



Syllabus
SPHG 722: Developing, Implementing, and Evaluating
Public Health Solutions
4 Credits | Online

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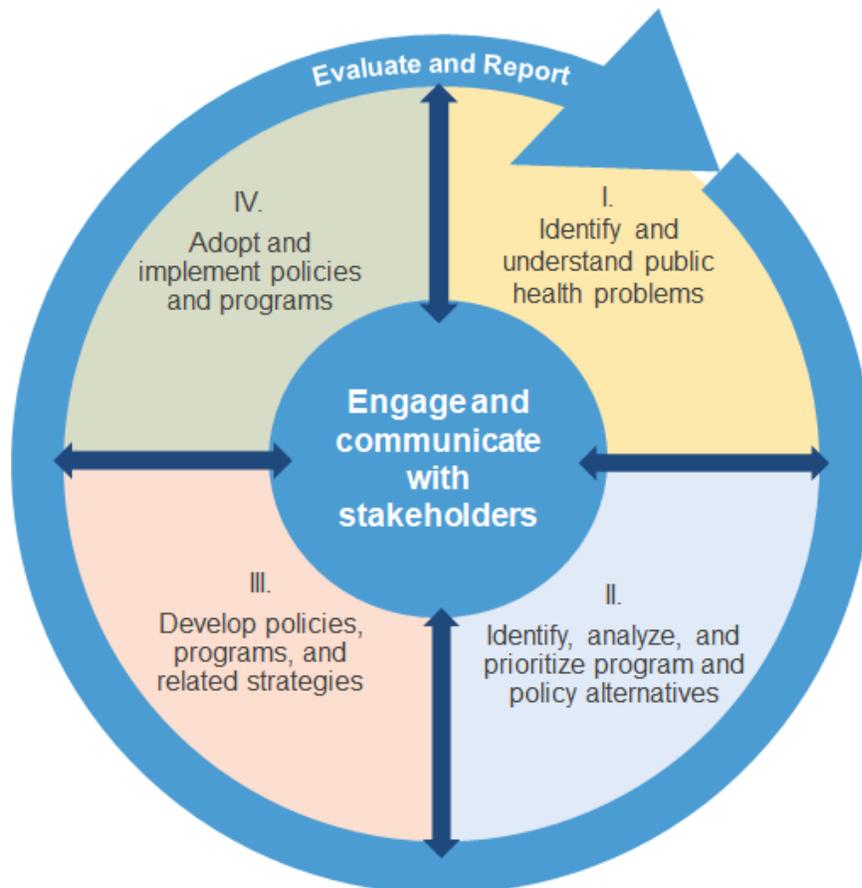
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Course Overview

Course Description This course is part of the new 12-credit, 2-semester integrated core public health training program completed by all MPH and terminal MSPH students in the Gillings School of Global Public Health. More information about the new MPH core be found [here](#).

In you other core courses, you have been developing the knowledge and skills necessary to identify and describe public health issues, articulate and answer key research questions related to public health issues, and conceptualize solutions to public health problems. In this course, students will learn how to develop, implement and evaluate public health solutions. This course is organized around the policy and program planning model displayed below. In the course, student will develop skills to help refine and enhance their understanding of specific public health problems; identify and prioritize potential solutions; adapt evidence-based interventions for a particular context; develop proposed solutions; and secure buy-in to implement solutions. In addition, you will learn how to identify and effectively engage with stakeholders throughout this process and how to plan for, conduct, and disseminate the results of program and policy evaluations.



Prerequisites	<ul style="list-style-type: none">● Completion of COMPASS modules● Basic quantitative skills through algebra at the college level, as demonstrated through satisfactory performance on the COMPASS quantitative module● Basic research skills: ability to find a Public Health journal article through Health Science Library website, read and understand the article, and summarize important points
Instructors	Name, PhD Rank Professor Department of XXXXX Phone: 919-[###-####] Email: [xxx]@email.unc.ed
Course Website	https://2ch.onlinemph.unc.edu . Use your MPH@UNC login.
Class Days, Times, Location	<p>This course is a fully online course that is completed asynchronously through MPH@UNC. You are expected to log into the course at least 4 times a week to participate in discussions and complete tasks and assignments for that week.</p> <p>This course will have 1 live session of two hours per week with asynchronous homework, assignments, and pre-work to happen before each live session</p>
Office Hours	Each section instructor will hold office hours each week. The day and time will be posted on the course wall, no later than Week 1. Students can attend Office Hours by logging in to the live classroom.
Course Texts	There is one assigned textbook for this course: <i>Health Program Planning and Evaluation</i> by Issel, L. M., & Wells, R., (2017) Fourth Edition, ISBN-13: 9781284112115 Other readings will be drawn from the peer-reviewed literature, as well as relevant websites, white papers, book chapters, and other sources. In addition, a case study will be made available to students. Readings will be noted in the course schedule.
Course Format	The course will run for 13 weeks straight, with one live online session per week. Each week, students will be expected to work through ~120 minutes of asynchronous material independently. Students are expected to attend the asynchronous sessions prepared, having already completed the required readings and reviewed the required resources. These asynchronous sessions will be completed prior to a synchronous (live) session online during which an instructor will be present, in addition to other students in the course. The instructor will lead the students through short lectures, discussions, and class activities. Throughout the semester, students will work in small groups to complete a team project in which they will design a population-based policy, program, project, or intervention based on the public health issue identified in SPHG 713.

Course Policies and Resources

Recognizing, Valuing and Encouraging Inclusion and Diversity in the Classroom

We share the School's [commitment to diversity](#). We are committed to ensuring that the School is a diverse, inclusive, civil and welcoming community. Diversity and inclusion are central to our mission — to improve public health, promote individual well-being and eliminate health inequities across North Carolina and around the world. Diversity and inclusion are assets that contribute to our strength, excellence and individual and institutional success. We welcome, value and learn from individual differences and perspectives. These include but are not limited to: cultural and racial/ethnic background; country of origin; gender; age; socioeconomic status; physical and learning abilities; physical appearance; religion; political perspective; sexual identity and veteran status. Diversity, inclusiveness and civility are core values we hold, as well as characteristics of the School that we intend to strengthen.

We are committed to expanding diversity and inclusiveness across the School— among faculty, staff, students, on advisory groups, and in our curricula, leadership, policies and practices. We measure diversity and inclusion not only in numbers, but also by the extent to which students, alumni, faculty and staff members perceive the School's environment as welcoming, valuing all individuals and supporting their development.”

In this class, we practice these commitments in the following ways:

- Develop classroom participation approaches that acknowledge the diversity of ways of contributing in the classroom and foster participation and engagement of *all* students.
- Structure assessment approaches that acknowledge different methods for acquiring knowledge and demonstrating proficiency.
- Encourage and solicit feedback from students to continually improve inclusive practices.

As a student in the class, you are also expected to understand and uphold the following UNC policies:

- Diversity and Inclusion at the Gillings School of Global Public Health: <http://sph.unc.edu/resource-pages/diversity/>
- UNC Non-Discrimination Policies: <http://policy.sites.unc.edu/files/2013/04/nondiscrim.pdf>
- Prohibited Discrimination, Harassment, and Related Misconduct at UNC: <https://deanofstudents.unc.edu/incident-reporting/prohibited-harassmentsexual-misconduct>

Accessibility

UNC-CH supports all reasonable accommodations, including resources and services, for students with disabilities, chronic medical conditions, a temporary disability, or a pregnancy complication resulting in difficulties with accessing learning opportunities. All accommodations are coordinated through the UNC Office of Accessibility Resources & Services (ARS), <https://ars.unc.edu/>; phone 919-962-8300; email ars@unc.edu. Students must document/register their need for accommodations with ARS before accommodations can be implemented.

UNC Honor Code

As a student at UNC-Chapel Hill, you are bound by the university's [Honor Code](#), through which UNC maintains standards of academic excellence and community values. It is your responsibility to learn about and abide by the code. All written assignments or presentations (including team projects) should be completed in a manner that demonstrates academic integrity and excellence. Work should be completed in your own words, but your ideas should be supported with well-cited evidence and theory. To ensure effective functioning of the [Honor System](#) at UNC, students are expected to:

- a. Conduct all academic work within the letter and spirit of the Honor Code, which prohibits the giving or receiving of unauthorized aid in all academic processes.
- b. Learn the recognized techniques of proper attribution of sources used in written work; and to identify allowable resource materials or aids to be used during completion of any graded work.
- c. Sign a pledge on all graded academic work certifying that no unauthorized assistance has been received or given in the completion of the work.
- d. Report any instance in which reasonable grounds exist to believe that a fellow student has violated the Honor Code.

Instructors are required to report suspected violations of the Honor Code, including inappropriate collaborative work or problematic use of secondary materials, to the Honor Court. Honor Court sanctions can include receiving a zero for the assignment, failing the course and/or suspension from the university. If you have any questions about [your rights and responsibilities](#), please consult the Office of Student Conduct at <https://studentconduct.unc.edu/>, or consult these other resources:

- Honor system [module](#).
- UNC library's [plagiarism tutorial](#).
- UNC Writing Center [handout on plagiarism](#).

Instructor Expectations

Email

The instructor will typically respond to email within 48 hours or less if sent Monday through Friday. The instructor may respond to weekend emails, but it is not required of them.

Feedback All graded assignments will receive written feedback that coincides with the assessment rubric. Feedback is meant to be constructive and help the student continue to build upon their skills. The types of feedback you may receive are descriptive feedback, evaluative feedback, and motivational feedback. Feedback is a tool that you as a learner can use to understand the areas that you are succeeding in and what you can do to improve in other areas.

Grading Assignments and projects will be graded no more than two weeks after the due date. Assignments that build on the next assignment will be graded within one week of the final due date. Early submissions will not be graded before the final due date.

Syllabus Changes The instructor reserves the right to make changes to the syllabus, including project due dates and test dates. These changes will be announced as early as possible.

Student Expectations

Appropriate Use of Course Resources: The materials used in this class, including, but not limited to, syllabus, exams, quizzes, and assignments are copyright protected works. Any unauthorized copying of the class materials is a violation of federal law and may result in disciplinary actions being taken against the student. Additionally, the sharing of class materials without the specific, express approval of the instructor may be a violation of the University's Student Honor Code and an act of academic dishonesty, which could result in further disciplinary action. This includes, among other things, uploading class materials to websites for the purpose of sharing those materials with other current or future students.

Assignments Submit all assignments through 2CH or assignment links located in the weekly modules, syllabus link, or assignments link (if made available by your instructor). Emailing assignments is not acceptable unless prior arrangements have been made. If you are having issues submitting assignments, try a different web browser first. If switching browsers does not work, email or call the instructor for guidance.

Attendance/ Participation Students are expected to attend and participate in all lectures. Unexcused absences from lecture will reduce students' participation grades. If you will be unavoidably absent, please notify the course instructor (and Teaching Assistant if one is assigned) as soon as possible. More information about excused absences and how to excuse an absence can be found here: <https://odos.unc.edu/student-support/class-absences>

Participation grades will consist of two equal parts: 1) productive engagement in class and group discussions, and 2) satisfactory completion of class activities.

Communication Students should read this syllabus before contacting TAs or instructors with questions about the course, as many questions may be answered in the syllabus text. If an answer is not found, students are encouraged to contact TAs and instructors by email or in-person if they have any questions.

Team project

Throughout this course you will work as part of a team to develop a solution to one of the public health issues that teams worked on in SPHG 713 (Understanding Public Health Issues). Your team's final deliverable will be a comprehensive written proposal and presentation of your proposed solution. Throughout the semester you will work individually and with your team on interim deliverables designed to help you develop your proposed solution one step at a time. Key components of your final proposal include:

- Description of the problem
- Stakeholder engagement and qualitative data collection plan
- Analysis of program and policy alternatives
- Logic model
- Proposed policy/program description, including core components and budget
- Implementation plan and timeline
- Evaluation plan and strategies for dissemination

Teams will generally have time to work on these key components during the weekly live (synchronous) sessions, and you will frequently be assigned tasks *to complete individually in advance of the synchronous sessions* to help prepare for team discussions and to contribute to the preparation of your team's interim deliverables.

For team projects, all team members will generally receive the same score. If peer evaluations indicate that one or more members did not substantively contribute to one or more components of a team project, grades will be adjusted accordingly.

Detailed instructions for the team project, including the individual assignments, are included in the Appendix of this syllabus.

Email

All email correspondence between student/instructor and peer/peer will be conducted in a professional manner following email etiquette.

- View the following link for more information on email etiquette: <http://metropolitanorganizing.com/etiquette-professional-organizing-services/essential-email-etiquette-tips/>

Late Work

Assignment due dates will not be changed because of exams or assignments in other courses or because of conflicting vacation travel plans. Late submissions will receive a 10% point reduction for every day that they are late. After seven days, late submissions will receive no points. Corrected submissions will not be accepted unless stated otherwise. You should inform the instructor during the first week of class if you anticipate not being able to attend a class event due to extenuating circumstances, such as medical procedures or professional travel. Should a medical or family emergency that impacts submission of work arise during the course, inform the instructor as soon as possible.

Technology	This course will use the learning management system 2CH for materials, some assessments, and interactions and resources. Access 2CH at https://2ch.onlinemph.unc.edu/login
Readings	Readings for a particular class should be completed before the class session and before completing associated activities.
Striving for Excellence in Learning	Understanding <i>how</i> you learn can help you become more efficient with your study time and more successful in this course. Two effective learning strategies are available in the resources module of COMPASS – specifically SQ5R and the Study Cycle. Consider trying them out to maximize your study time.
Technical support	MPH@UNC provides technical support 24-hours per day, seven days per week. If you need computer help, please contact student support at 855-770-2159 or studentsupport@onlinemph.unc.edu . There is also online chat available in the bottom right corner of the 2CH learning management system.

Competencies, Learning Objectives, and Assessment

Competency and Assessment Map

Foundational Learning Objective	Didactic Content	Assessments (assigned)
FLO 3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	Week 2 and 3	N/A
Competency	Didactic Content	Assessments (assigned)
MPH 2. Select quantitative and qualitative data collection methods appropriate for a given public health context.	Week 6	Evidence-Based Decision-Making Assignment
	Week 11	Evaluation proposal
MPH 3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate.	Week 3 and 4	Generating Themes from Qualitative Data
MPH 7. Assess population needs, assets and capacities that affect communities' health.	Week 2	Community Health Assessment Pitch and Plan
MPH 9. Design a population-based policy, program, project or intervention.	Week 5 and 6	Evidence-Based Decision-Making Assignment
	Week 7	Project logic model team activity
	Week 8	Program Goals and Objectives Team Activity
	Week 9	Program Implementation Plan and Budget Team Activity
	Week 10	Timeline Team Activity
	Week 13	Team Project Completion and Presentations
MPH 10. Explain basic principles and tools of budget and resource management.	Week 9	Program Implementation Plan and Budget Team Activity
MPH 11. Select methods to evaluate public health programs.	Week 11 and 12	Program Evaluation Proposal
MPH 13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.	Week 2	Community Health Assessment Pitch to Plan
MPH 17. Apply negotiation and mediation skills to address organizational or community challenges.	Week 1	Team Charter

Course Assignments and Assessments

Assignments	Percentage
1. Individual assignments	10%
2. Individual participation grade	20%
3. Group assignments	45%
4. Team Project Report	15%
Team Project Presentation	5%
Peer evaluation	5%
TOTAL	100%

Grading Scale

Final course grades will be determined using the following [UNC Graduate School grading scale](#). The relative weight of each course component is shown in the table above.

H	93.0 or above	High Pass: Clearly excellent graduate work
P	80 – 92.9	Pass: Entirely satisfactory graduate work
L	70 – 79.9	Low Pass: Inadequate graduate work
F	Less than 70	Fail

Course-at-a-Glance

The instructor reserves the right to make changes to the syllabus, including project due dates and test dates. These changes will be announced as early as possible.

Week	Topic	Competency	Assignment Due
Week 1	Clarifying the Problem and Engaging Stakeholders	MPH 17	CITI Certification (COMPASS)
Week 1 (sync)	Building Team Capacity and Identifying Gaps	MPH 17	Gap Analysis
Week 2	Assessing Community Assets and Needs: Overview	FLO 3, MPH 7, MPH 13	
Week 2 (sync)	Assessing Community Assets and Needs: Application	FLO 3, MPH 7, MPH 13	
Week 3	Qualitative Methods in Public Health	FLO 3, MPH 3	
Week 3 (sync)	Qualitative skills clinic	FLO 3, MPH 3	Team Charter, Memoing and Coding Exercise View: Community Health Needs Assessment in Abbott Northeastern Minnesota (17:49) before Synch Session
Week 4	Evidence-based decision making: Overview and Approach	MPH 3	
Week 4 (sync)	Thematic analysis skills clinic	MPH 3	Community Health Assessment Pitch, Generating Themes from Qualitative Data
Week 5	Locating and Evaluating Evidence	MPH 9	
Week 5 (sync)	Locating and Evaluating evidence	MPH 9	Community Health Assessment Plan Evidence-Based Decision-Making Assignment Part 1 (Locate evidence)

Week 6	Assembling Evidence and Prioritizing alternatives to Inform Decisions	MPH 2, MPH 9	
Week 6 (sync)	Use Structured Decision-making tools to prioritize program alternatives	MPH 2, MPH 9	Evidence-Based Decision-Making Assignment Part 2 (Evidence Table)
Week 7	Adapting Evidence-based Interventions; Constructing logic models	MPH 9	
Week 7 (sync)	Logic models	MPH 9	Evidence-Based Decision-Making Assignment Part 3 (Evidence Report) EBPH Quiz
Week 8	Planning for implementation	MPH 9	

Week 8 (sync)	Planning for implementation	MPH 9	Project Logic Model Team Activity
Week 9	Budgets	MPH 9, MPH 10	
Week 9 (sync)	Budgets	MPH 9, MPH 10	Program Goals and Objectives Team Activity
Week 10	Adoption and applied implementation: securing buy-in and putting your program or policy into place	MPH 9	
Week 10 (sync)	Implementation plans and timelines	MPH 9	Program Implementation Plan and Budget Team Activity
Week 11	Design and conduct evaluation	MPH 2, MPH 11	
Week 11 (sync)	Develop evaluation plans	MPH 2, MPH 11	Timeline Team Activity
Week 12	Disseminate results and facilitate their use	MPH 11	
Week 12 (sync)	Knowledge Translation to Add to the Public Health Evidence Base	MPH 11	Program Evaluation Proposal
Week 13	Closing the Cycle: Case Study Wrap-up, CQI, and Iterative Nature of Planning Model	MPH 9	
Week 13 (sync)	Student Project Presentations/Course Wrap-up	MPH 9	Team Project Presentations, Team Project Report (2 days after synch session), Peer Evaluation

Course Schedule

The instructor reserves the right to make changes to the syllabus, including project due dates and test dates. These changes will be announced as early as possible.

Unit 1. Clarifying the Problem and Engaging Stakeholders

Week 1 Asynchronous Session

Week 1	
Topic	Clarifying the Problem and Engaging Stakeholders
Competency Addressed	MPH 13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.
Learning Objective(s)	<ol style="list-style-type: none"> 1. Describe the components of the planning model as the frame for developing, implementing and evaluating public health solutions. 2. Identify strategies for engaging stakeholders across the program and policy planning process.
Required Readings	<ol style="list-style-type: none"> 1. Braveman, P. (2014). What Are Health Disparities and Health Equity? We Need to Be Clear. <i>Public Health Reports</i>, 129(Suppl 2), 5–8. 2. Gee, G. C., & Ford, C. L. (2011). Structural racism and health inequities. <i>DuBois review: social science research on race</i>, 8(1), 115-132. 3. Issel, L. M., & Wells, R. (2017). <i>Health program planning and evaluation</i>. Jones & Bartlett Learning. Chapter 1: Context of Health Program Development and Evaluation. 4. Duffy, Moran, Rudis. Creating an effective team charter. Process Excellence Network. Posted 09/18/2011. 5. The Community Toolbox: Chapter 20, Section 6: Training for Conflict Resolution
Required Resources	None
Optional/Cited Resources	<ol style="list-style-type: none"> 1. Israel, B.A., Schulz, A.J., Parker, E.A., Becker, A. B., Allen III, Alex J., Guzman, R., & Lichtenstein, R. (2018). Critical Issues in Developing and Following CBPR Principles. In Wallerstein, N., Duran, B., Oetzel, J. & Minkler, eds. <i>Community-Based Participatory Research for Health: Advancing Social and Health Equity</i>, Jossey-Bass, 31-44. 2. Srinivasan, S., & Williams, S. D. (2014). Transitioning from health disparities to a health equity research agenda: the time is now. <i>Public Health Reports</i>, 129(1_suppl2), 71-76. 3. De Marco, M., Kearney, W., Smith, T., Jones, C., Kearney-Powell, A., & Ammerman, A. (2014). Growing partners: building a community–academic partnership to address health disparities in rural North Carolina. <i>Progress in community health partnerships: research, education, and action</i>, 8(2), 181-186. 4. Lightfoot, A. F., Woods, B. A., Jackson, M., Riggins, L., Krieger, K., Brodie, K., Gray, P., & Howard, D. L. (2012). "In my house": Laying the foundation for youth HIV prevention in the black church. <i>Progress in community health partnerships: research, education, and action</i>, 6(4), 451-456. 5. Thornton, R. L. J., Glover, C. M., Cené, C. W., Glik, D. C., Henderson, J. A., & Williams, D. R. (2016). Evaluating Strategies for Reducing Health Disparities By Addressing The Social Determinants Of Health. <i>Health Affairs (Project Hope)</i>, 35(8), 1416–1423. http://doi.org/10.1377/hlthaff.2015.1357

Class Activity	An introduction to understanding and solving public health problems through the Gillings MPH Core Planning Model. This lecture will revisit core concepts, including the SEF, health disparities/health equity, and community engagement, as well as introduce ICO4MCH, a case study that will be
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	examined throughout the course. Finally, students will be introduced to tools, resources, and strategies for engaging stakeholders.	
Assignments	<ol style="list-style-type: none"> 1. Complete and submit CITI Certification (final requirement of COMPASS) 2. Read 2 White Papers from the fall course on your team's topic <ol style="list-style-type: none"> a. Focus in particular on the "Limitations and Next Steps" section of the papers 3. Prepare "gap analysis" pitch for synch session 	Due: Synch Session 1

Week 1 Participation Activity: Gap Analysis

From your reading of the White Papers, prepare a brief written "gap analysis" to summarize what you learned about the public health problem addressing the following questions:

1. What questions about the problem were prompted by your reading of the paper?
2. What were gaps you identified?
3. What populations are affected by the problem?
4. What are potential solutions to pursue in regards to addressing the problem in the population/s identified?

Come to the synchronous session prepared to discuss your gap analysis with your team.

Criteria	Fully Met/High Pass	Partially Met/Pass	Not Met/Low Pass	Fail
Completeness	All sections completed thoroughly	All sections are attempted, but some seem incomplete	Multiple sections have not been attempted or are incomplete	Significant numbers of incomplete section or blank
Relevance	All responses are relevant to the questions asked	>=50% of responses are relevant to the questions asked	< 50% of responses are relevant to the questions asked	No responses are relevant to the questions asked

Week 1 Synchronous Session

Synch Session 1	
Topic	Building Team Capacity and Identifying Gaps
Competency Addressed	MPH 17: Apply negotiation and mediation skills to address organizational or community challenges.
Learning Objective(s)	1. Demonstrate team building, negotiation and conflict management skills.
Required Readings	<ol style="list-style-type: none"> 1. Community Toolbox¹: Chapter 13.; Section 4. Building Teams: Broadening the Base for Leadership and Section 11: Collaborative Leadership 2. Community Toolbox: Chapter 14, Section 4: Understanding Peoples' Needs

¹ Fawcett, Stephen B., et al. "The Community Tool Box: A Web-based resource for building healthier communities." *Public health reports* 115.2-3 (2000): 274.:

	<ol style="list-style-type: none"> 6. Community Toolbox: Chapter 16, Section 1: Conducting Effective Meetings 7. The Community Toolbox: Chapter 20, Section 6: Training for Conflict Resolution 8. Duffy, Grace L., John W. Moran, and William Riley. "Applications and Tools for Creating and Sustaining Healthy Teams." <i>Update</i> (2009) 9. Duffy, Moran, Rudis. Creating an effective team charter. Process Excellence Network. Posted 09/18/2011. 		
Required Resources	None		
Optional/Cited Resources	<ol style="list-style-type: none"> 1. Community Campus Partnerships for Health 2. The Community Guide 3. Principles of Community Engagement 4. The Engagement Toolkit 5. Patient Centered Outcomes Research Institute (PCORI) 6. Measure Evaluation 7. USAID: Engaging Stakeholders for Health Systems Strengthening 		
Class Activity	<ol style="list-style-type: none"> 1. Building a Team <ol style="list-style-type: none"> a. Group Resume (group activity to help people get to know each other) b. Discussion of strategies to facilitate collaborative leadership and conflict negotiation c. Begin drafting Team Charter <ol style="list-style-type: none"> (1) Discuss/reflect on what worked/what didn't work in fall team (2) Discuss goals/objectives for new team (3) Begin to draft Team Charter with new team 2. Team Project Overview <ol style="list-style-type: none"> a. Components/Due Dates/Expectations 3. Gap Analysis Pitch <ol style="list-style-type: none"> a. Team members summarize problems from fall White Papers b. Group selects which aspect of the problem they want to pursue for the solution planning process 		
Assignments	<table border="1" style="width: 100%;"> <tr> <td style="width: 50%;">Group Assignment: Team Charter</td> <td style="width: 50%;">Due: Synch session 3</td> </tr> </table>	Group Assignment: Team Charter	Due: Synch session 3
Group Assignment: Team Charter	Due: Synch session 3		

Week 1 Assignment: Team Charter

Using a template provided by the teaching team, teams will submit a team charter that summarizes your plans for communicating and working effectively as a team. Be sure that in your charter you:

- Specify how and when your team will meet
- Specify how you will resolve disagreements (especially ones where you are not able to reach a consensus even after discussion)
- Specify roles and responsibilities within the team

Week 1 Assignment Rubric

Criteria	Fully Met/High Pass	Partially Met/Pass	Not Met/Low Pass	Fail
Quality of Negotiation Strategies (10 points)	Team fully and accurately describe negotiation strategies	All strategies are described, but some are not complete or accurate	Some strategies are not described and present descriptions are not complete or accurate	No strategies are described fully and accurately

Disagreements (20 points)	Team fully and adequately describes how disagreements will be resolved when consensus cannot be reached	Team describes how disagreements will be resolved	Team mentions resolving disagreements but does not describe a feasible approach to resolving them	Team does not mention resolving disagreements
Roles (20 points)	Team-member roles clearly and adequately defined; essential functions fully covered	Team-member roles defined; essential functions covered	Some team-member roles defined; some essential functions covered	Team member roles not defined
Completeness (15)	All team charter sections completed thoroughly	All team charter sections are attempted, but	Multiple sections of the charter have not been	Significant numbers of incomplete sections, or blank

		some seem incomplete	attempted or are incomplete	sections of team charter
Clarity, Grammar, and Mechanics (5)	All responses are clear and understandable to a typical instructor in this course, with no grammatical errors	>= 50% of responses are clear and understandable to a typical instructor in this course, with few grammatical errors	< 50% of responses are clear and understandable to a typical instructor in this course, with errors that impact the grader's understanding	No responses are clear and understandable to a typical instructor in this course
Relevance (15)	All responses are relevant to the questions asked	>=50% of responses are relevant to the questions asked	< 50% of responses are relevant to the questions asked	No responses are relevant to the questions asked
Comprehension of materials (15)	The team charter demonstrates an excellent understanding and application of course material	The team charter suggests an understanding of course material, but fails to fully address all aspects of the assignment	The team charter reflects a limited understanding of course material and fails to fully address all aspects of the assignment	The team charter does not suggest any meaningful understanding or application of course material

Week 2 Asynchronous Session

Week 2	
Topic	Assessing Community Assets and Needs
Competency Addressed	MPH 7: Assess population needs, assets and capacities that affect communities' health. MPH 13: Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.
Foundational Learning Objectives Addressed	FLO 3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health.
Learning Objective(s)	1. Discuss approaches for assessing community capacity, culture and assets in the solution planning process. 2. Explain tools and strategies for conducting health needs assessment and prioritization processes. 3. Review the role/use of mixed methods in describing and assessing a population's health.

<p>Required Readings</p>	<ol style="list-style-type: none"> 1. Minkler, M & Hancock, T. (2008). Community-driven asset identification and issue selection. In Minkler & Wallerstein, eds. <i>Community-based participatory research for health: From process to outcomes</i>, Jossey-Bass, 153-169. 2. Issel, L. M., & Wells, R. (2017). <i>Health program planning and evaluation</i>. Jones & Bartlett Learning. Chapter 2: Relevance of Diversity and Disparities to Health Programs. 3. Issel, L. M., & Wells, R. (2017). <i>Health program planning and evaluation</i>. Jones & Bartlett Learning. Chapter 3: Community Health Assessment for Program Planning. 4. Valenzuela, J. M., McDowell, T., Cencula, L., Hoyt, L., & Mitchell, M. J. (2013). ¡ Hazlo Bien! A participatory needs assessment and recommendations for health promotion in growing Latino communities. <i>American Journal of Health Promotion</i>, 27(5), 339-346.
<p>Required Resources</p>	<p>The Community Toolbox: Creating and Maintaining Partnerships</p> <p>View: Community Health Needs Assessment in Abbott Northeastern Minnesota (17:49) – We will discuss this in our Week 2 Synch Session</p>
<p>Optional/Cited Resources</p>	<ol style="list-style-type: none"> 1. Israel, B.A., Schulz, A.J., Parker, E.A., Becker, A. B., Allen III, Alex J., Guzman, R., & Lichtenstein, R. (2018). Critical Issues in Developing and Following CBPR Principles. In Wallerstein, N., Duran, B., Oetzel, J. & Minkler, eds. <i>Community-Based Participatory Research for Health: Advancing Social and Health Equity</i>, Jossey-Bass, 31-44. 2. Asad, A. L., & Kay, T. (2015). Toward a multidimensional understanding of culture for health interventions. <i>Social Science & Medicine</i>, 144, 79-87. 3. McKnight, J. L., & Kretzmann, J. (2008). Mapping community capacity. In Minkler, ed. <i>Community Organizing and Community Building for Health</i>, Rutgers University Press: New Jersey, 158-172. 4. Kretzmann, J., & McKnight, J. P. (1996). Assets-based community development. <i>National Civic Review</i>, 85(4), 23-29. 5. Lightfoot, A. F., De Marco, M. M., Dendas, R. C., Jackson, M. R., & Meehan, E. F. (2014). Engaging underserved populations in affordable care act-required needs assessments. <i>Journal of health care for the poor and underserved</i>, 25(1), 11-18. 6. Developing Effective Coalitions: An Eight-Step Guide² 7. The Community Tool Box: Chapter 3, Section 8: Identifying Community Assets and Resources (download Introduction to Community Asset Mapping: A Presentation³) 8. Community Asset Inventory 9. YoBrown, E., Ragan, D., Seymoar, N., Zirnhelt, A., Torjek, J., Shaw, K. (2009). MAPPED! A Community Youth Mapping Toolkit for Vancouver. City of Vancouver 2009 and The International Centre for Sustainable Cities. 10. The News & Observer 11. North Carolina Institute for Public Health

³ 26 August 2009, Mary E. Homan, MA, Missouri Institute of Mental Health, University of Missouri School of Medicine

	12. Programmatic Mapping Readiness Assessment for Use with Key Populations
Class Activity	Students will continue their discussion of engaging stakeholders, expanding the conversation to include equity and cultural sensitivity when designing and implementing health interventions. This lecture also introduces students to the

² Cohen L, Baer N, Satterwhite P. Developing effective coalitions: an eight step guide. In: Wurzbach ME, ed. Community Health Education & Promotion: A Guide to Program Design and Evaluation. 2nd ed. Gaithersburg, Md: Aspen Publishers Inc; 2002:144-161.

³ 26 August 2009, Mary E. Homan, MA, Missouri Institute of Mental Health, University of Missouri School of Medicine

	role of mapping a community's assets and needs in the planning process and tools and strategies to do so in both domestic and global contexts.	
Assignments	Group Assignment: Team Charter	Due: Synch Session 3

Week 2 Synchronous Session

Synch Session 2	
Topic	Assessing Community Needs and Assets
Competency Addressed	MPH 7: Assess population needs, assets and capacities that affect communities' health. MPH 13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.
Foundational Learning Objectives Addressed	FLO 3: Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health
Learning Objective(s)	<ol style="list-style-type: none"> 1. Determine approach for assessing community capacity, culture and assets in the solution planning process. 2. Select tools and strategies for conducting health needs assessments. 3. Describe ways to engage stakeholders in the assessment and prioritization process. 4. Identify qualitative and quantitative methods to be used in describing and assessing a population's health
Required Readings	<ol style="list-style-type: none"> 1. ATSDR. Principles of community engagement, Second edition. Chapter 2. Principles of Community Engagement. 43-54 2. The Community Toolbox: Chapter 3: Assessing Community Needs and Resources
Required Resources	<ol style="list-style-type: none"> 1. View: Community Health Needs Assessment in Abbott Northeastern Minnesota (17:49) 2. View: Maximizing Community Stakeholders' Engagement Webinar (34:50) 3. Durham, NC Community Health Assessment 4. Durham County State of the County Report
Optional/Cited Resources	<ol style="list-style-type: none"> 1. The Community Tool Box: Chapter 3, Section 8: Identifying Community Assets and Resources (view Introduction to Community Asset Mapping: A Presentation⁴) 2. Community Asset Inventory 3. YoBrown, E., Ragan, D., Seymoar, N., Zirnhelt, A., Torjek, J., Shaw, K. (2009)_ MAPPED! A Community Youth Mapping Toolkit for Vancouver. City of Vancouver 2009 and The International Centre for Sustainable Cities. 4. North Carolina Institute for Public Health 5. Programmatic Mapping Readiness Assessment for Use with Key Populations
Class Activity	<ol style="list-style-type: none"> 1. Clarification of Problem/Solution <ol style="list-style-type: none"> a. Work in teams to determine which community/population the team will focus on in the solution planning process 2. Assets/Needs Assessment Process – Exploration and Planning <ol style="list-style-type: none"> a. Discuss strengths, limitations and lessons learned from the community health needs assessment in Abbot Northeastern Minnesota depicted in the video b. What stakeholders were involved? Were there voices missing?

⁴ 26 August 2009, Mary E. Homan, MA, Missouri Institute of Mental Health, University of Missouri School of Medicine

	c. What tools/strategies used might be appropriate for your project? What might not be for the community/context you are focusing on?	
Assignments	Group: Team Charter	Due: Synch Session 3
	Individual: Community Health Assessment Pitch	Due: Synch Session 4
	Group: Community Health Assessment Plan for Team Project	Due: Synch Session 5

[Week 2 Assignment: Community Health Assessment Pitch to Plan](#)

Part I: Individual Pitch (Participation Activity)

As the first stage of your solution planning process, you will plan a community health assessment to assess context, assets and needs. You have been introduced to a range of tools for conducting assessments in domestic and global settings. You may use tools/strategies discussed in lectures and readings or you can look for other processes that may be more appropriate for the problem and population your solution will be addressing. The goal of this activity is to propose a process to engage stakeholders in order to gain deeper insights into the problem within the community as well as the community’s needs, assets, and capacities to address the problem. To apply these insights, each team member will develop a set of powerpoint slides (no more than ten) to describe a process that includes these components:

- a. Broad description of the context (culture, disparities, social determinants) that affects the community of interest/target population
- b. Specific methods you would use to assess community assets and needs (What process would you implement to understand and identify community assets? To understand community needs?)
- c. Identification of key stakeholders (be specific: whose voices need to be at the table to inform this process?) and rationale for including them (i.e., why is it important to have them at the table?)
- d. Discussion of how stakeholders will be engaged/play a role in the assessment process
- e. What data collection strategies will you use? Please describe how you will use mixed methods, both quantitative and qualitative methods (note Week 3 will go into more detail about qualitative methods and analysis), and justify your use of each. For quantitative data collection methods, you will need to say more than just “do a survey.” For example, if you did wish to use a questionnaire, you might clarify what tools and methods you will use, who your sample may be, what data you will collect, and what you would learn from these data.

Be prepared to “pitch” your process to your team members at Synch session 4. Each team member will have 10 minutes to pitch and then the group will discuss the strengths of each pitch of each and determine what components should be combined and put forward for the group’s Community Health Assessment section submitted in Week 5.

Criteria	Fully Met/High Pass	Partially Met/Pass	Not Met/Low Pass	Fail
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Completeness (50 points)	All sections completed thoroughly	All sections are attempted, but some seem incomplete	Multiple sections have not been attempted or are incomplete	Significant numbers of incomplete section or blank
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Relevance (50 points)	All responses are relevant to the questions asked	>=50% of responses are relevant to the questions asked	< 50% of responses are relevant to the questions asked	No responses are relevant to the questions asked
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Part II: Team Community Health Assessment Plan (Assignment)

Now that you have heard each pitch and determined the best components to include, you will integrate the submissions for the individual activity above to create a single Community Health Assessment Plan. Redress components (a)-(e), using the information from the individual pitches, and submit the combined Community Health Assessment Plan.

Week 2 Assignment Rubric

Criteria	Fully Met/High Pass	Partially Met/Pass	Not Met/Low Pass	Fail
Description of Community Context (15 points)	Description is thorough, includes the culture, disparities, and social determinants present in the community, and how these factors impact the community of interest/target population	Description is somewhat thorough, includes some discussion of the culture, disparities, and social determinants and how these factors impact the community of interest/target population	Description is somewhat thorough, but does not include how these factors impact the community of interest/target population	Description is not thorough, does not include culture, disparities, and social determinants and how these factors impact the community of interest/target population
Description of Community Assets/Needs Process (15 points)	Description is thorough, includes the specific methods (process) that will be used to assess community assets and the methods (process) that will be used to assess community needs	Description is somewhat thorough, but is not specific enough in the discussion of separate methods that will be used to assess assets and needs	Methods for assessing only community assets or needs are discussed, one process description is missing	Does not include specific methods of how community assets and needs will be assessed.
Description of Proposed Stakeholders (15 points)	Description is specific, explains which stakeholders must be involved to inform this process and provides a	Stakeholders are clearly identified and appropriate for the proposed project, but rationale is not clear	Stakeholders are identified without a clear, strong rationale for why they involved	Description is not specific about the stakeholders who will be involved and why

	strong rationale for including them			
Description of How Stakeholders will be Engaged in the Assessment Process (15 points)	Detailed, specific discussion of how stakeholders will be engaged and identifies what role stakeholders will play in the assessment process	Discussion of how stakeholders will be engaged and their role in the process, but it is not detailed or specific	Explanation of either how stakeholders will be engaged or their role in the process, the other is missing	Discussion is not specific as to how stakeholders will be engaged and what role they will play in the assessment process
Description of Mixed Methods to Collect Assessment Data (15 points)	Detailed description of what data collection strategies will be used, including both quantitative and qualitative methods, and each method is justified	Somewhat detailed description of what data collection strategies will be used, including quantitative and qualitative methods, but justifications are not clear or strong	Only discuss either quantitative or qualitative strategies in detail and lack strong justifications	Not specific with respect to the type of data collection strategies used and does not justify methods
Quality of Mixed Methods Proposed (15 points)	Proposed methods are highly suitable for and capable of quantifying and describing the community needs and assets to be assessed	Proposed methods are =suitable for and capable of quantifying and describing the community needs and assets to be assessed	Proposed methods are somewhat suitable for and capable of quantifying and describing the community needs and assets to be assessed	Proposed methods are not suitable for nor capable of quantifying and describing the community needs and assets to be assessed
Clarity, Grammar and Mechanics (10 points)	All responses are clear and understandable to a typical instructor in this course, with no grammatical errors	>= 50% of responses are clear and understandable to a typical instructor in this course, with few grammatical errors	< 50% of responses are clear and understandable to a typical instructor in this course, with errors that impact the grader's understanding	No responses are clear and understandable to a typical instructor in this course

Week 3 Asynchronous Session

Week 3	
Topic	Qualitative Methods in Public Health

Competency Addressed	MPH 2. Select quantitative and qualitative data collection methods appropriate for a given public health context MPH 3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate.
Foundational Learning Objectives Addressed	FLO 3: Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health
Learning Objective(s)	<ol style="list-style-type: none">1. Describe differences between quantitative and qualitative methods.2. Discuss the why, when, and how of qualitative methods.3. Identify commonly-used qualitative methods used in public health planning and evaluation.

	4. Discuss the steps in qualitative analysis.	
Required Readings	<ol style="list-style-type: none"> 1. Steckler, A.; McLeroy, K.R.; Goodman, R.M.; Bird, S.T.; McCormick, L.1992. Toward Integrating Qualitative and Quantitative Methods: An Introduction. <i>Health Education Quarterly</i>, 19(1): 1-8. 2. Tolley, E. E., Ulin, P. R., Mack, N., Succop, S. M., & Robinson, E. T. (2016). Invitation to Explore. In <i>Qualitative methods in public health: a field guide for applied research</i>. John Wiley & Sons. 3. Schaal, J. C., Lightfoot, A. F., Black, K. Z., Stein, K., White, S. B., Cothorn, C., ... Eng, E. (2016). Community-Guided Focus Group Analysis to Examine Cancer Disparities. <i>Progress in Community Health Partnerships: Research, Education, and Action</i>, 10(1), 159–167. 4. Tolley, E. E., Ulin, P. R., Mack, N., Succop, S. M., & Robinson, E. T. (2016). Qualitative Data Analysis. In <i>Qualitative methods in public health: a field guide for applied research</i>. John Wiley & Sons. 	
Required Resources	Transcript from ICO4MCH to be distributed	
Optional/Cited Resources	<ol style="list-style-type: none"> 1. Community Health Assessments 2. Valenzuela, J. M., McDowell, T., Cencula, L., Hoyt, L., & Mitchell, M. J. (2013). ¡ Hazlo Bien! A participatory needs assessment and recommendations for health promotion in growing Latino communities. <i>American Journal of Health Promotion</i>, 27(5), 339-346. 3. Schneider, M., Hall, W., Hernandez, A., Hindes, K., Montez, G., Pham, T., ... the HEALTHY Study Group. (2009). Rationale, design and methods for process evaluation in the HEALTHY study. <i>International Journal of Obesity</i> 33(S4), S60. 	
Class Activity	Students begin this session by revisiting the paradigms of mixed methods research, taking time to compare qualitative and quantitative techniques. The conversation will then shift to focus on qualitative methods, including considerations for qualitative data collection, how/when/why different qualitative methods are used in public health contexts, and the steps and tools of qualitative data analysis. To prepare for the qualitative skills clinic, students will be introduced to coding as an analysis technique and a project that used qualitative data collection techniques.	
Assignments	Group: Team Charter	Due: Synch Session 3
	Individual: Memoing/Coding Exercise	Due: Synch Session 3
	Individual: Community Health Assessment Plan Pitch	Due: Synch Session 4
	Group: Community Health Assessment Plan for Team Project	Due: Synch Session 5

Week 3 Participation Activity: Memoing and Coding Exercise (Individual)

Each student will be given a de-identified transcript and will complete the following exercise before Synch session 3 using the template provided to you by the Instructor:

1. “Deep read” the transcript
2. Memo as you read, jotting thoughts and ideas
3. From transcripts and memos, generate 3 codes
4. Using the template, draft a definition for each of the 3 codes and guidelines for application

5. Read the transcript again and apply the codes
6. Update the template with excerpts from the text to demonstrate your codes
7. Bring your template and coded transcript to Synch session 3

Criteria	Fully Met/High Pass	Partially Met/Pass	Not Met/Low Pass	Fail
Completeness (50 points)	All sections completed thoroughly	All sections are attempted, but some seem incomplete	Multiple sections have not been attempted or are incomplete	Significant numbers of incomplete or blank sections
Relevance (50 points)	All responses are relevant to the questions asked	>=50% of responses are relevant to the questions asked	< 50% of responses are relevant to the questions asked	No responses are relevant to the questions asked

Week 3 Synchronous Session

Synch Session 3	
Topic	Qualitative skills clinic
Competency Addressed	MPH 3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate.
Foundational Learning Objective Addressed	FLO 3: Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health
Learning Objective(s)	1. Demonstrate steps in analyzing qualitative data.
Required Readings	1. Schaal, J. C., Lightfoot, A. F., Black, K. Z., Stein, K., White, S. B., Cothorn, C., ... Eng, E. (2016). Community-Guided Focus Group Analysis to Examine Cancer Disparities . <i>Progress in Community Health Partnerships: Research, Education, and Action</i> , 10(1), 159–167.
Required Resources	1. Transcripts from ICO4MCH
Optional/Cited Resources	<ol style="list-style-type: none"> 1. Orange County Health Assessment (2015) 2. Lightfoot, A. F., Thatcher, K., Simán, F. M., Eng, E., Merino, Y., Thomas, T., Coyne-Beasley, T., & Chapman, M. V. (2017). "What I wish my doctor knew about my life": Using photovoice with immigrant Latino adolescents to explore barriers to healthcare. <i>Qualitative Social Work</i> 3. Young, D. R., Steckler, A., Cohen, S., Pratt, C., Felton, G., Moe, S. G., ... & Lee, J. S. (2008). Process evaluation results from a school-and community-linked intervention: The Trial of Activity for Adolescent Girls (TAAG). <i>Health Education Research</i>, 23(6), 976-986. 4. Lightfoot, A. F., Taggart, T., Woods-Jaeger, B. A., Riggins, L., Jackson, M. R., & Eng, E. (2014). Where is the faith? Using a CBPR approach to propose adaptations to an evidence-based HIV prevention intervention for adolescents in African American faith settings. <i>Journal of religion and health</i>, 53(4), 1223-1235.

	<ol style="list-style-type: none"> 5. Mouw, M. S., Taboada, A., Steinert, S., Willis, S., & Lightfoot, A. F. (2016). "Because we all trust and care about each other": Exploring Tensions Translating a Theater-based HIV Prevention Intervention into a New Context. <i>Progress in community health partnerships: research, education, and action</i>, 10(2), 241-249. 6. Lightfoot, A. F., Taboada, A., Taggart, T., Tran, T., & Burtaine, A. (2015). 'I learned to be okay with talking about sex and safety': assessing the efficacy of a theatre-based HIV prevention approach for adolescents in North Carolina. <i>Sexeducation</i>, 15(4), 348-363. 7. Carter-Edwards, L., Lowe-Wilson, A., Mouw, M. S., Jeon, J. Y., Baber, C. R., Vu, M. B., & Bethell, M. (2015). Community member and stakeholder perspectives on a healthy environment initiative in North Carolina. <i>Preventing chronic disease</i>, 12(8), [140595]. 8. Yonas, M. A., Jones, N., Eng, E., Vines, A. I., Aronson, R., Griffith, D. M., ... & DuBose, M. (2006). The art and science of integrating Undoing Racism with CBPR: challenges of pursuing NIH funding to investigate cancer care and racial equity. <i>Journal of Urban Health</i>, 83(6), 1004-1012. 9. Eng E, Schaal, J, Baker S, Black K, Cykert S, Jones N, Lightfoot AF, Robertson L, Samuel C, Smith B, Thatcher K. (2017) Partnership, Transparency, and Accountability: Changing Systems to Enhance Racial Equity in Cancer Care and Outcomes. In Wallerstein N, ed. <i>Community-Based Participatory Research for Health: Advancing Social and Health Equity</i>. 10. The Odom Institute 11. Bhattacharya, K. (2017). <i>Fundamentals of qualitative research: A practical guide</i>. Taylor & Francis. 12. Charmaz, K. (2014). <i>Constructing grounded theory</i>. Sage. 13. Saldaña, J. 2015. <i>The coding manual for qualitative researchers</i>. Sage. 	
Class Activity	<p>Coding Lab (activity to be done in pairs and individually)</p> <ol style="list-style-type: none"> 1. Meet in pairs 2. Describe coding process conducted individually 3. Share initial code ideas, definitions and sample text 4. Discuss similarities and differences and decide on definition of 3-5 topical and interpretive codes 5. Code transcripts separately <ol style="list-style-type: none"> a. Be sure to code sufficient text b. Allow for multi-coded text 6. Come back together and compare <ol style="list-style-type: none"> a. Discuss any discrepancies with your partner b. Refine code definitions, if need be c. Are you a lumper or a splitter? Does it depend? d. Did you apply multiple codes? 7. Were the codes conceptually clear? 	
Assignments	Individual or Group: Generating Themes from Qualitative Data	Due: Synch Session 4
	Individual: Community Health Assessment Pitch	Due: Synch Session 4
	Group: Community Health Assessment Plan	Due: Synch Session 5

	Group: Evidence-Based Decision-Making Part 1 – Locating Evidence	Due: Synch Session 5
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Week 3 Assignment: Generating Themes from Qualitative Data

Building on the codebook developed during Synch session 3, generate 2 themes to illustrate the meaning you made from your analysis of the data. Submit your codebook, themes and a quote that represents each of your themes by Synch Session 4. Additional details below:

Context for this Assignment:

You are a public health practitioner and member of the ACCURE partnership, which includes community residents, cancer survivors, medical center staff and providers, academic researchers, and community-based organization partners. The team is conducting focus groups with White and African American breast and lung cancer survivors to understand their experiences of cancer treatment and their interactions with the cancer care system. Findings from these focus groups will inform the intervention planning process. Now that you have completed the initial coding of one of the focus groups, your next step is to synthesize the findings to share with the rest of the partnership. You will do this by generating themes that illustrate the meaning derived from your analysis of the data.

What are the key takeaways from your analysis process to share with the ACCURE partnership? Building on the finalized codebook (Summary 4) developed during your Synch Session, generate 2 themes that summarize your interpretation of the data. Themes should be in sentence format and include a quote that exemplifies the theme.

What factors do the ACCURE team need to take into account in planning an intervention? Based on your analysis process, identify two challenges faced by cancer patients undergoing treatment that you think should be considered in developing an intervention to improve their experiences. Provide a rationale for why these are important and should be considered in the intervention planning process.

Submit your Summary Tables 1-4 and this Individual Assignment (1 page max, Single spaced, Arial 11 pt, 1 inch margins) per instructor instructions. This assignment may be completed in teams if you wish.

Week 3 Assignment Rubric:

Criteria	Fully Met/High Pass	Partially Met/Pass	Not Met/Low Pass	Fail
Quality of themes generated (30 points)	Both themes flow logically from the codebook.	One theme identified flows logically from the codebook	Themes do not flow logically from the codebook	No themes were generated
Appropriateness of Quotes (10 points)	Both quotes are well-chosen and appropriate	One quote is well-chosen and appropriate	Quotes have no connection to the themes	Did not submit
Rationale for Challenges selected	Two challenges are chosen and well-described	One challenge is chosen and well-described	Challenges are chosen but not described	No examples provided

(30 points)				
Relevance (15 points)	All responses are relevant to the questions asked	>=50% of responses are relevant to the questions asked	< 50% of responses are relevant to the questions asked	No responses are relevant to the questions asked
Completeness (10 points)	Student responded to both questions fully	Student responded to one question fully	Students responded to question/s partially	Students did not respond to questions
Clarity, Grammar and Mechanics (5 points)	All responses are clear and understandable to a typical instructor in this course, with no grammatical errors	>= 50% of responses are clear and understandable to a typical instructor in this course, with few grammatical errors	< 50% of responses are clear and understandable to a typical instructor in this course, with errors that impact the grader's understanding	No responses are clear and understandable to a typical instructor in this course

Unit 2. Identify, Analyze and Prioritize Policy and Program Options
Week 4 Asynchronous Session

Week 4	
Topic	Evidence-based decision making: Overview and Approach

Competency Addressed	MPH 3: Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate. MPH 9: Design a population-based policy, program, project or intervention.	
Learning Objective(s)	<ol style="list-style-type: none"> 1. Explain steps in analyzing qualitative data, including interpretation of data. 2. Identify appropriate strategies for gathering evidence using qualitative methods for your public health solution. 3. Understand role of evidence-based decision-making in public health. 	
Required Readings	<ol style="list-style-type: none"> 1. Issel, L. M., & Wells, R. (2017). <i>Health program planning and evaluation</i>. Jones & Bartlett Learning, Chapter 15: Qualitative Methods for Planning and Evaluation. 2. Chatterji, M. et al. 2014. L.E.A.D.: a framework for evidence gathering and use for the prevention of obesity and other complex public health problems. <i>Health Education & Behavior</i> 41(1): 85-89. 3. Brownson, Ross C., Jonathan E. Fielding, and Christopher M. Maylahn. "Evidence-based public health: a fundamental concept for public health practice." <i>Annual review of public health</i> 30 (2009): 175-201 	
Required Resources	1. Transcript	
Optional/Cited Resources	<ol style="list-style-type: none"> 1. NACCHO: Collecting & Analyzing Qualitative Data in Community Health Assessments 2. Defining Evidence (online module currently used in MHCH 745): Transcript 	
Class Activity	In this session, students will continue the discussion on qualitative data, focusing specifically on analysis of data, interpretation of data, and strategies for gathering appropriate evidence using qualitative methods. The discussion will shift to the importance of evidence-based decision-making, introducing students to the necessity of and strategies for applying data in policy- and decision-making contexts.	
Assignments	Individual: Generating Themes from Qualitative Data	Due: Synch Session 4
	Individual: Community Health Assessment Pitch	Due: Synch Session 4
	Group: Community Health Assessment Plan for the Team Project	Due: Synch Session 5

Week 4 Synchronous Session

Synch Session 4	
Topic	
Competency Addressed	MPH 9: Design a population-based policy, program, project or intervention
Learning Objective(s)	<ol style="list-style-type: none"> 1. Describe how qualitative methods are used in the field both domestically and globally. 2. Select appropriate strategies for gathering evidence using qualitative methods for your public health solution.
Required Readings	<ol style="list-style-type: none"> 1. Maman S, Murray KR, Mavedzenge SN, Oluoch L, Sjenje F, Agot, K, Thirumurthy H. A qualitative study of secondary distribution of HIV self-test kits by female sex workers in Kenya, PLoS One, March 27, 2017. 2. Maman S, van Rooyen H, Stankard P, Chingono A, Muravha T, Ntogwisangu J, et al. (2014) NIMH Project Accept (HPTN 043): Results from In-Depth Interviews

	with a Longitudinal Cohort of Community Members. PLoS ONE 2014;9(1):e87091.
	3. Maman S, Abler L, Parker L, Lane T, Chirowodza A, Ntogwisangu J, et al. A comparison of HIV stigma and discrimination in five international sites: the influence of care and treatment resources in high prevalence settings. Social Science & Medicine 2009;68(12):2271-2278.
Required Resources	None
Optional/Cited Resources	None
Class Activity	Teams will finalize group project for the Community Health Assessment Plan, incorporating how they will use qualitative methods in the plan.
Assignment	Group: Community Health Assessment Plan Due: Synch Session 5

Week 5 Asynchronous Session

Week 5	
Topic	Locating and Evaluating Evidence
Competency Addressed	MPH 9: Design a population-based policy, program, project or intervention.
Learning Objective(s)	<ol style="list-style-type: none"> 1. Identify sources of evidence and relevant information (for addressing public health problems) 2. Describe methods for collecting evidence and relevant information 3. Describe approaches for screening and reviewing evidence 4. Discuss what to do when evidence is not available 5. Discuss the ongoing nature of evidence gathering and review 6. Discuss and apply standards/criteria for evaluating the quality and strength of different types of evidence
Required Readings	<ol style="list-style-type: none"> 1. Institute of Medicine. 2010. Bridging the Evidence Gap in Obesity Prevention: A Framework to Inform Decision Making. Chapter 5: Specifying questions and locating evidence: an expanded view. 2. Institute of Medicine. 2010. Bridging the Evidence Gap in Obesity Prevention: A Framework to Inform Decision Making. Chapter 6: Evaluating evidence. 3. Institute of Medicine. 2010. Bridging the Evidence Gap in Obesity Prevention: A Framework to Inform Decision Making. Chapter 7: Assembling Evidence and Informing Decisions. 4. Guyatt, Gordon H., et al. "GRADE: an emerging consensus on rating quality of evidence and strength of recommendations." BMJ (Clinical research ed.) 336.7650 (2008): 924-926.
Required Resources	None
Optional/Cited Resources	<ol style="list-style-type: none"> 1. Reviewing the Evidence - Approaches that Work (online module currently used in MHCH 745): Transcript. 2. Understanding Evidence. Part 1: Best Available Research Evidence. A guide to the Continuum of Evidence Effectiveness. Available at: https://www.cdc.gov/violenceprevention/pdf/understanding_evidence-a.pdf 3. Institute of Medicine. 2010. Bridging the Evidence Gap in Obesity Prevention: A Framework to Inform Decision Making. Appendix D: Information Sources for Locating Evidence.

	4. Hill, Austin Bradford. "The environment and disease: association or causation?" <i>Journal of the Royal Society of Medicine</i> 108.1 (2015):32-37.
	5. Petticrew, Mark, and Helen Roberts. "Evidence, hierarchies, and typologies: horses for courses." <i>Journal of Epidemiology & Community Health</i> 57.7 (2003): 527-529.
Class Activity	This session will review approaches for locating and evaluating evidence for public health decision-making
Assignments	Group: Community Health Assessment Plan Due: Synch Session 5

Assignment: Evidence-Based Decision-Making Assignment

Locate Type I, II, and III evidence from appropriate sources that are relevant to your chosen group project topic; Evaluate this evidence according to LEAD Approach; summarize in a L.E.A.D. framework evidence table; complete a L.E.A.D. Framework evidence report

Week 5 Assignment:

Evidence-Based Decision-Making Part I- Locate evidence (Individual Participation Activity)

Complete prior to Synch Session 5

1. Conduct a search to locate evidence on effective solutions to your identified public health problem/issue (i.e. Type 2 evidence: "What should be done?")
2. Refine your search as necessary to obtain a manageable number of relevant results
3. Briefly document your search strategy:
 1. Search string(s) used
 2. Database(s) and/or evidence repositories searched
 3. Number of results returned
4. Rapidly screen results at title/abstract level to identify relevant pieces of evidence
5. Select 2-3 relevant pieces of Type-II evidence to include in this assignment
6. Add a few (1-2) pieces of Type-1 evidence ("Why should something be done?") Draw from available white papers, and locate additional evidence as needed to supplement this
7. Add a few (1-2) pieces of Type-3 evidence ("How can this be implemented or adapted in our setting/population?"). Cover as many of the potential solutions included in your Type-2 evidence as possible. In some cases, this may be challenging, and it is OK if not all are covered.
8. Review your selected pieces of evidence and come to lab prepared to discuss them
9. Summarize relevant findings in the provided Part-I template

Team Evidence-Based Decision-Making Assignment Rubric (Part 1)

Criteria	Fully Met/High Pass	Partially Met/Pass	Not Met/Low Pass	Fail
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Completeness (50 points)	At least 5 pieces of evidence located; Search is well documented	3-5 pieces of evidence located; Search is documented	1-2 pieces of evidence located; Search is partially documented	No evidence located; search not documented
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Relevance (50 points)	All included evidence is relevant to the public health problem selected	>=50% of included evidence is relevant to the public health problem selected	< 50% of included evidence is relevant to the public health problem selected	No included evidence is relevant to the public health problem selected
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Week 5 Synchronous Session

Synch Session 5		
Topic	Locating and evaluating evidence	
Competency Addressed	MPH 9: Design a population-based policy, program, project or intervention	
Learning Objective(s)	<ol style="list-style-type: none"> 1. Teams should locate, discuss, and evaluate evidence for their project 2. Teams should document findings for “Why,” “What,” and “How” questions under LEAD framework 3. Teams should identify remaining evidence gaps 4. Teams should suggest a strategy for addressing these gaps 	
Required Readings	<ol style="list-style-type: none"> 1. Review: Institute of Medicine. 2010. Bridging the Evidence Gap in Obesity Prevention: A Framework to Inform Decision Making. Chapter 5: Specifying questions and locating evidence: an expanded view. 2. Review: Institute of Medicine. 2010. Bridging the Evidence Gap in Obesity Prevention: A Framework to Inform Decision Making. Chapter 6: Evaluating evidence. 3. Review Institute of Medicine. 2010. Bridging the Evidence Gap in Obesity Prevention: A Framework to Inform Decision Making. Chapter 7: Assembling Evidence and Informing Decisions. 	
Required Resources	1. Review “Locating Evidence” PPT presentation prior to this session	
Optional/Cited Resources	1. Understanding Evidence. Part 1: Best Available Research Evidence. A guide to the Continuum of Evidence Effectiveness.	
Class Activity	This session will be a hands-on opportunity for teams to try to locate evidence that is relevant to their topics, identify data gaps, discuss missing evidence, etc.	
Assignments	Group: Evidence-Based Decision-Making Assignment Part 2 (L.E.A.D. Framework Evidence Table)	Due: Synch Session 6
	Group: Evidence-Based Decision-Making Assignment Part 3 (L.E.A.D. Framework Evidence Report)	Due: Synch Session 7
	Individual: EBDM Quiz	Due: Synch Session 7

Part II- develop a L.E.A.D framework evidence table (Group)

Complete prior to Synch Session 6

1. Combine relevant pieces of evidence from your individual Part-I assignments.
2. Locate additional evidence as necessary:
 1. Conduct a search to locate evidence on effective solutions to your identified public health problem/issue (i.e. Type 2 evidence: “What should be done?”)
 2. Refine your search as necessary to obtain a manageable number of relevant results (<1000)
 3. Document your search strategy
 4. Rapidly screen results at title/abstract level to identify relevant pieces of evidence
3. Select a total of 5-10 relevant pieces of Type-II evidence to include in this assignment
4. Add a few (3-5) pieces of Type-1 evidence (“Why should something be done?”) Draw from available white papers, and locate additional evidence as needed to supplement this
5. Add a few (3-5) pieces of Type-3 evidence (“How can this be implemented or adapted in our setting/population?”). Cover as many of the potential solutions included in your Type-2 evidence as possible. In some cases, this may be challenging, and it is OK if not all are covered.
6. Review your selected pieces of evidence and extract relevant findings
7. Summarize relevant findings in the provided Part-II L.E.A.D. Framework evidence table template
8. Evaluate the quality of your selected evidence according to the L.E.A.D. approach (use provided tools for evaluating quality of evidence in the Google Drive folder).
 1. You are only required to evaluate quality of evidence for three of your included pieces of evidence (though you are encouraged to do more as you are able)
 2. Aim to evaluate pieces of evidence of different types (perhaps two observational studies and one review, for example, or one randomized controlled trial, one evaluation report, and one meta-analysis, for example...)
9. Prepare a completed group evidence table integrating all of the Type 1, 2, and 3 evidence assembled by your team. Submit this table for a participation grade. It will be refined and included in your L.E.A.D. framework evidence report and in your final team project.
 1. Note that not all columns will be applicable to every piece of evidence (for example you may not be able to evaluate census data with respect to an effect size, etc.)
 2. Note however that some columns will be applicable to many pieces of evidence, even if they come in slightly different forms- for example one study may report an odds ratio, another might report an % change in an outcome, and both of these count as measures of “effect size.” Similarly, one study might report a 95% confidence interval while another might report a p value only, and both of these count as measures of uncertainty (and can be listed under

You can find an example L.E.A.D. framework evidence table in segment 5.11. Note that your work may differ from this example in many ways.

Team Evidence-Based Decision-Making Assignment Rubric (Part 1)

Criteria	Fully Met/High Pass	Partially Met/Pass	Not Met/Low Pass	Fail
Completeness (50 points)	All sections completed thoroughly	All sections are attempted, but some are incomplete	Multiple sections have not been attempted or are incomplete	Significant numbers of incomplete section or blank assignment

Relevance (50 points)	All included evidence is relevant to the public health problem selected	>=50% of included evidence is relevant to the public health problem selected	< 50% of included evidence is relevant to the public health problem selected	No included evidence is relevant to the public health problem selected
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Week 6 Asynchronous Session

Week 6	
Topic	Assembling Evidence and Prioritizing alternatives to Inform Decisions
Competency Addressed	MPH 15: Evaluate policies for their impact on public health and equity
Learning Objective(s)	<ol style="list-style-type: none"> 1. Assemble evidence so that it can be used to inform decisions 2. Use evidence to make decisions 3. Incorporate evidence into intervention/program planning and implementation 4. Use cost-effectiveness analysis to compare program alternatives 5. Use structured decision-making tools to prioritize policy and program options 6. Use standards/criteria to prioritize policy and program alternatives 7. Discuss what to do when suitable options are not available 8. Discuss the potential of Evidence-based decision-making to produce unintended consequences 9. Understand the need to effectively disseminate evidence and evidence-based practices 10. Engage stakeholders in policy/program prioritization
Required Readings	<ol style="list-style-type: none"> 1. Baltussen, R. et al. 2006. Priority setting of health interventions: the need for multi-criteria decision analysis. <i>Cost Effectiveness and Resource Allocation</i>. 2. Sanders, Gillian D., et al. "Recommendations for conduct, methodological practices, and reporting of cost-effectiveness analyses: second panel on cost-effectiveness in health and medicine." <i>Jama</i> 316.10 (2016): 1093-1103. 3. Kerner, Jon, Barbara Rimer, and Karen Emmons. "Introduction to the special section on dissemination: dissemination research and research

	<p>dissemination: how can we close the gap?." <i>Health Psychology</i> 24.5 (2005): 443.</p> <p>4. Bartram, Jamie, ed. <i>Routledge handbook of water and health</i>. Routledge, 2015. Chapter 68. The Arsenic Crisis in Bangladesh.</p>	
Required Resources	None	
Optional/Cited Resources	<ol style="list-style-type: none"> 1. Spencer, L.M. et al. 2013. Seeking Best Practices: A Conceptual Framework for Planning and Improving Evidence-Based Practices. <i>Preventing Chronic Disease</i> 10. 2. Baltussen, R. et al. 2010. Multi-criteria decision analysis to prioritize health interventions: Capitalizing on first experiences. <i>Health Policy</i> 96(3): 262-264. 3. Community Tool Box: Section 1. Criteria for Choosing Promising Practices and Community Interventions. 4. CDC. The 6 18 Initiative. Accelerating evidence into action 5. Russell, Louise B., et al. "The role of cost-effectiveness analysis in health and medicine." <i>JOURNAL-AMERICAN MEDICAL ASSOCIATION</i> 276 (1996): 1172-1177. 6. Goodman, Clifford S. "Healthcare technology assessment: Methods, framework, and role in policy making." <i>The American journal of managed care</i> 4 (1998): SP200-14. 	
Class Activity	This session will review methods for prioritizing program alternatives, as well as approaches for moving from evidence to practice, and for effectively disseminating public health evidence	
Assignments	Group: Evidence-Based Decision-Making Assignment Part 2	Due: Synch Session 6

Week 6 Synchronous Session

	Synch Session 6	
Topic	Use Structured Decision-making tools to prioritize program alternatives	
Competency Addressed	MPH 9: Design a population-based policy, program, project or intervention	
Learning Objective(s)	<ol style="list-style-type: none"> 1. Apply criteria for evaluating potential policy or program alternatives. 2. Demonstrate skills for presenting and advocating for policy and/or program solutions to improve public health in a given population. 	
Required Readings	<ol style="list-style-type: none"> 1. Pugh, Stuart. "The Systems Engineering Tool Box." (2009). (Pugh Prioritization Matrix) (skim) 2. The Community Toolbox, Chapter 30: Principles of Advocacy 3. The Community Toolbox, Chapter 32: Providing Encouragement and Education 	
Required Resources	Review Asynch unit on: "Methods of prioritizing program alternatives."	
Optional/Cited Resources	None	
Class Activity	In this session, students will practice using structured decision-making tools to prioritize program alternatives	
Assignments	Group: Evidence-Based Decision-Making Assignment Part 3 (L.E.A.D. Framework Evidence	Due: Synch Session 7

	Report)	
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	Individual: EBPH Quiz	Due: Synch Session 7
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[Assignment: EBPH Quiz \(Individual\)](#)

A quiz consisting of 8, short-answer questions on all content covered in EBPH unit to be completed individually. Students will have 1 hour to complete the quiz. Complete before Synch Session 7.

[Part III- develop a L.E.A.D framework evidence report \(Group\)](#)

Complete before Synch Session 7

1. Review and refine your L.E.A.D. framework evidence table as needed
2. Prepare a L.E.A.D. framework evidence report based on this completed group evidence table using the provided evidence report template.
3. Note where gaps in the evidence remain, and how they could be addressed using local expertise and/or additional qualitative and quantitative evidence
4. Submit your completed L.E.A.D. framework evidence report and your final L.E.A.D. framework evidence table for part III of this assignment.

You can find an example L.E.A.D. framework evidence report (based on the ICO4MCH case study) available to download in segment 5.11. Note that your work may differ from this example in many ways. Your team’s completed evidence report will be submitted through Sakai and graded according to the template below:

[Team Evidence-Based Decision-Making Assignment Rubric \(Part 3\)](#)

Criteria	Fully Met/High Pass:	Partially Met/Pass:	Not Met/Low Pass:	Fail
Locating Evidence (25 points)	>=3 pieces of evidence per section located. Evidence identified is from appropriate sources. Evidence is related to the public health problem selected.	Only 1-2 piece of evidence per section located that is from an appropriate source and is related to the public health problem selected. (Other pieces of evidence that do not meet these criteria may be present as well).	1 or fewer more pieces of evidence located that are related to the public health problem selected, but are not from an appropriate source. No pieces of evidence located that meet criteria for “partially met” or “fully met.”	No evidence located that is from an appropriate source nor is any piece of evidence related to the public health problem selected.

<p>Evaluation of Evidence (25 points)</p>	<p>Assessment of quality and relevance of all pieces of evidence is consistent with the L.E.A.D. framework approach (as taught in this course) and consistent with the characteristics of the specific pieces of evidence included.</p>	<p>Assessment of quality and relevance of all pieces of evidence is largely consistent with the L.E.A.D. framework approach (as taught in this course) and largely consistent with the characteristics of the specific pieces of evidence included. (few errors or inconsistencies observed)</p>	<p>Assessment of quality and relevance of all pieces of evidence is present but not consistent with the L.E.A.D. framework approach (as taught in this course) and/or not consistent with the characteristics of the specific pieces of evidence included. (many errors or inconsistencies observed)</p>	<p>No Assessment of quality and relevance of all pieces of evidence is present.</p>
<p>Completeness (15)</p>	<p>All aspects of the assignment have been addressed completely and accurately</p>	<p>All aspects of the assignment have been attempted, but some are incomplete or inaccurate</p>	<p>Multiple aspects of the assignment have not been attempted or are incomplete</p>	<p>Significant numbers of incomplete sections</p>
<p>Clarity, Grammar, and Mechanics (5)</p>	<p>All responses are clear and understandable to a typical instructor in this course, with few spelling or grammatical errors. Sentences are clear and flow in logical order.</p>	<p>Most responses are clear and understandable Some spelling or grammatical errors. Most sentences are clear and flow logically.</p>	<p>Responses are not clear and understandable. Multiple spelling or grammatical errors on the majority of pages. Difficult to understand sentences and logical flow</p>	<p>No responses are clear and understandable to a typical instructor in this course</p>

Relevance (15)	All evidence identified is relevant to the project proposed	>=50% of the evidence is relevant to the project proposed	< 50% of the evidence is relevant to the project proposed	Little to no evidence is relevant to the project proposed
Comprehension of materials (15)	The evidence selected, identified and evaluated demonstrates an excellent understanding and application of course material	The evidence selected, identified and evaluated demonstrates an adequate/average understanding and application of course material	The evidence selected, identified and evaluated demonstrates a below-average understanding and application of course material	The evidence selected, identified and evaluated does not suggest any meaningful understanding or application of course material

Unit 3. Strategize and Develop Policies/Programs

Week 7 Asynchronous Session

Week 7	
Topic	Adapting Evidence-based Interventions/Constructing Logic Models
Competency Addressed	MPH 9. Design a population-based policy, program, project or intervention.
Learning Objective(s)	<ol style="list-style-type: none"> 1. Discuss the iterative nature of adaptation 2. Understand how and when to adapt evidence-based interventions to account for context 3. Identify core components and resource requirements of proposed policy/programmatic intervention 4. Create a logic model as a tool for multilevel intervention development
Required Readings	<ol style="list-style-type: none"> 1. WK Kellogg Foundation. (2004). Logic Model Development Guide. Note: pp. 1-34* 2. Review The Community Guide material that is related to the health behavior you are targeting for your group project 3. 2013 ASPE Issue Brief by Blasé and Fixsen: Core Intervention Components: Identifying & Operationalizing What Makes Programs Work 4. US Department of Health and Human Services: Making Adaptations Tip Sheet 5. The Community Tool Box: Chapter 19, Section 4: Adapting Community Interventions for Different Cultures and Communities
Required Resources	None

Optional/Cited Resources	1. Developing a logic model: Teaching and training guide , Section 3: Benefits of a Logic Model	
Class Activity	Students will be introduced to the tools and knowledge needed to build a logic model for the team project. They will begin this process over the next two sessions.	
Assignments	Group: Evidence-Based Decision-Making Assignment Part 2	Due: Synch Session 7
	Individual: EBPH Quiz	Due: Synch Session 7

*Pages 1-34 are required for this week; the rest of the guide is optional, and likely useful as we transition to program evaluation.

[Week 7 Synchronous Session](#)

Synch Session 7

Topic	Logic Models	
Competency Addressed	MPH 9. Design a population-based policy, program, project or intervention.	
Learning Objective(s)	1. Develop logic model for recommended policy/program solution 2. Use the logic model to identify evaluation needs and potential	
Required Readings	None	
Required Resources	None	
Optional/Cited Resources	None	
Class Activity	Students will continue building a logic model for the team project	
Assignments	Group: Logic Model Team Activity	Due: Synch Session 8

Week 7 Assignment: Logic Model Team Activity

Use a format similar to the one presented on page 54 of the Kellogg Guide to develop a Program Implementation Logic Model for your proposed program. As you engage in the process of creating your program logic model, make sure that your team systematically addresses important program planning and evaluation issues including:

1. Cataloging both the resources and actions you believe are needed to reach the intended results
2. Documented connections among available resources, planned activities and the results you expect to achieve
3. Description of the results you are aiming for in terms of specific, measurable, action-oriented, realistic and timed outcomes

Note: The Checklists on pgs. 55-56 of the Kellogg Logic Guide can be used to assess the quality of your program logic model.

Criteria	Fully Met/High Pass:	Partially Met/Pass:	Not Met/Low Pass:	Fail
Attention to Program Planning and Evaluation Issues (15 points)	More than 3 items listed for each component, presents a highly comprehensive picture of the program's impacts	A minimum of 3 items are listed for each component presents a relatively comprehensive picture of the program's impacts	Less than 3 items listed for each component does not present a comprehensive picture of the program's impacts	One or more components lack any items listed
Completeness (15 points)	All sections of the logic model have been accurately completed	All sections have been attempted, but some seem incomplete or incorrect	Multiple sections have not been attempted or are incomplete	Significant number (more than half) of incomplete sections
Specificity (15 points)	All outputs, outcomes, and impacts are S.M.A.R.T. to the extent possible	>50% of outputs, outcomes, and impacts are S.M.A.R.T. to the extent possible	<50% of outputs, outcomes, and impacts are S.M.A.R.T. to the extent possible	Outputs, outcomes, and impacts are not S.M.A.R.T. to any meaningful

				extent
Feasibility (15 points)	Outcomes and Impacts can quite credibly be achieved through activities and outputs; inputs can quite credibly support activities and outputs	Outcomes and Impacts can credibly be achieved through activities and outputs; inputs can credibly support activities and outputs	Outcomes and Impacts can ~credibly be achieved through activities and outputs and/or inputs can ~credibly support activities and outputs	Outcomes and Impacts cannot credibly be achieved through activities and outputs; inputs cannot credibly support activities and outputs

Clarity, Grammar, and Mechanics (10 points)	All responses are clear and understandable to a typical instructor in this course, with no grammatical errors	$\geq 50\%$, but not all, of responses are clear and understandable to a typical instructor in this course, with few grammatical errors	$< 50\%$ of responses are clear and understandable to a typical instructor in this course, with errors that impact the grader's understanding	No responses are clear and understandable to a typical instructor in this course
Relevance (15 points)	All portions of the logic model are relevant to the project proposed	$\geq 50\%$ of the portions of the logic model are relevant to the project proposed	$< 50\%$ of the portions of the logic model are relevant to the project proposed	No portions of the logic model are relevant to the project proposed
Comprehension of materials (15 points)	The logic model presented demonstrates a clear understanding of course material	The logic model presented reflects a limited understanding of course material, but the model fully address all aspects of the assignment	The logic model presented reflects a limited understanding of course material and fails to fully address all aspects of the assignment	The logic model presented does not reflect a clear understanding of course material

Week 8 Asynchronous Session

Week 8	
Topic	Planning for Implementation
Competency Addressed	MPH 8: Apply awareness of cultural values and practices to the design or implementation of public health policies or programs
Learning Objective(s)	<ol style="list-style-type: none"> 1. Identify individual, organizational and community, assets and resources necessary in planning public health solutions. 2. Create program or policy objectives based on changeable determinants of health 3. Develop activities required to execute a public health solution 4. Understand the importance of continuing to engage stakeholders across the program and policy planning process.
Required Readings	<ol style="list-style-type: none"> 1. Community Tool Box: Identifying Community Assets and Resources. 2. Robert Wood Johnson Foundation blog post: Communities are using a powerful tool to journey toward better health
Required Resources	<ol style="list-style-type: none"> 1. Issel, Chapter 7- Program Objectives and Setting Targets
Optional/Cited Resources	<ol style="list-style-type: none"> 1. The Community Toolbox: Chapter 8, Section 3: Creating Objectives
Class Activity	Students will be introduced to the specifics of effective goals, objectives, and indicators to guide planning and implementation of a public health program.

Assignments	Group: Logic Model Team Activity	Due: Synch Session 8
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Week 8 Synchronous Session

Synch Session 8		
Topic	Planning for Implementation	
Competency Addressed	MPH 8: Apply awareness of cultural values and practices to the design or implementation of public health policies or programs	
Learning Objective(s)	1. Define program goals, objectives, and strategies 2. Develop goals, objectives, and strategies for a program plan 3. Determine appropriate target for outcomes	
Required Readings	None	
Required Resources	None	
Optional/Cited Resources	None	
Class Activity	In this session, students will complete the planning worksheet that was introduced in the previous session.	
Assignments	Group: Program Goals and Objectives Team Activity	Due: Synch Session 9

Week 8 Assignment: Program Goals and Objectives Team Activity

Identify a minimum of 2 and maximum of 4 goals for your proposed program. These should be broad, encompassing statements about the health outcomes or status of the target audience to be achieved across a long time horizon.

Develop up to 5 relevant objectives for each major goal of your program. These should be specific statements about impacts to be achieved, stated in measurable terms. In designing program objectives, remember the format *“by when, who will achieve what, by how much.”*

- Within your program objectives, include several Short Term Objectives that focus on the implementation of the program. These primarily address the implementation/effectiveness of the program activities but can also include participant satisfaction with these activities.
- Also include Intermediate/Long Term Objectives that identify specific outcomes for your program participants as a result of receiving the program interventions.
- Remember that the term ‘participants’ can refer to more than a direct recipient of a service and can include collaborative partners, a community agency, a policy-making body, etc. that is being targeted through the program and its interventions.
- Review your objectives against the criteria S.M.A.R.T. + C:
 - Specific
 - Measurable
 - Action-oriented
 - Realistic
 - Timed

- + C: They are *challenging*. They stretch the group to set its aims on significant improvements that are important to members of the community.

Note: In developing goals & objectives for program planning & evaluation, there are many different terms used by the 'experts' including process, effect, formative, summative, impact, etc. Some of these terms are used interchangeably while others are considered very close in meaning. We will continue to discuss these in class. For now, please strive for simplicity and clarity in the development of your objectives; try not to be overwhelmed by too many terms or reach beyond what would be realistic expectations for your program given size, scope, complexity and time frames.

Goals and objectives should reflect how and to what extent the proposed programmatic interventions are expected to affect the causal factors of the health problem. Again, please be realistic in terms of an appropriate target value to assign to each objective.

Criteria	Fully Met/High Pass	Partially Met/Pass	Not Met/Low Pass	Fail
Quality of Goals (25 points)	Goals are broad statements about the health outcomes or status of the target audience to be achieved across a long time horizon.	Some of the goals are broad statements with appropriate and strong objectives. However, not all of the criteria for goals have been met.	Goals are too specific, do not pertain to health outcomes or the target audience.	Inadequate number of goals (2-4) have been produced. Those that are present do not serve the appropriate role of goal
Quality of Objectives (25 points)	Objectives are appropriate to the goals and achieve the SMART+C criteria	Some of the objectives are strong and appropriate to the goals. However, not all of the criteria for objectives have been met.	Objectives are not appropriate for the related goals, and/or do not achieve SMART+C criteria	Inadequate number of objectives (2-5 per goal) have been produced. Those that are present do not serve the appropriate role of objective
Completeness (15 points)	All aspects of the assignment have been addressed completely and accurately	All aspects of the assignment have been attempted, but some are incomplete or inaccurate	Multiple aspects of the assignment have not been attempted or are incomplete	Significant numbers of incomplete sections

Clarity, Grammar and Mechanics (5 points)	All responses are clear and understandable to a typical instructor in this course, with no grammatical errors	≥ 50% of responses are clear and understandable to a typical instructor in this course, with few grammatical errors	< 50% of responses are clear and understandable to a typical instructor in this course, with errors that impact the grader's understanding	No responses are clear and understandable to a typical instructor in this course
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Relevance (15 points)	All goals and objectives are relevant to the project proposed	>=50% of the goals and objectives are relevant to the project proposed	< 50% of the goals and objectives are relevant to the project proposed	Few goals and objectives are relevant to the project proposed
Comprehension of material (15 points)	The goals and objectives demonstrate a clear understanding of course material	reflect limited understanding of course material/fail to fully address all aspects of the assignment	reflect limited understanding of course material/fail to fully address all aspects of the assignment	The goals and objectives do not suggest a clear understanding of course material

Week 9 Asynchronous Session

Week 9			
Topic	Budgets		
Competency Addressed	MPH 10. Explain basic principles and tools of budget and resource management		
Learning Objective(s)	<ol style="list-style-type: none"> Understand and be able to apply/use basic principles of budget and resource management. Be able to identify and utilize resources that provide budget inputs/cost items. Be able to develop a basic budget for a public health solution Understand how to research funding sources and apply for funding. Understand how to find budget line items and develop assumptions, choose budget format/template 		
Required Readings	<ol style="list-style-type: none"> Scotto, M. (1994). Project budgeting: the key to bringing business projects in on-time and on-budget. <i>Project Management Journal</i>, 25(1), 35–42. Issel, Chapter 9, <i>Monitoring Implementation Through Budgets and Information Systems</i> 		
Required Resources	None		
Optional/Cited Resources	<ol style="list-style-type: none"> Missouri Department of Health, Budget Planning Guide. Tufts Health Plan Foundation, Sample Program Budget Meyer, Werner G. "Estimating: the science of uncertainty" <i>Project Management Institute</i>, 2016. Public Health Finance Bootcamp 		
Class Activity	In this session, students will learn how public health programs are funded. They will also be introduced to the basic components of a budget, including revenues, expenditures, and what can impact each.		
Assignments	<table border="1" style="width: 100%;"> <tr> <td style="width: 60%;">Group: Program Goals and Objectives Team Activity</td> <td style="width: 40%;">Due: Synch Session 9</td> </tr> </table>	Group: Program Goals and Objectives Team Activity	Due: Synch Session 9
Group: Program Goals and Objectives Team Activity	Due: Synch Session 9		

Week 9 Synchronous Session

Synch Session 9

Topic	Budgets*	
Competency Addressed	MPH 10. Explain basic principles and tools of budget and resource management	
Learning Objective(s)	1. Develop a realistic budget	
Required Readings	1. Review guidance and templates from University of Wisconsin's PMA tool: https://pma.doit.wisc.edu/plan/2-4/how.html	
Required Resources	None	
Optional/ Cited Resources	1. Public Health Finance Bootcamp	
Class Activity	Students will apply tools to develop an operating budget.	
Assignments	Group: Program Implementation Plan and Budget Team Activity	Due: Synch Session 10

*Note: Each student can take on an individual section of the budget, but all members of the team must contribute to the overall budget, including challenging assumptions, finding potential sources of funding, etc.

Week 9 Assignment: Program Implementation Plan and Budget Team Activity

Develop a program implementation work plan in narrative or chart form that includes your program goals and objectives and strategies to meet proposed objectives (Refer to your planning worksheet from Synch Session 8 for guidance).

Develop a detailed budget & budget narrative (also called a budget justification) describing projected expenses of your proposed program and revenue sources. These elements will contribute to the core of your final program plan as well as guide implementation of your program.

First, identify a funding source for your program. This could include a:

- a. Community foundation
- b. State-level grant
- c. Federal agency grant (e.g. CDC)
- d. International development agency

Identify a relevant funding program or call for proposals from the past 2 years for that funding source and provide a brief overview of the program requirements or request for proposal and allowable budget. Please include a link to the identified information. In this section you should aim to very briefly and succinctly specify:

1. Who is eligible for this funding source (and why you meet these criteria)
2. What the funder aims to support (and why your proposed work fits this)
3. How much support the funder will provide over what time period (and how this matches your propose budget, within reason)

Next, develop a detailed budget & budget justification describing projected expenses of your proposed program (for at least your first year) that is in line with your chosen funding source.

- a. To complete your budget and justification, first identify and estimate start-up expenses and ongoing operating expenses for the **first year of your program**. Include all expenses associated with your proposed program, such as personnel, facilities and supplies.
 - i. You will need to provide support for all of your expense estimations. For example, if you include the salary for a program director in your expenses, explain how you estimated the salary/benefits expenses

for this position (this could be as simple as a link to relevant reference if you use an excel spreadsheet, for example; if you use some other estimation method, just provide brief description of how you estimated these costs). If you need to rent meeting space, describe how you estimated the monthly rent.

- II. You will also need to consider both variable and fixed expenses. When including variable expenses, you must include an estimate of the volume. For example, if you want to provide program participants with printed resources, describe how many copies you will need. If you need to provide meals for participants, describe how much you will order at what cost.
 - III. While any format is acceptable, program planners often use a spreadsheet that automatically calculates subtotals and totals, because this is easier to update and edit as you inevitably need to make changes.
- b. Detail your annual operating budget, with expenses and revenues, in the provided table.
- c. Include a budget justification. This is a brief narrative statement (generally no more than a page) that briefly and succinctly describes what each major line item is for. This is not your attempt to persuade the funder that the item is worthwhile and important, just a simple explanation. Example: Office Space (\$14,000/year): the program team will be based in the office and will conduct quarterly community workshops and trainings here.
- d. A brief note on in-kind expenses: many budgets will include services, space, equipment, or other items that are made available to the program or donor at no direct cost. These should be included on your budget, and their actual market value should be indicated (e.g. if a local hospital is “donating” 10 hours/month of RN effort, these should be listed at the current market rate for salary + benefits for that level of effort in your location. These costs should be indicated as “in-kind” contributions to the program rather than direct costs. However, recognizing their value and listing them in the budget accomplishes three things:
- I. It shows the funder the additional value they are leveraging through these in-kind contributions
 - II. It shows the funder that you have not forgotten to account for these items in your budget
 - III. It provides an indicative cost for calculating how much you would have to adjust your budget if these in-kind contributions were unavailable in the future, or if you wanted to scale to a level at which they could no longer be supported or adapt your program to a setting in which they were unavailable.
- e. Budget pitfalls. Funders look very closely at budgets and budget justifications when awarding grants and funding. A few items can reduce the persuasiveness of your budget and overall team project.
- I. Budget is not proportional to work proposed: If you propose to transform a service at the county level and have budgeted a total of \$12,000 for your first year, unless you are simply updating the county health department’s website, your budget is unlikely to be credible. Conversely, if you propose to introduce a new healthy eating module in the curriculum of a single middle school and have a budget of \$2.5m for your first year, this may be a tough sell.
 - II. Budget is too long: no funder will read a 30 page budget. There is no fixed length for a budget, but generally aim to keep it a reasonable length. For example, staples and paperclips can likely be combined under “supplies” unless you are specifically implementing a paperclip-based intervention to which this item is critical.
 - III. Budget has weird levels of detail; for example office supplies are itemized but there is a single line item for just “staff” or “program activities.”
 - IV. Budget is top-heavy or lopsided in unexpected ways: in most cases, program staff should not account for 95% of your total costs. If they do, the program should be one in which the intervention is directly delivered by your program staff- if the activities and assets that most directly produce the main

“outcomes and impacts” of your project make up too small a proportion of your budget expenses, this can look strange to funders.

Criteria	Fully Met/High Pass	Partially Met/Pass	Not Met/Low Pass	Fail
Quality of Program Implementation Work Plan (20 points)	Implementation plan contains specific and feasible strategies to meet all goals and objectives	Strategies are mostly specific and feasible and are proposed for all goals and objectives	Strategies are somewhat specific and feasible, but are not proposed for all goals and objectives	Strategies are not specific and feasible and do not meet all goals and objectives

Clarity of Budget (30 points)	Budget is appropriate for the proposed project, proposed expenses and revenue appear to be reasonable	Some aspects of the budget are not appropriate for the proposed project, expenses and revenue are mostly reasonable	There are several aspects of the budget that are not appropriate for the proposed project or the proposed expenses and revenue are not reasonable	Budget is not appropriated for proposed project, expenses and revenue are not reasonable
Completeness (15 points)	All aspects of the assignment have been addressed completely and accurately	All aspects of the assignment have been attempted, but some are incomplete or inaccurate	Multiple aspects of the assignment have not been attempted or are incomplete	Significant numbers of incomplete sections
Clarity, Grammar and Mechanics (5 points)	All responses are clear and understandable to a typical instructor in this course, with no grammatical errors	$\geq 50\%$ of responses are clear and understandable to a typical instructor in this course, with few grammatical errors	$< 50\%$ of responses are clear and understandable to a typical instructor in this course, with errors that impact the grader's understanding	No responses are clear and understandable to a typical instructor in this course
Relevance (15 points)	All aspects of the implementation plan and budget are relevant to the project proposed	$\geq 50\%$ of the implementation plan and budget are relevant to the project proposed	$< 50\%$ of the implementation plan and budget are relevant to the project proposed	Few aspects of the implementation plan and budget are relevant to the project proposed
Comprehension of material (15 points)	The implementation plan and budget demonstrate a clear understanding of course material	reflect limited understanding of course material/fail to fully address all aspects of the assignment	reflect limited understanding of course material/fail to fully address all aspects of the assignment	The implementation plan and budget does not suggest a clear understanding of course material

Unit 4. Adopt & Implement Policies & Programs

Week 10 Asynchronous Session

Week 10			
Topic	Adoption and applied implementation: securing buy-in and putting your program or policy into place		
Competency Addressed	MPH 9: Design a population-based policy, program, project or intervention		
Learning Objective(s)	<ol style="list-style-type: none"> 1. Describe the stages of implementation (<i>Note: This framework may be helpful later in the course when discussing sustainability</i>) 2. Describe the key drivers of effective implementation, including competency, organization and leadership 3. Discuss the roles and responsibilities of implementation teams 4. Understand improvement cycles and how to use them to successfully implement, adapt, and sustain an intervention 		
Required Readings	<ol style="list-style-type: none"> 1. Frieden, T.R. 2014. Six Components Necessary for Effective Public Health Program Implementation. <i>American Journal of Public Health</i>, 104(1). 2. Aarons, G.A. et al. 2011. Advancing a Conceptual Model of Evidence-Based Practice Implementation in Public Service Sectors. <i>Administration and Policy in Mental Health and Mental Health Services Research</i> 38(1): 4-23. 3. Fixen, D.L. et al. 2009. Core implementation components. <i>Research on Social Work Practice</i> 19(5): 531-540. 4. Aarons, G. A., Ehrhart, M. G., Farahnak, L. R., & Sklar, M. (2014). Aligning leadership across systems and organizations to develop a strategic climate for evidence-based practice implementation. <i>Annual Review of Public Health</i>, 35, 255-274. 5. Department of Health and Human Services (HHS), National Cancer Institute (NCI), Implementation Science at a Glance,; download at: https://cancercontrol.cancer.gov/IS/docs/NCI-ISaG-Workbook.pdf 		
Required Resources	<ol style="list-style-type: none"> 1. The Active Implementation Hub - Module 1: An Overview of Active Implementation Frameworks 		
Optional/Cited Resources	<ol style="list-style-type: none"> 1. Center TRT 2. Implementation Training Webinar 3. Implementation Process Webinar 4. National Implementation Research Network: Active Implementation Hub 		
Class Activity	Students will begin the session addressing the difficulties between translating evidence to effective implementation. Then, students will learn the specifics of implementation, including the drivers of effective implementation, the role of implementation teams, and how to utilize an improvement cycle to adapt and sustain and intervention.		
Assignments	<table border="1"> <tr> <td>Group: Program Implementation Plan and Budget Team Activity</td> <td>Due: Synch Session 10</td> </tr> </table>	Group: Program Implementation Plan and Budget Team Activity	Due: Synch Session 10
Group: Program Implementation Plan and Budget Team Activity	Due: Synch Session 10		

Week 10 Synchronous Session

Synch Session 10	
Topic	Implementation plan and timeline

Competency Addressed	MPH 9: Design a population-based policy, program, project or intervention	
Learning Objective(s)	<ol style="list-style-type: none"> 1. Learn how to plan for implementation and maximize efficiency, likelihood of success: 2. Break your proposed implementation into steps or activities 3. Estimate time required to implement each proposed step/activity 4. Identify potential sources of delay and mitigation measures 5. Identify potential opportunities to combine or shorten steps/increase efficiency 6. Develop a GANNT chart 	
Required Readings	2. The Community Toolbox: Chapter 17, Section 7: Putting Your Solution into Practice	
Required Resources	1. Community Toolbox Action Planning Sheet	
Optional/Cited Resources	1. IHI Project Planning Form	
Class Activity	Students will apply drivers to the implementation of their proposed program or policy intervention and continue to work on their implementation plans.	
Assignments	Group: Timeline Team Activity	Due: Synch Session 11

Week 10 Assignment: Timeline Team Activity

Break your proposed implementation work plan strategies into steps or activities. Describe each activity in detail. Your description needs to be sufficiently detailed so that someone could pick up your proposal and implement your proposed policy or program. How and when will the program be offered/provided and by whom? Describe staff required to implement the program and be sure to include who will lead/manage the program. Develop concrete milestones for each step. Estimate time required to implement each proposed step/activity. Use a GANNT Chart or a similar timeline to show planning, implementation and evaluation activities and how they will be conducted over time.

The purpose of this assignment is to develop a timeline of all program activities and strategies based on your implementation plan.

Use the provided GANTT chart template to complete your program timeline (you may use another template if you prefer).

- a. List 3 overarching goals of your program on the corresponding rows in the GANTT chart. You may copy and paste your revised goals from the Program Goals and Objectives assignment.
- b. List each activity/strategy associated with that goal on its own row. You should use the activities/strategies proposed in the Implementation Plan assignment for each program goal. The table provided below has three rows for three activities for each goal included. Add more rows for each additional activity/strategy as necessary.
- c. Estimate time required to implement each proposed step/activity. Indicate the length of time by shading when the activity will occur. Currently, the table is structured to reflect a program that is two years in length, with time denoted in quarter-year increments. You may alter the columns to reflect the amount of time, and length of time each column reflects as necessary for your program (e.g. one-year program, split into 12 months).

- d. List any startup activities and their timing under the 'Project Launch' section that will be required to conduct the activities associated with each program goal. Again, three rows for three startup activities are included, adjust the number of rows as needed.
- e. For this assignment, you may ignore the Evaluation activities at the end of the GANTT chart. Your team will complete that section as part of the Final Team Project.

Criteria	Fully Met/High Pass	Partially Met/Pass	Not Met/Low Pass	Fail
Quality of Timeline (50 points)	Timeline is sufficiently detailed and reasonable given the proposed project activities	Timeline is somewhat detailed, and mostly reasonable given the proposed project activities	Timeline is somewhat detailed, but unreasonable given the proposed project activities	Timeline is not sufficiently detailed to be implemented by someone unfamiliar to the project
Completeness (15 points)	All aspects of the assignment have been addressed completely and accurately	All aspects of the assignment have been attempted, but some are incomplete or inaccurate	Multiple aspects of the assignment have not been attempted or are incomplete	Significant numbers of incomplete sections

Clarity, Grammar and Mechanics (5 points)	All responses are clear and understandable to a typical instructor in this course, with no grammatical errors	$\geq 50\%$ of responses are clear and understandable to a typical instructor in this course, with few grammatical errors	$< 50\%$ of responses are clear and understandable to a typical instructor in this course, with errors that impact the grader's understanding	No responses are clear and understandable to a typical instructor in this course
Relevance (15 points)	All responses are relevant to the questions asked	$\geq 50\%$ of responses are relevant to the questions asked	$< 50\%$ of responses are relevant to the questions asked	No responses are relevant to the questions asked
Comprehension of material (15 points)	The timeline demonstrates a clear understanding of course material	reflect limited understanding of course material/fail to fully address all aspects of the assignment	reflect limited understanding of course material/fail to fully address all aspects of the assignment	The timeline does not suggest a clear understanding of course material

Unit 5. Evaluate and Communicate Policies and Programs

Week 11 Asynchronous Session

Week 11	
Topic	Design and conduct evaluations
Competency Addressed	MPH 2. Select quantitative and qualitative data collection methods appropriate for a given public health context MPH 11. Select methods to evaluate public health programs.
Learning Objective(s)	<ol style="list-style-type: none"> Understanding how to apply a program theory (logic model) to an evaluation topic Determining which type of evaluation is appropriate for your program/policy. Describe criteria for selecting which quantitative or qualitative evaluation methods would be most appropriate
Required Readings	<ol style="list-style-type: none"> Gugerty, M. K. & Karlan, D. (2018). Ten Reasons Not to Measure Impact—and What to Do Instead. Stanford Social Innovation Review. Crosby, R., & Noar, S. M. (2011). What is a planning model? An introduction to PRECEDE-PROCEED. J Public Health Dent, 71 Suppl 1, S7-15. Issel, L. M., & Wells, R. (2017). <i>Health program planning and evaluation</i>. Jones & Bartlett Learning, Chapter 11

	<ol style="list-style-type: none"> 4. Issel, L. M., & Wells, R. (2017). <i>Health program planning and evaluation</i>. Jones & Bartlett Learning, Chapter 12 5 Website Review: CDC Framework for Program Evaluation - https://www.cdc.gov/eval/framework/index.htm 6 Centers for Disease Control and Prevention. Framework for program evaluation in public health. MMWR 1999;48(No. RR-11):[inclusive page numbers].
Required Resources	None
Optional/Cited Resources	None
Class Activity	<ol style="list-style-type: none"> 1. I AM exercise 2. Evaluation Plan Exercise 3. Cure Violence Stakeholder Engagement Exercise
Assignments	Individual: Complete Asynch Exercises (above) Due: Synch session 11

Week 11 Synchronous Session

Synch Session 11	
Topic	Develop evaluation plan
Competency Addressed	MPH 2. Select quantitative and qualitative data collection methods appropriate for a given public health context MPH 11. Select methods to evaluate public health programs.
Learning Objective(s)	<ol style="list-style-type: none"> 1. Select a type of program evaluation or a program evaluation framework 2. Develop a set of evaluation questions for team project 3. Indicate possible metrics/indicators (indicate type), frequency of monitoring and data source for each
Required Readings	None
Required Resources	None
Optional/Cited Resources	None
Class Activity	<ol style="list-style-type: none"> 1. Address any burning questions [5 minutes] 2. Walk through Evaluation Plan Template and answer questions about assignment [10 minutes] 3. Reflections on the I AM exercise [15 minutes] 4. Reflections on Cure Violence video [10 minutes] 5. Work on Program Evaluation Proposals in Small Groups [75 minutes] 6. Wrap-up and Next Steps [5 minutes]
Assignments	Group: Program Evaluation Proposal Due: Synch Session 12

Week 11 Assignment: Program Evaluation Proposal

You will need to complete an evaluation plan as part of your class project, using the tables below.

The purpose of this assignment is to create an evaluation plan for your ~3 program goals. The evaluation will include information on data collection activities, methods, and measures as well as the timing of data collection. A table is provided for this information for each program goal. Following the tables, you will provide narrative information on the study design, data analysis, and ethical considerations for your evaluation. Please note, for each goal, **you will select only two objectives to evaluate, one process-related objective and one outcome/impact objective** (there is a little

flexibility here—see below). Note that a comprehensive plan would involve evaluating all goals and objectives. However, for the purposes of this exercise, please limit your plan to 2 objectives per goal.

First, complete the table provided below for each of the three program goals. The following sections are included in the table template for each goal and an example is provided at the end of this assignment document.

- a. Goal: Copy and paste the revised program goal from your Goals and Objectives assignment.
- b. Objective: Copy and paste the two objectives you have chosen for that goal in the rows for Objective A (process-related) and Objective B (outcome-related). Note that it is not strictly necessary to have exactly one process and one outcome objective for each goal, but do include a good mix of process and outcome objectives overall.
- c. Sampling strategy: from whom will you collect data to evaluate your objectives? All participants or a subset? If a subset, how will they be selected? By random sampling? By convenience? In some other way? Will you stratify your sampling approach to enable you to capture disparities among subgroups in any way? Note that your sampling strategy need not be complex, but it must be clear. If different sampling strategies are needed for different goals and objectives, this should be specified. If not, just say so.
- d. Data collection activities and methods: Provide a list of the data collection activities that will be necessary to carry out the evaluation. Describe the methods (e.g., surveys, focus groups, etc.) you will use to collect the data. It is expected that you will use both quantitative and qualitative data collection methods across the goals and objectives, but you have flexibility in your choice of method for each objective.
- e. Specific measures: List the outputs (e.g. patient visits, training sessions, population reached, etc.), outcomes (e.g. change in morbidity, mortality, BMI, smoking rate, etc.), disparities (e.g. by SES, race/ethnicity, rural/urban, etc.) and/or constructs (e.g. quality of life, etc.) you are intending to measure (e.g. quality of life) and the specific scales you intend to use (e.g. 3-item CDC quality of life measure) if applicable. If you want to know about changes in smoking behavior, specify the indicator(s) you will use to track this: packs per day? Days without smoking? Other?
- f. Timing of data collection: State when the evaluation and stakeholder engagement activities will occur (e.g., baseline and 12 months post-intervention, etc.)

Next, (briefly) summarize the following information in narrative format that integrates evaluation activities across the three goals:

- a. Summary of evaluation design: State the evaluation design you have chosen (e.g. descriptive, observational, quasi-experimental, experimental) in design notation. Provide a brief justification for selecting (the 'why') this design based on the degree to which the design assesses causality or program attribution and is feasible with the resources available and within the chosen setting.
 - o Note that for some programs in which the changes due to your intervention are likely to be very large relative to changes due to other factors (e.g. effect of cataract surgery on vision), a simple pre/post comparison may be sufficient; for other programs in which multiple determinants both related to and unrelated to your program may affect outcomes (e.g. effect of community gardens on obesity), a pre/post comparison is unlikely to provide a robust estimate of your program's effects on the outcome of interest.

- b. Summary of sampling strategy: Briefly summarize the sample and sampling strategy(ies) described above. Who will participate in the evaluation and how will they be selected? Will the evaluation cover multiple settings, locations, facilities, or groups of individuals? Will these be clustered or stratified in any way?
- c. Analysis plan: Specify very briefly how you will analyze the quantitative and qualitative data you collect. It is not sufficient to say “we will compare group x to group y.” How will this comparison be done? Specify statistical methods where possible. Where this is not possible, specify what you will look for (e.g. thematic codes mentioning X; a substantive proportion of focus group participants reporting Y, etc.)
- d. Ethical approval: Specify very briefly what ethical approvals, if any, will be needed, and what steps will be taken to protect any human subjects.
- e. Stakeholder engagement activities: List at least two ways that you would engage stakeholders in the program evaluation process.

Table Templates:

Goal 1: [Write Goal 1 here]	
Objective 1A: [Write your process-related objective here]	
Data Collection Activities and Methods:	Specific Measures:
	Sampling Details:
	Timing of data collection:
Objective 1B: [Write your outcome-related objective here]	
Data Collection Activities and Methods:	Specific Measures:
	Sampling Details:
	Timing of data collection:

For the Dissemination Plan section (250-300 words) briefly describe how you will disseminate results of your evaluation to the community and to other stakeholders:

In narrative format, provide a description of the dissemination plan. This description should include:

- a. The audience for whom the plan will be disseminated: describe and justify all the stakeholders that will receive the evaluation findings, and which type of material will be presented to each stakeholder. Note that where this builds on content included in earlier assignments, you may refer back to that content as needed to minimize duplication.
- b. The materials to be disseminated: be specific about what types of final materials should be created to report the evaluation results (e.g. Executive Summary, infographic, presentations). You should include a minimum of 2 dissemination strategies. Think about how you will reach different stakeholders and audiences most effectively and persuasively, and convey this in your dissemination plan.
- c. The timeline for dissemination.
- d. Describe how your dissemination strategy will add to the available evidence on solutions to your public health problem, in order to benefit other implementers in the future.

Week 11 Assignment Rubric

Criteria	Fully Met/High Pass:	Partially Met/Pass:	Not Met/Low Pass:	Fail
Quality of Overall Program Evaluation Proposal (30 points)	Study design, measures, sampling, and analysis plan fit together and meet the standards of rigor for a high quality evaluation.	Study design, measures, sampling, and analysis plan fit together to some extent, but are not likely to fully meet the standards of rigor for a high quality evaluation.	Study design, measures, sampling, and analysis plan do not all fit together, and results will not meet standards for a high quality evaluation.	Study design, measures, sampling, and analysis plan do not fit together and could not meet the standards of rigor for a high quality evaluation
Plausibility that Evaluation Plan can answer programmatic questions (30 points)	It is highly plausible that the proposed evaluation could determine the extent to which objectives were met and goals were achieved, and could assess extent to which these outcomes are attributable to program	It is plausible that the proposed evaluation could determine the extent to which >50% of program objectives were met and goals were achieved; evaluation may or may not	It is plausible that the proposed evaluation could determine the extent to which <50% of program objectives were met and goals were achieved; evaluation may or may not	It is not plausible that the proposed evaluation could determine the extent to which objectives were met and goals were achieved; evaluation does

	activities.	allow evaluators to attribute these outcomes to program activities.	allow evaluators to attribute these outcomes to program activities.	not allow evaluators to attribute these outcomes to program activities.
Completeness (15 points)	All sections of the program evaluation plan and dissemination plan have been accurately completed	All sections have been attempted, but some seem incomplete or incorrect	Multiple sections have not been attempted or are incomplete	Significant numbers of incomplete sections
Clarity, Grammar, and Mechanics (5 points)	All responses are clear and understandable to a typical instructor in this course, with no grammatical errors	$\geq 50\%$ of responses are clear and understandable to a typical instructor in this course, with few grammatical errors	$< 50\%$ of responses are clear and understandable to a typical instructor in this course, with errors that impact the grader's understanding	No responses are clear and understandable to a typical instructor in this course
Relevance (5 points)	All portions of the evaluation plan are relevant to the proposed program	$\geq 50\%$ of the portions of the evaluation plan are relevant to the proposed program	$< 50\%$ of the portions of the evaluation plan are relevant to the proposed program	Few portions of evaluation plan are relevant to the proposed program

Comprehension of materials (15 points)	The program evaluation plan presented demonstrates a clear understanding of course material	The program evaluation plan suggests an understanding of course material, but fails to fully address all aspects of the assignment	The program evaluation plan reflects a limited understanding of course material and fails to fully address all aspects of the assignment	The program evaluation plan does not suggest a clear understanding of course material
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Week 12 Asynchronous Session

Week 12	
Topic	Disseminate results and facilitate their use
Competency Addressed	MPH 9. Design a population-based policy, program, project or intervention
Learning Objective(s)	<ol style="list-style-type: none"> 1. Be able to apply a knowledge translation framework to a public health issue. 2. Disseminating program evaluation findings to community partners 3. Understanding principles of strategic communications 4. Be able to develop communications about public health issues for diverse groups 5. Understand the principles of risk communication
Required Readings	<ol style="list-style-type: none"> 1. Brownson, R. C., Fielding, J. E., & Maylahn, C. M. (2009). Evidence-based public health: a fundamental concept for public health practice. <i>Annu Rev Public Health, 30</i>, 175-201. 2. Birkeland, S., Murphy-Graham, E., & Weiss, C. (2005). Good reasons for ignoring good evaluation: The case of the drug abuse resistance education (D.A.R.E.) program. <i>Evaluation and Program Planning, 28</i>(3), 247-256. 3. Issel, L. M., & Wells, R. (2017). <i>Health program planning and evaluation</i>. Jones & Bartlett Learning, Chapter 14 4. Review: Issel, L. M., & Wells, R. (2017). <i>Health program planning and evaluation</i>. Jones & Bartlett Learning, Chapter 15: Qualitative Methods for Planning and Evaluation.
Required Resources	None
Optional/Cited Resources	None
Class Activity	<p>Watch the Stoner Sloth ads and then one set of FDA ads (This Free Life, Movie Moments, or Chemical Constituents)</p> <p>Stoner sloth ads (New South Wales)</p> <p>FDA ads (US)</p> <ul style="list-style-type: none"> • This Free Life (US FDA): Be Known for Your Flawless, The Secret to Sickening Nails, and What's Under the Paint • The Real Cost (US FDA) – iconic movie moments: Sleeping Beauty, The Notebook, and Star Wars

	<ul style="list-style-type: none"> The Real Cost –chemical constituents: Run Like Hell, Science Class, and The 7000 <p>Question: For both groups briefly state</p> <ul style="list-style-type: none"> Who the target audience is What information or health message is being conveyed? How effective are the ads in conveying the intended messages? One way that you might assess qualitatively and/or quantitatively, the effect of such ads What unintended consequences, either good or bad, the ads might have
Assignments	Group: Program Evaluation Proposal Due: Synch Session 12

Week 12 Synchronous Session

Synch Session 12	
Topic	Knowledge Translation to Add to the Public Health Evidence Base
Competency Addressed	MPH 9. Design a population-based policy, program, project or intervention
Learning Objective(s)	<ol style="list-style-type: none"> Identify knowledge translation opportunities Develop approaches for translating public health knowledge across diverse disciplines, settings, and audiences
Required Readings	None
Required Resources	None
Optional/Cited Resources	None
Class Activity	<ol style="list-style-type: none"> Address any burning questions [5 minutes] Reflections on possible adverse consequences of dissemination [20 minutes] Anti-smoking Campaign Breakout [35 minutes] Anti-smoking Campaign, Reporting Back [40 minutes] Group Discussion on Reporting Results [20 minutes]
Assignments	Group: Team Project Due: By midnight the day after Synch Session 13
	Group: Team Project Presentation Due: Synch Session 13

Week 13 Asynchronous Session

Week 13	
Topic	Closing the Cycle: Case Study Wrap-up, CQI, and Iterative Nature of Planning Model
Competency Addressed	MPH 9. Design a population-based policy, program, project or intervention
Learning Objective(s)	<ol style="list-style-type: none"> Understand how ongoing implementation connects to ICO4MCH project Understand how Quality Improvement tools can be used for ongoing implementation and use of evidence
Required Readings	None
Required Resources	None

Optional/Cited Resources	None	
Class Activity	<p><u>Evaluation Plan: Wrap Up and reflections</u> Take about 10 minutes to write some notes on the evaluation plan for ICO4MCH as it is presented in the report. Comment specifically on stakeholder engagement, the design of the evaluation, and the methods used for each part. Who are the identified stakeholders and how were they engaged? How was the evaluation designed? What methods were used? What do you see as the strengths of the plan? What might you have done differently?</p>	
Assignments	Group: Project Presentations	Due: Synch Session 13
	Group: Team Project Report	Due: Synch Session 13

Week 13 Synchronous Session

Synch Session 13		
Topic	Student Project Presentations/ Course Wrap-Up	
Competency Addressed	MPH 9. Design a population-based policy, program, project or intervention	
Learning Objective(s)	1. Present and Disseminate Student Projects 2. Provide and integrate peer feedback and questions	
Required Readings	None	
Required Resources	None	
Optional/Cited Resources	None	
Class Activity	Student Project Presentations	
Assignments	Complete Written Team Project	Due: 2 days after Synch Session 13
	Complete Peer Evaluations	Due: 2 days after Synch Session 13

Appendix: Team Project

Overview

As the final course in the Gillings MPH Core, SPHG 722 teaches students to apply public health concepts and skills to plan, implement and evaluate programs and policies aimed at improving population health. Throughout the course, students will work in teams of approximately 5 students to develop a specific plan to address one of the five priority health problems introduced in SPHG 713 (Understanding Public Health Issues) in a specific community or population. The final plan, due 2 days after the final sync session, will include 4 main sections. One or more components from each section will be completed and assessed earlier in the semester. Teams will receive feedback on those sections submitted earlier, and you will have the opportunity to incorporate or respond to that feedback when you compile the final proposal in order to make it as effective and cohesive as possible. The final product will include an introduction/project abstract, final works cited, and a presentation.

The assumed audience for the proposal is trained public health practitioners in a leadership role. The call for proposals may be coming from a state department of public health, a philanthropic foundation, or a U.S. or international agency, like the CDC, USAID, or the WHO. The proposal must include the following components:

Group Assignment: Final Team Project Assignment Instructions

Summary of assignment:

The final team project provides an opportunity to synthesize the tools, concepts, and content that you have developed in this course into a single, high-quality written product and presentation “pitch”. The focus of these products will be proposing and planning the design, implementation, and evaluation of a feasible and evidence-based solution to your chosen public health problem, for implementation in your specific selected population and context.

Formatting requirements:

- The final program plan proposal includes seven total sections described in detail below. Please upload the final plan as one document on Sakai.
- The document should be single-spaced, Arial 11 pt font, and 1 inch margins.
- The program should be ~20-25 pages based on the suggested page lengths for each section provided below. You have flexibility to choose how you allocate space among all the pieces. You also have flexibility where you place different components of the plan. Finally, feel free to move tables and items to appendices as needed. The outline below is a suggestion.
- Use APA style to format all tables, figures, and your works cited.
- All pages should be numbered.
- Formatting should be consistent throughout the document.
- The document has been reviewed for spelling and grammar.
- Public health and project-specific terms should be clearly defined at first use.
- Acronyms and abbreviations should be spelled out the first time they are used.
- Material submitted should reflect professional quality with regard to layout, design, and content.
- Submit as a Microsoft Word document.

Helpful hints:

- Below is a detailed outline of the final plan, which includes both sections you have already completed as well as a modest amount of new content to be added.
- It is expected that you will provide revised versions of the sections you have already completed based on feedback you have received.
- Furthermore, since your proposed population, setting, and solution will have evolved over the semester, you may wish to update earlier assignments slightly to bring them into alignment with your final population, setting, and solution as you currently envision these.
- The highlighted sections in this document identify pieces you have not yet turned in for previous assignments.
- The assumed audience for the proposal is trained public health practitioners in a leadership role. The call for proposals may be coming from a state department of public health, a philanthropic foundation, or a U.S. or international agency, like the CDC, USAID, or the WHO. You should aim to:
 - Be persuasive: this is a pitch
 - Showcase the skills and concepts you have learned in this course: this is also a final project
 - Above all, be clear
- Be sure to introduce sections appropriately or add transitional text as needed to make the proposal flow logically for the reader. The completed project may benefit from light editing to reduce redundancy and connect sections together so that the plan reads as an integrated, single document (rather than a bunch of disjointed assignments).
- We recommend drafting Part 1: Executive Summary last as it serves as a synopsis of the full plan. Pay particular attention to this section: it is worth the most points-per-page!

The final project should include the following seven parts:

Part 1: Executive summary (~ 1-2 pages)

[Insert details- see comment below about overview]

Part 2: Overview (~ 1-2 pages)

In this section, develop a very brief introduction that readers can use to get a basic overview of its contents. Include the following:

1. Brief description of need. You need to justify your proposal. Assume your audience has not read any of the white papers you used.
2. Brief overview of your proposed population, setting, and solution.
3. Brief description of evidence-base for your proposed solution.
4. Brief statement of the goals and objectives against which your proposed solution will be evaluated, and your proposed approach to evaluation.

Part 3: Clarify the problem your proposed solution will address. (~ 5 pages)

In this section, you will justify the problem to be addressed in light of community and stakeholder priorities.

1. Building on your group's assigned public health problem identified in the white papers from SPHG 713 (Understanding Public Health Issues), describe the specific problem that you will address in your proposal. Briefly describe the affected population or community that you will focus on. Then, briefly outline your rationale for addressing this public health problem now among your selected population. Use well-sourced evidence to convey the magnitude of (or basic epidemiology of) the problem in the population and in your selected target group as well as the consequences of maintaining the status quo. In other words, make the case that developing a solution for this problem is urgent and important for advancing the public's health. Be sure to consider relevant outcomes and disparities in this section. [\[Insert the first parts \(community context\) of your Community Health Assessment in Sections A and B.\]](#)

2. Briefly outline the determinants of your selected public health problem in your selected population. Use one or more of the white papers provided to you as your first source. If you need to supplement this, use well-sourced evidence to identify and summarize the determinants of the problem. The review does not have to be comprehensive, but it should be thorough and should address relevant determinants and identify the level(s) of the Social Ecological Framework (SEF) at which they act affect your target population.
3. Assess the community's assets and needs. [\[Insert your stakeholder engagement and community assessment plan from the prior assignment here with appropriate revisions.\]](#)

Part 4: Reviewing and prioritizing the evidence (~ 5 pages)

In this section, you will review the evidence and determine the best options for addressing your public health problem.

1. Summarize and synthesize the best available evidence. Given the specific public health problem you have identified, carefully review the “why,” “what,” and “how” evidence relevant to addressing this problem for your chosen context and/or population. [\[Insert your completed L.E.A.D. Framework Evidence Report from the prior assignment here. Your L.E.A.D. Framework evidence table may be included in a separate appendix if desired. Revise as needed prior to submitting it as part of the overall proposal.\]](#)
2. Prioritizing program alternatives. Use a structured decision-making tool (e.g. Pugh matrix) to select an intervention or program best suited to the priorities and needs of your target population, context, and stakeholders. [\[Insert your structured decision-making matrix and documentation and briefly summarize your process and findings here. This content may be included in a separate appendix if desired\]](#)
3. Match, Map, and Patch: Identify gaps in available evidence and describe how you might patch these with a) local stakeholder knowledge; b) additional qualitative and/or quantitative data collection; c) any other evidence sources, including grey literature, evaluations, and implementer input, among others.

Part 5: Design and implement the proposed program or policy intervention. (~ 5 pages)

In this section, you will make the case for your specific plan and present its components. In addition, you will outline the plans for implementing your program or policy, including your staff and budget needs and expected reach or impact.

1. Narrative summary of program plan. Concisely describe the major components of your proposed program or policy solution, how it will be implemented, and the target population for each core component. Identify the levels of the SEF targeted by your proposed program plan. Describe how your program will reach its participants or beneficiaries, and specify any participant recruitment or outreach you will need to do. State your assumptions and rationale for the major decisions taken to arrive at your program plan. Provide a brief rationale for each major decision and program component. Specifically speak to how the program or policy will i) improve health outcomes, and ii) enhance health equity.
2. Present your logic model. The logic model should clearly show the connections between inputs, activities, outputs, and outcomes. Remember that the logic model sets up the evaluation by showing what components will be used to meet each project goal and objective. [\[Insert your logic model from the prior assignment, with revisions as appropriate.\]](#)
3. Goals and objectives. [\[Insert your goals and objectives from the prior assignment, with revisions as appropriate.\]](#)
4. Implementation plan. [\[Insert your implementation plan from the prior assignment, with revisions as appropriate.\]](#)
5. Stakeholder engagement strategy. Briefly describe how you will engage stakeholders in the implementation of the programs or policies. What is your goal/purpose for stakeholder engagement at this point? Which stakeholders will be engaged and how? Why are these stakeholders important to include in your solution planning process? What will you ask them to do? What will they contribute? [\[You may refer to content from earlier sections as relevant.\]](#)

6. Budget. Briefly introduce your first-year budget with a budget justification stating what you have prioritized and why. [Insert your Budget and Budget justification, with revisions as appropriate from your prior assignment.]
7. Timeline. [Insert your Timeline, with revisions as appropriate.] Be sure to add the evaluation activities and associated timing to the timeline.
8. Sustainability and Scale. Briefly describe your sustainability plan. How will you keep the program going if it's effective? How and when will you scale (if appropriate)?

Part 6: Evaluation and dissemination plan for the proposed program, policy or services. (~ 5 pages)

In this section, you will provide a summary of how you will evaluate the chosen program or policy and the steps you will take to disseminate evaluation findings.

1. Evaluation plan. [Insert your evaluation plan from the prior assignment including both the tables and narrative sections, with revisions as appropriate.]
2. Dissemination plan. [Insert your dissemination plan from the prior assignment if already completed, with revisions as appropriate.]

Part 7: Works Cited

Part 8: Presentation. Develop a 10-12-minute pitch on your plan. Allow 3-5 minutes for questions after, for a total of 15 minutes per team.

You will be expected not only to inform your audience of what your project is about, but also to persuade your audience that this project will have a meaningful impact on your chosen problem in your population and context, and should be funded at the level you propose (e.g. convince your audience that the problem matters, you can address it with suitable evidence-based solution(s), you have/will build the necessary stakeholder relationships to succeed, and your proposed program offers good value for money). You will present during the Live Session in Week 13. You may include up to 14 slides, as follows:

1. Title, group names, date
2. Public health problem- basic epidemiology
3. Priority target population
4. Determinants
5. Stakeholder engagement plan
6. Evidence to inform your selection of program components
7. Logic model
8. Implementation plan
9. Budget
10. Timeline
11. Evaluation plan-- Outcome
12. Evaluation plan-- Process
13. Possible problems and mitigation plan
14. Dissemination plan

Works Cited-- Use APA style for your works cited. Also, use APA style to format your tables and figures

throughout the proposal.

When you present, allow at least 3-5 minutes for questions. Your response to questions will be part of your grade.

Assignment Rubric: Team Project

A team score will be given for this assignment based on a weighted rubric for a total of up to 100 points:

Executive Summary (Total= 10 points)

- Executive summary includes all required parts. (5 points)
- Executive summary provides an accurate and succinct overview of the project. It makes the reader want to read on. (5 points)

Part I: Public Health Problem (Total= 20 points)

- Specific public health problem, appropriate target population, logical and compelling rationale for addressing the problem. (5 points)
- Known determinants of the problem as it affects the specific population identified. (5 points)
- Important existing or potential disparities with respect to the problem in your population and context (5 points)
- The plan for engaging stakeholders is appropriate in light of the problem and target population and strengthens the proposal. (5 points)

Part II: Evidence (Total = 15 points)

- The evidence review flows logically from the problem, target population, and determinants presented in Part I. (5 points)
- The review, decision matrix, and matching/patching efforts result in a clear rationale for the intervention proposed in Part III. (5 points)
- Best available evidence suggests that the selected evidence-based solution (with reasonable adaptations) can effectively address the identified public health problem in the specified population and context (5 points)

Part III: Design and Implementation (Total = 25 points)

- The program, its goals and objectives, and all aspects of the implementation plan provide a compelling, reasonable, actionable, and achievable solution for the given problem. (5 points)
- The budget is clear, complete, and realistic for the proposed program (5 points)
- The proposed program adequately addresses health equity. (5 points)
- The plan for engaging stakeholders in program implementation is appropriate and likely to be effective. (5 points)
- There is a clear plan for sustaining and/or scaling the program if it is effective. (5 points)

Part IV: Evaluation (Total= 20 points)

- The evaluation plan is feasible and will allow for rigorous evaluation of the proposed program and implementation plan. (5 points)
- The evaluation plan engages stakeholders effectively. (5 points)
- The evaluation plan assesses equity effectively. (5 points)
- The dissemination plan makes sense and is feasible given the goals, objectives, and scope of the intervention. (5 points)

Overall quality (10 points)

- Clarity and completeness (5 points)
- References (5 points)

Team: _____ Student Members: _____

Assignment Rubric: Presentation

A team score will be given for this assignment based on a 4-part weighted rubric for a total of up to 20 points:

Presentation Quality (PPT supports narrative, good design, logical flow)	6 points
Effectiveness of Delivery (coherence, comfort, audience engagement)	8 points
Responsiveness to Assignment (content areas, length, use of PPT)	4 points
Response to Questions	2 Points

Team: _____ Student Members: _____

	Score (Total Possible = 20)			
Criterion	Fully Met/High Pass	Partially Met/Pass	Not Met/Low Pass	Fail
Presentation Quality 1. Logical flow 2. Text and visuals support message 3. Quantity and quality of content	Logical flow throughout	Logical flow for most content	Logical flow for <50% of content	No logical flow
	Text and visuals clearly support all points	Text and visuals clearly support most points	Text and visuals clearly support <50% of points	Text and visuals do not clearly support points
	Excellent quality and quantity of content	adequate quantity and quality of content	Inadequate quantity OR quality of content	Inadequate quantity and quality of content
Effectiveness of Delivery 1. Timing 2. Clarity 3. Informative 4. Audience engagement	Keeps to allotted time (+/- < 1 min)	Keeps to allotted time (+/- 1-2 min)	Keeps to allotted time (+/- 2-3 min)	Does not keep to allotted time
	All content clear	Most content clear	<50% of content clear	Content unclear
	Highly informative throughout	Reasonably informative throughout	Insufficiently informative in places	Insufficiently informative throughout

	Audience fully engaged throughout	Audience adequately engaged throughout	Audience inadequately engaged in places	Audience inadequately engaged throughout
Responsiveness to Assignment 1. All required content included 2. Strong case made for proposed solution	All required sections and content present	Most required sections and content present	Several required items absent	Required content absent
	Very persuasive case made	Adequately persuasive case made	Some aspects of case unpersuasive	Unpersuasive
Responsiveness to Questions Clear, convincing, and informative responses to questions	Excellent (Clear, convincing, and informative) responses to all questions	Adequate (Clear, convincing, and informative) responses to all questions	Adequate (Clear, convincing, and informative) responses to <50% questions	No clear, convincing, and informative responses to questions
Total Score/Grade for the Assignment				

Participation Grading Formula

Individual participation grade (20%)

a. Participation Activities (12%)

- (1) CITI Certification
- (2) Memoing and Coding Exercise
- (3) Stakeholder mapping
- (4) Evidence-based decision making Part 1
- (5) Community Health Assessment Pitch
- (6) Reflection on the I AM Exercise

b. Active participation in synch session activities (full class and group: 4%)

c. Asych short responses (4%)