SUBSTANTIVE CHANGE PROPOSAL

PUBLIC HEALTH TRAINING PROGRAM

College of Micronesia – FSM P.O. Box 159 – KOLONIA, Pohnpei, FM 96941

September 15, 2008

Spensin James, President

Appendices

- A. Program and Course Descriptions for each "Step"
- B. Sample Course Outlines
- c. COM-FSM Supportive Documents for the PHTP Program
- D. Proposed Business Plan

A. Description of the proposed change and the reasons for it

The College of Micronesia – FSM is proposing to add a new academic program in public health to its program offerings. The program would include:

A Certificate of Achievement in Basic Public Health (CABPH)

An Advanced Certificate of Achievement in Public Health (ACAPH)

An Associate of Science degree in Public Health (ASDPH)

A 3rd Year Certificate of Achievement in Public Health, with 2 options:

• As a: "Specialist in Public Health (SPH)"

or

 As a: "Public Health Specialist in.... (one of 5 Public Health Disciplines) (PHS....)"

The immediate aim of the program is to enhance the knowledge, skills and capabilities of the current public health workforce in the health administrations of the Federated States of Micronesia, namely: Chuuk, Kosrae, Pohnpei, and Yap.

The medium-to-long aim of the program is to attract young candidates, whose interest would gravitate towards health and, possibly, towards public health, being the "replacement" workforce of the future, and equip them with a more substantial academic foundation for a more effective work performance, both in the public as well as in the private sectors.

It is envisaged that the program would first be offered at the College of Micronesia-FSM, National Campus in Palikir, with the possibility of extending the program to the college's Pohnpei Campus and eventually at the other state campus sites.

Currently, public health workers are trained at other institutions outside of Micronesia where relevant Micronesia-related issues are not considered in the development and implementation of the curriculum. The proposed program will arm the College of Micronesia-FSM, which is the national institution of higher learning for the Federated States of Micronesia, with another Micronesia-relevant program for Micronesians.

The COM-FSM Board of Regents adopted, in September 2005, the following **vision statement**:

"The College of Micronesia – FSM will assist the citizens of the Federated States of Micronesia to be well-educated, prosperous, globally connected, accountable, healthy and able to live in harmony with the environment and the world community."

At the same time the Board revised the College's mission statement which now reads:

"Historically diverse, uniquely Micronesian and globally connected, the College of Micronesia – FSM is a continuously improving and student centered institute of higher education. The College is committed to assisting in the development of the Federated States of Micronesia by providing academic, career and technical education opportunities for student learning.

This proposal is in line with the vision and the mission of the college by providing another academic and career education opportunity for prospective learners at the College of Micronesia-FSM. The program will also satisfy the growing need for properly trained public health practitioners in Micronesia as identified in deliberations by members of the Pacific Islands Health Officers Association (PIHOA), which, in August 2006 resolved that, among other things:

There was a regional shortage of students for health professions;

There was a shortage of nurses and public health nurses; and

A career-ladder and bridging training for the current workforce was necessary.

The proposed PHTP initiative has been extensively described in a document by Professor Sitaleki 'Ata'ata Finau, Dr. Gregory G. Dever, and Dr. Giuseppe G. Cuboni, three prominent and experienced senior level public health professionals, where the following considerations are found:

"This paper proposes an innovative approach to solve the **twin disparities** that continue plaguing the health services in Micronesia and the Pacific, and more specifically, public health services.

Twin Disparities are recognized as the chronic shortage of health workers coupled with the marked under-training of those workers, who have, in large part, learnt through "on-the-job" training, frequently from predecessors also trained "on-the-job".

Successful experiences in several jurisdictions of Micronesia and the Pacific, where academic education and training were imparted "in country" Pohnpei, Palau, Yap, Marshall Islands, Chuuk, Kosrae, etc. have formed the basis for the proposal, along with in-depth insights into the **ethical principles** for Public health practice in Micronesia; selected **guiding principles** for Micronesia-centered education and training; and a **step-ladder approach** to teaching and learning, founded on the "multiple entry opportunities – multiple exit qualifications" method.

Another fundamental principle adopted in this proposal was that of **Generic Public Health Competencies**, introduced as those that are common to all public health roles, are necessary for the delivery of essential public health services, and underpin the higher-level discipline-specific competencies: Applied Epidemiology and Health Research; Health Services Management; Health Promotion; Food and Nutrition; and Environmental Health, which are core to specialized Public Health.

Four basic categories of **public health competencies** and seven categories of **culture-centered managerial competencies** are defined and described.

The proposed program opens an academic-cum-practice pathway for fresh-out-of-high school learners as well as for on-the-job learners most of whom are adult learners to earn certificates and degree qualifications according to the following steps:

STEP 1: Certificate of Achievement in Basic Public Health (CABPH)

- STEP 2: Advanced Certificate of Achievement in Public Health (ACAPH)
- STEP 3: Associate of Science Degree in Public Health (ASDPH)
- STEP 4: Third Year Certificate in Public Health

Specialist in Public Health (SPH) <u>or</u> Public Health Specialist in... {one discipline} (PHS-.....)

Public health Specialist (PHS) in:

- Applied Epidemiology and Health Research
- Environmental Health
- Food and Nutrition
- Health Promotion
- Health Services Management".

B. Description of the Program to be offered

This proposed program constitutes an academic response to the public health situation in Micronesia's Freely Associated States (FAS). There has been an expressed and unmet need for: performance review; re-licensure; and the development of human resources for health at all levels and categories in Micronesia for some time. There has been a demand for:

Public health workers to be trained in Micronesian institutions with an accredited qualification, preferably at the post secondary level;

The development of human resources for health to be institutionalized locally in a career track process with incremental and additive life-long learning as the fundamental academic philosophy and structure;

Academically combining public health practice and continuing education into a seamless articulation with other accredited academic programs and qualifications from credible public health training institutions in the Pacific and Pacific Rim countries; and

The overall aim of public health training and practice to be aimed at: a) decrease vulnerability; and b) increase the resilience of communities to the adverse external and internal forces of socioeconomic transformations, migration, demographic changes, globalization, natural disasters and other related societal developments.

The proposed program has taken into account the current academic and educational realities of the region and in addition, takes an approach incorporating the need to:

Urgently train or re-train the current public health workers and be cognizant of the concurrent need for replacement and succession of an aging and mobile workforce;

Provide bridging teaching and learning opportunities for professional public health practitioners;

Identify gaps and address these in the health professional training, through the improvement of the educational pipeline;

Additively build professionalism, self-esteem and enthusiasm of public health workers;

Encourage the rational performance review and the development of the public health infrastructure through professional licensure, establishment of criteria for promotion, and improved remuneration and incentives that are linked to professional efficiency, efficacy, effectiveness and equity;

Provide all public health workers with a healing capability for primary health care to be perceived as more than "health police", e.g. trained in basic life support, first aid, and traditional medicine treatments; and Enable the community to access affordable and acceptable available public health services.

The proposed program will be built on a bridging approach which will start at practical levels then lead learners toward advanced theoretical learning that will be relevant to the Micronesian needs and challenges. The academic approach will enable the prospective learners to transfer their learned skills to the workplace. At the same time, the learners will develop relevant and innovative skills that will recognize the ever changing physical, social and political environments of public health practice. It is planned that these will be done while simultaneously and appropriately fulfilling the service commitments and demands of on-the-job learners current daily workloads; the need for continuing education and re-licensure once these standards are established; and the expectations of cultural and societal obligations to their families, communities and societies.

This adaptability is important and essential for the Pacific public health workers who are expected to have multiple responsibilities at all levels of health practice and in diverse locations, ethnic, and socio-political environments in the Micronesian jurisdictions.

Program Administration

Initially, PTHP will be, administratively, a program at the National Campus as part of the division of math and science. That division's chair will be administratively responsible for the program. However, one of the full-time PHTP faculty members will be assigned the day to day academic coordination of the program. Similar arrangements exist, at COM-FSM, such as the current coordination of the AS program in marine science, also administratively within the math and science division and the AA program in Micronesian studies, which administratively is within the social science division. The faculty member who serves as the coordinator is given a one course = 3 credit course load equivalency, in the computation of work load, for his or her coordination work.

The selected faculty member for the position of PHTP coordinator/ instructor should hold any of the following credentials: MD; MPH; MS with graduate qualifications in public health; appointment will be made by COM-FSM authorities.

It is noteworthy to mention that funding from Palau AHEC has allowed two public health experts, both holders of MD and graduate qualifications, to be posted at COM-FSM, where they are instrumental in the finalization of the academic and managerial details of PHTP. It is envisaged that both these experts will continue their cooperation with PHTP in the years to come.

All faculty members working with the program must at least meet the same minimum qualifications as other COM-FSM academic faculty that is to hold a master's degree from US accredited institutions. Furthermore, the college faculty members who will be teaching under the program are expected to hold a MPH, MS, or a graduate

qualification in a public health related discipline. Holders of degrees from non-US accredited institutions must have their credentials equated and reviewed in accordance with existing college policy and WASC standards.

All faculty members with the PHTP program must have collegiate level English skills, assessed by COM-FSM, as per current procedures. All instruction will be conducted in English, as is the standard for all other certificate and degree level courses at the college. Language proficiency for admissions to the programs will be assessed by COM-FSM following current procedures for certificate- and degree- level programs. The general education core requirements for English language proficiency, mandatory for students to attain graduation, are the same as other COM-FSM programs.

The Vision and Mission of this public health training program

The vision of the program is to make public health practice in Micronesia everybody's business.

The mission is to support and improve socio-economic development and to improve health of Micronesians and their descendants through the provision of research-driven education, health training and practice, and through appropriate, dynamic, effective, and efficacious strategies for human resources development of Micronesia's public health practitioners who shall value and favour all that is Micronesian.

Guiding Principles

The curriculum and training in this program are guided by the specific situations in Micronesia as shown previously in this document. These guiding principles will be incorporated in this training program and its components.

Teaching and learning will be constantly focussed on Micronesia and Pacific experiences as far as these are available and relevant;

Principles taught will recognize the variable capacities of the jurisdictions in Micronesia and will seek to inculcate the development of relevant, appropriate and feasible practices;

There will be a strong evidence-based approach to teaching and practice;

The specific health care challenges of Micronesia and the Pacific will be given an appropriate emphasis in both teaching and practice;

All teaching will seek to emphasize the primary importance of families and communities in health development and the delivery of care;

The importance of children and gender-balanced approaches will be given adequate recognition in all public health training and practice;

Teaching and learning will Recognize and incorporate an approach to public health that is sensitive to multi-ethnic and multicultural societies of Micronesia and the Pacific;

This program will generate and foster links with regional, governmental and nongovernmental organizations; and

This program will aim to establish a culture of research in its teaching and practice.

Using these guiding principles, this program seeks to be a source of proactive and reactive response to public health demands of the jurisdictions of Micronesia. The overarching philosophy of cultural democracy and equity will encapsulate the above principles and practices of public health in Micronesia.

The Step Ladder program

The public health training program has been designed with four proposed steps in this career ladder public health academic program at COM-FSM. At the end of each step an exit qualification is awarded. The entry criteria to each step vary according to academic background, maturity and experience. Each of the qualifications will contain general education requirements and a required public health component.

This career ladder program aims to cater for those entering public health careers as well as to provide for the continuing education and the development of those in the current public health workforce. The multiple entry and exit approach enhances career mobility vertically and horizontally, catering for succession planning in public health work and recruitment into the health sector. The 4 steps are described below.

STEP 1: Certificate of Achievement in Basic Public Health (CABPH)

This basic program will provide a start for new entrants to the health sector as well as professionalizing many of those who entered public health practice without formal training. It also may attract others to convert to a career in health.

This step provides a foundation and bridging program to the Advanced Certificate of Achievement in Public Health and thus onward to the AS Degree in Public Health.

The entry criteria for Step 1 is graduation from high school or GED.

Upon successful completion of the Certificate in Basic Public Health (CABPH), the students will be able to:

- a) Recognize and describe basic health science facts and principles;
- b) Discuss the essential public health functions;
- c) Describe adult, children and family health issues;
- d) Demonstrate an understanding and practice of some generic public health competencies;

- e) Demonstrate proper public health skills for public health practice in the community as a junior health worker;
- f) Demonstrate community and cultural sensitivity in the health care environment;
- g) Describe the health determinants and problems of adults, children and families;
- h) Demonstrate proper cardio-pulmonary resuscitation and first aid techniques;
- i) Demonstrate ability to make a community diagnosis of the determinants of health in a community;
- j) Identify good public health practice; and
- k) Have had work experience at a public health area/section.

General education requirements (16 credit points) Generic basic public health requirements (19 credit points) Total credit points required: 35 See <u>Appendix A</u>– The proposed curriculum and course descriptions

STEP 2: Advanced Certificate of Achievement in Public Health (ACAPH)

This step is aimed largely at the current workforce with a view of eventually completing an AS Degree in Public Health. However, others who may want a career change may use this as an entrance into the health sector. Other health workers may use this opportunity to refocus on public health from other health related work. This step provides the entry to the AS degree and onward to the 3rd Year Certificate of Achievement level.

The entry criteria for Step 2 are - completed Certificate of Achievement in Basic Public Health (CABPH); or a qualification equivalent ⁽¹⁾ to CABPH, e.g. Certificate of Achievement in Community Health Sciences – Health Assistant Training (CACHS/HAT); or a similar Health-related Certificate; and appropriate public health work experience of at least 4 years.

Upon successful completion of the Advanced Certificate of Public Health (ACAPH), the students will be able to:

- a) Recognize, describe and discuss the basic public health science facts and principles;
- b) List and discuss the essential public health functions and their interrelationships at community and district level;
- c) Describe and discuss adult, children and family health issues;

¹⁰ as determined by a review panel chaired by the head of the math and science division with members of the public health faculty.

- d) Discuss and demonstrate an understanding and practice of some generic public health competencies;
- e) Demonstrate proper public health skills for public health practice in the community as a district public health officer;
- f) Discuss and demonstrate community and cultural sensitivity in the health care environment;
- g) Describe and discuss the health determinants and problems of adults, children and families ;
- h) Demonstrate proper cardio-pulmonary resuscitation and first aid techniques;
- i) Demonstrate the ability and discuss how to make a community diagnosis of the determinants of health in a community;
- j) Identify and demonstrate good public health practice; and
- k) Have had work experience at a public health specialty at community and district levels.

General education requirements (13 Credit points)

Public health requirements (18 Credit points)

Total credit points required: 31

See <u>Appendix A</u> – The proposed curriculum and course descriptions

STEP 3: Associate of Science Degree in Public Health (ASDPH)

This step should provide the minimal standard for the licensure as a professional public health practitioner. There is still the potential for others with equivalent qualification and experience to enter the health sector.

The entry criteria are: the completed Advanced Certificate of Achievement in Public Health (ACAPH); **or**: a Diploma ⁽²⁾ in Public health or in a Public health Specialty; **or**: a qualification in public health equivalent (see footnote ⁽¹⁾ under ACAPH) to those above; **and:** appropriate public health work experience of at least 6 years.

²⁰ The term "diploma" is used primarily to allow admission to PHTP of students who would hold a qualification earned after studies deemed adequate by a diploma-awarding Institution. A possible "benchmark" reference could be the Diplomas awarded by the Fiji School of Medicine's Department of Public health (formerly School of Public Health and Primary Care). Such qualifications could possibly be equated to what in the US system is referred to as a degree, such as the Associate of Arts or Science (AA or AS). Certificates of Achievement are awarded at the exit points of the program, prior to attaining a full AS degree. The 3rd year qualifications submitted for either cross-crediting or admission would be assessed by a review panel headed by the chair of the college's math/science division, and having public health faculty as members. Thus, no "diploma" qualification in English would be entertained.

Upon successful completion of the Associate of Science Degree in Public Health (ASDPH), the students will be able to:

- a) Recognize, describe and discuss and research about the basic public health science facts and principles;
- b) List, discuss and demonstrate the essential public health functions and their interrelationships at community and district level;
- c) Describe, discuss and research adult, children and family health issues;
- d) Discuss and demonstrate an understanding and practice of some generic public health competencies;
- e) Demonstrate proper public health skills for public health practice in the community as a national public health officer;
- f) Discuss and demonstrate community and cultural sensitivity in the health care environment;
- g) Describe, discuss and research the health determinants and problems of adults, children and families;
- Demonstrate proper cardio-pulmonary resuscitation and first aid techniques and other healing and patient care abilities;
- i) Demonstrate the ability and discuss how to make a community diagnosis of the determinants of health in a community;
- j) Identify and demonstrate good public health practice;
- k) Have had work experience at a public health specialty at community and national levels.

General education requirements (16 Credit points)

Public health requirements (18 Credit points)

Total credit points required: 34

See <u>Appendix A</u> – The proposed curriculum and course descriptions

STEP 4: Third Year Certificate of Achievement/Specialist in Public health (SPH).

This certificate is awarded after a mixture of the specialty courses is successfully achieved.

<u>or:</u>

Third Year Certificate of Achievement - Public Health Specialist.

This certificate requires specialization in one of the following disciplines/ specialties of public health:

- Applied Epidemiology and Health Research (AE-HR)
- Environmental Health (EH)
- Food and Nutrition (FN)
- Health Promotion (HP)
- Health Services Management (HSM)

This qualification is a self-standing certificate, earned after and beyond the Associate of Science degree. It is expected to better prepare successful students for their continued studies in public health, i.e. bachelor-; master-; and doctor in public health. Furthermore, the third year certificate level will provide opportunities for licensed public health practitioners who aspire to graduate studies and research and current public health workers who wish to specialize in a special area of interest on islands without necessarily needing to study overseas. The mixture of these courses will assist the senior national and state personnel who manage different public health projects and grants. Many of the mid level managers in health administrations carry multiple responsibilities, in many fields. At senior level, there is still an opportunity through this step to re-orient careers towards the health sector and public health in particular.

The entry criteria are: completed Associate of Science Degree in Public Health (ASDPH) or a similar Associate Degree of Arts or Science; **or**: a Diploma in Public Health, or equivalent (see footnote ⁽¹⁾ under ACAPH) **and** significant public health work of at least 8 years; **or**: satisfactory completion of a health-related research study **and** significant public health work of at least 8 years **and a** favourable interview with program faculty.

Upon successful completion of the 3rd Year Certificate of Achievement (SPH or PHS), the students will be able to:

- a. Recognize, describe and discuss and research about the basic principles and practices of the specialty;
- b. List, discuss and demonstrate the essential public health functions or the specialty and its interrelationships with the other specialties and health disciplines at community and national levels;
- c. Describe, discuss and research adult, children and family health issues at community level;
- d. Discuss and demonstrate an understanding and practice of the speciality public health competencies;
- e. Demonstrate proper public health skills for its practice in the community as a national specialty practitioner;
- f. Discuss and demonstrate community and cultural sensitivity in the health care environment;

- g. Describe, discuss and research the health determinants and problems of adults, children and families;
- h. Demonstrate proper cardio-pulmonary resuscitation and first aid techniques and other healing and patient care abilities;
- Demonstrate the ability and discuss how to conduct a community diagnosis and need assessment of the health determinants of the specialty in a community;
- j. Identify and demonstrate good practice in the specialty; and
- k. Have had management, planning experience and leadership role at a public health specialty at community and national levels.

Specialist in Public Health (SPH) or Public Health Specialist (PHS) requirements (30 Credit points)

See <u>Appendix A</u> - The proposed curriculum for each specialty and course descriptions.

Step 4:

- Specialist in Public Health (SPH) = a mix of 8 courses from several disciplines (for a total 30 credit points)
- Public Health Specialist (PHS...) in: AE/HR; EH; FN; HP; or HSM = a total of 6 courses from the discipline and 2 elective courses from other disciplines(for a total 30 credit points)

Summary course descriptions are listed in <u>Appendix A</u>.

This program will provide to current and prospective workers in public health a firm and comprehensive academic basis onto which experience will be added, thus enhancing significantly work performances and effectiveness of public health programs and activities, public and private as they may be.

Furthermore, students completing the course requirements for the 3rd Year Certificate of Achievement are expected to be adequately prepared to continue to a bachelor of public health qualification, offered by several Institutions in the Pacific.

Lastly, the acquired knowledge and skills should increase motivations and capabilities of the current public health workforce, in the health administrations of the 4 FSM states.

C. Description of the planning process which led to the request for change

As stated in section A above the college's mission statement committed the college to assisting in the development of the Federated States of Micronesia by providing academic, career and technical educational opportunities for student learning. The development of a skilled health workforce is a national priority. The proposed program addresses a national priority and aligns with the college's mission.

More recently, the senior administrators (ministers, secretaries or directors of health) of the Pacific Islands freely associated with the USA, gathered in PIHOA, the Pacific Islands Health Officers Association, gave a powerful impetus to the notion of "incountry/ regional" training for the health workforce. Their Board Resolution #43 - 16 dated 20 April 2007, attached herewith as Appendix C/1, documents the recognized training needs.

The World Health Organization's Pacific office, based in Suva, Fiji, recently convened an "Informal consultation on human resources for health for Pacific Island countries", and the summary report of it, dated 28 January 2008, is also attached herewith, as Appendix C/2. It underscores, in its recommendations:

The urgent need to intensify efforts and focus on human resources development in the Pacific;

The need for collaboration in capacity development, among other related priorities.

Furthermore, a series of studies and surveys on human resources for health, also part of appendix C (C/4 to C/9), have been carried out and reported on in recent times. Notable, among those, is the work of Dr. Mark Durand, which specifically was focused on Micronesian health administrations, marked as Appendix C/3.

Responding to these developments, COM – FSM welcomed, in September 2007, the presentation of a Micronesia-centered education and training in public health program, now labeled as PHTP (Public Health Training Program) offered by two scientists supported by the Palau Area Health Education Centre (AHEC), Prof. Sitaleki 'Ata'ata Finau and Dr. Giuseppe Cuboni.

Having COM-FSM endorsed in principle the proposal, one of the two scientists, Dr. Cuboni, took up residence in Pohnpei, FSM in November, 2007, and was tasked to prepare the relevant PHTP documentation for the COM-FSM curriculum committee.

When that committee endorsed PHTP, after 4 reviews/ readings of it, the college's Cabinet, a managing consultative body, and the Board of Regents of COM – FSM, both recommended that Mr. Spensin James, president of the college, accept PHTP as a COM-FSM program.

D. Evidence of human, administrative, financial and physical resources and processes to initiate, maintain and monitor the change and to assure that the activities undertaken are accomplished with acceptable quality.

Human resources: Current COM-FSM course offerings will be able to provide the general education requirements. Two instructors, supported by an AHEC-Palau budgetary contribution, are currently working with the college. They will provide the instruction for public health-core courses, supported by a cohort of public health-qualified scientists, currently residing in Micronesia, as adjunct faculty or temporary advisers (see Appendix C/10). The instructional affairs department has funding to take up the two instructors when the AHEC-Palau budgetary contribution phases out or should the contribution be suddenly withdrawn. The college will be hiring more instructors to teach some of the core public health courses when enrollment into the program increases.

Administrative resources: The program will be administered entirely by the college. The college's administrative set-up will provide the required support (admissions, financial aid, academic records, student services, etc.).

Financial resources: The leadership of the college has determined that COM-FSM's own resources would be adequate to launch and sustain this program, based on the analysis contained in the "Proposed Business Plan", Appendix F of this submission, even in the unlikely event of delayed or lacking external support, which is constantly being sought for, in any case. As shown in Appendix F, three delivery strategies are proposed, each with a specific connotation of academic guality, but with varied financial requirements. Under "Plan A", courses would initially be offered during daytime at the college's national campus in Palikir, targeting high school leavers; and a second offering would be presented to eligible health workers, who would attend "after hours" classes, possibly in the hospital area of Kolonia, Pohnpei. "Plan B" complements the above with the delivery of the public health courses in one other FSM state, Kosrae, where prospective public health instructors, selected to deliver PHTP at the state campuses of the college, would join classes run by the senior faculty of the Lastly, "Plan C", an eventual "fall-back" approach, foresees the program. dispatching of books and course outlines to the state campuses of the college, should financial support so curtail course delivery.

The following considerations support the college's financial determination:

- A minimum class size of 10 and the offering of 4-5 courses per semester would sustain the program, in the same way as this helps support all other COM-FSM programs.
- However, as outlined in the "Proposed Business Plan", (Appendix F), an analysis of estimated costs and expected revenue shows that the minimum number of 10 students per class would allow the program to become financially viable as of its 2nd or 5th year, depending on the delivery strategy chosen.

Although all available avenues for additional funding will be relentlessly explored, the amounts required \$100,000 for years one and two, and \$20,000 for years three and four, will be met by the college's own resources, should additional funding not be immediately forthcoming. These amounts are those required when the most desirable, but most costly, delivery strategy would be chosen (Plans A and B combined), which will assure the desirable quality standard of tuition and assessment among all the 5 campuses of the college.

The following table summarizes the relevant financial estimates:

	2009 - 2014					
	2009	2010	2011	2012	2013	2014
Revenues	68 400.00	153 900.00	239 400.00	290 700.00	342 000.00	342 000.00
Costs	169 837.54	242 640.14	263 775.54	304 495.74	304 495.74	262 931.90
Shortfall – net income	-101 437.54	-88 740.14	-24 375.54	-13 795.74	37 504.26	79 068.10
Teaching staff, full- time	5	8	9	12	12	12
Teaching staff, part- time	-	1	-	-	-	-

Table 1 -Budgetary Details for PHTP at COM – FSM, in USD (Plans A and B),

Notes:

- Costs: salaries, travel, and DSA (Daily Subsistence Allowance).
- Revenues: based on a minimum of 10 students per class, paying \$95 per credit, times 3 credits per course, times the number of PHTP courses envisaged in the curriculum. The attendance of PHTP students at general education courses, regularly offered at COM-FSM, would further increase the revenue, with no or marginal added cost.
- Teaching staff: as per "Plans A and B", the added faculty will be "inducted' by the 2 public health experts currently based at COM-FSM.

Summary of Plan A: PHTP courses are offered at the national COM-FSM campus in Palikir, during daytime, and **also** at the Pohnpei Hospital/ Division of Health Services in Kolonia, in the evenings.

Summary of Plan B: PHTP courses are offered, **3 courses each year**, at the COM-FSM Kosrae Campus, in the "4 week - compacted" mode; thereafter, the PHTP courses are offered at each COM-FSM state campus during daytime, and **also** at each state hospital/ division of health services in each state, in the evenings.

Funding for part-time or adjunct instructors is available in the regular budget of the Instructional Affairs Department.

Because several of the PHTP courses are existing courses taught by current faculty members within the existing divisions at the national campus, costs associated with the startup of PHTP are not as demanding as for other programs.

Administrative and clerical support for PHTP will be provided within the existing math and science division.

There are no requirements for particular, special equipment or tools for PHTP.

All lab components for PHTP are already established within the College.

A phased approach towards offering PHTP courses at the other FSM campuses of the college is envisaged, and this will also take advantage of the presence of qualified public health experts among the public health professional community, as part-time or adjunct faculty.

At present, it is envisaged that the program would start in the spring semester of 2009, as shown in the table and narratives above. The college is at any rate committed to meeting the shortfalls of the first 4 years, should no additional funding be forthcoming, thus ensuring academic completion of all entering candidates. All other short-term, limited grant funding opportunities are being explored (FSM national budget; USA sector grants; etc.) and tapped into.

COM-FSM's own resources will support the program in the beginning; the college's intention is to institutionalize PHTP, and ease its administration into the regular college operating budget.

As shown above, the program will be financially viable after the first 4 years, during which it will be possible, through an intense monitoring and evaluation set of activities, to ascertain PHTP's sustainability, based on the enrollments and general interest of the community and the FSM and state governments.

Obviously, the awarding of a Micronesia AHEC grant would make all of the above far easier to implement, but it is no longer a "pre-condition" to PHTP's implementation.

Physical resources: The college currently provides office space and support services to the two instructors with the college. An additional building which is currently under construction will provide more office space and other facilities for use by students. The college's existing classrooms will provide adequate teaching

venues and schedules for use will not contradict current schedules. Some of the classes will be offered in the evening as well as over the weekends. If classes are extended to the state campus sites, there are adequate classrooms and facilities comparable to the main Palikir site.

Quality assurance: The program is subjected to the college's institutional effectiveness plan. Like other programs for the college, this proposed program will generate data every semester for assessment of the program learning outcomes following guidelines outlined in the newly developed Institutional Assessment Plan Handbook (can be viewed on the college website: www.comfsm.fm). The individual courses will be evaluated annually and the data collected will be used for the improvement of the courses as well as the program as a whole. A comprehensive evaluation of the program will be done every other year. As stated above, this program will be evaluated and assessed through the college's institutional effectiveness plan. More details, related to program and course evaluation, appear also in the "Proposed Business Plan".

E. Evidence of all necessary internal and external approvals

The internal approval of the program included the following:

Detailed review by the college's curriculum committee. This was secured when the committee endorsed the program after 4 readings of it, at the end of January, 2008;

Overall analysis by the college's cabinet, both academic and administrative; cabinet also endorsed PHTP in February, 2008, and recommended that it be approved by the college's president;

Submission to COM-FSM's Board of Regents by the college's president of the program, for final, internal approval: this occurred in early March, 2008.

The college does not require any external approvals in order to run this program.

The only form of external approval is the submission of this proposal to the ACCJC.

F. Evidence that Eligibility Requirements will still be fulfilled after the change

Authority – The implementation of the program will not impact the authority at the college. The proposed program, rather, was established through the college's free use of its authority.

Mission – The program will further promote the college's ability to meet its mission by contributing to the development of the Federated States of Micronesia through the offering of another program needed by the nation.

Governing Board – like any program offered by the college, the Board of Regents has approved this program and endorsed this substantive change proposal.

Chief Executive Officer – The chief executive officer endorsed the program, approved its review within the college's committees, and submitted it to the governing board, where it was approved.

Administrative Capacity – This program will be managed within the administrative matrix of the college.

Operational Status – This program fits into the operation of the college. Our prospective learners will be able to secure employment or pursue further education after completing this program.

Degrees – The degrees as described in section B of this proposal will allow successful candidates to choose careers and/ or further studies.

Educational Programs – The program has been approved through our curriculum approval process and will be monitored at course and program level and through the college's institutional effectiveness processes, which is currently being implemented in response to the Commission's recommendations.

Academic Credit – The proposed program complies with the college's format for offering credits. Details are available in section B of this proposal.

Student Learning and Achievement – The program will be regulated through the college's institutional effectiveness plan. Student achievement will be monitored at both course and program level while student learning outcomes evaluation will be conducted using data generated from both internal and external sources. The extent of this process is documented under the college's institutional effectiveness plan.

General Education – The learners will be required to take all general education requirements for academic programs.

Academic Freedom – The proposed program will also comply with the college's academic freedom as clearly stated in its general catalog.

Faculty – Two faculty members with field and academic experience in public health have already been working with the college. Current math and science faculty members will serve as adjunct faculty when needed. Other faculty members may be hired when enrollment increases or when identified through program evaluation or review cycle.

Student Services – The college will support the program using its student support services.

Admissions – Prospective learners will be required to enter the program through the approved college admission requirements for academic programs. This process is administered at each campus while all student records are accounted for and monitored by the office of admissions and records based at the national campus. The college has implemented a web-based student data storage and access service which has greatly improved the admission process.

Information and Learning Resources – The Learning Resources Center at the national campus is currently being stacked with books and materials to support this program. Other learning support materials and resources are already available.

Financial Resources – Refer to the financial section under section D of this report.

Institutional Planning and Evaluation – The evaluation of this program will be integrated into the overall institutional effectiveness planning process which is being implemented by the college.

Public Information – The program will appear in the next edition of college's general catalog. Current public information needs will be handled through the college's website, flyers, and radio public service announcements.

Relations with the Accrediting Commission – Both Dr. Lily Owyang and Dr. Susan Clifford were contacted by the college's ALO. Dr. Owyang verified the need to submit the report while a working copy of the report was reviewed and commented on by Dr. Clifford.

G. Evidence that accreditation standards will still be fulfilled after the change and all relevant Commission policies are followed

Standard I: Institutional Mission and Effectiveness

- i. Mission (See Eligibility Requirements section under section F of this report).
- ii. Improving institutional effectiveness (See Eligibility Requirements under section F of this report).

Standard II: Student Learning Programs and Services

- i. Instructional programs The program will add another program offering to the college's current programs. The quality of the program will be regulated as part of the college's institutional effectiveness plan.
- ii. Student support services (See Administrative Services under section D and Admissions, Information, Learning Resources under section F of this report).
- iii. Library and learning support services (See Eligibility Requirements under section F of this report).

Standard III: Resources – (Refer to section D of this report).

- i. Human resources
- ii. Physical resources
- iii. Technology resources
- iv. Financial resources

Standard IV: Leadership and Governance (Refer to section F of this report).

- i. Decision-making roles and processes
- ii. Board and administrative organization

H. Other information requested by the Commission

External controls that could affect the operation of the program: a number of interactions took place during the preliminary phases of PHTP.

Here are some details:

- The college has received the collaboration of the Palau Community College (PCC), through its Palau AHEC financial support; also, the two public health scientists, currently at COM-FSM, continue their consultative cooperation with PCC, towards the establishment, there, of a similar Public Health for Palau (PHP) program.
- Discussions with the University of Hawaii/ Manoa, Department of Public Health under the JA Burns School of Medicine are continuing, with a view of facilitating the academic progress of interested candidates towards higher education levels.
- Cooperation is continuing with the University of Guam School of Nursing, as the regional 4-year institution providing support to the college.
- The University of the South Pacific in Fiji, through the Fiji School of Medicine, contributed to the design of the program; however, the final configuration of PHTP was completed in Micronesia, at COM-FSM.