

REVIEW FOR ACCREDITATION
OF THE
COLLEGE OF PUBLIC HEALTH
AT
KENT STATE UNIVERSITY

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:
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SITE VISIT TEAM:
Richard Kurz, PhD—Chair
Jennifer Ibrahim, PhD, MPH, MA
William Pilkington, DPA, MPA, MA

SITE VISIT COORDINATOR:
Zeinab Bazzi, MPH

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Accreditation Criteria for Schools of Public Health & Public Health
Programs, amended October 2016

Table of Contents

INTRODUCTION..... 1

A1. ORGANIZATION & ADMINISTRATIVE PROCESSES3

A2. MULTI-PARTNER SCHOOLS & PROGRAMS6

A3. STUDENT ENGAGEMENT7

A4. AUTONOMY FOR SCHOOLS OF PUBLIC HEALTH8

A5. DEGREE OFFERINGS IN SCHOOLS OF PUBLIC HEALTH.....8

B1. GUIDING STATEMENTS8

B2. GRADUATION RATES.....10

B3. POST-GRADUATION OUTCOMES.....11

B4. ALUMNI PERCEPTIONS OF CURRICULAR EFFECTIVENESS.....12

B5. DEFINING EVALUATION PRACTICES14

B6. USE OF EVALUATION DATA.....15

C1. FISCAL RESOURCES16

C2. FACULTY RESOURCES18

C3. STAFF AND OTHER PERSONNEL RESOURCES.....20

C4. PHYSICAL RESOURCES.....21

C5. INFORMATION AND TECHNOLOGY RESOURCES21

D1. MPH & DRPH FOUNDATIONAL PUBLIC HEALTH KNOWLEDGE.....22

D2. MPH FOUNDATIONAL COMPETENCIES25

D3. DRPH FOUNDATIONAL COMPETENCIES39

D4. MPH & DRPH CONCENTRATION COMPETENCIES39

D5. MPH APPLIED PRACTICE EXPERIENCES51

D6. DRPH APPLIED PRACTICE EXPERIENCE.....55

D7. MPH INTEGRATIVE LEARNING EXPERIENCE.....56

D8. DRPH INTEGRATIVE LEARNING EXPERIENCE57

D9. PUBLIC HEALTH BACHELOR'S DEGREE GENERAL CURRICULUM57

D10. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL DOMAINS.....58

D11. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL COMPETENCIES60

D12. PUBLIC HEALTH BACHELOR'S DEGREE CUMULATIVE AND EXPERIENTIAL ACTIVITIES61

D13. PUBLIC HEALTH BACHELOR'S DEGREE CROSS-CUTTING CONCEPTS AND EXPERIENCES62

D14. MPH PROGRAM LENGTH67

D15. DRPH PROGRAM LENGTH68

D16. BACHELOR'S DEGREE PROGRAM LENGTH.....68

D17. ACADEMIC PUBLIC HEALTH MASTER'S DEGREES69

D18. ACADEMIC PUBLIC HEALTH DOCTORAL DEGREES73

D19. ALL REMAINING DEGREES	77
D20. DISTANCE EDUCATION	78
E1. FACULTY ALIGNMENT WITH DEGREES OFFERED	79
E2. INTEGRATION OF FACULTY WITH PRACTICE EXPERIENCE	80
E3. FACULTY INSTRUCTIONAL EFFECTIVENESS	81
E4. FACULTY SCHOLARSHIP	82
E5. FACULTY EXTRAMURAL SERVICE	84
F1. COMMUNITY INVOLVEMENT IN SCHOOL/PROGRAM EVALUATION & ASSESSMENT	86
F2. STUDENT INVOLVEMENT IN COMMUNITY & PROFESSIONAL SERVICE	88
F3. ASSESSMENT OF THE COMMUNITY'S PROFESSIONAL DEVELOPMENT NEEDS.....	89
F4. DELIVERY OF PROFESSIONAL DEVELOPMENT OPPORTUNITIES FOR THE WORKFORCE	91
G1. DIVERSITY & CULTURAL COMPETENCE	92
H1. ACADEMIC ADVISING	96
H2. CAREER ADVISING	98
H3. STUDENT COMPLAINT PROCEDURES	100
H4. STUDENT RECRUITMENT & ADMISSIONS	101
H5. PUBLICATION OF EDUCATIONAL OFFERINGS.....	103
AGENDA	104

INTRODUCTION

Kent State University is a public research university in Ohio, founded in 1910 as part of an eight-campus system throughout Northeast Ohio. Kent State also has several regional campuses: Kent State University at Ashtabula, Kent State University at East Liverpool, Kent State University at Geauga, Kent State University at Salem, Kent State University at Stark, Kent State University at Trumbull, and Kent State University at Tuscarawas. The Kent State main campus currently enrolls more than 26,800 students in over 300 degree programs, including 250 baccalaureate, 40 associate, 50 master's, and 23 doctoral programs of study, including nursing, business, history, library science, aeronautics, journalism, and fashion design. Kent State University has more than 2,700 full-time and part-time faculty and employs 2,644 full-time staff, and over 3,800 part-time staff. The Higher Learning Commission accredits the university, and Kent State also holds accreditation from specialized accrediting agencies in fields including engineering and technology, psychology, dietetics, occupational therapy, and sports medicine, among others.

Kent State University's College of Public Health was established in 2009. The college currently enrolls 245 students in the MPH program, 36 students in the MS program, 60 students in the doctoral programs, and 675 students in the BSPH program.

The school achieved initial accreditation in 2015 for a five-year term. The college completed interim reporting related to MPH graduation rates and BSPH post-graduation outcomes in 2018 and 2019.

Due to COVID-19-related restrictions on travel and gatherings, this site visit was conducted via distance technology, with all attendees participating via the Zoom platform with video. The distance-based visit will be followed by an on-campus visit when it is safe to do so, within one year of the accreditation decision resulting from this visit.

Instructional Matrix - Degrees and Concentrations						
Bachelor's Degrees			Categorized as public health	Campus based	Distance based	
Allied Health		BSPH	BSPH	X	X	
Clinical Trials Research		BSPH	BSPH	X	X	
Community Health Outreach and Development		BSPH	BSPH	X	X	
Global Health		BSPH	BSPH	X		
Health Services Administration		BSPH	BSPH	X	X	
Pre-Medicine, Dentistry, Osteopathy		BSPH	BSPH	X		
Master's Degrees		Academic	Professional			
Biostatistics			MPH	MPH	X	
Clinical Epidemiology		MS		MS		X
Epidemiology			MPH	MPH	X	X
Health Policy and Management			MPH	MPH	X	X
Social and Behavioral Science Theories			MPH	MPH	X	X
Doctoral Degrees		Academic	Professional			
Epidemiology		PhD		PhD	X	
Health Policy and Management		PhD		PhD	X	
Prevention Science		PhD		PhD	X	
Joint Degrees (Dual, Combined, Concurrent, Accelerated Degrees)		Academic	Professional			
2nd Degree Area	Public Health Concentration					
Doctor of Podiatric Medicine	Health Management and Policy		DPM/MPH			
Combined BSPH/MPH	All MPH concentrations		BSPH/MPH			

A1. ORGANIZATION & ADMINISTRATIVE PROCESSES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Designates appropriate committees or individuals for decision making, implementation		The college's organization and administrative processes are effective and sufficient to conduct decision making and the implementation of decisions. This structure is mandated by the policies and procedures of the university and its collective bargaining agreement.	Click here to enter text.	
Faculty have opportunities for input in all of the following: <ul style="list-style-type: none"> • degree requirements • curriculum design • student assessment policies & processes • admissions policies & decisions • faculty recruitment & promotion • research & service activities 		The college is administered by the dean with the counsel of the College Advisory Committee (CAC), which consists of all tenured faculty and two elected non-tenure track faculty and provides recommendations on all academic matters. The dean is <i>ex officio</i> at the CAC and presides. The administrative team consists of the associate dean, the assistant dean, graduate coordinators, and senior advisory members who direct community affairs and workforce development. In addition to the CAC, counsel on administrative decisions is also provided by the student advisory committee, which consists of the graduate student senator, the undergraduate student senator, and the officers of the Public Health Student Alliance, and the College External Advisory Committee, which consists of executives representing health departments, hospitals, and non-profit and for-profit organizations.		
Ensures all faculty regularly interact with colleagues & are engaged in ways that benefit the instructional program		The administrative organization of the college also includes several standing committees, which include the College Curriculum Committee (CCC); the Student Academic Complaint Committee; the Reappointment,		

		<p>Tenure, and Promotion Committee; and the Graduate Faculty Committee as well as other ad hoc committees.</p> <p>Decisions are made in each of the following areas by specified committees or individuals:</p> <ul style="list-style-type: none">• Degree requirements: Degree requirements are initiated with two subcommittees of the CCC, the College Graduate Studies Committee and the College Undergraduate Curriculum Committee. The dean or her designee is an <i>ex officio</i> member of the committees, which make recommendations to the CCC, which in turn makes recommendations to the CAC. The CAC reviews the proposals and makes recommendations to the dean. Final approval is by the University Educational Policies Committee and Faculty Senate.• Curriculum design: Curriculum design is the responsibility of the faculty and the CCC, which is a subcommittee of the CAC. Curriculum changes are typically initiated at the annual faculty retreat and are advanced to the appropriate subcommittee for refinement. An assigned faculty member gains input from students and faculty teaching in the area and prepares a formal proposal. Input from professionals and other university units is also acquired. The college has an instructional designer to assist with the process when needed.• Student assessment policies and processes: Student assessment policies and processes are primarily a university responsibility through the Advisory Committee on Academic Assessment, which advises the university Office of Accreditation, Assessment and Learning. The college has membership on this committee. The charge of the committee is to develop		
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		<p>a comprehensive academic assessment plan for the university. Student assessment is the charge of the faculty and CCC. The CCC reviews data on student satisfaction, competency achievement, and student graduation plans and makes recommendations to the CAC.</p> <ul style="list-style-type: none"> • Admissions policies and/or decisions: Admissions to the undergraduate programs are made centrally by the university. Admissions to the graduate programs are made by the graduate coordinators for each program in consultation with the faculty, guided by established admissions criteria. Interviews may occur prior to graduate admissions decisions. An appropriate research setting must be established prior to a doctoral admission. • Faculty recruitment and promotion: Tenure-track faculty recruitment is conducted through a search committee appointed by the dean in consultation with the CAC. The search committee makes ranked recommendations to the dean. The dean makes an independent recommendation along with the committee recommendation to the provost. Selected candidates receive an appointment letter from the dean. Non-tenure track faculty are also hired by the dean in consultation with the CAC. The college's Reappointment, Tenure, and Promotion Committee consisting of all tenured faculty, reviews materials relevant to these matters for all tenure-track faculty members and makes recommendations to the dean. The committee also reviews non-tenure track faculty members as stated in the college handbook and the Collective Bargaining Agreement. • Research and service activities: In consultation with the CAC, the dean makes research and service 		
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		<p>assignments to faculty members in accordance with the college handbook and the College Bargaining Agreement.</p> <p>The primary means for faculty to contribute to decision making in the university is through the Faculty Senate. This is a representative body for all schools and colleges of the university. The college elects a senator to represent it. The senate meets twice each year.</p> <p>The two primary means through which faculty interact are the annual faculty retreat, held in the fall of each academic year, and monthly faculty meetings. Interaction also occurs through CAC meetings and CCC meetings and their associated subcommittees. Copies of agendas, attendance lists, and minutes verify interaction and participation in decision making. Discussion with the faculty indicated that these approaches are effective. These discussions also indicated that there is strong collegial relationship among all faculty.</p>		
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A2. MULTI-PARTNER SCHOOLS & PROGRAMS

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

A3. STUDENT ENGAGEMENT

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students have formal methods to participate in policy making & decision making		Students have three formal methods to participate in policy making and decision making within the college. These include an undergraduate and a graduate student senator who meet monthly with the dean and the assistant dean and make recommendations to the faculty and college committees. The Public Health Student Alliance and its officers also meet and express their concerns to the dean and the faculty.	Click here to enter text.	
Students engaged as members on decision-making bodies, where appropriate		<p>In addition to meetings with college officials, the student senators serve as members of the Student Advisory Committee and the Student Academic Complaint Committee. Students also have representatives on the College Diversity Committee and the College Student Grievance Committee.</p> <p>During the past academic year, the focus was on career preparation, co-hosting online events in resume preparation and career fairs.</p> <p>The student organization at the college is the Public Health Student Alliance. This organization is open to all undergraduate and graduate students and meets monthly to organize student participation in social and community service events. These events include participation in the Greater Akron Health Walk, The Cancer Society Relay for Life, food distribution through food banks, and hospital health fairs.</p>		

A4. AUTONOMY FOR SCHOOLS OF PUBLIC HEALTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Operates at highest level of organizational status & independence		The college operates at the highest level of autonomy within the university structure. Like all other college deans at Kent State, the CPH dean reports directly to the provost, who reports to the university president.	Click here to enter text.	

A5. DEGREE OFFERINGS IN SCHOOLS OF PUBLIC HEALTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Offers professional public health master's degree in at least three distinct concentrations		As indicated in the instructional matrix, the college offers the MPH in four distinct concentration areas, including biostatistics, epidemiology, health policy and management, and social and behavioral science theories. The college offers the PhD in three distinct concentration areas including epidemiology, health policy and management, and prevention science.	Click here to enter text.	
Offers public health doctoral degree programs in at least two distinct concentrations				

B1. GUIDING STATEMENTS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Commentary			
Defines a vision, mission statement, goals, statement of values		There is a clearly stated mission and vision for the college. The mission is "to advance public health by preparing	Click here to enter text.	

Taken as a whole, guiding statements address instruction, scholarship, service		leaders, scientists, and practitioners to collaborate with community partners in conducting impactful research and practice to solve public health challenges.” The vision is “to be a leader in public health education, inquiry and engagement.” The priority areas for the college are: “students first, nationally distinct, globally competitive, regional impact, organizational stewardship.”		
Taken as a whole, guiding statements define plans to 1) advance the field of public health & 2) promote student success				
Guiding statements reflect aspirations & respond to needs of intended service area(s)		The college uses the following values to guide its operations: fairness, leadership, accountability, students first, honor, excellence, and success.		
Guiding statements sufficiently specific to rationally allocate resources & guide evaluation of outcomes		<p>The college’s guiding statements address students, research, and service and articulate aspirations of what the college hopes to do and how it will connect with the local area. Regarding academics, the guiding statements speak most directly to student services and student engagement as opposed to the content of the programs.</p> <p>During the site visit, the faculty described the process through which the mission, vision, and objectives were created and are reviewed annually. In discussions with the external stakeholders, it was clear that the college’s programs are meeting the workforce needs of the region.</p> <p>The commentary relates to the specificity of the guiding statements and their utility. The guiding statements are limited in their ability to direct the college’s priorities, and the objectives largely describe tasks rather than outcomes the college hopes to achieve. The objectives could be strengthened to better articulate what the college hopes to achieve and to help direct where to allocate resources. During the site visit, faculty could not point to specific</p>		

		ways that the mission and vision were used to aid in decision making and to prioritize activities of the college.		
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B2. GRADUATION RATES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Collects, analyzes & accurately presents graduation rate data for each public health degree offered		The college has sufficient graduation rates for its bachelor's, master's, and doctoral degrees. The maximum time to graduation is ten years for bachelor's students, six years for master's, and ten for doctoral students.	Click here to enter text.	
Achieves graduation rates of at least 70% for bachelor's & master's degrees, 60% for doctoral degrees		<p>Calculated graduation rates for the cohorts entering from 2012-13 to 2017-18 are as follows:</p> <ul style="list-style-type: none"> • BSPH: 91%, 92%, 92%, 87%, 90%, and 90% • MPH: 71%, 86%, 76%, 72%, 67%, and 72% <p>All BSPH and MPH cohorts that have reached the maximum time to graduation exceed this criterion's threshold. Attrition rates for the few cohorts that have not yet met or exceeded the rate are low enough that the cohorts still are able to meet the threshold.</p> <p>Graduation rates for PhD students are as follows:</p> <ul style="list-style-type: none"> • 63% for the 2010-11 cohort • 66% for the 2011-12 cohort • 44% for the 2012-13 cohort • 0% for the 2013-14 cohort 		

		<ul style="list-style-type: none"> 66% for the 2014-15 cohort <p>Based on allowable time to graduation, the college has exceeded this criterion's threshold for the cohort that has reached the maximum time to graduation and for three cohorts that have not (2010-11, 2011-12, and 2014-15). Attrition rates for the 2012-13 and 2013-14 cohorts are low enough that the cohorts are still able to meet or exceed the threshold.</p>		
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B3. POST-GRADUATION OUTCOMES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Collects, analyzes & presents data on graduates' employment or enrollment in further education post-graduation for each public health degree offered		The college achieves positive post-graduation outcome rates that meet this criterion's expectations for most degree levels. Rates for the BSPH program were 89%, 55%, and 94%, and for the MPH and PhD students, rates were consistently above 81% for each year 2018 through 2020:	Click here to enter text.	
Chooses methods explicitly designed to minimize number of students with unknown outcomes		<ul style="list-style-type: none"> MPH: 98%, 81%, and 94% PhD: 100%, 100%, and 100% 		
Achieves rates of at least 80% employment or enrollment in further education for each public health degree		<p>The rate of unknowns was consistently low across all degree levels in all years.</p> <p>The college collects alumni data three times a year, in June/July, September/October, and February/March. In each collection cycle, the college targets alumni who completed their degrees in summer, fall, or spring of the preceding year. The college sends the names of alumni who do not complete the survey and who are not enrolled</p>		

		<p>in an educational program at Kent State University to the faculty for additional outreach and contact. Additionally, the college checks LinkedIn at one year post-graduation to see if alumni have joined the alumni group.</p> <p>During the site visit, reviewers asked about the 55% positive outcome rate for the 2019 BSPH cohort. Faculty explained that the 2019 BSPH cohort was surveyed again in the new comprehensive alumni survey and less than 5% of the graduates were 'actively seeking employment.'</p>		
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B4. ALUMNI PERCEPTIONS OF CURRICULAR EFFECTIVENESS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines qualitative &/or quantitative methods designed to provide meaningful, useful information on alumni perceptions		The college uses quantitative and qualitative methods to solicit meaningful feedback from alumni regarding curricular effectiveness.	Click here to enter text.	
Documents & regularly examines its methodology & outcomes to ensure useful data		The college partnered with The Center for Marketing and Opinion Research (CMOR) (a research firm) to collect alumni data related to perceptions of curricular effectiveness. In March 2020, CMOR sent out a survey to 1,546 alumni who graduated in the last 10 years. Data collection continued through July 2020. A total of 510 alumni completed the survey: 54% of respondents were bachelor's alumni, 41% were master's alumni, and 5% were doctoral alumni. The survey solicited feedback regarding how well the curriculum prepared alumni to achieve program competencies. The survey directed graduates to the list of competencies and topic areas		
Data address alumni perceptions of success in achieving competencies				
Data address alumni perceptions of usefulness of defined competencies in post-graduation placements				

		<p>specific to their majors or concentrations, followed by additional questions.</p> <p>The college presented the average competency preparation level by concentration for each degree level on a scale of one to three, one being not prepared at all, and three being very prepared. Among all BSPH concentrations, the average level of preparedness was between 2.4 and 2.9. Among all MPH concentrations, the average level of preparedness was between 2.7 and 2.9. Among PhD concentrations, the average level of preparedness was between 2.8 and 2.9.</p> <p>At the of the survey, alumni were also asked an open-ended question: Do you feel there were additional skills or competencies that were lacking in the curriculum? Some of the skills or competencies that alumni identified as gaps in the curriculum included evaluation and data collection, advanced statistics, grant writing, health equity, leadership, budget and finance, and more experiential learning.</p> <p>During the site visit, alumni shared that the program has reached out to them for feedback on several occasions and they have several opportunities to be involved in college evaluation and curriculum review.</p>		
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B5. DEFINING EVALUATION PRACTICES

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines sufficiently specific & appropriate evaluation measures. Measures & data allow reviewers to track progress in achieving goals & to assess progress in advancing the field of public health & promoting student success		The college has an evaluation plan that aligns with its mission and values, including goals focused on students first, national distinct/research productivity, globally competitive, regional impact, and organizational stewardship. The primary data to support the evaluation plan are annual reports of faculty activities (related to teaching, research, and service); records regarding external funding and research activities; data on student recruitment and admissions, retention, progress toward a degree, internships, practicums, and advising; course evaluations; student exit surveys; alumni surveys; employer surveys; community education needs assessments; and committee meeting minutes.	Click here to enter text.	
Defines plan that is ongoing, systematic & well-documented. Plan defines sufficiently specific & appropriate methods, from data collection through review. Processes have clearly defined responsible parties & cycles for review		<p>During the site visit, students, alumni, and external stakeholders discussed the different forms of data collection in which they participated. During the site visit, the faculty and staff discussed different forms of data collection. Faculty also shared one example of how data were shared back with faculty in the form of a report card.</p> <p>The CAC shares data related to the objectives with the college faculty each fall. In addition, data are reviewed by the Research Committee, the Continuing Education Committee, the College Diversity Committee, the Distance Education Committee, and the College Executive Committee.</p>		

B6. USE OF EVALUATION DATA

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Engages in regular, substantive review of all evaluation findings, including strategic discussions.		The self-study provides examples of programmatic changes that were made in the last three years as a result of the evaluation process. One example was based on student exit data that pointed to the fact that students were satisfied with advising, but not career counseling. The college responded by modifying its approach to career services. In addition to hiring three retired health executives (equal to 1.0 FTE) to provide career counseling and connections, the college also developed a three-course series on professional practice. The course sequence provides students with the opportunities to develop a cover letter, resume, job talk/elevator pitch, etc.	Click here to enter text.	The Council reviewed the team's report and self-study document. The issues identified by the team do not prevent the college from documenting full compliance with this criterion. Therefore, the Council acted to change the team's finding of met with commentary to a finding of met.
Translates evaluation findings into programmatic plans & changes. Provides specific examples of changes based on evaluation findings (including those in B2-B5, E3-E5, F1, G1, H1-H2, etc.)		In another example, the college developed an accelerated BSPH/MPH program. The self-study notes concern over affordability and financial challenges as the reason for this new program. During the site visit, the faculty spoke of the financial challenges that they see with students on a regular basis, including student debt and financial holds that prevent students from progressing. The dean also spoke about a survey that was distributed to students during the semester and noted that students reported financial concerns, as well as food insecurity and technology needs. The accelerated program was created to make the degree more affordable and to expedite time to the workforce.		

		The commentary relates to the opportunity that exists to strengthen the alignment between the data collected in various evaluations and the use of that data to drive decision making. When changes are made (such as the implementation of the public health ambassadors for career counseling), follow-up evaluation may be helpful in determining success or a need for additional attention.		
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C1. FISCAL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Financial resources currently adequate to fulfill stated mission & goals & sustain degree offerings		The college has sufficient and stable financial resources. The most recent year's revenue, approximately \$14.5 million, exceeded the expenditures of approximately \$13.9 million. The college's expenditures exceeded revenue in its initial years of operation, continuing through 2018-2019, and during those years, the university provided support as a planned investment. Since 2014, the college's income has grown by almost 40%.	Click here to enter text.	
Financial support appears sufficiently stable at time of site visit		The university operates on a responsibility center management model that allows the college to retain most of the instructional fee portion of tuition dollars and 37% of all indirect costs associated with grants and contracts. Formulas govern the distribution of tuition funds: the general fee portion of tuition dollars is allocated to university services such as the student center and health services; instructional fees flow to the college delivering each course for graduate students and are shared between the college offering the course and the college in which the student is a major for undergraduate students.		

		<p>Instructional fees also cover scholarships, collection costs, and associated expenses.</p> <p>The college participates in the university's annual budget process, and a variety of college faculty and staff provide input to each year's budget. The college focuses on ensuring that its budget supports the college's strategic initiatives. College staff prepare monthly budget forecasts for the university, and external funding is monitored through a similar reporting process, with the support of the University Research and Administrative Office.</p> <p>To add faculty or staff positions, the college must demonstrate continuous funding availability and must receive approval from the university provost and Central Budget Office. Faculty and staff salaries constitute most college expenditures (other than funds paid back to the university for central services). The college uses all funding streams to support travel and faculty development and to provide student support.</p> <p>The university has an established process for colleges to request central funds to cover expenses over revenue; this is the process that the college has used in past years. Such requests must pass through internal college channels and university channels, including the Central Finance Office and the university's Financial Committee.</p> <p>The university currently has a hiring freeze due to the economic consequences of the COVID-19 pandemic. During the site visit session with university leaders, there was strong support for filling vacant faculty positions, even to the extent of identifying two faculty positions that are being given high priority.</p>		
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C2. FACULTY RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
School employs at least 21 PIF; or program employs at least 3 PIF		The college has 23 primary instructional faculty (PIF) and 47 non-PIF, with 11 PIF who are appropriately double-counted to support multiple concentrations. The college has sufficient faculty resources to meet or exceed this criterion's minimum requirements for all concentrations and degree levels.	It is important to remember that the College self-study was conducted during the pandemic year and the second semester of data includes the extraordinary time when the University closed and then went remote for the rest of the semester.	The Council reviewed the college's response and looks forward to reviewing future information documenting compliance.
3 faculty members per concentration area for all concentrations; at least 2 are PIF; double-counting of PIF is appropriate, if applicable			The usual process of collecting student satisfaction surveys was disrupted and the response rate for the student surveys of satisfaction was low. In fact, at the time of this response, the College of Public Health remains remote and there have been no in person classes since March 2020. Classes are capped at 60 for undergraduate sections and 40 for MPH and MS course sections. Doctoral classes seldom are larger than 10 students. As we return to the classroom this summer, our typical classrooms that would hold 60 now hold 12 due to 6-foot social distancing requirements.	
Additional PIF for each additional degree level in concentration; double-counting of PIF is appropriate, if applicable		All PIFs have primary appointments in the college at 1.0 FTE. Non-PIFs include adjunct, secondary faculty appointments, and graduate assistants. The college calculates FTE based on individual courses for all non-PIF instructors (one- three-credit course = 0.125 FTE).		
Ratios for general advising & career counseling are appropriate for degree level & type		Bachelor's students are advised by full-time staff academic advisors, with a range of one up to 300 BSPH students per advisor. Faculty members also support staff advisors, as needed. In addition to academic advisors and faculty support, graduate assistants in the doctoral programs also assist in advising freshmen. The graduate assistants do not have a set case load of advisees assigned to them but serve as support when needed.		
Ratios for MPH ILE are appropriate for degree level & nature of assignment				
Ratios for bachelor's cumulative or experiential activity are appropriate, if applicable		Faculty members advise master's and doctoral level students. Faculty average 19 master's students and four PhD students for general and career advising. Advisors for the cumulative/experiential activity at the bachelor's level have an average of 50 students; MPH ILE advisors have an		
Ratios for mentoring on doctoral students' integrative project are appropriate, if applicable			Based on the comments to the site visit, the College has added a	

Students' perceptions of class size & its relation to quality of learning are positive (note: evidence may be collected intentionally or received as a byproduct of other activities)		<p>average of five students; MS supervisors/advisors have an average of 17 students; and PhD dissertation advisors have an average of two students.</p>	question directly asking about class size to the College exit surveys which are conducted every semester. We have also requested that class size perception be added to questions on the University Climate Study. In the future, we will be able to report this data.	
Students are satisfied with faculty availability (note: evidence may be collected intentionally or received as a byproduct of other activities)		<p>The college collects quantitative data regarding faculty availability through the exit survey. Among undergraduates, data from 2018 and 2019 show that 87% of students rated faculty availability as excellent or good. Among master's students, data from 2018 and 2019 show that 85% of students rated faculty availability as excellent or good. Among doctoral students, data from 2018 and 2019 show that 75% of students rated faculty availability as excellent or good. The college does not currently collect data related to student perceptions of class size but will collect these data for students graduating in December 2020.</p> <p>The concern relates to the college's inability to demonstrate adequate resources in the form of positive student perceptions of class size. During the site visit, faculty shared that data on student perceptions of class size were originally collected as part of a university survey, but the relevant question was removed in the past few years. Faculty noted that the university allows each college to add questions to class evaluation surveys, so this mechanism will allow for data collection in future years.</p>	<p>Meanwhile, we can present data on "overall learning experience," which can be considered in parallel with perceptions of class size. We note that we do not have comments related to class size in any of our student surveys (climate, exit, course satisfaction). Over the past 3 academic years, 90% of the undergraduate students and 89% of graduate students in the College of Public Health have reported their overall learning experience as good or excellent. These rates have remained consistent since 2018.</p>	

C3. STAFF AND OTHER PERSONNEL RESOURCES

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Staff & other personnel are currently adequate to fulfill the stated mission & goals		The college has stable staff resources that are sufficient to support the college’s mission, instructional, and operational needs. In addition to the dean and assistant/associate deans, the college has 10 full-time staff members and five part-time staff members. Three of the part-time staff members are the college’s public health ambassadors, discussed in greater detail in Criterion H2, retired public health and hospital executives, who advise students and support college efforts in continuing education and other areas. Other school staff include personnel associated with finance, advancement, grant and administrative support, advising, technology, and instructional design. The college maintains a centralized staffing model, rather than associating staff with departments or other units within the college. During the site visit, both faculty and students provided evidentiary examples of the adequacy of staff. Students noted that “staff always are receptive and responsive” and faculty felt staff support was “exceptional.”	Click here to enter text.	
Staff & other personnel resources appear sufficiently stable				

C4. PHYSICAL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Physical resources adequate to fulfill mission & goals & support degree programs		The college's primary locations are in Lowry and Moulton Halls. All full-time faculty and staff members have private office space on one of three floors across the two buildings, and the college's primary office is on the first floor of Moulton Hall. Moulton Hall has a common student area and tutoring lab. The college has two laboratories for faculty research in Lowry Hall. Moulton Hall also has a ballroom and other flexible space that the college can use, and two Moulton Hall classrooms are primarily designated for college use.	Click here to enter text.	
Physical resources appear sufficiently stable		Classrooms are generally pooled and shared across programs. The college uses a centralized process to request classroom space and has encountered no challenges in obtaining appropriate space. The college collected data from alumni on satisfaction with physical resources, and 91% of respondents rated facilities and resources as good or excellent.		

C5. INFORMATION AND TECHNOLOGY RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Adequate library resources, including personnel, for students & faculty		University Libraries has an extensive collection and set of resources to support student and faculty needs. The self-study notes that, in recent months, the library has	Click here to enter text.	

Adequate IT resources, including tech assistance for students & faculty		expended over \$19,000 in new journal subscriptions, over \$14,000 for books and reference materials, and over \$10,000 for the public health ProQuest database. The college also has access to key public health journals via OhioLINK's Electronic Journal Center.		
Library & IT resources appear sufficiently stable		<p>The university supports technology needs among both students and faculty. Faculty receive new computers every four years, and students and faculty can access multiple tech help centers, including 24/7 tech support, accessible remotely. The campus has multiple computer labs, and students can purchase and/or download free software through the university's software catalog.</p> <p>During the site visit, students and faculty expressed satisfaction with information and technology resources. Students were especially pleased with online resources and access to assistance from both faculty and staff.</p>		

D1. MPH & DRPH FOUNDATIONAL PUBLIC HEALTH KNOWLEDGE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
Ensures grounding in foundational public health knowledge through appropriate methods (see worksheet for detail)		The college ensures that MPH students are grounded in public health knowledge by mapping the learning objectives to five core courses: BST 52019 Biostatistics in Public Health; EHS 52018 Environmental Health Concepts in Public Health; EPI 52017 Fundamentals of Public Health Epidemiology; HPM 53010 Community Health Needs Assessment; and SBS 54634 Social Determinants of Health Behaviors. Students in online and on-campus programs are required to take the same courses to obtain the foundational public health knowledge. Reviewers' findings	The concern relates to learning objective 2; reviewers could not validate that students are grounded in the core functions of public health and the 10 Essential Services. During the site visit, faculty who were present could not identify a course in which students learn about this knowledge area.	The Council appreciates the college's response and looks forward to reviewing updated documentation demonstrating compliance with this criterion.

		<p>related to the college's coverage of the foundational learning objectives is presented in the D1 worksheet.</p> <p>The concern relates to learning objective 2; reviewers could not validate that students are grounded in the core functions of public health and the 10 Essential Services. During the site visit, faculty who were present could not identify a course in which students learn about this knowledge area.</p>	<p>Currently, this is assessed in the Learning Module 1 quiz of HPM 52016.</p> <p>Didactic content is provided in our traditional courses (Learning Module 1/HPM 52016). A new lecture is being prepared for the online version of the course which will focus on the core functions of public health and the 10 Essential Services. The schedule for completion is Summer 2021.</p> <p>In addition, the quiz for learning module 1 is being revised to focus more exclusively on the core functions of public health and the 10 Essential Services. This will be pilot also be updated in Summer 202, for implementation in all courses in Fall 2021.</p> <p>Note: CEPH notes that in regard to HPM 53010, reviewers could not validate that students are grounded in the core functions of public health and the 10 Essential Services. This topic area is covered in HPM 52016.</p>	
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Foundational Knowledge	Yes/CNV
1. Explain public health history, philosophy & values	Yes
2. Identify the core functions of public health & the 10 Essential Services	CNV
3. Explain the role of quantitative & qualitative methods & sciences in describing & assessing a population's health	Yes
4. List major causes & trends of morbidity & mortality in the US or other community relevant to the school or program	Yes
5. Discuss the science of primary, secondary & tertiary prevention in population health, including health promotion, screening, etc.	Yes
6. Explain the critical importance of evidence in advancing public health knowledge	Yes
7. Explain effects of environmental factors on a population's health	Yes
8. Explain biological & genetic factors that affect a population's health	Yes
9. Explain behavioral & psychological factors that affect a population's health	Yes
10. Explain the social, political & economic determinants of health & how they contribute to population health & health inequities	Yes
11. Explain how globalization affects global burdens of disease	Yes
12. Explain an ecological perspective on the connections among human health, animal health & ecosystem health (eg, One Health)	Yes

D2. MPH FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
Assesses all MPH students, at least once, on their abilities to demonstrate each foundational competency (see worksheet for detail)		<p>All students in the MPH program complete six courses intended to cover the 22 foundational competencies. The core includes BST 52019 Biostatistics in Public Health; EHS 52018 Environmental Health Concepts in Public Health; EPI 52017 Fundamentals of Public Health Epidemiology; HPM 52016 Public Health Administration; HPM 53010 Community Health Needs Assessment; and SBS 54634 Social Determinants of Health Behaviors. The students in the dual degree DPM/MPH program also take the same core set of courses.</p> <p>There were several competencies for which evidence of coverage and assessment could not be verified based on the documents provided prior to and during the site visit. During reviewers' discussions with faculty, the faculty were aware of which competencies mapped to different courses but were not able to articulate descriptions of the didactic coverage or assessments opportunities. There were multiple points during which faculty participating in the site visit meetings noted that the person who taught the course was not present to answer. Additional documentation that was provided to the team after these initial meetings also did not include sufficient detail to allow for</p>	Competency 2: EPI 52017 Module 4: Over the next three modules, you will conduct an individual investigation and ultimately produce a 3-5 page epidemiologic research paper consisting of four sections titled "Introduction," "Methods," "Results," and "Discussion." For this module, your objective is to design an analytic epidemiologic study in order to investigate the effect of a dichotomous exposure (or other health-related characteristic, risk factor, or determinant) on a dichotomous disease state or event (or other health-related outcome, state, or event). A sample EXCEL dataset pertaining to heart disease is available for you to use. A brief dataset description and variable definitions are available on the following page. You should review the description, consider your options for investigating potential exposure-disease relationships, and choose one that is of interest to you. Alternatively, you may choose to obtain and utilize your own dataset, but should discuss the details with your instructor and get approval before beginning your work. Before you begin working with the dataset, you should perform a literature search on your chosen exposure-disease relationship and compile all relevant information. Such information will help you to better understand important theories and hypotheses that currently exist regarding the exposure and the disease. Further, you will be able to identify related studies that have	<p>The Council reviewed the college's response, including attached documentation. The Council found that the college identified appropriate assessments for foundational competencies 14, 15, 18, 19, and 21.</p> <p>However, the Council could not validate that the college provides appropriate assessment for foundational competencies 2, 10, 11, 12, 16, 17 or 22.</p> <p>For some competencies, the assessment does not appear to align with the competency. For example, for FC 2, the assignment description does not appear to guarantee that students can select quantitative and qualitative data collection methods. Students design an epidemiologic study for a given disease state, but the assignment does not appear</p>

		<p>verification. Reviewers' findings are shown in the D2 worksheet.</p> <p>The first concern relates to the absence of didactic coverage and an adequate assessment method for foundational competencies 10, 18, 21, and 22. For example, the assessment for foundational competency 10 is a multiple-choice quiz, and none of the questions appears to allow students to be assessed on the skill of explaining the principles and tools of budget and resource management. When reviewers asked faculty about the didactic coverage and a clearer assessment, they acknowledged that the didactic coverage and assessment could be more explicit.</p> <p>The second concern relates to the lack of adequate assessment methods for foundational competencies 2, 8, 11, 12, 14, 15, 16, 17, and 19. In these cases, reviewers found some evidence that students received instruction (lectures, readings, etc.) relevant to the topic, but the listed assessment activity did not seem to align. For example, the listed assessment for foundational competency 15 requires students to discuss how healthcare systems work together to address a health issue; students are not assessed on evaluating policies.</p>	<p>been conducted previously. Once you feel that you have a sufficient understanding of your chosen exposure-disease relationship, you should consider your options for a study design to assess the association between the exposure and the disease. Then, design your study. You should discuss the data collection methods that produced the data as well as what data was collected well and what data may be missing that you would want to best answer your question. Otherwise, you are encouraged to be creative, make-up details concerning your data and its collection, and "employ" relevant design options. For analytic ease, you should ultimately categorize and define both your exposure and your disease variables as dichotomous (so that each has only two categories). For this module, you should concentrate on writing the "Introduction" and "Methods" sections of your research paper (you will concentrate on the other sections during the next two modules). Ultimately, your paper should be typed, use APA style to cite references, and be presented in a professional manner. You should plan to include any relevant tables, graphs, and/or figures in the body of your paper, using appropriate titles that can be referenced in the text. If you would like to view examples of epidemiological research papers, it is suggested that you refer to recent articles published in highly regarded journals, such as the American Journal of Public Health, the American Journal of Epidemiology, or JAMA. Most journals also have "Instructions for Authors" available on their websites that you may find useful.</p>	<p>conductive to eliciting students' understanding of circumstances in which qualitative data collection methods would be relevant.</p> <p>For FC 12, students write a memo that summarizes "the legal, regulatory, or political environment surrounding a particular health issue." The assessment, while related to policy, does not require students to demonstrate their ability to discuss the policy making process—environmental scanning is required for effective policy development, but it does not encompass the policy making process. The HPM 52016 assignment comparing health systems appears relevant to FC 5 and to analytical approaches to policy but does not appear to address the policy making process.</p> <p>For FC 16, the discussion assignment on great leaders provides grounding in this area and requires reflection, but does not appear to require students to apply leadership skills. Without additional information</p>
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		<p>Competency 8: Apply awareness of cultural values and practices to the design or implementation of public health policies or programs</p> <p>Addressed in previous documentation.</p> <p>Foundational Competency 15 is the central focus of the Discussion Assignment on integrating public health and healthcare in Learning Module 1 of HPM 52016.</p> <p>Lastly, a question of related to cultural values and practices will be added to the program planning case study assignment in Learning Module 4 of HPM 52016. This will be added during a major course update scheduled for Summer 2021.</p> <p>Competency 10: Explain basic principles and tools of budget and resource management</p> <p>While addressed in earlier documentation, a new lecture is being developed for HPM 52016 explaining the principles and tools of budget and resource management that will substitute for one of the existing lectures in Learning Module 6: Management and Leadership. Also included will be a new case assignment that will demonstrate student competencies in actual budget/budget management processes. The new case study assignment will replace the current assessment which doesn't allow adequate student demonstration of this competency. This will be updated summer 2021.</p>	<p>on the case and questions in Learning Module 7, the Council did not have sufficient information to validate the application of leadership skills in this activity.</p> <p>For FC 17, the assignment does not appear to relate to negotiation and mediation skills, focusing instead on advocacy and/or persuasion.</p> <p>For all of the other competencies (8, 10, 11, and 22), the college did not provide adequate description or documentation, or the college's response indicates that didactic preparation and/or assessment was still in development. For example, for FC 8, the college did not provide a description or supporting materials of an assessment that aligned with the competency statement. Based on the self-study document and team's report, the Council could not validate compliance. The Council could not locate an attachment relevant to competency 22.</p>
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			<p>Competency 11: Select methods to evaluate public health programs</p> <p>The Foundational Competency involving selecting methods to evaluate public health programs is currently addressed in the quiz in HPM 52016, Learning Module 4 (Planning and Evaluation). An additional assignment focusing on evaluation is being prepared as a replacement for the Assignment: Social Determinants of Health, focusing more specifically on the selection of methods to evaluate public health programs, which will be included in the major course update planned for Summer 2021.</p> <p>EPI 52017 Module 3 - Measures of Screening, Diagnosis, & Prognosis</p> <p>1) A recent nationwide study investigated the value of the prostate-specific antigen (PSA) blood test for the detection of prostate cancer among 100,000 men 50 years of age and older. Of the 686 men who tested positive on the PSA test, a total of 281 were ultimately diagnosed with prostate cancer, either by immediate needle biopsy or during 12 months of watchful waiting. An additional 45 men who tested negative on the PSA test were ultimately diagnosed with prostate cancer during 12 months of follow-up. Calculate the validity (i.e., sensitivity and specificity) and predictive value (i.e., positive and negative predictive value) of the PSA test used for prostate cancer screening in this population. Interpret the results and discuss the public health value of this screening program.</p> <p>2) The sensitivity and specificity of a screening test for scoliosis is 22.9% and 99.8%, respectively, when used</p>	
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			<p>among school-aged children. Assuming that the prevalence of scoliosis among this population is 1.5%, calculate the expected positive predictive value and negative predictive value of the test when used to screen 10,000 children. Interpret the results and discuss the public health value of this screening program.</p> <p>Competency 12: Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence</p> <p>The multiple dimensions of the policy-making process are currently assessed in the MPH core course HPM 52016. Specifically, the use of evidence in the policy making process is stressed in the Learning Module 2 (The Legal and Regulatory Environment of Public Health and Healthcare) Assignment Summarizing Issues in a Memo, in this case one that summarizes the legal, regulatory, or political environment surrounding a particular health issue and advocate a position. The instructions for this latter assignment are as follows: As a health care professional, you may be asked to provide a Memorandum or a Memo. A memo is a 1- or 2-page document that is used in both business and government, to communicate internal messages. Often, but not always, the purpose of the memo is to convince the reader to do something, like joining a wellness program. Memos are also used as directives, like informing the audience of required rules. In addition, memos can also summarize the legal, regulatory, or political environment surrounding a particular health issue and advocate a</p>	
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		<p>position. The latter example is the focus of this assignment.</p> <p>A new assessment was added to Learning Module 2 of HPM 52016 in Spring 2021:</p> <p>Case Assignment: Comparing Health Systems</p> <p>Students select two international health systems from a list provided. The instructions: Review the characteristics of the health systems you selected. You may use peer-reviewed literature, as well as resources such as the Commonwealth Fund's International Health Care System Profiles (https://www.commonwealthfund.org/international-health-policy-center/system-profiles) for this purpose. Compare and contrast the chosen systems on issues of 1) coverage (individuals and services), 2) payment, and 3) role of government. Key health outcomes may also be addressed. Identify at least two strengths for each system, as well as two weaknesses.</p> <p>Competency 14: Advocate for political, social or economic policies and programs that will improve health in diverse populations</p> <p>Advocacy is addressed in the Summarizing Issues in a Memo Assignment in HPM 52016. The memo students are asked to prepare summarizes the legal, regulatory, or political environment surrounding a particular health issue and advocates a particular position. The instructions for this latter assignment are as follows: "As a health care professional, you</p>	
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		<p>may be asked to provide a Memorandum or a Memo. A memo is a 1- or 2-page document that is used in both business and government, to communicate internal messages. Often, but not always, the purpose of the memo is to convince the reader to do something, like joining a wellness program. Memos are also used as directives, like informing the audience of required rules. In addition, memos can also summarize the legal, regulatory, or political environment surrounding a particular health issue and advocate a position. The latter example is the focus of this assignment. The context of this memo is that the student is to approach it as a CEO of the largest children’s advocacy organization in Philadelphia. They have just received a telephone call from the Mayor’s Office asking for their organization’s support in building a Supervised Consumption Facility (SCF) in the heart of downtown (called “Center City”). The student is to advocate for the agency’s board to agree with a position either for or against SCFs in the city using evidence in support of their position.</p> <p>Additionally, the competency is addressed in the HPM 52016 Learning Module 6 assignment, entitled “Write a Testimony.” The instructions for this assignment: “The Ohio Legislature is considering a bill to increase the tax on soft drinks as a way to reduce consumption of sugary drinks. You have been asked to testify before the House committee that is considering the bill. Write a legislative testimony giving your rationale for either supporting or opposing the bill. Look at the links provided below for examples of written testimonies and guidelines for writing one.”</p>	
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			<p>Competency 15: Evaluate policies for their impact on public health and health equity</p> <p>A new assessment was added to Learning Module 2 of HPM 52016 in Spring 2021:</p> <p>Case Assignment: Comparing Health Systems</p> <p>Students select two international health systems from a list provided. The instructions: Review the characteristics of the health systems you selected. You may use peer-reviewed literature, as well as resources such as the Commonwealth Fund's International Health Care System Profiles (https://www.commonwealthfund.org/international-health-policy-center/system-profiles) for this purpose. Compare and contrast the chosen systems on issues of 1) coverage (individuals and services), 2) payment, and 3) role of government. Key health outcomes may also be addressed. Identify at least two strengths for each system, as well as two weaknesses.</p> <p>Additionally, the competency is addressed in the HPM 52016 Learning Module 6 assignment, entitled "Write a Testimony." The instructions for this assignment: "The Ohio Legislature is considering a bill to increase the tax on soft drinks as a way to reduce consumption of sugary drinks. You have been asked to testify before the House committee that is considering the bill. Write a legislative testimony giving your rationale for either supporting or opposing the bill. Look at the links provided below for examples of written testimonies and guidelines for writing one."</p>	
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			<p>Advocacy is addressed in the Summarizing Issues in a Memo assignment in HPM 52016. The memo students are asked to prepare summarizes the legal, regulatory, or political environment surrounding a particular health issue and advocates a particular position. The instructions for this latter assignment are as follows: “As a health care professional, you may be asked to provide a Memorandum or a Memo. A memo is a 1- or 2-page document that is used in both business and government, to communicate internal messages. Often, but not always, the purpose of the memo is to convince the reader to do something, like joining a wellness program. Memos are also used as directives, like informing the audience of required rules. In addition, memos can also summarize the legal, regulatory, or political environment surrounding a particular health issue and advocate a position. The latter example is the focus of this assignment. The context of this memo is that the student is to approach it as a CEO of the largest children’s advocacy organization in Philadelphia. They have just received a telephone call from the Mayor’s Office asking for their organization’s support in building a Supervised Consumption Facility (SCF) in the heart of downtown (called “Center City”). The student is to advocate for the agency’s board to agree with a position either for or against SCFs in the city using evidence in support of their position.</p> <p>Competency 16: Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making</p>	
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			<p>The principles of leadership is currently assessed in a discussion assignment, entitled “What makes a Great Leader” in HPM 52016 (Learning Module 6). In this discussion, students are asked to “reflect on the leaders you have encountered in your life. They could be your parents, employers, politicians, family friends, or anyone else you consider a leader. What makes them a truly great leader? How have you adapted your behavior to emulate their leadership abilities?”</p> <p>Additionally, there is a leadership case assignment in Learning Module 7 of HPM 52016. Students are asked to read the attached case entitled, “Collaboration Among County Health Department Directors to Formulate Realistic Response Plans in the Event of Mosquito-Borne Zika Outbreaks” and answer the questions at the end of the case.</p> <p>Competency 17: Apply negotiation and mediation skills to address organizational or community challenges</p> <p>Advocacy is addressed in the Summarizing Issues in a Memo assignment in HPM 52016. The memo students are asked to prepare summarizes the legal, regulatory, or political environment surrounding a particular health issue and advocates a particular position. The instructions for this latter assignment are as follows: “As a health care professional, you may be asked to provide a Memorandum or a Memo. A memo is a 1- or 2-page document that is used in both business and government, to communicate internal messages. Often, but not always, the purpose</p>	
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		<p>of the memo is to convince the reader to do something, like joining a wellness program. Memos are also used as directives, like informing the audience of required rules. In addition, memos can also summarize the legal, regulatory, or political environment surrounding a particular health issue and advocate a position. The latter example is the focus of this assignment.</p> <p>The context of this memo is that the student is to approach it as a CEO of the largest children’s advocacy organization in Philadelphia. They have just received a telephone call from the Mayor’s Office asking for their organization’s support in building a Supervised Consumption Facility (SCF) in the heart of downtown (called “Center City”). The student is to advocate for the agency’s board to agree with a position either for or against SCFs in the city using evidence in support of their position.</p> <p>Competency 18: Select communication strategies for different audiences and sectors</p> <p>Didactic content for competency 18 is found in the Health Communication & Health Literacy learning module of HPM 52016. The assessment is Assignment: Measuring Readability, which asks students to select existing text from a health department website or other health related source and measure the readability of the text. Based on that assessment, students then edit to achieve a 6th grade reading level.</p>	
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			<p>In addition, a new case assignment is being developed for this Learning Module in Summer 2021 which will address the intersection of cultural competency and health literacy.</p> <p>EHS 52018 Module 5: Written Opinion Editorial Module 6 Article and Discussion Prompt: Discuss how the public perceives risk and the tenets of risk communication. Consider the documentary, The Ozone Hole: How We Saved the Planet. What role did risk communication play in this collective action that successfully mitigated the ozone hole and averted disaster? What lessons can we learn from this effective global collaboration that could be used to address climate change?</p> <p>Primary postings are required to be 150-250 words with professional grammar and accurate spelling. (Attachment 1)</p> <p>Competency 19: Communicate audience-appropriate public health content, both in writing and through oral presentation</p> <p>Didactic content for competency 19 is found in the Health Communication & Health Literacy learning module of HPM 52016. The assessment is Assignment: Measuring Readability, which asks students to select existing text from a health department website or other health related source and measure the readability of the text. Based on that assessment, students then edit to achieve a 6th grade reading level.</p>	
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			<p>In addition, a new case assignment is being developed for this Learning Module in Summer 2021 which will address the intersection of cultural competency and health literacy.</p> <p>EPI 52017 Learning Module 1 – Food Outbreak Activity Learning Module 2 – Age-Adjusted Cancer Mortality Learning Module 3 - Discussion Learning Module 4 - Discussion Learning Module 5 - Discussion Learning Module 6 –Discussion (Attachments 2-7)</p> <p>Competency 21: Perform effectively on interprofessional teams EPI 52017 Interpersonal Collaboration Exercise 1: In Module 1, you completed an interactive learning module titled Navigating a Foodborne Outbreak: Preparation for Interprofessional Practice and were awarded a digital certificate of completion to verify that you are prepared for interprofessional practice. This exercise will Assessment of Competencies for MPH (all concentrations) Competency Course number(s), and name(s)* Describe specific assessment opportunity put your new skills to use and require you and your Exercise Group to collaborate with an interprofessional external partner throughout Modules 2, 3, and 4. Students interact with doctoral prepared external partners in Nursing Home setting or City Human Services Department. Competency 22: Apply systems thinking tools to a public health issue See assignment sent separately (Attachment 3)</p>	
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D2 Worksheet

MPH Foundational Competencies	Yes/CNV
1. Apply epidemiological methods to the breadth of settings & situations in public health practice	Yes
2. Select quantitative & qualitative data collection methods appropriate for a given public health context	CNV
3. Analyze quantitative & qualitative data using biostatistics, informatics, computer-based programming & software, as appropriate	Yes
4. Interpret results of data analysis for public health research, policy or practice	Yes
5. Compare the organization, structure & function of health care, public health & regulatory systems across national & international settings	Yes
6. Discuss the means by which structural bias, social inequities & racism undermine health & create challenges to achieving health equity at organizational, community & societal levels	Yes
7. Assess population needs, assets & capacities that affect communities' health	Yes
8. Apply awareness of cultural values & practices to the design or implementation of public health policies or programs	CNV
9. Design a population-based policy, program, project or intervention	Yes
10. Explain basic principles & tools of budget & resource management	CNV
11. Select methods to evaluate public health programs	CNV
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics & evidence	CNV
13. Propose strategies to identify stakeholders & build coalitions & partnerships for influencing public health outcomes	Yes
14. Advocate for political, social or economic policies & programs that will improve health in diverse populations	Yes
15. Evaluate policies for their impact on public health & health equity	Yes
16. Apply principles of leadership, governance & management, which include creating a vision, empowering others, fostering collaboration & guiding decision making	CNV
17. Apply negotiation & mediation skills to address organizational or community challenges	CNV
18. Select communication strategies for different audiences & sectors	Yes
19. Communicate audience-appropriate public health content, both in writing & through oral presentation	Yes
20. Describe the importance of cultural competence in communicating public health content	Yes
21. Perform effectively on interprofessional teams	Yes
22. Apply systems thinking tools to a public health issue	CNV

D3. DRPH FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D4. MPH & DRPH CONCENTRATION COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
Defines at least five distinct competencies for each concentration or generalist degree in MPH & DrPH. Competencies articulate an appropriate depth or enhancement beyond foundational competencies		The college offers four MPH concentrations. The social and behavioral sciences and epidemiology concentrations have five concentration competencies; the health policy and management concentration has six concentration competencies; and the biostatistics concentration has four concentration competencies.	Biostatistics Specific: Biostatistics Competency 5 5. Perform appropriate sample size and power calculations to ensure that the study is sufficiently powered to address the research questions and achieve the scientific aims	The Council reviewed the self-study, team's report and the college's response. Based on the updated information provided with the response, the Council concluded that the college has addressed the first concern identified by the team, identifying an appropriate competency statement and assessment for the biostatistics concentration.
Assesses all students at least once on their ability to demonstrate each concentration competency		The first concern relates to the biostatistics concentration, which only lists four concentration competencies. During the site visit, faculty acknowledged that they were missing one competency for biostatistics.	Measured in: BST 63013 Experimental Designs in Public Health Assignment: BST 63013 Module 2 Homework (SAS homework) Calculate the power for the analysis using GPower. If you were designing this study from the beginning, what would have been an appropriate sample size to get 80% Power	
If applicable, covers & assesses defined competencies for a specific credential (eg, CHES, MCHES)	n/a	The other concern relates to the absence of adequate assessment methods for some competency statements, as detailed in the D4 worksheet. For example, the listed assessment for competency 2 of the epidemiology concentration does not align with the competency statement. Another example is competency 4 for the social	HPM Specific: 4. Integrate and apply interdisciplinary concepts and "systems thinking" for resolving policy and/or organizational issues.	The Council's review concluded that the college addressed some, but not all, aspects of the second concern. The updated D4 worksheet summarizes the Council's conclusions.

		<p>and behavioral sciences concentration: “analyze emerging social and behavioral issues and create evidence-based interventions.” The mapped assessment is an annotated bibliography; students are not creating their own evidence-based interventions.</p> <p>Faculty were able to provide additional examples of activities and assessments relevant to the concentrations, but these examples also were not connected to the specific competencies. On several occasions, faculty told reviewers that they acknowledge that the competencies were not explicitly addressed or assessed.</p>	<p>As noted in the previous documentation, the strongest assessment of this competency is the Final Policy Analysis Paper (HPM 53004).</p> <p>There is a final policy analysis paper due at the end of the course. It is assigned earlier in the course, when the subject of policy analysis is addressed. When it is first assigned, you are required to submit a short description and outline of the issue and analysis you intend to conduct, and it is subject to review by the instructor (see Bb for complete instructions regarding this description and outline, and what it should include). Toward the end of the course, you are required to submit a PowerPoint presentation summarizing your policy analysis paper and its recommendations, as well as the policy analysis paper itself. Your policy analysis paper should take account of points made by the student colleague who reviews your PowerPoint summary.</p> <p>HPM Competency 5: Develop and demonstrate problem-solving skills related to a health policy and/or management concern.</p> <p>HPM 53004 Final Policy Analysis Paper; HPM 53006 Essay Quiz; HPM 53007 Program Planning Project; HPM 60192 Final Narrative and Project</p> <p>The best examples are the Final Policy Analysis Paper assignment in HPM 53004 and the Program Planning Project in HPM 53007</p> <p>Instructions for the HPM 53004 Final Policy Analysis Paper: There is a final policy analysis paper due at the end of the course. It is assigned earlier in the course,</p>	<p>The Council found that the college identified appropriate assessments for all outstanding competencies in the SBS and BIOS concentrations.</p> <p>Analysis of the HPM and EPI concentrations is as follows:</p> <p>In the HPM concentration, the Council concluded that the documentation was minimally acceptable for competency 4—the HPM 53004 course clearly requires students to demonstrate more advanced policy analysis skills than those associated with the foundational courses. The competency statement, as written, focuses on interdisciplinary concepts and systems thinking, as applied to “resolving policy and/or organizational issues,” and the policy analysis assignment does not appear to directly reference interdisciplinary concepts or systems thinking, and only the recommendations section relates to resolving issues; the Council accepted the assessment but encourages the college to consider better alignment between the</p>
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			<p>when the subject of policy analysis is addressed. When it is first assigned, you are required to submit a short description and outline of the issue and analysis you intend to conduct, and it is subject to review by the instructor (see Bb for complete instructions regarding this description and outline, and what it should include). Toward the end of the course, you are required to submit a PowerPoint presentation summarizing your policy analysis paper and its recommendations, as well as the policy analysis paper itself. Your policy analysis paper should take account of points made by the student colleague who reviews your PowerPoint summary.</p> <p>Instructions for the HPM 53007 Group Planning Project: The Program Plan project provides students a real-world learning experience and an opportunity to apply knowledge gained through the course. Working collaboratively in small groups, students will draft a comprehensive and detailed program plan that includes the planning, implementation and evaluation of a health program. Program Plans will include interventions that contain at least one educational component that is detailed in a lesson plan.</p> <p>Several example Program Plans are available on Blackboard. Students are encouraged to review each to become familiar with its content and format. While the specific public health issue of concern may differ from the sample Program Plans, the content and comprehensiveness should be the same. Further, the content of the Program Plan follows the chapters of the textbook for the course (see Program Plan Guide).</p>	<p>competency statement and assignment provided to students.</p> <p>The Council could not validate an appropriate assessment for HPM competency 5. As with above, it appears that students do develop advanced skills in their concentration courses, but neither listed assignment appears designed to assess HPM competency 5 as written. Policy analysis and program planning do implicitly require problem-solving skills, but only insofar as most skills-based assignments in any graduate-level class requires problem-solving skills. Neither assignment appears to target specific problem-solving skills or methods that are taught in class, and the program planning project does not appear oriented toward solving a particular “policy and/or management concern.”</p> <p>Although only five appropriately-defined and mapped competencies are required, the Council reviewed revised HPM competency 6 and concluded that it does not</p>
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			<p>Each module will contain specific tasks to be completed in an effort to draft a final version of the Program Plan that will be submitted to the instructor prior at the end of the course. Each group will be expected to submit their Program Plan work prior to the module deadline each week for review and feedback from the instructor. Each group is expected to use the feedback from the instructor to revise and improve the Program Plan throughout the duration of the course and eventually submitting a revised final version of the Program Plan prior to the course deadline for grading.</p> <p>HPM Competency 6: Describe the strengths and weaknesses of different health care systems and how they affect the delivery, value, and equity of care. <i>As noted, the competency is revised as follows:</i> HPM Competency 6: Understand the strengths and weaknesses of different health care systems and how they affect the delivery, value and equity of care.</p> <p>A new assessment was added to Learning Module 2 of</p> <p>HPM 52016: Case Assignment: Comparing Health Systems Students select two international health systems from a list provided. The instructions: Review the characteristics of the health systems you selected. You may use peer-reviewed literature, as well as resources such as the Commonwealth Fund's International Health Care System Profiles (https://www.commonwealthfund.org/international-health-policy-center/system-profiles) for this purpose. Compare and contrast the chosen systems</p>	<p>address the team's concerns. Based on the statement and accompanying assignment, this appears to replicate the knowledge and skills in foundational competency 5.</p> <p>For EPI competency 2, the assessment activity, analyzing and leading a discussion of a journal article, does not appear to align with the skills identified in the competency statement. The journal club presentation does require students to "explain why the topic [of the chosen journal article] is important," but this does not demonstrate that students can "Explain the importance of epidemiology for informing scientific, ethical, economic, and political discussion of health issues."</p> <p>For EPI competency 3, completion of a CITI training does not sufficiently address the competency's focus on ethical principles relating to epidemiologic data. CITI training modules are broadly applicable and completed by many MPH and other graduate program</p>
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			<p>on issues of 1) coverage (individuals and services), 2) payment, and 3) role of government. Key health outcomes may also be addressed. Identify at least two strengths for each system, as well as two weaknesses.</p> <p>SBS Specific: SBS Competency 3: Use the principles of ethics, social justice, and advocacy in improving the health of diverse populations in a culturally competent manner</p> <p>SBS 54634 - Social Determinants of Health Behaviors</p> <ol style="list-style-type: none">1. Submitted revised syllabus.2. Assessment. Revised final exam, item 7, to include: "What could you, as a health professional, do to advocate regarding specific public health inequities? Provide ONE detailed example."3. Reaction Paper Assignment. Revised instructions include specific requirements to include principles of cultural competency and ethics. Revised assessment items include:<ol style="list-style-type: none">a. "1. Discuss how these constructs/concepts have increased/enhanced your understanding of cultural competency of a specific health behavior. (20 points)"b. "Critique each of your selected interventions in terms of ethics, social justice, impact, and equity (utilizing your newly gained knowledge of the reciprocal effects of	<p>students, regardless of specialization.</p>
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			<p>social structure on culture and behavior). (60 points)</p> <p>SBS Competency 4: Analyze emerging social and behavioral issues and create evidence-based interventions</p> <p>SBS 54634 - Social Determinants of Health Behaviors</p> <ol style="list-style-type: none">1. Assessment. Revised final exam, item 10, to include: Select ONE poor health outcome and ONE behavior that contribute to that health outcome. Describe, in detail, at least one causal pathway from the Social Determinants/root causes of that behavior and outcome AND create one evidence-based intervention that is effective in addressing the behavior and outcome.2. Mapping Exercise. Assessment. Points of public health intervention. Identified PH issues will be “mapped” FROM the Structural Determinants of Health to a health outcome THROUGH the intermediary determinants of health. Provide a narrative (within the text box under your power point slide) identifying and discussing each of the constructs in your model along with Public Health interventions that could be utilized to change the points of intervention you identify. Points will be deducted for lack of correspondence between the structural determinants, the intermediary determinants and the health behavior and outcome.” <p>Epidemiology Competency 2</p>	
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			<p>2. Explain the importance of epidemiology for informing scientific, ethical, economic and political discussion of health issues.</p> <p>Measured in:</p> <p>EPI 63014 Epidemiology of Chronic Diseases</p> <p>EPI 63015 Epidemiology of Infectious Diseases</p> <p>EPI 63016 Principles of Epidemiologic Research</p> <p>Assignment: EPI 63014: Module 3 Journal Club Presentation (this is a multi-module presentation and group discussion)</p> <p>If this is your week to "present," create a PowerPoint presentation that summarizes journal article you selected earlier. Be detailed and thorough in your assessment. Utilize the notes field in PowerPoint to "narrate" your presentation as if you were presenting in front of a live audience. The PowerPoint presentation must include all the following sections:</p> <p>Specify the authorship, paper title, publication year, journal</p> <p>Describe the purpose/objective of the journal article</p> <p>Explain why the topic is important</p> <p>List the methods used</p> <p>Explain the results/findings</p> <p>Discuss the strengths and limitations of the methods and findings</p> <p>Summarize the authors' main points and conclusion</p> <p>Epidemiology Competency 3</p>	
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			<p>3. Comprehend basic ethical and legal principles pertaining to the collection, maintenance, use and dissemination of epidemiologic data.</p> <p>Measured in: EPI 63016 Principles of Epidemiologic Research</p> <p>If EPI 63016-- Student will be required to complete the CITI (Collaborative Institutional Training Initiative) training for ethical conduct of human subject research. Students are required to complete the full Biomedical Research and Social and Behavioral Research Modules and submit the certification to receive credit. It will account for 10% of the final grade. The CITI training can be access at: https://www.citiprogram.org/Default.asp?</p> <p>Biostatistics Comptency 2</p> <p>2. Describe preferred methodological alternatives to commonly used statistical methods when assumptions are not met.</p> <p>Measured in: BST 63012 Survival Analysis in Public Health BST 63014 Applied Regression Analysis of PH Data EPI 63034 Longitudinal Data Analysis</p> <p>BST 63014 Module 4: Midterm Exam (see module) BST 63012 EPI 63012 Topic/Module 3 see attached</p>	
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			<p>assignment EPI 63034 Topic/Module – Repeated Measures Analysis of Variance and Multivariate Analysis of Variance Assessment – Performing statistical analysis of repeated measures data using ANOVA & MANOVA methods and writing up the report explaining the results. Topic/Module – Repeated Measures Analysis using response profiles. Assessment – Performing statistical analysis of repeated measures data using response profiles methods and writing up the report explaining the results. Assessment – Midterm Exam, Final exam, Class Project</p> <p>Biostatistics Comptency 3 3. Distinguish among the different measurement scales and the implications for selection of statistical methods to be used based on these distinctions.</p> <p>Measured in:BST 63014 Applied Regression Analysis of PH Data BST 63013 Experimental Designs in Public Health Research EPI 63016 Principles of Epidemiologic Research</p> <p>"BST 63014 Module 1:Lab This first lab assignment will help me assess your skill level in using the SAS</p>	
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			<p>operating system. Complete the assignment to the best of your ability. The data are in the attached document.</p> <p>Directions</p> <ol style="list-style-type: none">1. Create a data file in SAS using the attached data.2. Produce frequencies of each variable.3. Produce the appropriate measure of central tendency and dispersion for each variable.4. Save your data file for use in future lab assignments throughout the course.5. Save a PDF of your SAS output and name this file LabDataEntry_firstnamelastname.pdf (i.e. LabDataEntry_JohnSmith.pdf).6. Upload your PDF to the Assignment tool in Blackboard Learn and submit by the due date listed in the course schedule. (Note: You can only submit once, so make sure you are completely finished and that you have attached the correct file.) <p>Module 2: Lab This lab exercise is designed to get you working in SAS again and to assess your understanding of the content in Chapter two of the text. You will use the data file you created in the previous lab. You will start by performing the specified calculations by hand, then run a simple regression in SAS and compare the output to your calculations done by hand. Finally, you will use this Lab Worksheet to identify specific values on the output and an interpretation of your findings. Detailed directions are on the attached document.</p>	
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			<p>Directions</p> <p>Using the data file you created in the previous lab, calculate by hand the Pearson's correlation coefficient and the bivariate regression coefficient for the relationship between Martian height and Martian weight. Use the weight variable as your dependent variable and the height variable as your independent variable.</p> <p>Produce a simple linear regression model (hint: use the proc reg procedure in SAS). Check that the values you calculated by hand match the values on your SAS output (with only rounding error).</p> <p>Open the Lab Worksheet by clicking the title in Blackboard Learn and input the values from the proc reg procedure output.</p> <p>Write a one paragraph interpretation of your findings on the effect of Martian height on Martian weight, and include it in the worksheet. [Note: It is recommended that you write your interpretation in another program (Microsoft Word, Google Docs, etc.) then copy and paste it into the worksheet to avoid lost work.]</p> <p>Submit the Lab Worksheet by the due date listed in the course schedule.</p> <p>Module 4: Midterm Exam</p> <p>EPI 63016</p> <p>Topic/Module—Introduction to Epidemiologic Research</p> <p>Assessment-Assignment VI-- Data Analysis and Presentation</p>	
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			<p>Description: In this assignment students select and perform appropriate descriptive and univariable analyses to assesses the relationship between an outcome and potential risk factors, and present results in formats suitable for publication in an epidemiologic journal. This analysis and presentation should include statistics from all the descriptive and analytic procedures conducted, including but not limited to measures of central tendencies, association, and appropriate 95% confidence intervals and/or p-values."</p>	
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D4 Worksheet

Social & Behavioral Sciences Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Apply and evaluate basic social and behavioral theories that effect health behaviors.	Yes	Yes
2. Analyze the role of social determinants in the onset and solution to public health problems.	Yes	Yes
3. Use the principles of ethics, social justice, and advocacy in improving the health of diverse populations in a culturally competent manner.	Yes	Yes
4. Analyze emerging social and behavioral issues and create evidence-based interventions.	Yes	Yes
5. Utilize effective strategies for obtaining funding for public health interventions.	Yes	Yes

Health Policy & Management Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Understand, interpret, and apply key elements of the policy processes as it relates to public health issues.	Yes	Yes
2. Apply the principles of planning, implementation and evaluation of public health programs and effectively communicate outcomes.	Yes	Yes
3. Evaluate the financial performance and management of public health organizations.	Yes	Yes
4. Integrate and apply interdisciplinary concepts and "systems thinking" for resolving policy and/or organizational issues.	Yes	Yes
5. Develop and demonstrate problem-solving skills related to a health policy and/or management concern.	Yes	CNV
6. Describe the strengths and weaknesses of different health care systems and how they affect the delivery, value, and equity of care.	No	---

Epidemiology Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Identify the principles and limitations of public health screening programs.	Yes	Yes
2. Explain the importance of epidemiology for informing scientific, ethical, economic and political discussion of health issues.	Yes	CNV
3. Comprehend basic ethical and legal principles pertaining to the collection, maintenance, use and dissemination of epidemiologic data.	Yes	CNV
4. Communicate epidemiologic information to lay persons and professional audiences.	Yes	Yes
5. Evaluate the strengths and limitations of epidemiologic reports.	Yes	Yes

Biostatistics Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Describe and apply basic concepts of probability, random variation, and commonly used statistical probability distributions.	Yes	Yes
2. Describe preferred methodological alternatives to commonly used statistical methods when assumptions are not met.	Yes	Yes
3. Distinguish among the different measurement scales and the implications for selection of statistical methods to be used based on these distinctions.	Yes	Yes
4. Apply common statistical methods for inference.	Yes	Yes
5. Perform appropriate sample size and power calculations to ensure that the study is sufficiently powered to address the research questions and achieve the scientific aims	Yes	Yes

D5. MPH APPLIED PRACTICE EXPERIENCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
All MPH students produce at least 2 work products that are meaningful to an organization in appropriate applied practice settings		The college has a well-designed and highly structured practicum process. Students complete either 150 hours or 300 hours at a practice site, depending on whether they enroll in a three-credit or six-credit experience. They select	On the practicum agreement form, there is a timeline that show when deliverables will be produced and what the deliverables are. Students	The Council reviewed the college's response and noted that the college has clarified its APE requirements in relation to the team's second

Qualified individuals assess each work product & determine whether it demonstrates attainment of competencies		150 if they want to take an additional elective. The practicum course instructor, an adjunct faculty member assigned to the course, guides students through finding an appropriate site, preceptor, and project; completing all required paperwork; and submitting the final portfolio and video presentation of results. The practicum instructor assigns a grade of satisfactory or unsatisfactory based on the portfolio, presentation, and preceptor evaluation. Students also complete an evaluation of the preceptor and site.	are required to complete at least two deliverables that are provided to the practicum site when the practicum ends. We have modified the practicum agreement form (now the APPLIED PRACTICE EXPERIENCE AGREEMENT form) to make it more explicit what the two deliverables (APE Products) are. This will increase transparency and reduce ambiguity of what the two products are that will be completed by the student for the APE site. To be clear, the practicum (APE) presentation is NOT counted toward the deliverables.	concern. The Council looks forward to reviewing updated evidence of implementation of the clarified policy.
All students demonstrate at least 5 competencies, at least 3 of which are foundational		<p>A practicum agreement form structures the experience. Students outline at least five competencies to be demonstrated through the practicum, and at least three must be foundational competencies. Students outline the major steps in the project that they will undertake, with learning objectives for each step and identified evidence for each objective. For example, one student completed a community health assessment project for the Virginia Beach Department of Health. Evidence associated with her learning objectives included a data report and a PowerPoint presentation.</p> <p>The portfolio includes the approved practicum agreement form, signed bi-weekly time sheets, a self-evaluation video presentation, and a research narrative of the practicum experience. The practicum handbook notes “The research narrative is a scholarly description of the Practicum project. If your Practicum entails a final work product or technical report for your organization, you are welcome to use that product instead of writing a separate narrative. It is your choice. For example, if you are doing analysis of a particular policy, collecting data, then actually revising existing policy or creating a new policy manual, that that</p>		<p>The college’s response does not appear to address the team’s first concern. As a result, the Council looks forward to reviewing updated documentation demonstrating compliance with this criterion.</p>

		<p>policy document can be submitted instead of writing a narrative.”</p> <p>The college submitted recent portfolio samples from each MPH concentration, along with each student’s Template D5-1. All samples included practicum agreement forms that identify a project and, in most cases, appropriate competencies.</p> <p>Students completed projects including the following: a survey and educational material development for school nurses on vaccination practices; a neighborhood-level intervention to address infant mortality; and outreach and investigation of adolescent internet gaming behaviors.</p> <p>The first concern relates to the fact that the evidence provided to site visitors suggests that students in the biostatistics concentration are not consistently completing an experience that meets this criterion’s requirements. All five of the samples provided to site visitors involved students completing data analysis projects, culminating in a journal article-style product, under the supervision of a college faculty member. All five samples contained identical, relatively generic descriptions of the work to be conducted. All five products identified identical competencies, and not all the identified competencies appeared feasible to address in the given project; however, the set listed by all five students included more than five competencies, and at least five were relevant to the project. In the practicum agreement form’s section identifying evidence for learning objectives, all listed sections of the scholarly paper. For example, the methods section of the paper demonstrates that students could manage data and create datasets, and the results and</p>		
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		<p>discussion sections demonstrate that the students could analyze and interpret data. During the site visit, faculty shared that there are some students in the biostatistics concentration that complete their practicum with an external partner, however it was clear that this example was an exception, and most students are completing their practicum with a faculty member, without any communication with a community partner.</p> <p>Although some of the biostatistics students' projects did require students to address the problems inherent in using real data sets (e.g., NHANES or BRFSS data), the projects do not appear to be structured to meet this criterion's requirements or intent. This criterion notes "to be appropriate for applied practice experience activities, university-affiliated settings must be primarily focused on community engagement, typically with external partners." This criterion also notes that "Activities meeting the applied practice experience should be mutually beneficial to both the site and the student." The projects do not appear to require students to encounter practical issues as intended by this criterion: for example, primary data collection for a community initiative or liaising with non-expert partners and data end users.</p> <p>The second concern relates to the fact that students in the other three MPH concentrations are only required to complete one work product. Products associated with these concentrations are consistently oriented toward community partners and toward completing work beneficial to the practicum site. However, during the site visit, faculty said that the practicum was a "one-product project," and that the second piece of the practicum was presenting their product to their peers.</p>		
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		<p>Careful review of the samples provided to site visitors indicated that some students are producing multiple products for the practice partner; however, the college's process and documentation does not consistently guarantee compliance with this criterion. All versions of Template D5-1 list the project plan outline and final narrative as the sole work products that demonstrate all five identified competencies. Currently, the documentation and assessment are largely oriented toward the research narrative, in most cases. A small number of the sample portfolios were structured as intended by this criterion. One sample was structured as a strategy memo with recommendations, and two samples were structured as professional summaries and community health assessment reports, rather than as scholarly articles; however, the balance of samples provided a research report rather than practice projects.</p> <p>During the site visit, alumni and preceptors that met with reviewers shared their positive experience with the practicum. One preceptor who has hosted five students believed students were ready to learn and contributed immediately to the host organization. Another preceptor told the site visitors that a recent APE student was extremely helpful in revising substance abuse curricula.</p>		
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D6. DRPH APPLIED PRACTICE EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D7. MPH INTEGRATIVE LEARNING EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
Students complete project explicitly designed to demonstrate synthesis of foundational & concentration competencies		<p>The self-study reports that students are assessed on demonstration and synthesis of competencies through a culminating examination that is graded satisfactory or not satisfactory. The exam has two parts: part A covers the foundational competencies, including integration across the five public health disciplines, and part B covers the concentration-specific competencies. Students complete the experience at the end of their degree programs, and the culminating experience provides an opportunity to employ what they have learned in prior coursework.</p> <p>The concern related to the comprehensive exam is that students are not required, nor do they have the opportunity, to synthesize competencies. For the comprehensive exam, students are required to choose a public health issue and are asked to write how each discipline (biostatistics, epidemiology, and health policy and management) is necessary, relevant, and used in addressing the public health issue. During the site visit, the faculty agreed that the examination was primarily an academic exercise. Students who met with the site visit team could not speak to how they selected competencies to focus on for the culminating experience. Faculty could not articulate how the comprehensive exam is focused on synthesis of competencies.</p>	<p>For the comprehensive exam, as stated, there are two parts (A & B). Part A focuses on the foundational competencies and the synthesis of the five public health disciplines. For preparation for the exam, students are encouraged to consider a PRECEDE model approach to Part A. Given the social, epidemiological, and environmental assessments that are conducted as part of the PRECEDE Model, this helps students integrate and synthesis the content from the core courses. As such, the students are asked to consider the five disciplines and how they are integrated to address public health issues. However, based on the site visitors' assessment, we have modified the comprehensive exam to have students explicitly integrate the foundation competencies in Part A of the exam. We understand how the exam could be seen as a non-integrated response for the foundational competencies and the PH disciplines.</p>	<p>The Council appreciates the college's response and notes that changes have been made to the comprehensive exam with the intention of satisfying the team's concern. The Council looks forward to reviewing documentation of the revised experience to demonstrate compliance with this criterion.</p>
Project occurs at or near end of program of study				
Students produce a high-quality written product				
Faculty reviews student project & validates demonstration & synthesis of specific competencies				

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D8. DRPH INTEGRATIVE LEARNING EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D9. PUBLIC HEALTH BACHELOR'S DEGREE GENERAL CURRICULUM

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students introduced to all domains:		The college offers several BSPH concentrations as listed in the instructional matrix.	Click here to enter text.	
1. Foundations of scientific knowledge, including biological & life sciences & concepts of health & disease		Students are introduced to foundations of scientific knowledge through PH 30007: Prevention and Control of Diseases. In addition, students are required to complete seven credit hours of courses in the basic sciences, including a laboratory course. Courses that satisfy this requirement include BSCI 110001: Human Biology; CHEM 10060: General Chemistry; CHEM 10062: General Chemistry Laboratory; or PHY 13001: General College Physics.		
2. Foundations of social & behavioral sciences				
3. Basic statistics				
4. Humanities / fine arts		Students are introduced to foundations of social and behavioral sciences through PH 20006: Social and Behavioral Science Theories. In addition, students are		

		<p>required to complete basic social science courses in two areas. For example, student may take ANTH 18210: Global Cultural Diversity: Anthropological Perspectives; PSYC 11762: General Psychology; or SOC 12050: Introduction to Sociology.</p> <p>Student are introduced to math/quantitative reasoning though PH 30002: Introductory Biostatistics.</p> <p>Students are introduced to the domain of the humanities and fine arts through the university requirement that students take courses from a list that includes HIST 11051: World History: Modern; PHIL 21001: Introduction to Ethics; ARTH 22027 Art History: Renaissance to Modern Art; and THEA 11000: Art of the Theater.</p>		
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D10. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL DOMAINS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Curriculum ensures that all elements of all domains are covered at least once (see worksheet for detail)		The BSPH curriculum requires all students to complete a core set of courses: PH 10001 Introduction to Public Health; PH 10002 Introduction to Global Health; PH 20001 Essentials of Epidemiology; PH 30002 Introductory Biostatistics; PH 30004 Public Health Research; PH 30005 Social and Behavioral Science Theories in Public Health; PH 30006 Introduction to Environmental Health and Safety; PH 30007 Prevention and Control of Diseases; PH 30033 Public Health Policy and Decision-Making; PH 44000 Health Disparities; and PH 49000 Capstone Experience in Public Health.	All Kent State Students complete two semesters of English Composition as a graduation requirement. The courses introduce students to basic mechanics of writing, critical thinking, composition and rhetoric. The outcomes are presented as D10 1 and D10 2. Students also complete advance writing practice in PH 44000, Health Disparities, in which students create a research paper	The Council reviewed the updated materials provided with the college's response and concluded that the college has addressed the issues identified by the site visit team. Therefore, the Council acted to change the site visit team's finding of partially met to a finding of met.
If curriculum intends to prepare students for a specific credential (eg, CHES), curriculum addresses the areas of instruction required for credential eligibility	N/A			

		<p>The concern relates to elements of domain 9 that are only introduced, not covered, as indicated in the self-study and confirmed during the site visit. Documentation indicates that use of mass media and electronic technology are not covered.</p> <p>The curriculum presented in the self-study covers the other eight foundational domains at least once, as shown in the D10 worksheet.</p>	<p>based on a specific topic of their choosing. Throughout the BSPH core curriculum (PH 30033 and PH 49000) students complete Op-Ed assignments, these founded reasoned opinion assignments, are valuable for blog posting's and other media platforms. Additionally, students create infographics, fliers and brochures in PH 30005. Other examples of this criterion can be found in concentration specific courses throughout our curriculum.</p>	
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D10 Worksheet

Public Health Domains	Yes/CNV
1. History & philosophy of public health as well as its core values, concepts & functions across the globe & in society	Yes
2. Basic concepts, methods & tools of public health data collection, use & analysis & why evidence-based approaches are an essential part of public health practice	Yes
3. Concepts of population health, & the basic processes, approaches & interventions that identify & address the major health-related needs & concerns of populations	Yes
4. Underlying science of human health & disease, including opportunities for promoting & protecting health across the life course	Yes
5. Socioeconomic, behavioral, biological, environmental & other factors that impact human health & contribute to health disparities	Yes
6. Fundamental concepts & features of project implementation, including planning, assessment & evaluation	Yes
7. Fundamental characteristics & organizational structures of the US health system as well as the differences between systems in other countries	Yes
8. Basic concepts of legal, ethical, economic & regulatory dimensions of health care & public health policy & the roles, influences & responsibilities of the different agencies & branches of government	Yes
9. Basic concepts of public health-specific communication, including technical & professional writing & the use of mass media & electronic technology	Yes

D11. PUBLIC HEALTH BACHELOR’S DEGREE FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students demonstrate & are assessed on each competency & all its elements:		The self-study describes how students demonstrate communication and informational literacy skills in the bachelor’s degree. For example, in PH 30005: SBS Theories in Public Health, students bring talking points to class each week and engage their peers in a discussion. In PH 44000: Health Disparities, students write a semester-long policy paper on health disparities. Students have several opportunities to communicate with diverse audiences through participation in the community renaissance program and the incarceration program. In one of the required courses, there are several information literacy assessment opportunities. For example, students complete a literature review of peer-reviewed journals and are required to synthesize their findings in an infographic and a five-page op-ed.	Click here to enter text.	
1. ability to communicate public health information, in both oral & written forms, through a variety of media & to diverse audiences				
2. ability to locate, use, evaluate & synthesize public health information		Bachelor’s students who met with the site visit team said that they are familiar with all competencies and are assessed on competencies in all public health courses. Reviewers’ findings are presented in the D11 worksheet.		

D11 Worksheet

Competency Elements	Yes/CNV
Public Health Communication	
Oral communication	Yes
Written communication	Yes
Communicate with diverse audiences	Yes
Communicate through variety of media	Yes
Information Literacy	
Locate information	Yes
Use information	Yes
Evaluation information	Yes
Synthesize information	Yes

D12. PUBLIC HEALTH BACHELOR’S DEGREE CUMULATIVE AND EXPERIENTIAL ACTIVITIES

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students complete cumulative & experiential activities		All students complete PH 49000, the Capstone Experience in Public Health. The course draws together prior public health learning and requires students to engage in case studies, conduct informational interviews with professionals, review peer-reviewed journal articles, and develop an editorial article focused on an interest area in public health.	Click here to enter text.	
Activities require students to integrate, synthesize & apply knowledge & program encourages exposure to local-level professionals & agencies		The three case studies involve students hearing a presentation about a problem that needs to be solved then working with a team over four weeks to create a solution. Teams create a visual component describing the solution and prepare a brief, convincing speech on each solution. Each student prepares an individual support at		

		the conclusion of each case. Other course assessments include preparing questions and reports for the informational interview, summarizing journal articles, and preparing a summary and op-ed on either a book from the ASPPH summer reading lists or five research articles from peer-reviewed journals on a single topic. Class sessions and readings involve public health practitioners as guest speakers and address problem solving models, program planning, politics and policy, and other topics.		
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D13. PUBLIC HEALTH BACHELOR'S DEGREE CROSS-CUTTING CONCEPTS AND EXPERIENCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Program ensures opportunities available in all cross-cutting areas (see worksheet for detail)		<p>The college uses a set of courses to document coverage of the cross-cutting areas for BSPH students, including PH 10001 Introduction to Public Health; PH 10002 Introduction to Global Health; PH 20001 Essentials of Epidemiology; PH 30002 Introductory Biostatistics; PH 30004 Public Health Research; PH 30005 Social and Behavioral Science Theories in Public Health; PH 30006 Introduction to Environmental Health and Safety; PH 30007 Prevention and Control of Diseases; PH 30033 Public Health Policy and Decision-Making; and PH 44000 Health Disparities. The exposure to the concepts is largely through discussion/participation. The college also uses quizzes and exams for some concept areas, such as critical thinking.</p> <p>The concern relates to the lack of opportunities available in all cross-cutting areas, as detailed in the D13 worksheet. During the site visit, reviewers asked faculty about specific</p>	<p>Advocacy for the Protection and Promotion of the Public's Health at All Levels of Society:</p> <p>As part of PH 44000 students complete a Health Disparity Review that allows them to deeply investigate a documented health disparity among a population. Students self-critique portions of the paper with their peers for board exposure to multiple issues and populations. See below for essay assignment:</p> <p>HEALTH DISPARITIES REVIEW</p>	The Council reviewed college's response and concluded that the college has addressed the issues identified by the site visit team. Therefore, the Council acted to change the finding of partially met to a finding of met.

		<p>examples, and faculty were not able to provide additional information.</p>	<p>Throughout the semester, students will complete multiple components which will be combined into a final Health Disparity Review (HDR) paper, to be submitted during finals week. The HDR consists of 5 parts:</p> <p>Part 1: Topic Proposal (20 points)</p> <p>In preparation for writing the Health Disparity Review paper, students are to identify and submit for approval a specific health disparity topic—that is, a documented health disparity (e.g. obesity, lung cancer, diabetes) among a particular at-risk population (Hispanics, Black men, Black women) living in the United States. Additional requirements will be indicated in the Assignment Guide.</p> <p>Part 2: Determinants Table (30 points)</p> <p>After their topics have been approved, students will complete a structured table enabling them to identify social determinants that contribute to their chosen health disparity. The table contents will be researched and incorporated into the final paper. Additional requirements will be indicated in the Assignment Guide.</p>	
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			<p>Part 3: Inequalities Explanation (45 points) Based on instructor feedback, students will revise and resubmit their Determinants Table. Additional requirements will be indicated in the Assignment Guide.</p> <p>Part 4: Intervention & Policy Report (30 points) Students will submit a brief structured report of a public health intervention and a policy they have identified in their research work thus far. Additional requirements will be indicated in the Assignment Guide.</p> <p>Part 5 Final: Health Disparity Analysis (80 points)</p> <p>Incorporating material and feedback from the first 4 parts, students will submit a cohesive review that describes and explains the root causes of the chosen disparity and makes recommendations for public health action. Additional requirements will be indicated in the Assignment Guide.</p> <p>Community Dynamics:</p>	
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			<p>As part of PH 30005 students complete a public health essay that allows them to utilize course constructs around health behavior and apply them toward their health behaviors. See below for essay assignment:</p> <p>ESSAY ASSIGNMENT</p> <p>1. Public Health Essay Assignment. This essay is designed to provide an opportunity for you to attach the new concepts and constructs you’ve learning in this course to your own beliefs and experiences. In an essay format (no bullet points or incomplete sentences), write a maximum of five (5) pages (double spaced, 12 point font) addressing the following: 1. Identification of one personal health behavior that you either practice, or would like to change (i.e., exercise, smoking, alcohol consumption, regular dental visits, regular physical checkups, stress reduction practices, etc.).</p> <p>2. Explain the role you believe that the larger “causes of the causes (social determinants)” have in shaping that behavior?</p> <p>3. Explain the role that community level constructs you’ve learned about in this course have on that behavior?</p>	
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			<p>4. Explain the role that individual level constructs you've learned about in this course have on that behavior?</p> <p>5. Discuss which constructs and levels of influence you believe had/have the strongest effect on your selected health behavior.</p> <p>6. Given your "analysis" of your own health behavior, what intervention might help you maintain or change your selected behavior?</p> <p>Systems Thinking</p> <p>As part of PH 30033 students complete a full policy analysis that allows them to understand how local, state, national and global issues impact oversight and regulation of health policy. Additionally, students regularly participate in case studies that allow them to better understand how different agencies (or levels, branches, departments) within a system interact.</p>	
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D13 Worksheet

Cross-cutting Concepts & Experiences	Yes/CNV
1. advocacy for protection & promotion of the public’s health at all levels of society	Yes
2. community dynamics	Yes
3. critical thinking & creativity	Yes
4. cultural contexts in which public health professionals work	Yes
5. ethical decision making as related to self & society	Yes
6. independent work & a personal work ethic	Yes
7. networking	Yes
8. organizational dynamics	Yes
9. professionalism	Yes
10. research methods	Yes
11. systems thinking	Yes
12. teamwork & leadership	Yes

D14. MPH PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
MPH requires at least 42 semester credits or equivalent		Students must complete at least 46 credit hours for all MPH degree concentrations. The college defines a semester credit hour as a minimum of 750 minutes of formal instruction and an average of twice that amount of study-time outside the classroom.	Click here to enter text.	

D15. DRPH PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D16. BACHELOR’S DEGREE PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Required credit hours commensurate with other similar degrees in institution		The BSPH is 120 semester credits in length, comparable to other Kent State bachelor’s degree programs in nursing, radiologic and imaging sciences technology, and information technology.	Click here to enter text.	
Clear, public policies on coursework taken elsewhere, including at community colleges		The university has articulation agreements with Columbus State Community College, Cuyahoga Community College, Eastern Gateway Community College, Lakeland Community College, Lorain County Community College, and Stark State College, with resources available at each institution to support the transition.		

D17. ACADEMIC PUBLIC HEALTH MASTER'S DEGREES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
Defines specific assessment activity for each of the foundational public health learning objectives (see worksheet for detail)		The college's MS in clinical epidemiology program states that it covers and demonstrates the 12 foundational public health learning objectives through several program courses and varied assessment assignments including essays, homework assignments, online discussions with posts, quizzes, tests, essays, and case evaluations.	10. Explain the social, political and economic determinants of health and how they contribute to population health and health inequities EPI 63018 Observational Designs in Clinical Research EPI 63021 Ethics in Clinical Research and Public Health	The Council reviewed the college's response and concluded that the college has addressed the site visit team's concern related to learning objectives 10 and 11. However, the college did not address the team's concern related to learning objective 4. The Council looks forward to reviewing updated documentation demonstrating compliance with this criterion.
Depth of instruction in 12 learning objectives is equivalent to 3-semester-credit course		The depth of instruction is equivalent to a three-credit course. The self-study identifies eight required courses that provide coverage and assessment opportunities of the material for the 12 learning objectives.	EPI 63018 Observational Designs Module 2: For this discussion post, you should read the STROBE STATEMENT, the Critical Review Guidelines adapted from the STROBE STATEMENT. You should also read and pick one of the articles to discuss in your first post and be ready to respond to either article in the second post.	
Defines competencies for each concentration. Competencies articulate an appropriate depth of knowledge & skill for degree level		The concern relates to the lack of appropriate assessments for foundational learning objectives 4, 10, and 11. For example, the discussion question mapped to learning objective 11 asks students to consider "important ethical issues in international research," but does not directly address how globalization affects global burdens of disease. Reviewers' findings are shown in the D17-1 worksheet.	The Association between Zika virus infection and microcephaly in Brazil, January to May, 2016: preliminary report of a case-control study. Or Long-term hydroxychloroquine use in patients with rheumatic conditions and development of SARS-CoV-2 infection a retrospective study	
Assesses all students at least once on their ability to demonstrate each concentration competency				
Curriculum addresses scientific & analytic approaches to discovery & translation of public health knowledge in the context of a population health framework				
Instruction in scientific & analytic approaches is at least equivalent to a 3-semester-credit course				
Students produce an appropriately rigorous discovery-based paper or project at or near end of program				

<p>Students have opportunities to engage in research at level appropriate to program's objectives</p>		<p>Students are provided with two options to address the discovery paper or project requirement. The first option is a research-based practicum in which a student participates in a research-based study conducted by a faculty member or research organization. Students must participate in activities that are appropriate for their levels of expertise, but which involve them in virtually all aspects of the research process leading to publication of results. The final product can be a journal ready manuscript and/or a formal presentation of the study. These practicum products are presented to the community.</p> <p>The second option is a traditional thesis under the direction of a thesis committee with an advisor and two other committee members. At the completion of the thesis research, there is final examination open to the university and a presentation to the college in person or by videoconference.</p> <p>The ERF presents five examples of practicum projects which have been completed by students. These involve research on chronic conditions in India and Ohio. Each project has appropriate development materials for the project and final products, including a PowerPoint presentation that clearly presents the work.</p> <p>During site visitors' meeting with students, they indicated that research opportunities were available to them. However, they indicated that often students had to be assertive and seek out opportunities. Faculty felt that they provide research opportunities and that these were frequently posed or distributed to students.</p>	<p>Post your answers to the following questions from the STROBE:</p> <p>What was the scientific background and rationale? (In your own words, please)</p> <p>What was the scientific objective(s) or any pre-specified hypothesis?</p> <p>What was the type of study design?</p> <p>MOST IMPORTANTLY: Was the study design appropriate for the specific objective(s) or hypothesis? WHY or WHY not, explain your answer?</p> <p>Dr. Zullo's questions:</p> <p>How you could carry this study out using a study design OTHER than the one used in the article, would you use qualitative or quantitative approaches to address the question? Think about-what design best allows you to answer the question about the relationship between the disease and the outcome (there may be more than one approach - you just need to justify it to me and your classmates)? Depending on the article you picked, these could be very different answers.</p> <p>How does Zika infection and associated short and long-term outcomes vary by country and what are some of the reasons for this variance? Things to consider are the</p>	
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			<p>social and political environments as well as socioeconomic status that may act as drivers of infection and health outcomes.</p> <p>Response: Due Sunday - at minimum respond to TWO different students:</p> <p>What were some of the potential problems with the original design - did your classmate identify them?</p> <p>Is the study that was proposed by the student in question 4 above feasible, ethical, and overall a good choice?</p> <p>Did the proposed design allow a description of the target population?</p> <p>Did the proposed design allow an assessment of the disease and outcome using an appropriate approach?</p> <p>What are the strengths and limitations of the proposed design that was chosen?</p> <p>11. Explain how globalization affects global burdens of disease</p> <p>EPI 63019 Experimental Designs in Clinical Research</p> <p>EPI 63019 Module 12 Essay: There are many articles and op-eds on the web around globalization and development of the COVID-19 vaccines and the impact of COVID-19 on economies and health outcomes. Pick one opinion piece or mainstream</p>	
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			article (eg. https://reason.com/2020/12/04/like-covid-vaccines-thank-globalization/) and one scientific article and discuss the impact of the global efforts to fight COVID-19. You can discuss anything you find interesting as long as you discuss COVID-19 burden from a global perspective.	
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D17-1 Worksheet

Foundational Knowledge	Yes/CNV
1. Explain public health history, philosophy & values	Yes
2. Identify the core functions of public health & the 10 Essential Services	Yes
3. Explain the role of quantitative & qualitative methods & sciences in describing & assessing a population’s health	Yes
4. List major causes & trends of morbidity & mortality in the US or other community relevant to the school or program	CNV
5. Discuss the science of primary, secondary & tertiary prevention in population health, including health promotion, screening, etc.	Yes
6. Explain the critical importance of evidence in advancing public health knowledge	Yes
7. Explain effects of environmental factors on a population’s health	Yes
8. Explain biological & genetic factors that affect a population’s health	Yes
9. Explain behavioral & psychological factors that affect a population’s health	Yes
10. Explain the social, political & economic determinants of health & how they contribute to population health & health inequities	Yes
11. Explain how globalization affects global burdens of disease	Yes
12. Explain an ecological perspective on the connections among human health, animal health & ecosystem health (eg, One Health)	Yes

D17-2 Worksheet

MS Clinical Epidemiology Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
(C8) Design basic quantitative and qualitative research to address public health problems.	Yes	Yes
(C19) Communicate audience-appropriate public health content, both in writing and through oral presentation	Yes	Yes
(C1) Analyze quantitative data using biostatistics, informatics, computer-based programming, and software, as appropriate	Yes	Yes

D18. ACADEMIC PUBLIC HEALTH DOCTORAL DEGREES

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines specific assessment activity for each of the foundational public health learning objectives (see worksheet for detail)		The college states that it ensures coverage and assessment of the 12 foundational learning objectives through four required courses that are taken by all doctoral students. Students also are required to complete four prerequisite courses in biostatistics, epidemiology, environmental health, and health administration.	Foundational Knowledge (D18-1 Worksheet,) learning objectives 7 and 8 are addressed in the Biological Basis of Public Health Course. (EPI 73027 BIOLOGICAL BASIS OF PUBLIC HEALTH 3 Credit Hours). This course integrates the sciences of biology and molecular biology into the principles and practice of public health. Implicit in this course are learning objectives that establish the ecology of infectious disease, the impact of vaccines in disease prevention, and the role of environment on human health and	The Council reviewed college’s response and concluded that the college has addressed the issues identified by the site visit team. Therefore, the Council acted to change the finding of partially met to a finding of met.
Depth of instruction in 12 learning objectives is equivalent to 3-semester-credit course		The concern relates to the absence of assessment for learning objectives 7 and 8. During the site visit, faculty were not able to articulate an assessment opportunity for the two learning objectives. These findings are presented in the D18-1 worksheet.		
Defines competencies for each concentration. Competencies articulate an appropriate depth of knowledge & skill for degree level				
Assesses all students at least once on their ability to demonstrate each concentration competency		The doctoral program does an excellent job of providing unique doctoral-level coursework for its students. All		

Curriculum addresses scientific & analytic approaches to discovery & translation of public health knowledge in the context of a population health framework		doctoral students are required to take four common courses in addition to a series of required courses at the doctoral level unique to each degree program and several doctoral level elective courses.	disease. Additionally, students propose policy, regulations and legislation designed to protect human health within the realm of personalized medicine. These learning objectives are assessed by specific assignments in the course.	
Instruction in scientific & analytic approaches is at least equivalent to a 3-semester-credit course		Each of the degrees has an appropriate number of competencies (five each) that are written with appropriate depth for the doctoral degree, as shown in the D18-2 worksheet.		
Students produce an appropriately advanced research project at or near end of program		The advanced research project for the doctoral programs is the dissertation. A review of the five dissertations in the ERF demonstrated that students could perform all aspects of the research process and produce a product that makes a unique contribution to the literature in an area of public health concern.	1. <u>Written PH strategies</u> means that you will write 3-4 page written strategies to address three current public health issues, as defined by the instructor. Where possible you will report on the biological basis, epidemiological profile, and underlying social, environmental, and behavioral determinants that frame the issue. Your strategy should incorporate these factors and logically define a method to objectively study the issue. What questions will you ask? What type of data will you collect? What type of statistics could/should you use to analyze those data?	
Students have opportunities to engage in research at appropriate level			2. <u>Research proposal</u> means that you will undertake a systematic review of the literature surrounding a public health problem rooted in biology. Once the review is completed, you	
Curriculum includes doctoral-level, advanced coursework that distinguishes program from master's-level study				

			<p>will determine the area of research that would generate data to further assist in the problem's solution, i.e., is missing. You will then propose the question to answer, the data collection method, and the data analysis method. The proposal should reflect considerable thought about the problem and a way to advance knowledge toward a solution. Thus, it is recommended that you choose a topic for approval by week three of the course, so that you can spend several weeks digesting the literature. It is also recommended that you review and summarize a broad group of primary and secondary data to understand the breadth and depth of the problem. Solutions should reflect a logical approach to the problem, based on the current literature integrating. [Note that you are integrating skills from previous assignments to create a polished product.]</p>	
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D18-1 Worksheet

Foundational Knowledge	Yes/CNV
1. Explain public health history, philosophy & values	Yes
2. Identify the core functions of public health & the 10 Essential Services	Yes
3. Explain the role of quantitative & qualitative methods & sciences in describing & assessing a population's health	Yes
4. List major causes & trends of morbidity & mortality in the US or other community relevant to the school or program	Yes
5. Discuss the science of primary, secondary & tertiary prevention in population health, including health promotion, screening, etc.	Yes
6. Explain the critical importance of evidence in advancing public health knowledge	Yes
7. Explain effects of environmental factors on a population's health	Yes
8. Explain biological & genetic factors that affect a population's health	Yes
9. Explain behavioral & psychological factors that affect a population's health	Yes
10. Explain the social, political & economic determinants of health & how they contribute to population health & health inequities	Yes
11. Explain how globalization affects global burdens of disease	Yes
12. Explain an ecological perspective on the connections among human health, animal health & ecosystem health (eg, One Health)	Yes

D18-2 Worksheet

PhD Health Management and Policy Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Evaluate competing policy alternatives and outcomes at the local, state, and national levels.	Yes	Yes
2. Assess the ability of a public health system or organization to respond to a particular need or issue.	Yes	Yes
3. Implement effective management strategies within public health organizations including financial, quality improvement, planning and evaluation strategies.	Yes	Yes
4. Demonstrate mastery of a substantive area and apply this knowledge in conducting original health policy and management research.	Yes	Yes
5. Apply "systems thinking" for resolving organizational problems.	Yes	Yes

PhD Prevention Science Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Integrate the social ecological approach to the study and development of health promotion and disease prevention strategies.	Yes	Yes
2. Plan, develop, implement, evaluate, and sustain evidence-based health promotion and disease prevention interventions.	Yes	Yes
3. Evaluate the role of social determinants in the onset and solution of a health concern.	Yes	Yes
4. Research and recommend effective strategies to prevent a specific public health problem and demonstrate mastery in a substantive area of health promotion or disease prevention.	Yes	Yes
5. Integrate and combine the steps and procedures for planning, developing, implementing, evaluating, and sustaining evidenced-based social and behavioral public health interventions	Yes	Yes

PhD Epidemiology Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Understand the biological, environmental, sociocultural, and behavioral factors in the natural history of disease and their influence on the performance, interpretation, and dissemination of epidemiologic research.	Yes	Yes
2. Critically evaluate epidemiological study designs and advanced methods and select the most appropriate method to address a specific study question.	Yes	Yes
3. Conduct statistical analysis of epidemiologic data from various study designs, including assessing for and managing confounding factors and interaction.	Yes	Yes
4. Demonstrate mastery of a substantive area and apply this knowledge in conducting original epidemiologic research.	Yes	Yes
5. Communicate clearly and effectively in writing and orally ideas, epidemiologic concepts, methods, results, and implications to diverse audiences	Yes	Yes

D19. ALL REMAINING DEGREES

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D20. DISTANCE EDUCATION

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Instructional methods support regular & substantive interaction between & among students & the instructor		<p>The college offers an online option for all BSPH concentrations except for the global health and the pre-professional health concentrations. The college also offers an online option for all MPH concentrations except for the biostatistics concentration. The MS in clinical epidemiology is only offered online. The college offers distance education to meet the needs of working professionals and to allow students to continue working part-time while continuing their education.</p> <p>The college employs a full-time director of online learning and a full-time senior instructional designer, who assists faculty in developing and implementing online courses. These staff also provide support for all online programs and provide faculty professional development training and consultation. The college also receives assistance from the Kent State University Office of Continuing Distance Education instructional design staff to develop and implement online MPH program courses.</p> <p>All online and traditional courses use the same learning material and assessments to evaluate student learning. Most of the faculty who develop online courses also teach on-campus courses. All online faculty go through an online teaching orientation in form of a self-paced moderated weeklong workshop to learn the best practices in online teaching. They also participate in other educational</p>	Click here to enter text.	
Curriculum is guided by clearly articulated learning outcomes that are rigorously evaluated				
Curriculum is subject to the same quality control processes as other degree programs in the university				
Curriculum includes planned & evaluated learning experiences that are responsive to the needs of online learners				
Provides necessary administrative, information technology & student/faculty support services				
Ongoing effort to evaluate academic effectiveness & make program improvements				
Processes in place to confirm student identity & to notify students of privacy rights and of any projected charges associated with identity verification				

		<p>technology training and workshops to learn about Blackboard Learn and other instructional tools.</p> <p>The college's online courses are designed based on the Quality Matters (QM) standards. The college is currently in the process of getting all online MPH and BSPH core courses QM certified (nine MPH courses are already certified).</p> <p>To confirm student identity, all students are required to sign in using a secure password login for all university platforms. The university also provides all faculty with access to proctoring and monitoring tools to conduct secure exams.</p>		
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E1. FACULTY ALIGNMENT WITH DEGREES OFFERED

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Faculty teach & supervise students in areas of knowledge with which they are thoroughly familiar & qualified by the totality of their education & experience		PIF are well qualified based on their education and areas of expertise to teach and supervise students at all degree levels. The PIF includes 12 associate professors, seven professors, three assistant professors, and one lecturer. Of these faculty, 16 are tenure-track (13 tenured). Of the 23 PIF, 20 hold doctoral or terminal degrees, with 18 holding a PhD degree, one JD degree, and one MD degree. In addition, these faculty hold many master's degrees, including six faculty with the MPH degree.	Click here to enter text.	
Faculty education & experience is appropriate for the degree level (eg, bachelor's, master's) & nature of program (eg, research, practice)		The 46 non-PIF are primarily adjunct instructors (28) and graduate assistants (13) with others listed as professor, adjunct, lecturer, and non-tenure track instructor (one		

		<p>each). Of the non-PIF, all but four are 0.25 FTE faculty members. The four individuals teaching at 0.125 FTE are the dean, associate dean, assistant dean, and a lecturer. All but six of the non-PIF teach in areas that are consistent with their educational training. A review of the non-PIF CVs indicates substantial professional experience outside of the college.</p> <p>During site visitors' meeting with students, students expressed consistent praise for the faculty teaching at each degree level in the college. They were especially pleased that faculty had not only strong formal academic backgrounds, but also practical experience that made theories and concepts more relevant to public health issues and problems.</p>		
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E2. INTEGRATION OF FACULTY WITH PRACTICE EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Employs faculty who have professional experience in settings outside of academia & have demonstrated competence in public health practice		<p>The college employs full-time and part-time faculty with extensive practice experience and ongoing and current linkages. One full-time faculty member serves as chair of the Kent City Board of Health. Other primary faculty have career experience as a section chief at the U.S. Environmental Protection Agency and as a scientist in the American Medical Association's Institute for Ethics. Other primary faculty maintain consulting relationships with health departments and serve on councils and consortia involved in state and local health initiatives, as discussed in Criterion E5.</p>	Click here to enter text.	
Encourages faculty to maintain ongoing practice links with public health agencies, especially at state & local levels				
Regularly involves practitioners in instruction through variety of methods & types of affiliation				

		<p>Part-time faculty include three current or retired county health commissioners, executives from hospitals and nursing homes, and individuals with leadership experience in state and local tobacco control and air pollution control programs.</p> <p>This depth of professional experience, combined with ongoing faculty linkages to the practice community as described in Criterion E5, ensure that students are exposed to a range of public health practice perspectives.</p>		
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E3. FACULTY INSTRUCTIONAL EFFECTIVENESS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Systems in place to document that all faculty are current in areas of instructional responsibility		<p>The self-study describes a process for faculty to document work completed in the area of teaching, including courses taught, curricular innovations and student and peer reviews. The self-study lists several resources for faculty training, such as the Center for Teaching and Learning and the Quality Matters Consortium. Faculty also have access to 'improvement leaves' that provide time and space to work on teaching. During the site visit, several faculty members discussed the opportunities that they have engaged in to support their teaching. There was also high praise for the addition of instructional technologists within the college to assist with transforming in-person course to online courses. The faculty stated that the college was responsive to their needs with the pandemic.</p>	Click here to enter text.	
Systems in place to document that all faculty are current in pedagogical methods				
Establishes & consistently applies procedures for evaluating faculty competence & performance in instruction				
Supports professional development & advancement in instructional effectiveness for all faculty				

		<p>The college has a system of conducting routine evaluations of instructional effectiveness for all faculty, including both tenure-track and non-tenure track. Students complete course evaluations at the end of the semester and the feedback is available to faculty three weeks later. In addition to course evaluations, the college also relies on peer evaluations and student exit surveys to assess teaching quality. Faculty also discussed the availability of teaching awards and other recognition of teaching excellence. The self-study provides four metrics for ongoing evaluation of faculty instructional quality: the student course feedback at the end of each semester (flash survey), the review of faculty productivity, relation of scholarship to instruction, graduate faculty status and Quality Matters online course training.</p> <p>Faculty members stated that they felt the evaluation process was fair and thorough. One faculty member compared instructional evaluation to a previous institution and felt that it was more comprehensive and transparent at Kent State.</p>		
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E4. FACULTY SCHOLARSHIP

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Policies & practices in place to support faculty involvement in scholarly activities		The college's expectation is that all tenure-track faculty will participate in research activity, resulting in distinction for their work and a national reputation in their field.	Click here to enter text.	
Faculty are involved in research & scholarly activity, whether funded or unfunded		These faculty are also expected to produce a record of scholarship in their disciplinary focus to support their teaching and service. These expectations are consistent		

Type & extent of faculty research aligns with mission & types of degrees offered		with the college's mission, which includes conducting impactful research to address public health challenges. The college's stated goal is to engage in rigorous research that can translate into sustainable public health solutions.		
Faculty integrate their own experiences with scholarly activities into instructional activities		Faculty are expected to seek support for their scholarly activity both internally and externally, consistent with the opportunities that are available to their disciplines. Internally, the university supports research through the University Research Council's awards program and research institutes and initiatives. There are five mechanisms: creative scholarships, new researcher funding, proposal enhancement grants, conference support, and international travel grants. The college also provides support for travel to conferences, for research exploration, and to advance new collaborations.		
Students have opportunities for involvement in faculty research & scholarly activities		<p>One faculty member conducts nationally recognized research on infectious diseases and vaccines. Her research extends to the impact of infectious diseases on the development of cultures and societies throughout history. From this work she has created an undergraduate course, PH 22001 Plagues and Pandemics: How Infection Shaped Culture and History. The course content extends from the Justinian plague to the current pandemic, providing an opportunity for students to develop an understanding of the epidemiology of infectious diseases.</p> <p>Another faculty member has recently explored the Pathways HUB model for providing social and medical services in community settings, emphasizing its design and links to the social determinants of health. Also, in her course on the US healthcare system, she has students read her recent Health Affairs article highlighting the</p>		

		<p>Pathways HUB model and its relevance for understanding social determinants. She has also included her work on the expansion of Medicaid in the ACA in her course HPM 53012 Health Reform.</p> <p>Another faculty member provides students with opportunities to improve their research skills in data management and analysis, health communication, and program development, implementation, and evaluation. The involvement of students is voluntary and through paid positions that are supported by a SAMHSA grant.</p> <p>The self-study provides information on three indicators of faculty research activity. These include the percent of primary faculty participating in research activities each year, the number of proposals submitted for external funding, and the amount of externally grant/contract funds awarded. In each case the college has shown progress, reaching the target by the second year for the first two measures and by the third year for all measures.</p>		
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E5. FACULTY EXTRAMURAL SERVICE

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines expectations for faculty extramural service		College faculty are actively engaged in applying knowledge through a range of service opportunities, including both funded and unfunded activities. College policies and procedures, including requirements for tenure and promotion, explicitly encourage service and ensure that faculty maintain linkages to professional and community activities. The Faculty Handbook explicitly	Click here to enter text.	
Faculty are actively engaged with the community through communication, consultation, provision of technical assistance & other means				

		<p>addresses public service, public outreach, and professional service as factors that may be considered in reappointment, promotion, and tenure decisions and encourages public service. The Faculty Handbook outlines policies through which faculty members may request teaching release time for significant service activities, just as they may for research or scholarly activities, and provides the following examples: “service on an Advisory Board for a community-based or health service organization, serving on an Editorial Board..., or providing consultation to a CEO, Mayor, Commissioner, or another high-ranking leader or a government or private sector organization.”</p> <p>Faculty play key leadership roles in activities including community health assessments and providing input into policy making. One faculty member has a federally funded grant to provide mental health first aid training to individuals at Kent State and in K-12 schools in a local county. On the Kent State campus, this initiative will train over 700 students, faculty, and staff to recognize signs of mental illness and identify available resources. A group of college faculty, staff, and students have engaged in grant and contract work to support the Pathways Community HUB, a model that brings together community health workers, families, and social and medical service providers. This work has involved three local counties and a partnership with Akron Children’s Hospital to establish a Risk Reduction Research Network.</p> <p>The college dean is a board member at the Cleveland Clinic and has been able to link students to a variety of service opportunities through this connection, including analyzing needs assessment surveys, providing health</p>		
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		<p>education at health fairs, and volunteering to provide walk-in registration at local sites. The college's associate dean is a member of the APHA Executive Board and has actively engaged students in APHA activities, including work on APHA's strategic plan communication efforts.</p> <p>A college faculty member coordinates the Walls Community Garden and teaches the community-based public health practice class that created the garden. This project won the university's 2018 Outstanding New Service Award.</p> <p>Finally, over 100 college faculty, staff, and students have been engaged in the COVID-19 Public Health Assist program. Students have engaged in assisting with COVID-19 testing efforts and many have been trained as contact tracers. During the site visit, faculty talked about their extensive outreach into community organizations needing consultation and technical assistance during the pandemic.</p>		
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F1. COMMUNITY INVOLVEMENT IN SCHOOL/PROGRAM EVALUATION & ASSESSMENT

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Engages with community stakeholders, alumni, employers & other relevant community partners. Does not exclusively use data from supervisors of student practice experiences		The college engages external stakeholders primarily through the External Advisory Committee (EAC), which includes local government officials, directors of hospitals, healthcare systems, and non-profit organizations, and representatives from neighboring universities. The EAC has three subcommittees focusing on curricular review,	Click here to enter text.	

Ensures that constituents provide regular feedback on all of these:		<p>advancement and external relations, and workforce development. The EAC meets twice annually, and the subcommittees meet quarterly or as needed.</p> <p>The college also solicits input and feedback from other community partners, including the public health ambassadors (discussed in Criterion H2) and the College of Public Health Alumni Group.</p>		
Defines methods designed to provide useful information & regularly examines methods				
Regularly reviews findings from constituent feedback		<p>The college's revised strategic plan, which includes the guiding statements and evaluation measures, was shared with the EAC, the alumni group, adjunct faculty, and other colleges for review and comment. In concert with the university's strategic plan, the college publishes a strategy map annually on its website outlining the college's plans and major initiatives for the year. The EAC recently reviewed the strategy map during the October 2020 meeting to ensure relevancy and currency, considering changes due to COVID-19.</p> <p>During the development of the preliminary and final self-study documents, the college posted drafts of the self-studies to its website and sent them to the EAC for their feedback.</p> <p>During the site visit, several stakeholders shared their involvement in the college's evaluation process. For example, members of the EAC shared that they analyzed results of the alumni survey and appreciated the college's commitment to having a strong feedback loop. Employers of the college's graduates shared very positive experiences with their hires. Employers also noted that grant writing is one potential area of improvement for students.</p>		

F2. STUDENT INVOLVEMENT IN COMMUNITY & PROFESSIONAL SERVICE

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Makes community & professional service opportunities available to all students		The college has an array of methods to provide students with community and professional service opportunities. The PHSA, discussed in Criterion A3, engages over 100 students at its monthly meetings and has sponsored service activities including participation in the Greater Akron Heart Walk, Relay for Life, local food bank distribution efforts, and hospital health fairs and screenings. The PHSA is also active in career and professional development activities, including networking events and bringing guest speakers to campus.		
Opportunities expose students to contexts in which public health work is performed outside of an academic setting &/or the importance of learning & contributing to professional advancement of the field		<p>As noted in Criterion E5, students are actively engaged in faculty members’ service work. Doctoral, master’s, and undergraduate students have attended and presented at professional meetings. During the site visit, faculty offered examples of students engaging in research that was published in peer reviewed journals and presented at professional meetings. A group of MPH students chose to center their class project on sponsoring a symposium on infant and mother mortality in Ohio. They engaged other groups on campus, including the Women’s Center, and worked closely with a faculty member to plan and implement the event.</p> <p>The college introduces service, community engagement, and professional development opportunities at all student orientation events.</p>		

F3. ASSESSMENT OF THE COMMUNITY'S PROFESSIONAL DEVELOPMENT NEEDS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines a professional community or communities of interest & the rationale for this choice		<p>The college defines its professional communities of interest as local health departments, local boards of health, substance abuse prevention providers, behavioral health providers, and municipal clerks. The college's rationale for local health departments and boards is that these professionals are the essential employers of their graduates and the college has a focus on supporting and collaborating with the public health practice community. The college's rationale for serving substance abuse prevention and behavioral health providers is that the college has several faculty members with expertise in these areas. Additionally, the MPH in social and behavioral sciences and the PhD in prevention science are designed to equip practitioners in these fields. The rationale for serving municipal clerks is that they play essential roles in local communities across Ohio, including supporting health services in their respective communities.</p> <p>The college assesses the professional development needs of its communities of interest in three ways:</p> <ol style="list-style-type: none"> 1. In 2020, the Region V Public Health Training Center at the University of Michigan conducted a comprehensive workforce development needs assessment of local health departments in its six-state region. The college obtained Ohio-specific data from the RVPHTC that identified training gaps in nine skill domains. The top five training needs were budgeting, change management, cultural 	Click here to enter text.	
Periodically assesses the professional development needs of individuals in priority community or communities				

		<p>competency, systems, strategic thinking, and Ohio decision-making data. The faculty are currently developing training modules to address these needs.</p> <ol style="list-style-type: none">2. The college faculty conducted a professional development needs assessment of substance abuse providers in Ohio in 2019. The survey results identified training needs in evidence-based interventions, community implementation systems, monitoring and evaluation, community needs, and resource assessment.3. The college's Center for Public Policy and Health (CPPH) receives training needs from the Ohio Municipal Clerks Association (OMCA) each year. Each year, the CPPH organizes a series of professional development workshops for the OMCA. <p>During the site visit, the faculty explained the role and function of the college's Office of Public Health Practice (OPHP), which was established in 2013 to build connections with the professional community and create opportunities for students to be involved. The office reaches out to the individuals in the college's communities of interest and holds key informant interviews over the phone to survey their workforce development needs. The OPHP staff work with faculty and doctoral students to evaluate the data and design modules for trainings and workshops.</p>		
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F4. DELIVERY OF PROFESSIONAL DEVELOPMENT OPPORTUNITIES FOR THE WORKFORCE

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Provides activities that address professional development needs & are based on assessment results described in Criterion F3		<p>As a result of the 2019 needs assessment conducted by the college with substance abuse providers, the college held two workshops in 2019 to train substance abuse prevention providers in prevention science's basic principles. A total of 50 Ohio-based prevention specialists were trained. The training covered the following topics:</p> <ul style="list-style-type: none">• Evidence-based interventions and their practical components• Community Implementation systems• Monitoring and evaluation• Community needs and resource assessment <p>The CPPH has also conducted ongoing trainings in mental health first aid since 2019. A total of 1,351 individuals have received the training, including 837 professionals, community members, and 514 Kent State students. Trainees are taught a five-part action plan to help others cope with mental health problems.</p> <p>During the site visit, faculty also shared several other professional development opportunities that have been delivered to the workforce. Faculty and students also shared their collaboration to utilize the social media skills of students to disseminate literature and information related to mental health awareness trainings to the state of Ohio.</p>	Click here to enter text.	

G1. DIVERSITY & CULTURAL COMPETENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
Defines appropriate priority population(s)		<p>Diversity and cultural competence activities are led at Kent State by the university, with each unit developing its own activities in addition to the university-led initiatives. This approach is represented in the Equity Action Plan developed by the university. In this plan, the emphasis is on underrepresented students, specifically African Americans, Latino Americans, and Native Americans. The college also focuses on students who are eligible for Pell Grants and first-generation college students. The primary focus for the university and college plans is on students, but the self-study notes that the college is attempting to increase the diversity of its faculty. The self-study indicates, however, that the university has had a hiring freeze for the past three years, which is likely to continue with the spread of COVID-19.</p> <p>The college has clearly stated goals and strategies for increasing the diversity of the student population. Although the goals are stated at the college level and the strategies at the university level, they are appropriately aligned to be successful. The colleges goals are to 1) increase the under-represented BSPH freshmen retention rate to be equal or exceed the non-under-represented rate, 2) enroll an equal or greater percentage of under-represented</p>	<p>During the spring semester of 2021, 4% of full-time faculty and 13% of part-time faculty are underrepresented faculty (as defined by African American, Latino American or Native American). There is no current "goal" for underrepresented faculty, although the College Advisory Committee participates in the University's initiatives to increase the diversity of faculty on campus. Ideally, the representation within the faculty would be comparable to the representation of diversity within the students at Kent State University. Currently, there are 16% underrepresented students in the undergraduate population and 11% in the graduate population. In order to achieve these rates, the College would need to add three full time faculty who meet the diversity criteria.</p> <p>Our efforts have been challenging with a hiring freeze from 2018-2020. Since the time of the self-study, the University President's Office has initiated funding for diversity hires. The College of Public Health has received funding from the President to add one full time position that will be supported with central funding for three years. At the time of this response, we are searching for this hire. It is anticipated that this</p>	<p>The Council appreciates the college's response and looks forward to reviewing updated documentation demonstrating compliance with this criterion.</p>
Identifies goals to advance diversity & cultural competence, as well as strategies to achieve goals				
Learning environment prepares students with broad competencies regarding diversity & cultural competence				
Identifies strategies and actions that create and maintain a culturally competent environment				
Practices support recruitment, retention, promotion of faculty (and staff, if applicable), with attention to priority population(s)				
Practices support recruitment, retention, graduation of diverse students, with attention to priority population(s)				
Regularly collects & reviews quantitative & qualitative data & uses data to inform & adjust strategies				

<p>Perceptions of climate regarding diversity & cultural competence are positive</p>		<p>undergraduate and graduate students than non-under-represented students, and 3) to reduce the percentage of all undergraduate and graduate students leaving the university, specifically based on their sense of belonging, as reflected in the next university climate survey.</p> <p>To achieve these goals the college focuses on two broad university strategies. The first strategy is to enhance and expand student success programs to improve retention and graduation. Actions in this strategy include revising the first-year experience course and implementing a Student Success Course in the spring. The second strategy is to enhance student engagement through increased participation in high-impact experiences. Actions related to this strategy include encouraging under-represented undergraduate students to participate in internships, creating funds for under-represented students to study abroad, and encouraging women- and minority-owned businesses to participate in CPH career fairs.</p> <p>The college does not have any goals or strategies and actions for improving faculty diversity.</p> <p>The college has two primary strategies and related actions to improve the cultural competence of students in the college. The first action was the creation of a diversity symposium, presented annually as a full-day workshop. The initial workshop was attended by 100 students and faculty. The second was the development of required and elective courses for all students that focus on cultural</p>	<p>position will be filled for a fall, 2021 start. The College has also experienced enrollment growth enabling the search for a full time Biostatistics professor and that search is in process now. We have consulted the ASA Directory of Minority Statisticians and advertised the position in the Blacks in Higher Education publications and website. We are also contacting other CEPH-accredited colleges to encourage minority doctoral students who will graduate in May 2021. Finally, we are searching for a retirement replacement in our Office of Public Health Practice. We are seeking minority candidates for this position who have considerable experience working in minority communities and school systems. At Kent State, searches must adhere to Affirmative Action plans:</p> <p>https://www.kent.edu/policyreg/administrative-policy-and-plan-regarding-affirmative-action</p> <p>This process requires that search pools have diversity and that those participating in search committees have diversity training. The College has a Diversity Committee comprised of faculty, staff and students who also work to recruit diverse candidates to our College.</p>	
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		<p>competence. These courses now include PH 42014 Public Health and Mass Incarceration, PH 44000 Health Disparities, and SBS 54634 Social Determinants of Health Behaviors. A special topics course is also offered, Racism as a Public Health Crises, which is open to all students.</p> <p>Based on the 2017 university Climate Survey results, the college has a broad picture of student perceptions of the college climate. All students were asked if they ever seriously considered leaving the university. Twenty five percent of undergraduate students said that they had, as did 13% of graduate students. The college considered these as significant and troubling results. Of the students who said “yes,” the survey inquired as to why they considered leaving. The most frequent reasons, in order, were lacking a sense of belonging, financial reasons, the campus climate was not welcoming, and lack of a support group.</p> <p>The college has taken several actions based on these results. The college has intensified its commitment to the College Diversity Committee. It has worked with the university’s financial aid staff to increase the university’s commitment to scholarships and created an emergency fund related to COVID issues. Moreover, the college annually contributes to a diversity scholarship fund. In addition, the college has appointed a diversity officer to focus on programs to increase students’ sense of belonging. The college administration also participates in university retreats and diversity training workshops.</p>		
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		<p>To evaluate the results of the college’s strategies and actions, the college is tracking nine metrics. The freshman URS (under-represented students) retention rate remained close to 90% for AY 2018 through AY 2020. This rate was consistently higher than the non-URS rate. The BSPH overall graduation rate ranged from 61% to 65% over the three AYs while the URS rate had two years at 65% and a low year at 54%. The non-URS rate was similar to the URS rate. Undergraduate URS enrollment in the college was consistently higher than that of the university. In addition, the percentage of bachelor’s degrees awarded to URS students was consistently higher than in the university, as was true also for master’s degrees. Finally, the college had graduate URS enrollment that exceeds the university’s enrollment of URS students.</p> <p>The concern is that the college does not provide any assessment of faculty diversity or what its goals are to address concerns in this population group. During the site visit, faculty and staff shared that faculty diversity is an area that has room for improvement, and although they do not currently have plans to address this concern, they acknowledge its need for attention. The faculty also attributed the limited faculty diversity to the current hiring freeze.</p>		
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H1. ACADEMIC ADVISING

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students have ready access to advisors from the time of enrollment		The college provides comprehensive individualized advising services to students in all degree programs.	Click here to enter text.	
Advisors are actively engaged & knowledgeable about the curricula & about specific courses & programs of study		A team of two full-time staff members, one part-time staff member, the assistant dean, and two graduate assistants advise undergraduate students. Each staff member works with specific groups of students or undergraduate concentrations: for example, one advisor serves all deferred nursing students and adult/online students, and the assistant dean advises all students in the global health concentration and the combined bachelor's/master's program. The two full-time advisors have loads of approximately 250-270 students; the part-time advisor serves approximately 125 students; and the assistant dean serves approximately 60 students. The graduate assistants provide support to all advising functions. Advising ratios fall below the university's recommended limit of 300 students per advisor. The university's advising office provides training to undergraduate advisors, as does the college.		
Qualified individuals monitor student progress & identify and support those who may experience difficulty				
Orientation, including written guidance, is provided to all entering students		Faculty members advise graduate students. During the site visit, faculty explained that students are assigned by the program coordinators based on the professional statement submitted with their applications. Students are expected to meet with advisors at least annually. The university has an online advising and tracking system that allows students and advisees to view the student's degree		

		<p>plan and progress; the system flags potential issues and allows students and advisors to conduct an “audit” against graduation requirements with a single click, along with other functions.</p> <p>The college collects information on student satisfaction with advising through surveys. The self-study indicates high levels of satisfaction with advising. Eighty-nine percent of undergraduate students (142 respondents) rated advising as good or excellent in the most recent data. MS and PhD satisfaction data are based on very small numbers of respondents (three to nine) each year but reflect positive perceptions. Seventy-eight percent of MPH students (49 respondents) rated advising as good or excellent in the most recent year, with 12% rating it as fair, 4% as poor, and 6% as unsure. The survey also collects qualitative data, which praised advisors’ responsiveness and helpfulness. Students who reported negative perceptions reported frustration with changes in the person serving as the assigned advisor and lack of information or misinformation; for example, one undergraduate student sought greater familiarity with medical school admissions in advisors and better coordination with the College of Arts and Sciences.</p> <p>During the site visit, all the undergraduate students said that they were very satisfied with academic advising. MPH students who met with site visitors presented a mixed picture, with some students expressing complete satisfaction, while others expressed frustration. One student said that her advisor recently retired, and she was not notified, hearing of the retirement through another student. During the site visit, faculty were surprised to</p>		
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		learn that this student had not been quickly reassigned to another advisor and notified of the reassignment.		
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H2. CAREER ADVISING

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students have access to qualified advisors who are actively engaged & knowledgeable about the workforce & can provide career placement advice		The college provides structured career advising to undergraduate students through the curriculum and provides an array of extracurricular career advising services to undergraduate and graduate students.	Click here to enter text.	
Variety of resources & services are available to current students		One of the college’s most significant career advising resources is its career ambassadors program. The college has engaged three retired public health and health care executives to serve as dedicated mentors to college students. The ambassadors draw on their professional networks to make connections for students and to provide advice. During the two years prior to the site visit, the ambassadors conducted 171 and 137 scheduled appointments. The self-study notes that ambassadors also interact with students to provide advice and consultation outside of scheduled appointments. The current year’s activities were impacted by COVID-19, but the ambassadors adjusted methods and began hosting topical sessions that students could attend remotely. Recent events addressed opportunities for service during the pandemic and a general question and answer session on job opportunities. Ambassadors also began hosting small group discussions for four or five students on career strategies.		
Variety of resources & services are available to alumni				

		<p>The ambassadors also organize an annual Public Health Career Day that brings together students and employers. The event typically draws more than 100 students and alumni, and the most recent event (in fall 2019) included 35 potential employers.</p> <p>All college students have access to the university's Career Exploration and Development Center, which provides a wide range of resources. Faculty, staff, and ambassadors distribute information about job and internship opportunities on the college listserv, social media, and physical bulletin boards.</p> <p>Finally, undergraduate students complete a series of three, one-credit professional practice courses. These courses involve self-assessment, resume and LinkedIn profile creation, practice delivering an elevator speech, development of a personal and professional development plan, and introduction to job search strategies, among other topics.</p> <p>Graduate students' career advising draws on the college resources mentioned above, as well as on the PHSA, discussed in Criteria A3 and F2. Faculty advisors are also a primary resource for graduate student career advising.</p> <p>Surveys track student satisfaction with career advising and present favorable impressions. One exception to this trend exists in the 2019-2020 data for MPH students. Of the 49 survey respondents, only 40% rated career advising as good or excellent; 40% rated it as fair or poor; and 20% were unsure. During the site visit, faculty expressed their concern with the survey results, noting their efforts with engaging public health ambassadors and integrating</p>		
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		career development into the curricula. One faculty member said that students might have unrealistic expectations, desiring more direct job placement, rather than career advising. The faculty plan to implement a virtual career academy in the next academic year.		
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H3. STUDENT COMPLAINT PROCEDURES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defined set of policies & procedures govern formal student complaints & grievances		<p>Complaints are governed by a university-wide policy that is posted to the university website, and there were also references to the policy in the student-facing documents provided in the electronic resource file.</p> <p>The college has a standing grievance committee called the Student Academic Complaint Committee. During the site visit, students indicated that they were aware of the ways in which to raise concerns. There are also opportunities for students to be engaged in the grievance process; a graduate student is engaged if there is a graduate student issue and an undergraduate student is involved if it is an undergraduate student issue. The College Advisory Committee appoints students to the committee.</p> <p>The self-study outlines the process by which the student initiates a formal complaint, and it was clear that there was a process for designating administrators to review and resolve complaints.</p> <p>The self-study notes that there were no complaints during the past three years.</p>	Click here to enter text.	
Procedures are clearly articulated & communicated to students				
Depending on the nature & level of each complaint, students are encouraged to voice concerns to unit officials or other appropriate personnel				
Designated administrators are charged with reviewing & resolving formal complaints				
All complaints are processed & documented				

H4. STUDENT RECRUITMENT & ADMISSIONS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Implements recruitment policies designed to locate qualified individuals capable of taking advantage of program of study & developing competence for public health careers		The self-study documents policies and procedures for recruiting students to the programs. The college's BSPH recruitment efforts focus on students on campus who have not yet identified a major and under-represented students. For graduate-level recruitment, the college does marketing and outreach to community organizations that have a mission to address health disparities. The recruitment of graduate students is a coordinated effort between the college and the university's Division of Graduate Studies. The college manages the event participation, marketing campaigns, and communication plans.	Click here to enter text.	The Council reviewed the self-study and team's report. Based on the totality of the evidence, the Council concludes that the college has demonstrated compliance with this criterion. Therefore, the Council acted to change the team's finding of met with commentary to a finding of met.
Implements admissions policies designed to select & enroll qualified individuals capable of taking advantage of program of study & developing competence for public health careers		The college adheres to the university's graduate and undergraduate admissions policies and procedures. For general admission for freshman, students must have graduated with at least 16 units of the recommended college preparatory curriculum in high school, achieved a cumulative high school grade point average of 2.5 or higher (on a 4.0 scale) and have a composite ACT score is 21 or better. The college has rolling admissions for the MPH and MS programs and admit students in fall, spring, and summer. Applicants must have an earned bachelor's degree from a regionally accredited college/university with a minimum undergraduate GPA of 3.0. Applicants must provide an official transcript(s), a goal statement, three letters of recommendation, TOEFL score (if		

		<p>applicable), and an acceptable GRE score or other standardized graduate-level admission exams (GMAT, MCAT, LSAT, PCAT, or MAT). The college waives standardized test requirements, in rare circumstances, where an applicant has extensive practice experience, as determined by department chairs. Students applying to the doctoral program must have earned a master's degree from an accredited college/university in a related discipline with a minimum graduate GPA of 3.0, acceptable GRE score, or other standardized graduate-level admission exams with a quantitative component (GMAT, MCAT, LSAT, PCAT, or MAT), a personal statement, and a resume, three letters of recommendation, a TOEFL score (if applicable) and participate in a required interview with faculty. The standardized test requirement may be waived, as determined by the academic department faculty.</p> <p>For the BSPH, the program has not met its self-defined target for ACT or SAT for the last two years; during the site visit, the faculty indicated that standardized testing may be waived or optional in the future, so they were less concerned with these numbers. The same logic applies to the fact that the college has not met its self-defined GRE targets for graduate students. Faculty who met with site visitors noted that they are considering what other metrics may be used to evaluate student qualifications if GREs are made optional.</p> <p>The commentary relates to the college's limited role in recruitment. While it is typical for central units within the university to lead recruitment activities, it may benefit the college to have its faculty and staff more involved.</p>		
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H5. PUBLICATION OF EDUCATIONAL OFFERINGS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Catalogs & bulletins used to describe educational offerings are publicly available		The college maintains centralized web resources that clearly present the academic calendar, admissions policies, grading policies, academic integrity standards, and degree completion requirements. All recruitment and promotional materials provided to reviewers reflect current and accurate information.	Click here to enter text.	
Catalogs & bulletins accurately describe the academic calendar, admissions policies, grading policies, academic integrity standards & degree completion requirements				
Advertising, promotional & recruitment materials contain accurate information				

AGENDA

Council on Education for Public Health Virtual Site Visit Agenda Kent State University College of Public Health

Wednesday, December 2 (first day of visit)

8:45 am ET Site Visit Team Executive Session 2	
9:15 am ET Guiding Statements and Evaluation	
Participants	Topics on which participants are prepared to answer team questions
Sonia Alemagno, PhD, Dean Jeff Hallam, PhD, FRSPH, Associate Dean Jennifer Miller, M.Ed., M.B.A, Assistant Dean Brent Christman, M.B.A, College Finance Director Jonathan VanGeest, PhD, Grad. Coord., FASBAC Matthew Stefanak, MPH, IPE, Workforce Dev. Ken Slenkovich, MA, Online MPH, Workforce Development	<i>Guiding statements – process of development and review?</i>
	<i>Evaluation processes – how does school collect and use input/data?</i>
	<i>Resources (personnel, physical, IT) – who determines sufficiency?</i>
	<i>Acts when additional resources are needed?</i>
Budget – who develops and makes decisions?	
Total participants: 7	
10:30 am ET Break Site Visit Team Online Meeting Room	
11:00 am ET Curriculum 1- MPH	
Participants	Topics on which participants are prepared to answer team questions
Jeff Hallam, PhD, FRSPH, Professor, Associate Dean, Graduate Studies and Research	<i>Foundational knowledge</i>
	<i>Foundational competencies – didactic coverage and assessment</i>

Melissa Zullo, PhD, Associate Professor, Faculty Graduate Coordinator: MS CEPI, MPH, EPI and BST and PhD, EPI Jonathan VanGeest, PhD, Professor, Faculty Graduate Coordinator, HPM - MPH and PhD Eric Jefferis, PhD, Professor, Graduate Coordinator, SBS MPH and Prevention Science PhD Tom Brewer, PhD, Associate Professor, Faculty Graduate Coordinator- MPH/DPM Lynette Phillips, PhD, Assoc. Professor, EPI and BST Laurel Tomi, MPH, Practicum Coordinator	<i>Concentration competencies – development, didactic coverage, and assessment</i>
Total participants: 6	

12:15 pm ET Break

1:00 pm ET Students	
Participants	Topics on which participants are prepared to answer team questions
Jordan Smith, BSPH Olivia (Liv) Robbins, PHSA, BSPH Sydney Evans, UG Senator, BSPH Jeffrey Bearden, MS-Clinical EPI Monica Snyder Braun, MS-Clinical EPI April Ruther, Prevention Science PhD Bria Oden, MPH (MPH, EPI Alumnus August 2020) Jessica Mulvany, MPH Biostatistics, Doctoral Candidate EPI Joud Rafael, Graduate Student Senator, HPM PhD Andrew Snyder, HPM PhD Chelsey Kirkland, Prevention Science PhD Anthony Coetzer-Liversage, Delta Omega, Prevention Science PhD	<i>Student engagement in school operations Curriculum (competencies, APE, ILE, etc.) Resources (physical, faculty/staff, IT) Involvement in scholarship and service Academic and career advising Diversity and cultural competence Complaint procedures</i>
Total participants: 12	

2:00 pm ET
Break
Site Visit Team Online Meeting Room

2:15 pm ET Curriculum 2- PHD, MS Clinical Epidemiology, Combined degrees	
Participants	Topics on which participants are prepared to answer team questions
Jeff Hallam, PhD, FRSPH, Professor, Associate Dean, Graduate Studies and Research Melissa Zullo, PhD, Associate Professor, Faculty Graduate Coordinator: MS CEPI, MPH EPI and BST and PhD EPI Jonathan VanGeest, PhD, Professor, Faculty Graduate Coordinator, HPM - MPH and PhD Eric Jefferis, PhD, Professor, Graduate Coordinator, SBS MPH and Prevention Science PhD Tom Brewer, PhD, Associate Professor, Faculty Graduate Coordinator - MPH/DPM Jennifer Miller, M.ED., Assistant Dean, Combined BSPH/MPH Madhav Bhatta, PhD, Associate Professor, EPI Lynette Phillips, PhD, Assoc. Professor, EPI & BST Vinay Cheruvu, PhD, Professor, BST Sasi Benzigar, PhD, Instructional Design	<i>Concentration competencies – development, didactic coverage, and assessment</i>
	<i>Applied practice experiences</i>
	<i>Integrative learning experiences</i>
	<i>Public health bachelor's degrees</i>
	<i>Academic public health degrees</i>
	<i>Distance education</i>
Total participants: 10	

3:30 pm ET
Site Visit Team Executive Session 3

4:30 pm ET **Adjourn**

Thursday, December 3

9:15 am ET	
Curriculum 3- BSPH	
Participants	Topics on which participants are prepared to answer team questions
Sonia Alemagno, PhD, Dean Jennifer Miller, MEd, Assistant Dean Ken Zakariasen, PhD, DDS, Professor Tina Bhargava, DrPH, Associate Professor Abbey Eng, PhD, Associate Professor Melissa Zullo, PhD, Associate Professor Bethany Lanese, PhD, Assistant Professor William (Bill) Franks, MPH, PH Ambassador Robert Howard, MA, PH Ambassador Cindy Widuck, MA, Senior Lecturer Jamie Rhoads, MEd, Senior Instructional Designer	Concentration competencies – development, didactic coverage, and assessment
	Applied practice experiences
	Integrative learning experiences
	Public health bachelor’s degrees
	Academic public health degrees
	Non-public health degrees
	Distance education
Total participants: 11	

10:30 am ET Break Site Visit Team Online Meeting Room

10:45 am ET Instructional Effectiveness	
Participants	Topics on which participants are prepared to answer team questions
Jeff Hallam, PhD, FRSPH Tom Brewer, PhD, HPM John Hoornbeek, PhD, HPM Deric Kenne, PhD, HPM Peter Leahy, PhD, HPM Mary Step, PhD, SBS Sheryl Chatfield, PhD, SBS	<i>Currency in areas of instruction & pedagogical methods</i>
	<i>Scholarship and integration in instruction</i>
	<i>Extramural service and integration in instruction</i>
	<i>Integration of practice perspectives</i>
	<i>Professional development of community</i>

Kristina Knight, PhD, SBS Heather Beaird, PhD, EPI/BST Tara Smith, PhD, EPI/BST Melissa Zullo, PhD, MPH, EPI/BST Jamie Rhoads, MEd, Senior Instructional Designer	
Total participants: 12	

11:45am ET Site Visit Team Lunch

12:30 pm ET Stakeholder Feedback/Input	
Participants	Topics on which participants are prepared to answer team questions
Shelby Barnes, Alumni Association (BSPH Alumnus) Bill Benoit, MOT, MBA, FACHE President, University Hospitals Alec Boros, PhD, Research Manager, Oriana House Michael Dolan, PhD, Senior VP, GOJO Industries, Inc. Darcy Folzenlogen, MD, MPH, Retired physician, (MPH Alumnus) Iris Harvey, MBA, Eds, CEO, Planned Parenthood of Greater Ohio Jennifer King, PhD, Research Associate, Temple University (PhD Alumnus) Steven Paciorek, MPH, PHD, Brecksville City (MPH, PhD Alumnus) Joan Seidel, RN, MA, Kent City Health Commissioner	<i>Involvement in school evaluation & assessment</i>
	<i>Perceptions of current students & school graduates</i>
	<i>Perceptions of curricular effectiveness</i>
	<i>Applied practice experiences</i>
	<i>Integration of practice perspectives</i>
	<i>School delivery of professional development opportunities</i>
Total participants: 11	

1:30 pm ET
Break

1:45 pm ET Strategies & Operations	
Participants	Topics on which participants are prepared to answer team questions
Tina Bhargava, DrPH, Diversity Committee Chair Kristina Knight, PhD, Diversity Committee Co-Chair Sonia Alemagno, PhD, Dean Jeffrey Hallam, PhD, FRSPH, Associate Dean Jennifer Miller, MEd, Assistant Dean Ken Slenkovich, MA Career Services Matt Stefanak, MPH, Career Services	<i>Diversity and cultural competence – who develops the targets, who reviews the data and how are changes made based on the data?</i>
	<i>Recruiting and admissions, including who chose the measures and why did they choose them</i>
	<i>Advising and career counseling, including who collects and reviews the data</i>
	<i>Staff operations</i>
	<i>Complaint procedures</i>
Total participants: 7	

2:45 pm ET
Site Visit Team Executive Session 4

3:45 pm ET **Adjourn**

Friday, December 4

8:30 am ET University Leaders		
Charlene Reed, Vice President and University Secretary attending on behalf of Todd Diacon, PhD, University President Melody Tankersley, PhD, Senior Vice President Academic Affairs and Provost	Participants	Topics on which participants are prepared to answer team questions
		<i>School's position within larger institution</i>
		<i>Provision of school-level resources</i>
		<i>Institutional priorities</i>
Total participants: 2		
9:00 am ET Break		
9:15 am ET Site Visit Team Executive Session 5		
1:00 pm ET Exit Briefing		