

# California State University SAN MARCOS

California State University San Marcos

Master of Public Health Program

Self-Study document in preparation for an accreditation review by the Council on Education for Public Health (CEPH)
February 2020

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### **List of Acronyms**

AACSB - Association to Advance Collegiate Schools of Business

AANAPISI -Asian American Native American Pacific Islander Serving Institution

Acronyms List

AJPM - American Journal of Preventive Medicine

APHA - American Public Health Association Annual

ARR – Academic Requirement Report

ASHA - American Speech-Language-Hearing Association

AY - Academic Year

BRN - California Board of Registered Nursing

CAB - Community Advisory Board

CBA - Collective Bargaining Agreement

CBPR - Community Based Participatory Research

CCNE - Commission on Collegiate Nursing Education

CCTC - California Commission on Teacher Credentialing

CEHHS - College of Education, Health and Human Services

CEPH - Council on Education for Public Health

CFA - California Faculty Association

CSU – California State University

CSUEU – California State University Employees Union

CSUSM – California State University San Marcos

CSWE - Council on Social Work Education

EL – Extended Learning

ELB - Extended Learning Building

FTE - Full-Time Equivalent

GH - Global Health

GHD - Global Health Diplomacy

GIS - Geographic Information System

GoPH - Graduate Organization of Public Health

HEHP - Health Education Health Promotion

HIPs - High Impact Practices

**HSI** - Hispanic Serving Institution

IC - Internship Coordinator

IDS - Instruction Design Services

IITS - Instructional & Information Technology Services

ILC – Internship Learning Contract

ILE - Integrative Learning Experience

MPH - Master of Public Health

NARCH - Native American Research Centers for Health

NIH - National Institutes of Health

OGSR - Office of Graduate Students & Research

PRC - Peer Review Committee

PSLO - Program Student Learning Outcome

PTC - Promotion and Tenure Committee

QOLT - Quality Online Learning and Teaching

RFA – Request for Application

RTP - Retention, Tenure, Promotion

SPSS - Statistical Package for the Social Sciences

SSIBAC – Self-Support Budget Advisory Committee

TLC - Technology Learning Center

UARSC - University Auxiliary and Research Services Corporation

WASC - WASC Senior College and University Commission

WPAF - Working Personnel Action File WTU – Weighted Teaching Unit

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#### Introduction

- 1) Describe the institutional environment, which includes the following:
  - a. year institution was established and its type (eg, private, public, land-grant, etc.)

California State University San Marcos (CSUSM) was originally created in 1979 as a satellite campus of San Diego State University. Subsequently, in 1989, CSUSM was reconstituted as the 20th California State University (CSU) campus through Senate Bill 365 and was formally established as California State University San Marcos. As a public university, CSUSM is the 20<sup>th</sup> campus established in the 23-campus CSU system.

b. number of schools and colleges at the institution and the number of degrees offered by the institution at each level (bachelor's, master's, doctoral and professional preparation degrees)

#### As of Fall 2018 CSU San Marcos included:

- Four Colleges:
  - o College of Humanities, Arts, Behavioral & Social Sciences
  - o College of Business Administration
  - o College of Education, Health & Human Services (includes the MPH program)
  - College of Science & Mathematics
- 43 bachelor program majors
- 39 minors
- 24 master's programs
- 8 credential programs
- 1 joint doctoral with UC San Diego
- c. number of university faculty, staff and students

#### Faculty Demographics

Full Professor: 111Associate Professor: 85Assistant Professor: 88

Lecturer: 556

Teaching Associate: 169

# Staff Demographics

 CSUSM employees 847 staff (includes staff and management personnel but not student assistants)

#### Student Demographics (enrollment effective Fall 2019)

- 14,519 State-Supported Enrollment
  - 13,879 Undergraduate
  - 640 Graduate and Post-Baccalaureate
  - 60% Female
  - 40% Male
  - 47% Hispanic
  - 27% White, Non-Latino
  - 9% Asian American
  - 5% Two or More Races
  - 5% Non-Resident Alien
  - 4% Unknown
  - 3% African American

- 1,664 Self-Supported Enrollment
  - 680 Undergraduate
  - 984 Graduate and Post-Baccalaureate
  - 71% Female
  - 29% Male
  - 32% Hispanic
  - 29% White, Non-Latino
  - 14% Asian American
  - 12% Unknown
  - 5% Two or More Races
  - 4% Non-Resident Alien
  - 3% African American

# d. brief statement of distinguishing university facts and characteristics

Building on an innovative 28-year history, California State University San Marcos is a forward-focused institution, dedicated to preparing future leaders, building great communities and solving critical issues. Located on a 304-acre hillside overlooking the city of San Marcos, CSUSM is distinctive for its strong sense of entrepreneurialism and adaptability, its deeply embedded community partnerships and accountability to its region, and its consistent use of data-driven decision-making frameworks. With a technologically sophisticated campus and an increasing focus on community engagement, CSUSM brings together a hands-on, real-world curriculum, with applied research to fuel the creative thinking needed to solve critical twenty-first century problems. CSUSM embraces the use of:

- 1. High-Impact Practices (HIPs);
- 2. Initiatives to ensure success of first-year students, many of whom are first-generation students from underrepresented groups;
- 3. Community engagement by students, faculty, staff, and administrators;
- 4. Education of non-traditional students; and
- 5. Continual self-reflection through assessment and program review

#### Important Facts and Characteristics

- Ranked 13th for preparing students for career success relative to costs nationally.
- 78% job placement rates 6 months post-graduation.
- 53% of graduates were the first in their families to earn a BA degree.
- 85% of our alumni stay in the local community.
- Hispanic Serving Institution (HSI)
- 2018 Higher Education Excellence in Diversity award winner.
- e. names of all accrediting bodies (other than CEPH) to which the institution responds. The list must include the regional accreditor for the university as well as all specialized accreditors to which any school, college or other organizational unit at the university responds.

#### **Accrediting Agencies**

WASC Senior College and University Commission (WASC) Commission on Collegiate Nursing Education (CCNE) California Board of Registered Nursing (BRN) California Commission on Teacher Credentialing (CCTC) Council on Social Work Education (CSWE) American Speech-Language-Hearing Association (ASHA)

# **In-Process**

Association to Advance Collegiate Schools of Business (AACSB) Council on Education for Public Health (CEPH)

#### (ERF/Intro-1e/CSUSM Accrediting Bodies)

f. brief history and evolution of the public health program (PHP) and related organizational elements, if applicable (eg, date founded, educational focus, other degrees offered, rationale for offering public health education in unit, etc.)

A survey conducted during a "Health Science Summit" at CSUSM in January 2006 on the development of health-related degree programs revealed that an overwhelming majority of the agency/organization participants were in need of graduates in health professions, including public health professionals to fill vacant positions and programs in North San Diego County. From this event, it was determined that CSUSM would explore MPH degrees that focus on health promotion and education, health disparities, disease prevention, and global health given that these would have enormous impact on existing shortages and ongoing public health crises in our local areas and beyond.

The genesis of the MPH program focused on improving public health through community engagement, service learning, and research activities to train graduates who will possess the knowledge and critical thinking skills needed to address and solve public health issues facing California, our nation, and our world. The population of San Diego County has increased over the years and as a result, needed an infusion of professionals with graduate-level training in public health and healthcare-related fields. CSUSM, the only university in North San Diego County, was strategically positioned to address these demands by offering a MPH degree through its Office of Extended Learning. The MPH program was developed by an Advisory Board that utilized the consulting expertise of diverse CSUSM faculty drawn from Kinesiology, Nursing, and Human Development as well as from a sister institution, CSU San Bernardino, and professionals from the public sector including San Diego County Department of Health and Human Services, County of San Diego's Office of Emergency Services, the San Diego Workforce Partnership and Palomar Pomerado Health. The expertise and input from these partnerships focused on developing a curriculum that would ensure that future MPH graduates would be trained to provide services in a culturally sensitive and competent manner to San Diego County and beyond while recognizing and responding to emerging threats to public health in the coming decades. The input from the partnership directly guided the development of the MPH curriculum to ensure that graduates are trained to serve the specific and unique needs of our region. Subsequent enrollment projections were based on community needs for public health professionals as well as the current enrollment data from other California State University MPH programs in southern California, including San Diego State University and California State University Fullerton.

In 2016, the Master of Public Health (MPH) program was formally established to train future public health professionals to be leaders dedicated to building a diverse workforce of well-trained professionals to meet the public health needs of 21st Century communities.

The program offers one professional MPH degree with two concentrations in Health Promotion and Health Education and Global Health. Training in both MPH program concentrations includes didactic preparation in seven foundational public health courses, five concentration-specific courses, including one required elective, a practice experience course (internship), and an integrative learning experience course (either a thesis or a capstone project).

Currently, given their status as a program (and not department), the MPH is organizationally located under the School of Nursing and housed within the College of Education, Health and Human Services (CEHHS). CEHHS comprises of three schools, including the School of Education, the School of Nursing, and the School of Health Sciences and Human Services. This relationship can be seen visually in Figure 2. CEHHS Organizational Chart. Notably, the MPH Program Director reports directly to the Dean and functionally the program operates like a department. Finally, while academically housed under CEHHS, the MPH program is operated by

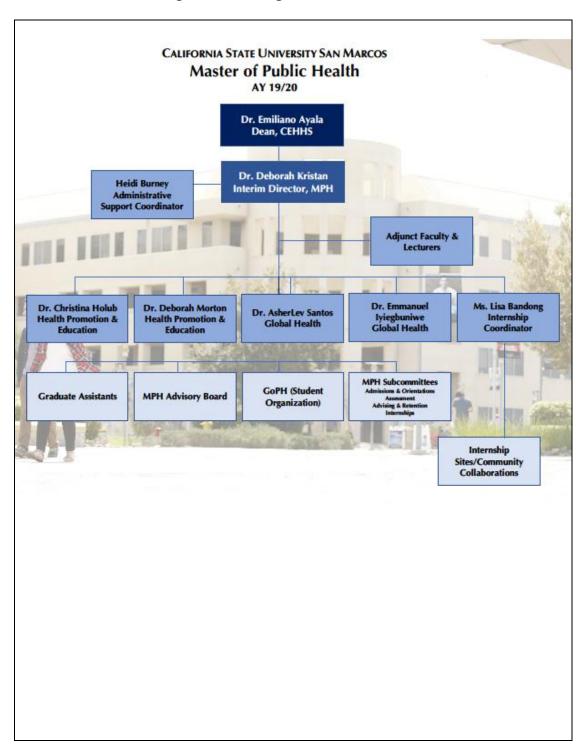
Extended Learning who support the recruitment, admissions, and financial processes for the program.

Extended Learning (EL) at CSUSM serves as an academic outreach arm of the university. EL is a unit within the Division of Academic Affairs that provides continuing education and professional preparation programs that are entirely self-support (funded exclusively by student tuition). This differs from our state-side programs that rely on a combination of student tuition and financial support by the State of California. EL programs are built to respond to the educational needs of individuals and organizations in North County San Diego region and beyond. In this regard, EL assists the University in meeting its enrollment, service, and access goals through creative, flexible, and responsive self-support academic programming. Given decreasing support by the State of California to grow or develop new state-side programs, EL provided the MPH program an opportunity to launch their new degree graduate program. EL is led by a Dean and associated staff who interact with the MPH Program Director to establish annual programmatic budgets that are ultimately approved by the Self Support Budget Advisory Committee (SSIBAC). Aside from recruitment, admissions, and financial support (reporting lines) between EL and the MPH Program Director, all other supervisory, evaluative, and curricular oversight for the MPH program (including faculty, staff, and student issues) falls within the purview of CEHHS and the college Dean. This is further explained in section 2.b. below.

# 2) Organizational charts that clearly depict the following related to the program:

a. the program's internal organization, including the reporting lines to the dean/director

Figure 1. MPH Organizational Chart



- \*Reviewers find it helpful to also include a copy of the organizational chart in the ERF (ERF/Intro-2a/MPH Org Chart)
- b. the relationship between program and other academic units within the institution. Ensure that the chart depicts all other academic offerings housed in the same organizational unit as the program. Organizational charts may include committee structure organization and reporting lines

The College of Education, Health and Human Services (CEHHS) resides within the university's Division of Academic Affairs. The organizational chart below (Figure 2) shows the relationship of the MPH program to the other schools and departments within CEHHS. While structured under the School of Nursing, functionally, MPH is a program whose Director reports directly to the Dean and not the Director of the School of Nursing. The original purpose of this relationship stems from our campus-based curricular and faculty approval processes. At CSUSM, new degree programs such as the MPH must be proposed by an existing school or department. In this case, the School of Nursing faculty originally proposed the development of the MPH program and, as such, they provisionally remain a Program under the School of Nursing. Once the MPH program completes the institutionalization of its curricular processes, faculty evaluation policies (RTP), and related programmatic and accreditation-related operations, it is anticipated that the MPH program will be formally converted to a department and move under the School of Health Sciences and Human Services within CEHHS. Currently, this is functionally the case (MPH Program Director reports to the CEHHS Dean) until the formal authorization of department status for the MPH is complete. Finally, it should be noted that at CSUSM, operationally, Schools are very similar to departments yet are often larger and more complex (housing multiple programs, serving a larger student body, and intersecting with myriad community partners) that often requires additional managerial support.

California State University San Marcos Division of Academic Affairs AY 2019 / 2020 Dean College of Education, Health & Associate Dean **Human Services** Shannon Cody Deborah Kristan **Emiliano Ayala** School of Nursing School of Education Associate Directors School of Health Sciences Associate Director Director Director W. Hansbrough and A. Daoud Tom Olson **Human Services** Educational Leadership Undergraduate Kinesiology Dept. Chair P. Stuhr Master of Arts Graduate Programs Human Development Doctoral Program Prog. Coordinator Programs Coordinator Dept. Chair T. Toyokawa Prog. Coordinator Coordinator N. Coffin-Romig A. Elsbree S. Sivahhan W. Hansbrough ech-Language Educational Administratio Master's in Public Health Social Work eading/Language Arts Pathology Prog. Co-Coordinators B. Soles Prog. Coordinator L. Stowell Interim Program Directo Dept. Chair Dept. Chair L. Heisler C. Van Voore Education Specialist Integrated Credential Prog. Coordinator Prog. Co-Coordinators L. Mauerman S. Freeborn J. Robledo Multiple Subject Prog. Co-Coordinators Middle Level Prog. Coordinator I. Flores E. Daniels W. Heredia Single Subject Bilingual Authorization Prog. Coordinator J. Rich Prog. Coordinator A. Hernandez Office of the Provost and VPAA page 4 of 10

Figure 2. CEHHS Organizational Chart

c. The lines of authority from the program's leader to the institution's chief executive officer (president, chancellor, etc.), including intermediate levels (e.g., reporting to the president through the provost)

The organizational chart below (Figure 3) is from the Division of Academic Affairs and it shows the relationship of the College of Education, Health and Human Services (CEHHS) to the other components of the university.

California State University San Marcos Division of Academic Affairs AY 2019 / 2020 UNIVERSITY PRESIDENT Ellen J. Neufeldt Executive Assistant to the Provost & VPAA Interim Provost and Vice President Maria Shterew for Academic Affairs Administrative & Office Ranjeeta Basu Budget Coordinator Pia Bombardier Academic Advising & Academic Programs Regina Eisenbach Interim Dean Associate Vice President Graduate Studies & Planning and Academic Resources Faculty Affairs Research Chuck De Leone Michelle Hunt Vacant **Undergraduate Studies** Dawn Formo Interim Dean Chief Information Dean College of College of Associate Vice Officer & Dean for College of Science Acting Dean resident for CSUSM College of Business Education, Humanities, Arts, Instructional University Library Extended Learning & Mathematics Behavioral & Social Sciences Administration Health, & Human at Temecula & Information Sue Moineau Jennifer Fabbi Ed Ashley Jim Hamerly **Technology Services** Services Kantardiieff Emiliano Ayala Elizabeth Matthew Kevin Morningstar Division of Academic Affair

Figure 3. CSUSM Academic Affairs Organizational Chart

d. for multi-partner programs (as defined in Criterion A2), organizational charts must depict all participating institutions

Not applicable to CSUSM.

3) An instructional matrix presenting all of the program's degree programs and concentrations including bachelor's, master's and doctoral degrees, as appropriate. Present data in the format of Template Intro-1.

Template Intro-1. Instructional Matrix

|                           |          |              | Categorized as public health | Campus<br>based | Executive | Distance based |
|---------------------------|----------|--------------|------------------------------|-----------------|-----------|----------------|
| Master's Degrees          | Academic | Professional |                              |                 |           |                |
| Concentration             | Degree   | Degree       |                              |                 |           |                |
| Health Promotion & Health |          | MDU          | V                            | MDU             |           | MDII           |
| Education                 |          | MPH          | Х                            | MPH             |           | MPH            |
| Global Health             |          | MPH          | X                            | MPH             |           | MPH            |

4) Enrollment data for all of the program's degree programs, including bachelor's, master's and doctoral degrees, in the format of Template Intro-2.

Template Intro-2. Enrollment Data

| Degree   |  | Current Enrollment |
|----------|--|--------------------|
| Master's |  | Fall 2019          |
|          | MPH: Health Promotion & Health Education concentration | 76                 |
|          | MPH: Global Health concentration                       | 55                 |

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#### A1. Organization and Administrative Processes

The program demonstrates effective administrative processes that are sufficient to affirm its ability to fulfill its mission and goals and to conform to the conditions for accreditation.

The program establishes appropriate decision-making structures for all significant functions and designates appropriate committees or individuals for decision making and implementation.

The program ensures that faculty (including full-time and part-time faculty) regularly interact with their colleagues and are engaged in ways that benefit the instructional program (eg, participating in instructional workshops, engaging in program specific curriculum development and oversight.

1. List the program's standing and significant ad hoc committees. For each, indicate the formula for membership (e.g., two appointed faculty members from each concentration) and list the current members.

The MPH program's organizational structure is built around committees that address our core operations. Centrally, the MPH Program Committee (comprised of all tenure-track faculty, full-time lecturers, and our student representative) serves as the main forum where final decisions are made on all program-related issues including curriculum, assessment, internships, integrative learning experiences, student issues, and related programmatic activities. Meetings are held on every 2<sup>nd</sup> and 4<sup>th</sup> Monday through the Fall and Spring semesters. Apart from the MPH Program Committee, the following standing subcommittees represent our overall organization structure.

- Admissions Committee
- Curriculum and Advising Committee
- Assessment Committee
- MPH Community Advisory Board (CAB)

Each subcommittee serves in an advisory capacity by making recommendations to the MPH Program Committee on specific tasks relating to revisions, changes and/or modifications to the program. In general, each committee has formalized policies and procedures that serve as guidance document for its activities. Given that the MPH program has only four tenure-track faculty and one full-time lecturer, a decision was made by the MPH program to limit the composition of each subcommittee to two faculty members drawn from both concentrations. In consultation with the faculty, the MPH Program Director has the responsibility of appointing the Lead for each committee. It is also expected that one student will be nominated by the Graduate Organization of Public Health (Student Club) to serve on the MPH Program Committee as well as acting as the student representative for the MPH Community Advisory Board. Students serve as ex-officio members (ERF/A1-1/Subcommittee Assignments REVISED Oct 2017-18; ERF/A1-1/MPH Meeting Minutes 11.13.17). Through the self-study process certain opportunities for improving our current program organizational structure became clear. This improvement and review process, the committee structure adjustments, and implementation schedule is outlined in A1.6 plans for improvement.

# **MPH Program Committee**

Membership: A. Santos; C. Holub; L. Bandong; D. Morton; E. Iyiegbuniwe; GoPH Student

Representative; H. Burney (Staff); MPH Program Director (D. Kristan-Interim)

Purpose: The Program Committee oversees all organizational subcommittees and serves as

the final deliberative body on all curricular and related programmatic decisions.

Formula: All tenure-track faculty; full-time faculty, MPH Program Director, MPH staff and the

GoPH student representative attend the twice-monthly Program Committee meeting.

#### **Admissions Committee**

Membership: A. Santos; L. Bandong; MPH Program Director (D. Kristan-Interim)

Purpose: The Admissions

The Admissions Committee is charged with the responsibility of reviewing applicant files after they have been checked for completeness. The committee's primary charge is to ensure applicants have met the minimum academic requirements. This helps to ensure students are well-qualified to successfully complete the MPH degree.

The Admissions process begins with Extended Learning where they collect all applications received. At this point they verify all the required transcripts, letters, application forms have been submitted. Once an application has been completed, it is forwarded to the Admissions Committee for review. The Admissions Committee reviews files two times a month on the 1st and the 15<sup>th</sup>. Students applications meeting the admissions criteria are sent to the MPH Program Director, who reviews the committee's recommendations and makes final decisions. These decisions on accepted and denied applications are sent back to Extended Learning for them to notify students.

Formula: In addition to the Program Director, two faculty are assigned responsibility to address

programmatic needs related to admissions procedures and reviews.

**Advising and Retention Committee** 

Membership: E. Iyiegbuniwe; A. Santos; MPH Student (TBD), CEHHS Graduate Student Services

Coordinator (N. Nguyen)

Purpose: The Advising & Retention Committee is charged with the key responsibility of

assisting and encouraging students to participate actively in achieving successful educational goals. Specifically, the Committee strives to encourage students to meet with their faculty advisors as often as possible during every semester and to ensure timely completion of their coursework required for graduation. The staff member on the committee has job-embedded responsibilities to monitor and track enrollment, student grades, general advising questions, and related advising/retention issues that

are brought to the subcommittee as needed.

Formula: Consists of at least two tenure-track faculty members and/or full-time lecturers; one

student elected by the MPH student organization; and as ex-officio member the

CEHHS Student Services Graduate Student Services Coordinator.

**Assessment Committee** 

Membership: C. Holub; D. Morton; CEHHS Assessment Specialist (K. Landin)

Purpose: The Assessment Committee assures the effectiveness of the MPH programs'

processes and activities through regular assessments and evaluations to ensure that its stated mission, vision, goals, and objectives are routinely met. The program, in coordination with members of the Assessment Committee, administers surveys through common survey tools available through the university. Survey data are supplemented through direct contact via social media and email. The findings are summarized and provided to the MPH faculty, students, CSUSM administrators, and the Advisory Board. In addition, the committee also actively collaborates with the

Office of Academic Programs who lead CSUSM's efforts on university and

departmental Program Assessment and Evaluation. These efforts ensure continuous assessment and evaluation of students learning across all programs as anticipated by our WASC accreditation expectations and are achieved through the administration

of signature assignments. When addressing programmatic level assessment requirements by the University Assessment Committee of Program Student Learning Outcomes (PSLOs), the MPH Program Committee is engaged and the MPH Program Director, or an identified lead faculty member, facilitates the annual assessment. (ERF/A1-1/Subcommittees Assignments REVISED Oct 2017-18)

Formula:

Two of the full-time faculty annually agree to serve on the assessment committee. Given the nature of the work, one of the two faculty members will also collaborate annually with the Office of Academic Programs as noted above. Additional support is provided by the MPH Program Director and the CEHHS Assessment Specialist who supports this committee in an ex-officio capacity.

# **MPH Community Advisory Board**

Membership: A. Santos; C. Holub; L. Bandong; D. Morton; E. Iyiegbuniwe; GoPH Student

Representative; H. Burney (Staff); MPH Program Director (D. Kristan-Interim);

Community Advisory Board Members

Purpose: The purpose of the Community Advisory Board is to include and involve Public

Health community partners in all aspects of program development, assessment, and

planning. Each MPH subcommittee reports to the advisory board on key

developments or updates that impact our programmatic work. Feedback is solicited

from the advisory board to ensure we are meeting the needs of our regional

community partners.

Formula: All tenure-track faculty; full-time lecturer faculty, MPH staff, MPH Program Director

and GoPH student representative attend the semi-annual Community Advisory Board meeting. The current Community Advisory Board membership is included in our ERF.

(ERF/A1-1/Community Advisory Board Directory 19-20)

2. Briefly describe which committee(s) or other responsible parties make decisions on each of the following areas and how the decisions are made:

#### a. degree requirements

The MPH Program Committee is responsible for the initiation, implementation, and review of all degree requirements. In general, discussions and decisions are made during the biweekly MPH Program Committee meetings. Considering the university and system-wide policies regarding degree requirements, any substantive derivation or change in degree requirements must comply with current CSU San Marcos and system-wide policies. Any substantive change requires review and approval by college, university and system-wide authorities.

#### b. curriculum design

All curriculum development, revisions, and changes are carried out by the MPH Program Committee. Curriculum items are periodically reviewed, discussed and approved by the MPH faculty. In certain instances, individuals or subgroups of the MPH faculty may work on specific tasks related to curriculum development or evaluations on an ad-hoc basis. The findings of the ad-hoc committee, individuals or groups are then shared with the entire faculty during the MPH Program Committee meeting for their approval. In accordance with CSU San Marcos policy, once approved at the MPH program level, any substantive curriculum proposals or changes are subsequently submitted for review and approval by a college-level committee, a university curriculum committee, and, as needed, system-wide approvals or ratification.

# c. student assessment policies and processes

The Assessment Committee assures that the MPH program complies with assessment expectations set forth by CEPH and the university's Office of Academic Programs. The Assessment Committee works in concert with the MPH Program Committee to conduct regular assessments of curriculum, and assessment of student and alumni perceptions. The Assessment Committee is also responsible for tracking Program Goals and metrics. In addition, all CSU San Marcos degree programs engage in annual Program Student Learning Outcomes (PSLO) assessment activities that are also monitored by the Assessment Committee which include student-focused assessments. The university's Office of Academic Programs monitors and evaluates the Program Review process adopted by the university considering WSCUC (WASC) accreditation requirements.

#### d. admissions policies and/or decisions

The Admissions Committee ensures that the program recruits diverse and well-qualified students for the program through the establishment of admissions criteria and the evaluation of applicants against set criteria and rubrics. The committee meets biweekly (or as often as needed) to review application materials and make admission recommendations to the MPH Program Director. The Program Director renders the final admission decision based on recommendations from the committee and sends the list of applicants (accepted, conditional admission or denied) to the MPH Advising and Admissions Coordinators at the Office of Extended Learning.

#### e. faculty recruitment and promotion

#### Recruitment:

The MPH Program Committee, in concert with the Program Director, is responsible for determining its faculty needs. All requests to hire tenure-track faculty must be made through the Dean of the College of Education, Health and Human Services and the Dean of Extended Learning, and subsequently approved by the Provost (Vice President of Academic Affairs). Once a tenure-track faculty position is approved, MPH faculty identify the professional knowledge and skills desired for the new position and form a search committee to draft the Professional Opportunity Announcement. Program faculty complete all steps involved in the search process and make recommendations to the college dean on the faculty candidates best qualified for the new position. Lecturer faculty are hired on an as-needed basis to cover course assignments not assigned to tenure-track or full-time lecture faculty. The MPH Program Director solicits applications of qualified lecturer faculty via electronic ads approved by the CSU San Marcos Office of Faculty Affairs and posted publicly at:

https://www.csusm.edu/facultyopportunities/lecturers/index.html.

A sample lecturer recruitment advertisement is included in the ERF (<u>ERF/A1-2/Sample Lecturer</u> Recruitment Advertisement PH 502)

#### Promotion:

CSU San Marcos operates under a collective bargaining agreement that stipulates the tenure and promotion expectations for all tenure-track faculty. Considering that collective barging agreement, each department crafts Retention, Tenure and Promotion (RTP) guidelines that stipulate the tenure and promotion expectations. The MPH RTP guidelines are included in the ERF (ERF/A1-2/2018 RTP Standards for Public Health Program). Every two years, all tenure-track are reviewed by a peer review committee (PRC), the Dean, and the Provost to recommend their reappointment, tenure and/or promotion. Once tenured, faculty undergo a Post Tenure Periodic Evaluation (PTPE) every two years. Public Health faculty have an opportunity to sit on review committees once they have been granted tenure. Currently, only one faculty has tenure.

#### f. research and service activities

#### Research:

Teaching is the primary mission of all CSU faculty members with an expected workload of 15 weighted teaching units (WTUs) of which 9 WTUs are devoted to teaching (i.e., 60% of total WTUs). The typical division of workload assignments requires that each tenure-track faculty has a standard 3 WTUs or 20% time devoted to research. All tenure-track faculty are expected to enrich their teaching assignments through engaged scholarship and research activities. As stipulated in the Retention, Tenure and Promotion document, faculty input on how they participate in active and engaged research aimed at developing mutually beneficial collaborations with local communities to solve public health problems is essential. In this regard, faculty are encouraged to involve students in their research endeavors, to prepare students for research-informed practice in the community through integrative learning experience courses using thesis and capstone projects, and to solidify their research-to-practice and practice-to-research conceptual loop.

#### Service:

All faculty members in the MPH program work collaboratively towards making significant contributions to support and sustain the MPH program, especially with regards to curriculum development, assessment, and ongoing accreditation efforts. In this regard, faculty input shapes both their individual service contributions as well as their program-wide priorities. Service to the MPH program, CEHHS, CSUSM, the local community, and to the profession constitutes a significant component of a tenure-track faculty member's workload. As result, service is typically assigned 3 WTUs and accounts for 20% of the total workload.

Typical service activities include attending scheduled meetings, serving on various committees (program, college and university), advising students, developing policy documents (e.g., the Retention, Tenure and Promotion documents), assisting with the completion of accreditation documents, serving on faculty search committees for open faculty lines, and engagement in service in the community.

3. A copy of the bylaws or other policy documents that determine the rights and obligations of administrators, faculty and students in governance of the program.

The College of Education, Health and Human Services (CEHHS) has college-level bylaws that determine the rights and obligations of administrators, faculty and students in governance of the program (ERF/A1-3/2018 CEHHS College Bylaws).

The CSU Collective Bargaining Agreement outlines the rights and responsibilities of faculty and administrators in the governance of the program that pertain to all CSU campuses. Specifically, Article 20 outlines workload responsibility related to rights and obligations (<a href="ERF/A1-3/California Faculty Association Collective Bargaining Agreement">ERF/A1-3/California Faculty Association Collective Bargaining Agreement</a>).

4. Briefly describe how faculty contribute to decision-making activities in the broader institutional setting, including a sample of faculty memberships and/or leadership positions on committees external to the unit of accreditation.

MPH faculty serve on numerous committees and are involved in decision making activities at both the College (CEHHS) and University level. However, participation is not limited to faculty as Public Health lecturers and staff also participate in the shared decision-making process. For example, Public Health faculty and staff serve on the CEHHS (college level) Budget and Academic Planning Committee, the Committee on Diversity, Inclusion and Equity, and the General Education Committee. Similarly, Public Health faculty and staff serve on various university level committees including the Academic Senate, Faculty Learning Community, Holistic Wellness Committee, and University Global Affairs Committee. An example of how MPH faculty and staff contribute and participate in decision-making in CEHHS is included in the ERF (ERF/A1-4/2018-2019 CEHHS Standing Committee Roster). The listing of the Senate committees is

included in the ERF (<u>ERF/A1-4/CSUSM Academic Senate Other Committees</u>) (<u>ERF/A1-4/CSUSM Academic Senate Standing Committees</u>).

5. Describe how full-time and part-time faculty regularly interact with their colleagues (self-study document) and provide documentation of recent interactions, which may include minutes, attendee lists, etc.

As noted in other sections of this report, the small enrollment numbers of the MPH program preclude the need for large numbers of part-time faculty. Most course loads are filled by full-time faculty teaching assignments, which is considered a strength of our program. On average, we hire one to three part-time faculty per semester but in Fall 2019 this jumped to five as a result of our increased enrollment. The full-time tenure-track faculty consult each other when preparing to teach classes. Full-time tenure-track faculty also work with our part-time faculty to support their preparation and teaching of courses developed originally by the full-time faculty. Although these interactions occur on an as needed basis, our part-time faculty anecdotally report on the value of these interactions.

Part-time faculty have historically been invited to attend MPH Program Committee meetings, but attendance has been quite low, in part, as these meetings are optional and part-time faculty often hold full-time employment which limits their availability. Part-time faculty have served on Thesis and Capstone project committees and served as guest speakers to various classes taught by our full-time faculty, which encourages other regular interactions.

As well, part-time faculty are invited and included in the bi-annual MPH Community Advisory Board (CAB). While their attendance varies, several consistent members who serve dually as community advisory members and part-time faculty include Charles Matthews, John Scott, and Carey Riccitelli. The CAB roster (ERF/A1-1/Community Advisory Board Directory 19-20) and minutes (ERF/A1-5/CAB Minutes March 2018; ERF/A1-5/CAB Minutes October 2018) of recent meetings can be found in the ERF, which documents their participation and interaction with the core MPH program faculty.

6. If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

# Strengths:

- Full-time faculty represent most of the teaching faculty in the program.
- Hold bi-annual Community Advisory Board meetings at which important programmatic
  decisions are presented and decided upon. All part-time faculty are invited, and several of our
  part-time faculty attend these meeting given their dual roles.
- Full-time faculty support and guide part-time faculty on their course preparation and teaching.

#### Weaknesses:

- The program continues to grow and needs to incorporate additional opportunities for our parttime faculty to interact with the full-time faculty.
- Increased communication is needed between the program and part-time faculty.

#### Plans for Improvement:

- If part-time faculty are not able to attend MPH Program Committee meetings, ensure the distribution of meeting notices and minutes and ask for input.
- Fall and Spring beginning of term meetings is intended for all instructional faculty. The initial implementation of the meeting schedule began January 2020.

A2. Multi-Partner Programs (applicable ONLY if functioning as a "collaborative unit" as defined in CEPH procedures)

Not applicable for CSUSM.

### A3. Student Engagement

Students have formal methods to participate in policy making and decision making within the program, and the program engages students as members on decision-making bodies whenever appropriate.

1) Describe student participation in policy making and decision making at the program level, including identification of all student members of program committees over the last three years, and student organizations involved in program governance.

Student participation in policy and decision making is drawn from the CSUSM Public Health student organization. The Graduate Organization of Public Health (GoPH) is the organization available to Master of Public Health students at CSU San Marcos. The primary charge of this student-led organization is to offer volunteer and community activities both on campus and within our regional community to bring awareness to public health issues. In order to ensure student participation in policy and program decisions, the president of GoPH attends the MPH Program Committee to offer insight and a student voice on appropriate program governance issues. An additional method of student participation in policy and program decisions comes from the president's participation at the Community Advisory Board (CAB). The president of GoPH attends the semi-annual CAB meetings to offer updates on GoPH activities and participates in shared decision-making processes that occur at those meetings. Finally, in a less formal fashion, faculty have attended GoPH meetings in order to solicit feedback from students about components of the program, and this feedback has also been used to inform or guide programmatic decisions.

Over the past three years, the following student members were a part of the MPH Program Committee and Community Advisory Board:

2019-2020: Treavor Seabaugh, GoPH President

2018-2019: Cyndy Tran, GoPH President

2017-2018: Theresa Nguyen, GoPH President

2016-2017: Janell Bryant, GoPH President

2) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

#### Strengths:

- Shortly after the MPH program was founded, the program faculty recognized the need to establish and support a student-led organization.
- One MPH faculty serves as the advisor to GoPH and regularly meets with GoPH leadership.

#### Weaknesses:

More active participation of our student body across the governing committees is needed.
 Due to the non-traditional, full-time employed nature of our students, it has been difficult to maintain continuous participation.

#### Plans for Improvement:

 In 2018-2019, the program invited the GoPH President to become a standing member of the Community Advisory Board to increase student participation in policy and related program decisions. In Fall 2019, the program planned to collaborate with GoPH to clarify their rights and responsibilities for participation in the decision-making processes of the program and to identify additional opportunities for increased student participation.

- The program will work with our student club, GoPH, to solicit greater student involvement across our subcommittees. The program will identify a GoPH representative to participate on the Assessment Committee by Fall 2020. The program will meet with GoPH to discuss student participation in the remaining subcommittees by Spring 2021.
- The MPH Program committee structure needed updating given different leadership changes and improvement opportunities revealed by the self-study process. Faculty came together on Feb 7 to address the committee structure. Adjustments were made to the charge of each committee and the lead faculty of each committee. This revision will first be brought to the CAB during the Spring 2020 meeting and will be reviewed by the MPH Program Committee before the end of the AY2020-2021. Implementation of the new committee structure will begin September 2020 (ERF/A3-2/CEPH Assessment Retreat Follow-up 2.7.20) (ERF/A3-2/Suggested Committee Revision Feb 7 2020).

# A4. Autonomy for Schools of Public Health

Not applicable for CSUSM.

# A5. Degree Offerings in Schools of Public Health

Not applicable for CSUSM.

#### **B1.** Guiding Statements

The program defines a *vision* that describes how the community/world will be different if the program achieves its aims.

The program defines a *mission statement* that identifies what the program will accomplish operationally in its instructional, community engagement and scholarly activities. The mission may also define the program's setting or community and priority population(s).

The program defines goals that describe strategies to accomplish the defined mission.

The program defines a statement of *values* that informs stakeholders about its core principles, beliefs and priorities.

1) A one- to three-page document that, at a minimum, presents the program's vision, mission, goals and values.

#### Vision

Attainment of health equity through our public health efforts in California, our nation and our world.

#### Mission

To enhance wellness and reduce health disparities through community-based interventions and practice by preparing culturally responsive professionals engaged locally and abroad.

#### Goals

- 1. Engage faculty and students in public health research and practice opportunities to enhance health equity and reduce health disparities in communities.
- 2. Develop a diverse body of culturally responsive public health professionals.
- 3. Develop public health professionals with knowledge and skills relevant to planning, implementing, and evaluating community-engaged programs.

#### **Values**

The MPH Program's core values include:

**Accountability**. Answers to the community in conducting evidence-based practice and research while training prepared and active public health practitioners.

**Community**. Dedicated to the service, teamwork, and partnership that strengthens our community as it struggles with modern health problems.

**Diversity**. Embraces and promotes the diversity of our students, faculty and staff.

**Excellence**. Committed to excellence in teaching, research, and service.

**Integrity**. Follows the principles of ethics in research, practice, instructional, and administrative activities.

**Inclusivity**. Values the input, participation, and perspectives of our community stakeholders. **Relevance**. Active participant in projects supporting the mission of the CSUSM and improving the welfare of our community.

2) If applicable, a program-specific strategic plan or other comparable document.

The program does not currently have its own strategic plan but is part of the strategic plan for the College of Education, Health and Human Services. Each department or program contributes to the College plan by creating its own set of goals (<u>ERF/B1-2/CEHHS Three Year Rolling Plan AY 19 22</u>).

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

#### Strengths:

 The program has identified a general vision and are codifying processes to measure our progress toward that vision.

#### Weaknesses:

• The iterative process of data collection and review has not been as systematic as it could be. The program would benefit from refining and systematizing the data collection process, as well as the measures themselves.

# Plans for Improvement:

- The program planned to obtain the input of the Community Advisory Board on the program's goals and measures during the Fall 2019 CAB meeting. Due to time constraints, revisions to the vision, mission, goals and values were mentioned, but not discussed.
- At the Annual Assessment Retreat held January 16-17, 2020, faculty made revisions to the program's goals and measures (<u>ERF/B1-2/MPH Assessment Retreat-Program Metric</u> <u>Discussion 1.16.20</u>). These revisions will be brought to the April 2020 CAB meeting for feedback prior to formal adoption.

# B2. Graduation Rates (SPH and PHP)

The school or program collects and analyzes graduation rate data for each public health degree offered (eg, BS, MPH, MS, PhD, DrPH).

The school or program achieves graduation rates of 70% or greater for bachelor's and master's degrees and 60% or greater for doctoral degrees.

1) Graduation rate data for each degree in unit of accreditation. See Template B2-1.

MPH students at CSUSM participate in an accelerated program of study that anticipates their program completion within 16 months, which includes one summer term. Given our multiple admissions cycles, we have collapsed the enrollment data to conform with Template B2-1.

Template B2-1. MPH Graduate Rates

|             | PH Graduation Rates                                |             |                 |                |
|-------------|--|-------------|-----------------|----------------|
|             | Time To Graduate: CSUSM stipulates that the re     |             |                 |                |
|             | ed within five years following admissions into the |             |                 |                |
|             | an extension with the approval of the Graduate Pr  | ogram Coord | inator/Chair/Di | rector as long |
| as the cour | sework does not exceed 7 years.                    |             |                 |                |
|             | Cohort of Students                                 | 2016-2017   | 2017-2018       | 2018-2019      |
| 2016-17     | # Students entered                                 | 49          |                 |                |
|             | # Students withdrew, dropped, etc.                 | 3           |                 |                |
|             | # Students graduated                               | 0           |                 |                |
|             | Cumulative graduation rate                         | 0%          |                 |                |
| 2017-18     | # Students continuing at beginning of this school  | 46          | 32              |                |
|             | year (or # entering for newest cohort)             |             |                 |                |
|             | # Students withdrew, dropped, etc.                 | 3           | 3               |                |
|             | # Students graduated                               | 34          | 0               |                |
|             | Cumulative graduation rate                         | 69%         | 0%              |                |
| 2018-19     | # Students continuing at beginning of this school  | 9           | 29              | 81             |
|             | year (or # entering for newest cohort)             |             |                 |                |
|             | # Students withdrew, dropped, etc.                 | 1           | 0               | 3              |
|             | # Students graduated                               | 4           | 25              | 0              |
|             | Cumulative graduation rate                         | 78%         | 78%             | 0%             |

2) Data on doctoral student progression in the format of Template B2-2.

Not applicable for CSUSM

3) Explain the data presented above, including identification of factors contributing to any rates that do not meet this criterion's expectations and plans to address these factors.

The completion rate for our MPH students exceeded the 70% graduation rate anticipated by CEPH. Analysis of the data suggest that for each cohort a small percent withdraw from the program which slightly impacts our results. We are examining the extent to which our international students and others may struggle to complete the CSUSM Graduate Writing Requirement which may account for some of the student withdrawals. As well, a few students who are otherwise employed have opted to extend their program completion (attend part-time) which is permitted but not encouraged. Finally, as our cohort numbers continue to increase, we look forward to examining this graduate data and ensuring continued success rates.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

# Strengths:

- Graduation rate exceeds the minimum standard anticipated by CEPH.
- We run relatively large cohorts for a program that has only been operating for a few years.
- The program admits many non-traditional students.
- As an accelerated program, the reduced timeframe appeals to applicants even though it may be a challenge.

#### Weaknesses:

• Students struggle with certain aspects of the MPH program such as the writing expectations for graduate level work and the accelerated timeline of the program.

#### Plans for Improvement:

- Compare admissions GPA data and GWAR pass rate in preparation for the Fall 2020 semester start meeting to determine if the writing requirements needed for admission should be modified to identify those who may struggle to complete the CSUSM Graduate Writing Requirement.
- Further examine program completion surveys to determine programmatic supports that may help our students. In preparation for survey distribution in the AY 2020-2021, initial survey modifications will be discussed during the Spring 2020 CAB meeting. These revisions will be incorporated by May 2020. Final revisions will be brought back to the CAB's Fall 2020 meeting before implementation and distribution in December 2020.
- The program is considering reaching out to students who withdraw from the program to collect information that may inform our practice. This can be prepared to include with survey distribution in the AY 2020-2021. However, this survey will be distributed only if a student chooses to withdraw from the program. Initial survey development will be discussed during the Spring 2020 CAB meeting. These revisions will be incorporated by May 2020. Final revisions will be discussed when faculty return August 2020 to be ready should any new students withdraw in the Fall 2020 semester.

#### **B3. Post-Graduation Outcomes**

The program collects and analyzes data on graduates' employment or enrollment in further education post-graduation, for each degree offered (eg, BS, MPH, MS, PhD, DrPH).

The program achieves rates of 80% or greater employment or enrollment in further education within the defined time period for each degree.

1) Data on post-graduation outcomes (employment or enrollment in further education) for each degree. See Template B3-1.

| Template B3-1. MPH Program Post-Graduation Outcomes |
|---|
|---|

| Post-Graduation Outcomes<br>(Of those finishing during the<br>year listed) | 2017-2018<br>Number<br>(Percentage) | 2018-2019<br>Number<br>(Percentage) |
|--|-------------------------------------|-------------------------------------|
| Employed   | 25 (74)                             | 23 (79)                             |
| Continuing education/training (not employed)                               | 4 (12)                              | 0 (0)                               |
| Not seeking employment or education by choice                              | 0 (0)                               | 0 (0)                               |
| Actively seeking employment or further education                           | 4 (12)                              | 6 (21)                              |
| Unknown  | 1 (2)                               | 0 (0)                               |
| Total graduates  | 34 (100)                            | 29 (100)                            |

2) Explain the data presented above, including identification of factors contributing to any rates that do not meet this criterion's expectations and plans to address these factors.

Of the 2017-2018 graduates, 73.5% are employed in some capacity. Including those in education programs this percentage jumps to 85.2%. The alumni from the 2018-2019 academic year are closer to the employment mark at 79.3%, with no additional alumni who are in education programs. While capturing data, in addition to the six students that were actively seeking employment, six currently employed students indicated they are seeking new employment opportunities. The alumni survey questions will be refined to better delineate employed alumni seeking new employment opportunities in order to understand why they are seeking new opportunities. The response rates for collecting post-graduation outcomes is 100%. The program used a combination of surveys and personal contacts through emails and social media to ensure all students post-graduation outcomes were included.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

### Strengths:

 The program has developed the tools to capture data and have identified a process and workplan to capture more information about our alumni. This plan includes working with campus wide Alumni outreach, reviewing social media and networking sites, and including students in the personal outreach to alumni.

#### Weaknesses:

 The alumni survey tool needs to be further aligned with CEPH criteria to ensure employment data meets CEPH requirements (<u>ERF/B3-3/MPH Alumni Survey Instrument</u>) (<u>ERF/B3-3/MPH Alumni Survey Results Cohorts 1 and 2</u>). Post-graduation outcome data collection was not initially systematized. An alumni survey was
created by the Assessment Committee and distributed to applicable cohorts to capture postgraduation outcomes data. The response rate to the distribution of the survey was not
sufficient. In order to complete the data set, an alumna was enlisted to contact all students in
the appropriate cohorts via email and/or social media to collect missing post-graduation
outcomes data.

#### Plans for Improvement:

- Systematic implementation of a post-graduation outcomes data collection process has been a challenge. The program has identified a survey schedule and annual data collection timeline that will be implemented Fall 2020 (ERF/B3-3/Assessment Sequence).
- The program will bring the survey schedule and annual data collection timeline to the April 2020 CAB meeting for input. Recommended revisions to the survey and schedule will be implemented in Fall 2020.
- Every student will receive an alumni survey one year after they finish the program. For
  example, those graduating in the 2018-2019 academic year will be surveyed in May 2020. If
  additional responses to the Alumni survey are needed, the Assessment Committee will work
  with the College Assessment Specialist and the Program Administrative Coordinator to
  contact students who have not responded to the survey when initially contacted. Plans to
  include GoPH in surveying current students is being planned for Fall 2020.
- The Assessment Committee is responsible for coordinating the survey's implementation and reviewing the associated results during the Annual Assessment Retreat and Community Advisory Board meetings.

# B4. Alumni Perceptions of Curricular Effectiveness

For each degree offered, the program collects information on alumni perceptions of their own success in achieving defined competencies and of their ability to apply these competencies in their post-graduation placements.

The program defines qualitative and/or quantitative methods designed to maximize response rates and provide useful information. Data from recent graduates within the last five years are typically most useful, as distal graduates may not have completed the curriculum that is currently offered.

1) Summarize the findings of alumni self-assessment of success in achieving competencies and ability to apply competencies after graduation.

The End-of-Program survey (ERF/B4-1/MPH End-of-Program Survey Instrument) captures student perceptions of their success in achieving the competencies. The End-of-Program survey is administered in each student's final semester. The End-of-Program survey has been administered three times as of February 2020. The first administration was combined to cohorts 1 & 2 with 23 of 44 students responding (52.3% response rate). The second administration was to cohort 3 with 15 of 21 students responding (71.4% response rate). Students felt prepared or very well prepared in all areas with the highest ranked competency area being public health and health care systems (100%), while the lowest ranked competency was applying epidemiologic methods to the breadth of settings in public health practice (69.2%), and basic principles of budget and resource management (77%). Results from End-of-Program survey distributions to date are primarily from students in the Health Education and Health Promotion track (95% of responses). This reflects the later implementation and lower student numbers for the Global Health concentration. The first Global Health cohort started Fall 2017 with four students. Due to low enrollment, the next cohort of Global Health students were admitted Fall 2018 and graduated Fall 2019. This survey includes information for graduates from 2017-2018 (49% of survey respondents) and 2018-2019 (51% of current survey respondents). Overall, most respondents indicated they felt satisfied with the program and perceived they were prepared to apply skills learned during the program.

The Alumni survey (ERF/B3-3/MPH Alumni Survey Instrument) captures student perceptions of their ability to apply CEPH competencies. The alumni survey is administered via email from Qualtrics to each cohort approximately one-year post program completion. As of February 2020, the alumni survey has been administered twice to cohorts 1 & 2 combined with 20 of 36 students responding (55.6% response rate). In the alumni surveys distributed to date, most students self-assessed as feeling confident or highly confident in their ability to apply competencies in eight categories. At least 84% of the students indicated they felt confident or highly confident in the following areas: inter-professional practice (100%), communication of public health information (89%), leadership/principles related to empowerment and collaboration applied to community level of health improvement (84%), systems thinking (84%) and planning and management to promote health (84%).

- 2) Provide full documentation of the methodology and findings from alumni data collection.
  - ERF/B4-2/Evaluation Methodology
  - ERF/B4-2/Alumni and End-of-Program Survey Summary
  - ERF/B4-2/MPH End-of-Program Survey Results Cohorts 1 to 3
  - ERF/B3-3/MPH Alumni Survey Results Cohorts 1 and 2

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

# Strengths:

 Responses to the End-of-Program and alumni surveys indicate high levels of student confidence and satisfaction with achieving and applying the major CEPH foundational competencies.

#### Weaknesses:

 The Program has been implementing alumni assessment activities to meet expectations of both CEPH and the University. This implementation has at times been ad-hoc and driven by immediate needs. The program needs to continue to develop sustainable, systematic assessment processes that ensure it can not only meet accreditation requirements, but also develop a culture of data-driven continuous programmatic improvement.

#### Plans for Improvement:

- An activity sequence for the implementation of surveys and other related activities has been
  created and will be followed starting Fall 2020 (<u>ERF/B3-3/Assessment Sequence</u>). The
  Alumni Survey is distributed to each cohort approximately one-year post-graduation. The
  End-of-Program Survey is sent to graduating students in their final semester.
- The Alumni and End-of-Program surveys have indicated certain areas that need improvement including curriculum overlap and career advising. The program has taken steps to address overlapping topics in the curriculum. Through the self-study process the curriculum was streamlined and adjustments were made. The latest syllabi that reflect these adjustments are found in the ERF (<a href="ERF/D1-2/Syllabi">ERF/D1-2/Syllabi</a>). Career advising will be expanded in the 2020-2021 academic year by providing a Career Workshop created and presented by faculty in public health in collaboration with the University level Career Center on campus.

# **B5. Defining Evaluation Practices**

The program defines appropriate evaluation methods and measures that allow the program to determine its effectiveness in advancing its mission and goals. The evaluation plan is ongoing, systematic and well-documented. The chosen evaluation methods and measures must track the program's progress in 1) advancing the field of public health (addressing instruction, scholarship and service) and 2) promoting student success.

1) Present an evaluation plan that, at a minimum, lists the program's evaluation measures, methods and parties responsible for review. See Template B5-1.

Program assessment on the CSUSM campus involves the systematic evaluation of student learning outcomes. Programs are required to assess Program Student Learning Outcomes (PSLOs) attainment annually and to complete a comprehensive Program Review every five years. Public Health is a new program and will have its first Program Review starting the 21-22 Academic Year. The CSUSM Program Review process is included in the ERF along with the review timeline (ERF/B5-1/prog rev timeline flowchart) (ERF/B5-1/program review timeline) (ERF/B5-1/programreviewpolicyapproved.effective 2011aug18). The MPH Program began its first annual PSLO assessment cycle during the 2017-2018 Academic Year (ERF/B5-1/MPH Assessment Report 2017-2018). The program completed its second PSLO assessment cycle during the 2018-2019 Academic Year (ERF/B5-1/MPH Assessment Report 2018-2019).

Template B5-1. Evaluation Measures

| Goal 1. Engage faculty and students in public health research and practice opportunities to enhance health equity and reduce health disparities in communities.    Measure 1.1  | Evaluation Measure        | Data Collection Method  | Lead        |  |  |
|---|---------------------------|---|-------------|--|--|
| The Assessment Committee Lead reviews faculty CVs in each Fall semester for relevant, new projects and publications addressing health disparities/health equity each year   | Goal 1. Engage faculty an | Goal 1. Engage faculty and students in public health research and practice opportunities to |             |  |  |
| Tenure-track faculty have research projects and publications addressing health disparities/health equity each year  Measure 1.2 Tenure-track Faculty participate in professional development activities to enhance research and scholarly activities each year  Measure 1.3 Eligible students complete MPH field placement experiences or internships each year  CVs in each Fall semester for relevant, new projects and publications. These updates will be discussed at the Annual Assessment Committee Lead reviews faculty CVs each Fall semester for relevant, new projects and publications. These updates will be discussed at the Annual Assessment Retreat in the Spring semester.  The Assessment Committee Lead reviews faculty CVs each Fall semester for relevant, new projects and publications. These updates valued to committee Lead  Program Director & Assessment Committee Lead reviews faculty CVs each Fall semester for relevant, new projects and publications. These updates valued to committee Lead  Program Director & Assessment Committee Lead reviews faculty CVs each Fall semester for relevant, new projects at the Annual Assessment (Committee Lead  Program Director & Assessment Committee Lead reviews faculty CVs each Fall semester for relevant, new projects at the Annual Assessment (Committee Lead  Program Director & Assessment Committee Lead reviews faculty CVs each Fall semester for relevant, new projects at the Annual Assessment (Committee Lead  Program Director & Assessment Retreat in the Spring at the Annual Assessment (Committee Lead  Program Director & Assessment Retreat in the Spring at the Annual Assessment |                           |   |             |  |  |
| have research projects and publications addressing health disparities/health equity each year    Measure 1.2   Tenure-track Faculty participate in professional development activities to enhance research and scholarly activities each year    Measure 1.3   Eligible students complete MPH field placement experiences or internships each year  | Measure 1.1               | •   | •           |  |  |
| and publications addressing health disparities/health equity each year    Measure 1.2   Tenure-track Faculty participate in professional development activities to enhance research and scholarly activities each year    Measure 1.3   Eligible students complete MPH field placement experiences or internships each year   at the Annual Assessment Retreat in the Spring semester.     The Assessment Committee Lead reviews faculty CVs each Fall semester for relevant, new professional development activities. These updates will be discussed at the Annual Assessment Retreat in the Spring semester.   |                           | , , , , , , , , , , , , , , , , , , ,   | Director &  |  |  |
| addressing health disparities/health equity each year    Measure 1.2   The Assessment Committee Lead reviews faculty CVs each Fall semester for relevant, new professional development activities. These updates will be discussed at the Annual Assessment Retreat in the Spring semester.    Measure 1.2   The Assessment Committee Lead reviews faculty CVs each Fall semester for relevant, new professional development activities. These updates will be discussed at the Annual Assessment Retreat in the Spring semester.    Measure 1.3   The Internship Coordinator (IC) tracks the number of students who have completed their field placement experiences or internship activities during regular MPH Program meetings, Advisory Board meetings, and for review   |                           |   |             |  |  |
| disparities/health equity each year    Measure 1.2   Tenure-track Faculty participate in professional development activities to enhance research and scholarly activities each year    Measure 1.3   Eligible students complete MPH field placement experiences or internships each year    Measure 1.3   The Assessment Committee Lead reviews faculty   CVs each Fall semester for relevant, new professional development activities. These updates will be discussed at the Annual Assessment Retreat in the Spring semester.    Program   Committee   Lead   Committee   Lead   |                           |   |             |  |  |
| Measure 1.2 Tenure-track Faculty participate in professional development activities to enhance research and scholarly activities each year  Measure 1.3 Eligible students complete MPH field placement experiences or internships each year  Measure 1.3 Eligible students complete MPH field placement experiences or internships each year  The Assessment Committee Lead reviews faculty CVs each Fall semester for relevant, new professional development activities. These updates will be discussed at the Annual Assessment Retreat in the Spring semester.  The Internship Coordinator (IC) tracks the number of students who have completed their field placement experience or internship. The Internship Coordinator internship activities during regular MPH Program meetings, Advisory Board meetings, and for review  |                           | semester.   | Lead        |  |  |
| The Assessment Committee Lead reviews faculty Tenure-track Faculty participate in professional development activities to enhance research and scholarly activities each year  Measure 1.3 Eligible students complete MPH field placement experiences or internships each year  The Assessment Committee Lead reviews faculty CVs each Fall semester for relevant, new professional development activities. These updates will be discussed at the Annual Assessment Retreat in the Spring semester.  The Internship Coordinator (IC) tracks the number of students who have completed their field placement experience or internship. The Internship Coordinator disseminates summary statistics of internship activities during regular MPH Program meetings, Advisory Board meetings, and for review  |                           |   |             |  |  |
| Tenure-track Faculty participate in professional development activities. These updates will be discussed at the Annual Assessment Retreat in the Spring semester.  Measure 1.3 Eligible students complete MPH field placement experiences or internships each year  The Internship Coordinator (IC) tracks the number of students who have completed their field placement experience or internship. The Internship Coordinator internship activities during regular MPH Program meetings, Advisory Board meetings, and for review  Director & Assessment Committee Lead  Program Director & Assessment Committee Lead  Program Director & Assessment Committee Lead  |                           | The Assessment Committee Lead reviews foculty   | Drague      |  |  |
| participate in professional development activities. These updates will be discussed at the Annual Assessment Retreat in the Spring semester.  Assessment Committee Lead  Assessment Committee Lead  The Internship Coordinator (IC) tracks the number of students who have completed their field placement experiences or internships each year  The Internship Coordinator (IC) tracks the number of students who have completed their field placement experience or internship. The Internship Coordinator disseminates summary statistics of internship activities during regular MPH Program meetings, Advisory Board meetings, and for review  |                           |   | •           |  |  |
| will be discussed at the Annual Assessment Retreat development activities to enhance research and scholarly activities each year  Measure 1.3 Eligible students complete MPH field placement experiences or internships each year  Will be discussed at the Annual Assessment Retreat in the Spring semester.  Committee Lead  Program Director & Internship Coordinator disseminates summary statistics of internship activities during regular MPH Program meetings, Advisory Board meetings, and for review  | _                         | ,   |             |  |  |
| development activities to enhance research and scholarly activities each year    Measure 1.3   The Internship Coordinator (IC) tracks the number of students who have completed their field placement experiences or internships each year   Coordinator disseminates summary statistics of internship activities during regular MPH Program meetings, Advisory Board meetings, and for review   Lead   |                           |   |             |  |  |
| enhance research and scholarly activities each year  Measure 1.3 Eligible students complete MPH field placement experiences or internships each year  The Internship Coordinator (IC) tracks the number of students who have completed their field placement experience or internship. The Internship Coordinator disseminates summary statistics of internship activities during regular MPH Program meetings, Advisory Board meetings, and for review   |                           |   |             |  |  |
| Measure 1.3   The Internship Coordinator (IC) tracks the number of students who have completed their field placement experiences or internships each year   The Internship Coordinator (IC) tracks the number of students who have completed their field placement experience or internship. The Internship Coordinator   Director & Internship Coordinator   | •                         | m me spinig semesiem  |             |  |  |
| Measure 1.3  Eligible students complete MPH field placement experiences or internships each year  The Internship Coordinator (IC) tracks the number of students who have completed their field placement experience or internship. The Internship Coordinator disseminates summary statistics of internship activities during regular MPH Program meetings, Advisory Board meetings, and for review   | scholarly activities each |   |             |  |  |
| Eligible students complete MPH field placement experiences or internships each year  of students who have completed their field placement experience or internship. The Internship Coordinator disseminates summary statistics of internship activities during regular MPH Program meetings, Advisory Board meetings, and for review  | •                         |   |             |  |  |
| complete MPH field placement experience or internship. The Internship Coordinator disseminates summary statistics of internships each year meetings, Advisory Board meetings, and for review  | Measure 1.3               | The Internship Coordinator (IC) tracks the number   | Program     |  |  |
| placement experiences or internships each year Coordinator disseminates summary statistics of internship activities during regular MPH Program meetings, Advisory Board meetings, and for review  |                           |   |             |  |  |
| or internships each year internship activities during regular MPH Program meetings, Advisory Board meetings, and for review   | •                         |   | · ·         |  |  |
| meetings, Advisory Board meetings, and for review   |                           |   | Coordinator |  |  |
|   | or internships each year  | ,   |             |  |  |
| during the Annual Assessment Retreat.   |                           |   |             |  |  |
|   |                           | during the Annual Assessment Retreat.   |             |  |  |
|   |                           |   |             |  |  |
|   |                           |   |             |  |  |
|   |                           |   |             |  |  |
|   |                           |   |             |  |  |
|   |                           |   |             |  |  |

| <b>Evaluation Measure</b> | Data Collection Method                                       | Lead         |
|---------------------------|--|--------------|
| Measure 1.4               | Students submit their Advancement to Candidacy               | Program      |
| Eligible students will    | form to CEHHS Graduate Student Services                      | Director &   |
| complete Integrative      | Coordinator who track students' ILE completion.              | Assessment   |
| learning experience       |  | Committee    |
| (theses and capstone      | Summary data are provided at the program's                   | Lead,        |
| projects) in current      | Beginning of the Year meeting, the Annual                    | Graduate     |
| public health topics per  | Assessment Retreat, and for the Fall Advisory                | Student      |
| cohort within the 18-     | Board meeting.   | Services     |
| month timeframe.          |  | Coordinator  |
| Measure 1.5               | Administered by the Assessment Committee, the                | Assessment   |
| MPH Program alumni        | annual Alumni Survey measures alumni perception              | Committee    |
| will agree or strongly    | of Goal 1 achievement. The results of this question          | Lead &       |
| agree that the program    | will be presented at the Annual Assessment                   | Assessment   |
| meets Goal 1 on the       | Retreat.   | Specialist   |
| alumni survey per         | Notical.   | Орссканас    |
| survey administration     |  |              |
|                           | e body of culturally responsive public health profes         | eionale      |
| Measure 2.1 Recruit       | The Program Director requests student enrollment             | Program      |
| and maintain a diverse    | and demographic data from the University                     | Director &   |
| study body that reflects  | Institutional Planning & Analysis Department. This is        | Assessment   |
| the surrounding           | summarized in preparation for the Annual                     | Committee    |
| community, with at least  | Assessment Retreat.  | Lead         |
| 37% Hispanic, 9%          | Assessment Netreat.  | Leau         |
| Asian, and 2% Black       |  |              |
| students enrolled per     |  |              |
| academic year             |  |              |
| Measure 2.2               | Program Director requests graduation data that are           | Program      |
| Parity between            | compiled by the CEHHS Student Services                       | Director &   |
| graduation rate           | Department. This is summarized in preparation for            | Assessment   |
| of underrepresented       | the Annual Assessment Review Retreat.                        | Committee    |
| minorities and non-       | the Annual Assessment Neview Netreat.                        | Lead         |
| underrepresented          |  | LCaa         |
| minorities (URM) per      |  |              |
| academic year             |  |              |
| Measure 2.3               | The Program Administrative Coordinator collects              | Advising and |
| Non-concentration         | each semester syllabi to submit to Academic Affairs.         | Retention    |
| courses contain didactic  | The Advising and Retention Committee Lead will               | Committee    |
|                           |  | Committee    |
| preparation and/or        | receive a copy of this email and review syllabi for          |              |
| assignments addressing    | completeness and inclusion of knowledge and skills           |              |
| cultural responsiveness   | related to cultural responsiveness.                          |              |
|                           | Availability of accuracy to male to a that to accuracy track |              |
|                           | Availability of course templates that tenure-track           |              |
|                           | faculty and lecturer faculty can use ensures                 |              |
|                           | consistency of courses between instructors and               |              |
|                           | facilitates an easy review. Any issues will be               |              |
|                           | discussed with the committee and brought to the full         |              |
|                           | MPH Program Committee.                                       |              |
|                           |  |              |
|                           |  |              |
|                           |  |              |
|                           |  |              |
|                           |  |              |
|                           |  |              |

| Evaluation Measure          | Data Collection Method                                   | Lead         |
|-----------------------------|--|--------------|
| Measure 2.4                 | The End-of-Program Survey measures student               | Assessment   |
| MPH program                 | satisfaction with program diversity and cultural         | Committee    |
| completers will indicate    | competence. The results of this question will be         | Lead &       |
| satisfied or very satisfied | presented at the Annual Assessment Retreat.              | Assessment   |
| with program diversity      | presented at the Annual Assessment Netroat.              | Specialist   |
| and cultural competence     |  | Opecialist   |
| in each End-of-Program      |  |              |
| survey administration       |  |              |
| Measure 2.5                 | The annual Alumni Survey measures alumni                 | Assessment   |
| MPH Program alumni          | perception of Goal 2 achievement. The results of         | Committee    |
| will agree or strongly      | this question will be presented at the Annual            | Lead &       |
| agree that the program      | Assessment Retreat.                                      | Assessment   |
| meets Goal 2 on the         | Assessment Netreat.                                      | Specialist   |
| alumni survey per           |  | Specialist   |
|                             |  |              |
| survey administration       | l<br>ealth professionals with knowledge and skills relev | ant to       |
|                             | and evaluating community-engaged programs.               | ant to       |
| Measure 3.1                 | The Program Administrative Coordinator collects          | Advising and |
| Non-concentration           | each semester syllabi to submit to Academic Affairs.     | Retention    |
| courses contain didactic    | The Advising and Retention Committee Lead will           | Committee    |
| preparation and/or          | receive a copy of this email and review syllabi for      | Committee    |
| assignments addressing      | completeness. and inclusion of knowledge and skills      |              |
| planning, implementing,     | related to planning, implementing and/or evaluating      |              |
| and/or evaluating public    | public health programs.                                  |              |
| health programs             | public ricular programs.                                 |              |
| nealth programs             | Availability of course templates that tenure-track       |              |
|                             | faculty and lecturer faculty can use ensures             |              |
|                             | consistency of courses between instructors and           |              |
|                             | facilitates an easy review. Any issues will be           |              |
|                             | discussed with the committee and brought to the full     |              |
|                             | MPH Program Committee.                                   |              |
| Measure 3.2                 | The annual Alumni Survey measures alumni                 | Assessment   |
| t Alumni will agree or      | perception of Goal 3 achievement. The results of         | Committee    |
| strongly agree program      | this question will be presented at the Annual            | Lead &       |
| meets Goal 3 in each        | Assessment Retreat.                                      | Assessment   |
| alumni survey               |  | Specialist   |
| administration              |  |              |
| Measure 3.3                 | The End-of-Program Survey measures student               | Assessment   |
| Students will indicate      | perceptions of how well the program prepared them        | Committee    |
| they felt prepared or       | to meet the Program Student Learning Outcomes            | Lead &       |
| well-prepared to meet       | (PSLOs). PSLOs 2-4 are aligned to program Goal           | Assessment   |
| PSLOs 1-3 on the End-       | 3. Results are reviewed yearly by the Program            | Specialist   |
| of- Program satisfaction    | Director, Assessment Committee and Faculty.              | •            |
| surveys per survey          | •  |              |
| administration              |  |              |
| Measure 3.4 Student         | Students of each graduating cohort submit their          | Program      |
| involvement in theses       | Proposal Approval Form to the Administrative             | Director &   |
| and capstone projects       | Coordinator who will track the number of community       | Assessment   |
| with community-             | engaged projects Summary data are provided at the        | Committee    |
| engaged interventions       | Beginning of the Year department meeting, the            | Lead         |
| and programs                | Annual Assessment Retreat, and for the Fall              |              |
| 2 2 2 3 2                   | Advisory Board meeting.                                  |              |
|                             | 1  |              |

2) Briefly describe how the chosen evaluation methods and measures track the program's progress in advancing the field of public health (including instruction, scholarship and service) and promoting student success.

#### Goal 1: Scholarship and Research

Having faculty active in research and scholarship contributes to the field overall. This informs their teaching and applied practice activities on health disparities.

## Goal 2: Culturally Competent Workforce building as service

Working with our local communities to build a culturally competent workforce is a form of service. As students graduate from our program, they bring these skills to area community clinics, social service entities and public institutions. Being able to work with communities using their cultural awareness lens only strengthens these community resources that contribute to a healthy community.

### Goal 3: Instruction of skills

The instruction of program planning and evaluation are skills routinely applied in the field. These skills are vital to iterative improvement processes used to improve health programming in communities.

- 3) Provide evidence of implementation of the plan described in Template B5-1. Evidence may include reports or data summaries prepared for review, minutes of meetings at which results were discussed, etc. Evidence must document examination of progress and impact on both public health as a field and student success.
  - ERF/B5-3/MPH Alumni Survey Results Measures 1.5\_2.5\_3.2
  - ERF/B5-3/MPH Priority Student Populations Measure 2.1
  - ERF/B5-3/MPH URM Parity Data Measure 2.2
  - ERF/B5-3/MPH Cultural Competence Data Measure 2.4
  - ERF/B5-3/MPH PSLO Data Measure 3.3
- 4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

# Strengths:

The program strengths are in the alignment of values between the program and the
University. The scholarly requirements for faculty in the MPH Program are required at three
different levels: the university, the college and the program itself (ERF/B5-4/RTP
Documents). The MPH Program defines in more detail the general requirements set forth by
the university and the college. The values of community engagement and cultural awareness
also align with the university's values.

#### Weaknesses:

- The program needs a cohesive and comprehensive assessment and evaluation process.
- The program has been working toward these metrics, but a streamlined, systematized data collection and analysis process has yet to be finalized.
- The current measures are over-reliant on End-of-Program and Alumni survey data.
- Attempting to implement the existing goals and measures, the program encountered challenges. Ultimately the MPH Program felt that the current goals and measures did not reflect the vision and mission of the program.

# Plans for Improvement:

• Through continued process improvement and the CEPH self-study process, the program faculty felt that the previously established goals and measures were not reflective of the program's mission and vision. The Spring 2020 faculty retreat involved significant revisions to the goals and measures for implementation in the 2020-2021 academic year. The revision of goals and measures include more defined activities, roles and responsibilities, and timing of data collection. The revision of the goals and metrics are slated for discussion during the Spring 2020 CAB meeting. Data collection for these metrics is planned to begin next academic year (ERF/B1-2/MPH Assessment Retreat-Program Metric Discussion 1.16.20) (ERF/B5-4/Revised Goals and Metrics Feb 16 2020) (ERF/A3-2/CEPH Assessment Retreat Follow-Up 2.7.20).

### **B6.** Use of Evaluation Data

The program engages in regular, substantive review of all evaluation findings, as well as strategic discussions about the implications of evaluation findings.

The program implements an explicit process for translating evaluation findings into programmatic plans and changes and provides evidence of changes implemented based on evaluation findings.

1) Provide two to four specific examples of programmatic changes undertaken in the last three years based on evaluation results. For each example, describe the specific evaluation finding and the groups or individuals responsible for determining the planned change, as well as identifying the change itself.

As a part of the self-study process (see sections G1-1 to G1-3), the program identified that its student body is not reflective of the surrounding community in terms of its Hispanic/Latino enrollment (ERF/B5-3/MPH Priority Student Populations – Measure 2.1). The local community is 37% Hispanic/Latino, while the program's current population is 30% Hispanic/Latino. The program is working with Extended Learning, whose purview includes recruitment, to increase awareness of the program on campus and in the local Hispanic/Latino community. Extended Learning has implemented strategies to increase awareness of the program on campus through information sessions. Recruitment in the local Hispanic/Latino community is done by attending community events and online through social media and networking platforms.

End-of-Program surveys administered to Cohorts 1-3 showed students were consistently dissatisfied with Career Counseling offered by the program (<a href="ERF/B4-2/MPH End-of-Program">ERF/B4-2/MPH End-of-Program</a> Survey Results Cohorts 1 to 3). Results of these surveys were discussed at the MPH Program Meeting and faculty agreed the program needs to develop a comprehensive and strategic approach to career advising. Plans already developed include a Career Readiness Workshop that has a scope of work developed. Current plans are to offer the workshop Summer 2020 (<a href="ERF/H2-5/MPH Career Readiness Workshop Proposal">ERF/H2-5/MPH Career Readiness Workshop Proposal</a>).

Initial student surveys indicated the course sequence did not give them time to learn certain skills before needing to apply them toward their thesis. The Assessment Committee administered the survey and brought the results to the MPH Program Committee. The faculty agreed to make adjustments to the schedule (ERF/B4-2/MPH End-of-Program Survey Results Cohorts 1 to 3). The Graduate Written Assessment Requirement was moved to later in the sequence to allow students more time to develop their graduate level academic writing skills. The program also made course schedule adjustments for PH 507, the thesis proposal class, in order to better time the introduction of these skills. These changes were implemented Fall 2017.

2) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

#### Strengths:

• The Program has responded to a significant portion of the student feedback obtained through End-of-Program and Alumni surveys by making initial programmatic changes.

#### Weaknesses:

- The use of evaluation data to inform program improvement is in its early stages. We are working on improving our review processes to ensure that we are utilizing data we collect to effect meaningful improvements.
- Evaluation findings review has primarily occurred in MPH Program Committee meetings.
   These meetings typically have full agendas, which can result in discussions of evaluation findings not being as thorough as required.

# Plans for Improvement:

- The Assessment Committee will meet regularly going forward. This committee will engage in a regular substantive review of all evaluation findings. These findings will be summarized and disseminated, and key items will be brought to the MPH Program Meeting for discussion and action
- The program is developing an Annual Assessment Retreat that will occur each Spring semester starting Spring 2020. The Spring 2020 retreat was focused on revising the program's goals and measures. Future retreats will include all program faculty and will involve a complete review of the program's progress in meeting its stated goals and measures. Additionally, CAB members will be invited to participate in future Annual Assessment Retreats.
- The program will work to engage the Community Advisory Board further in the areas of and the use of evaluation data. The Assessment Committee will share evaluation findings with the CAB in both semi-annual meetings starting during the 2020-2021 academic year in order to solicit feedback leading to continuous improvement.

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### C1. Fiscal Resources

The program has financial resources adequate to fulfill its stated mission and goals. Financial support is adequate to sustain all core functions, including offering coursework and other elements necessary to support the full array of degrees and ongoing operations.

- 1) Describe the program's budget processes, including all sources of funding. This description addresses the following, as applicable:
  - a) Briefly describe how the program pays for faculty salaries. If this varies by individual or appointment type, indicate this and provide examples. If faculty salaries are paid by an entity other than the program (such as a department or college), explain.

The MPH program at CSUSM operates under a self-support model, where the program does not receive any funding from the State of California to cover any of its direct operating expenses or indirect expenses. As such, faculty salaries are exclusively funded through the revenue generated from the program via paid student tuition fees. The rationale to offer this program through Extended Learning and not draw on state-funds comes from the limited "growth funds" offered to CSUSM from the CSU Chancellor's Office. With limited growth funds, CSU campuses have the flexibility to launch new programs via Extended Learning utilizing a self-support model.

The CEHHS and Extended Learning Dean's offices work collaboratively to determine the direct operating expenses, and accompanying indirect expenses, for every academic year. These total expenses, in turn, determine the enrollment targets needed in order to generate the appropriate tuition revenue required to cover all expenses.

b) Briefly describe how the program requests and/or obtains additional faculty or staff (additional = not replacements for individuals who left). If multiple models are possible, indicate this and provide examples.

All requests for full-time faculty, lecturer, and staff positions are vetted by faculty and the MPH Program Director at the MPH Program Committee. As a self-support program, all ongoing and one-time expenditures are considered in light of student enrollment and related tuition revenues. Once hiring decisions are discussed at the MPH Program Committee level, the MPH Program Director will follow a newly adopted budget process set forth by the Self-Support Instructional Budget Advisory Committee (SSIBAC). Along with the rationale or justification, all requests are forwarded for the approval of the Deans of CEHHS and EL, the Provost, and the President. The faculty and staffing needs for the MPH program, including conducting faculty/staff searches follow the policies and guidelines outlined by CSUSM Faculty Affairs and CEHHS. All policies prescribed for the recruitment of university personnel are in accordance with those formulated by Chancellor's Office for all 23 campuses within the California State University system. Additionally, these policies are in agreement with applicable federal and state laws and align with the Collective Bargaining Agreements (CBAs) between the California State University Board of Trustees and the California Faculty Association (CFA) and the California State University Employees Union (CSUEU).

Lecturer faculty (part-time) are not included in the SSIBAC hiring model. Once tenure-track faculty teaching assignments have been established, any remaining courses that require an instructor follow a protocol for hiring. The protocol for hiring begins with a discussion on the teaching needs of the program followed by advertisement for lecturers join a pool of part-time faculty in support of the program's teaching/course assignment needs. Lecturer faculty submit their curriculum vitae and the MPH Program Director uses these to vet their qualifications to fulfill course assignments not allocated

to tenure-track faculty. The funds needed to staff these courses are also drawn from the MPH program budget.

- c) Describe how the program funds the following:
  - a. operational costs (programs define "operational" in their own contexts; definition must be included in response)

The MPH program at CSUSM functions in a self-support capacity, and as such the tuition revenue received from enrolled students funds the operational costs of the program. Operational costs are those that can be directly attributed to the resources and activities related to administer the program. The operational costs of the MPH are (but not limited to):

- Faculty Program Director Salary and Benefits
- Full Time Faculty Salaries and Benefits
- Internship Coordinator Salary and Benefits
- Lecturer Faculty Salaries and Benefits
- Program Staff Salaries and Benefits
- Graduate Research Assistants or Teaching Assistants
- Library Support for discipline-specific journals and databases not already purchased by the CSUSM library.
- Accreditation Related Expenses (Fees, Consultant, Site Visit, etc.)
- Office Equipment & Supplies (Telephones, Computers, Paper, etc.)
- Faculty Travel (Conferences, Mileage, Accommodations, etc.)
- Hospitality Related Expenses (Venue, Food, Coordination, etc.)
- Marketing and Outreach (Promotional Collateral, Printing, Digital Ads, etc.)
- b. student support, including scholarships, support for student conference travel, support for student activities, etc.

The MPH program has funds in the budget designated for hiring of Graduate Assistants to support faculty in their teaching and/or research activities. Typically, at the start of the fall semester, each faculty member desiring to hire a Graduate Assistant for the academic year will complete and submit a request form (i.e., Request for Employing a Graduate or Research Assistant) to the MPH Program Director for approval. Upon approval, the MPH Administrative Support Coordinator will complete all necessary paperwork and obtain needed signatures required to process the application by the Office of Human Resources.

Also, the Dean of CEHHS and the Office of Graduate Studies and Research provide access to funds to graduate students to support their conference travels and other expenses. MPH graduate students are eligible to apply for these funds on an annual basis. For example, CEHHS allocated \$5,000.00 in the 2018-2019 Academic Year to support student travel. Two MPH students received travel awards of \$300 and \$305 respectively. Finally, MPH students' activities are organized and funded by the Graduate Organization of Public Health, the official club for all enrolled public students in the program.

c. faculty development expenses, including travel support. If this varies by individual or appointment type, indicate this and provide examples

Every faculty is provided with a start-up fund by the Dean of CEHHS at the time of hire. This initial start-up fund is often negotiated and varies from one faculty to another based upon their negotiation with the Dean of CEHHS. Additionally, the Dean of CEHHS provides each faculty with a professional development fund of \$1,000.00 every year. This

fund is typically used to support faculty travels and other expenses required to attend conferences, workshops, seminars, etc.

d. In general terms, describe how the program requests and/or obtains additional funds for operational costs, student support and faculty development expenses.

All other operational costs not delineated as a direct expense within the finalized program budget for the academic year must be approved by the Dean's offices of both CEHHS and Extended Learning. Other funds for professional development may be requested from the CSUSM Faculty Center or Office of Graduate Studies and Research. Typically, these other sources are based on request and disbursed on the basis of first come first serve, depending on availability of funds. In light of the new SSIBAC budgeting model, programs are expected to anticipate needs and include these expenses in their annual budget proposal.

d) Explain how tuition and fees paid by students are returned to the program. If the program receives a share rather than the full amount, explain, in general terms, how the share returned is determined. If the program's funding is allocated in a way that does not bear a relationship to tuition and fees generated, indicate this and explain.

All tuition revenue received from students enrolled in all self-support programs at CSUSM cover the direct operational expenses associated with the MPH program, the indirect expenses needed to administer these programs, as well as a contingency fund. The total surplus from all programs are first used to cover any deficits in any particular program if necessary. Next, remaining surpluses are proportionally redistributed back to the respective college and academic department of each program. As such, if the MPH program generates a surplus then 75% of this surplus will go back to the program and the remaining 25% goes to CEHHS. This revenue distribution model is outlined and detailed in an overarching Memorandum of Understanding approved by CSUSM's president.

The fees collected from students matriculated into all degree seeking programs do not directly go to any college, academic department or program, but are used to provide services benefitting all students at CSUSM. The table below shows the student fees for the fall 2019 semester based on if the student is pursuing a fully online program or not:

Table C1-d. Student Fees

| Fees   | Campus Fall 2019 | Online 2019 |
|--|------------------|-------------|
| Academic Records                               | \$12.00          | \$12.00     |
| Associated Students                            | \$75.00          | N/A         |
| Athletics                                      | \$100.00         | N/A         |
| Child Care Services                            | Opt-In \$10      | Opt-In \$10 |
| Health Services                                | \$75.00          | Opt-In \$75 |
| Health Facilities                              | \$20.00          | Opt-In \$20 |
| EL Technology Fee                              | \$48.00          | \$48.00     |
| Academic Excellence and Student Success (AESS) | \$250.00         | N/A         |
| Mental Health                                  | \$88.00          | Opt-In \$88 |
| Recreation                                     | \$35.00          | Opt-In \$35 |
| Student Union                                  | \$315.00         | N/A         |
| Instructionally Related Activities (IRA)       | \$5.00           | N/A         |
| TOTAL  | \$1,023.00       | \$60.00     |

e) Explain how indirect costs associated with grants and contracts are returned to the program and/or individual faculty members. If the program and its faculty do not receive funding through this mechanism, explain.

According to the current CSUSM's University Auxiliary and Research Services Corporation (UARSC) Policy on the Allocation of Facilities and Administrative Costs (Indirect Costs or IDCs) resulting from grants and contracts to the university are distributed. The distribution is as follows: 10% to the Primary Investigator (PI), 10% to the Pl's home Department, 35% to the Office of Graduate Studies and Research, 30% to the College, and 15% to Academic Affairs, Provost's Office. Where there is more than one PI, the split among the PIs, departments, and colleges, will be determined by negotiation among the relevant parties at the time of grant submission.

If the program is a multi-partner unit sponsored by two or more universities (as defined in Criterion A2), the responses must make clear the financial contributions of each sponsoring university to the overall program budget. The description must explain how tuition and other income is shared, including indirect cost returns for research generated by the public health program faculty appointed at any institution.

Not applicable to CSUSM.

2) A clearly formulated program budget statement in the format of Template C1-1, showing sources of all available funds and expenditures by major categories, for the last five years.

Template C1-1. Sources of Funds and Expenditures

| Sources of Funds and Expenditures by Major Category, 2016-2017 to 2018-2019 |                       |               |                 |  |
|---|-----------------------|---------------|-----------------|--|
|   | AY 2016-17 AY 2017-18 |               | AY 2018-19      |  |
| Source of Funds   |                       |               |                 |  |
| Tuition & Fees  | \$ 585,877.15         | \$ 927,864.02 | \$ 1,385,591.70 |  |
| Total   | \$ 585,877.15         | \$ 927,864.02 | \$ 1,385,591.70 |  |
|   |                       |               |                 |  |
| Expenditures  |                       |               |                 |  |
| Faculty Salaries & Benefits   | \$ 497,533.04         | \$ 702,149.45 | \$ 721,918.11   |  |
| Staff Salaries & Benefits   | \$ 35,303.00          | \$ 67,363.79  | \$ 60,908.29    |  |
| Operations  | \$ 43,041.34          | \$ 19,745.11  | \$ 23,135.34    |  |
| Travel  | \$ 7,989.61           | \$ 6,685.83   | \$ 10,841.29    |  |
| University Tax  | \$ 125,842.98         | \$ 154,461.01 | \$ 208,351.23   |  |
| Total   | \$ 709,709.97         | \$ 950,405.19 | \$ 1,025,154.26 |  |

Note: As a new self-support program, the deficits noted in Year 1 and Year two were absorbed by Extended Learning which is permitted on our campus and noted in the CEHHS/Extended Learning Memorandum of Understanding. After three years, self-support programs across campus are expected to operate in a revenue neutral or revenue positive model.

If the program is a multi-partner unit sponsored by two or more universities (as defined in Criterion A2), the budget statement must make clear the financial contributions of each sponsoring university to the overall program budget.

Not applicable to CSUSM.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

With the adoption of an entirely new budgeting planning and proposal process (SSIBAC), the MPH Program looks forward to having even greater authority and control over fiscal planning and budgeting operation. In lieu of negotiating for resources throughout the year, the program proposes a budget one year in advance and is approved for expenditures in advance for the following academic year. The expectation is that the new model will assist program in longer-term planning for their budgetary needs.

### C2. Faculty Resources

The program has adequate faculty, including primary instructional faculty and non-primary instructional faculty, to fulfill its stated mission and goals. This support is adequate to sustain all core functions, including offering coursework and advising students. The stability of resources is a factor in evaluating resource adequacy.

Students' access to a range of intellectual perspectives and to breadth of thought in their chosen fields of study is an important component of quality, as is faculty access to colleagues with shared interests and expertise.

All identified faculty must have regular instructional responsibility in the area. Individuals who perform research in a given area but do not have some regular expectations for instruction cannot serve as one of the three to five listed members.

1) A table demonstrating the adequacy of the program's instructional faculty resources in the format of Template C2-1.

|   | FIRST DEGREE LEVEL                  |  |                           | ADDITIONAL FACULTY* |
|---|-------------------------------------|--|---------------------------|---------------------|
| CONCENTRATION                             | PIF 1*                              | PIF 2*                                   | FACULTY 3 <sup>^</sup>    |                     |
|   |                                     |  |                           |                     |
| Health Promotion and Health Education MPH | Dr. Christina<br>Holub<br>(FTE=1.0) | Dr. Deborah<br>Morton<br>(FTE=1.0)       | Lisa Bandong<br>(FTE=1.0) | PIF: 0, Non-PIF:    |
|   |                                     |  |                           |                     |
| Global Health<br>MPH                      | Dr. AsherLev<br>Santos<br>(FTE=1.0) | Dr. Emmanuel<br>lyiegbuniwe<br>(FTE=1.0) | Lisa Bandong<br>(FTE=1.0) | PIF: 0, Non-PIF: 2  |
|   |                                     |  |                           |                     |
| Total Faculty:                            | Named PIF                           | 5  |                           |                     |
| -   | Total PIF                           | 5  |                           |                     |
|   | Non-PIF                             | 6  |                           |                     |

Template C2-1. Primary Instructional Faculty (Programs)

2) Explain the method for calculating FTE for faculty in the templates and evidence of the calculation method's implementation. Programs must present calculation methods for primary instructional and non-primary instructional faculty.

The calculation of the Full Time Equivalent (FTE) for the MPH program is aligned with the University's FTE calculation and aligns with our CSU Collective Bargaining Agreement. Faculty contracts cover the entire academic year (AY) which includes both the Fall and Spring semester. Each CSUSM MPH tenure-track faculty is expected to teach 18 weighted teaching units (WTU) annually. This teaching load converts to 6 courses annually per year. The FTE values for instructional faculty is calculated using the University's required instructional load as the denominator and the number of MPH courses taught in the numerator. For Non-primary instructional faculty, they are employed as instructors only and are offered 3 WTU for each course they teach. As noted in Template E1-2, non-primary faculty have only taught one 3-unit course per semester which accounts for a .20 FTE. As non-primary (lecturer) faculty, they do not have responsibilities for advising or research.

As of Fall 2019, the MPH Program Director is a college administrator who has been appointed to the interim role of MPH Program Director while we seek a faculty member to fulfill duties. Apart

from this interim support, more commonly, the Director of the MPH program maintains a reduced instructional load due to their administrative duties. The MPH Program Director maintains an instructional load of 0.5 FTE or 3 courses per academic year. Due to their instructional obligations as well as their administrative contributions to the MPH program, the Program Director contributes what is considered 1.0 FTE to the MPH program.

3) If applicable, provide a narrative explanation that supplements reviewers' understanding of data in the templates.

Ms. Lisa Bandong serves as a full-time equivalent lecturer faculty member. Given her appointment as the Coordinator for Internships, she supports students from both concentrations and has also taught selected courses in the MPH program. As a full-time lecturer faculty (nontenure-track), her annual 30 WTU appoint is 100% dedicated to instructional activities, which includes some academic advising.

4) Data on the following for the most recent year in the format of Template C2-2. See Template C2-2 for additional definitions and parameters.

Template C2-2. Faculty Regularly Involved in Advising, Counseling, and Integrative Experiences

| General advising & career counseling   |         |     |     |
|--|---------|-----|-----|
| Degree level                           | Average | Min | Max |
| Bachelor's                             | n/a     | n/a | n/a |
| Master's                               | 21      | 15  | 35  |
| Doctoral                               | n/a     | n/a | n/a |
|  |         |     |     |
| Advising in MPH integrative experience |         |     |     |
| Average                                | Min     | Max |     |
| 6.5                                    | 3       | 7   |     |

The average number of advisees is only for tenure-track faculty. Students are assigned to faculty members upon matriculation. Once students have advanced to candidacy, they work with their thesis/project committee chairs for advising. Since only tenure-track faculty can be committee chairs, this metric also only includes tenure-track faculty.

5) Quantitative data on student perceptions of the following for the most recent year:

The End-of-Program Survey provides quantitative data on students' perceptions of class size and availability of faculty. Faculty developed an End-of-Program Survey during the 2017-2018 academic year. The survey is sent to all MPH students via email using the Qualtrics software tool and the survey has been administered twice to date. The first administration was in July 2018 to Cohorts 1 and 2. Response rates were 13 of 26 (50%) for Cohort 1 and 10 of 18 (55.6%) for Cohort 2. The second administration was in February 2019 to Cohort 3. The response rate was 15 of 21 (71.4%).

 Class size and its relation to quality of learning (e.g., The class size was conducive to my learning)

MPH End-of-Program survey administered via email on 2/26/2019 to Cohort 3 completers. 15 of 21 responses yielded a 71.4% response rate to the following prompt:

Q3 - Please indicate your level of satisfaction with the following elements of your program: Class sizes being conducive to learning

Very satisfied

Satisfied

Dissatisfied

Very dissatisfied

0 1 2 3 4 5 6 7 8

Figure C2-5a. Student Satisfaction with Class Size

The results suggest that 100% of our Cohort 3 students who responded (71% response rate) felt satisfied or very satisfied that class sizes were conducive to their learning. Notably, these results were an improvement from the first survey administered in 2017-2018 which indicated a 95% satisfaction rate.

b. Availability of faculty (ie, Likert scale of 1-5, with 5 as very satisfied)

MPH End-of-Program survey administered via email on 2/26/2019 to Cohort 3 completers. 15 of 21 responses yielded a 71.4% response rate to the following prompt:

Q3 - Please indicate your level of satisfaction with the following elements of your program: Faculty availability and responsiveness

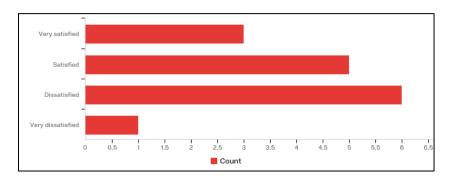


Figure C2-5b. Student Satisfaction with Faculty Availability

The results suggest that 53% of our Cohort 3 students who responded (71% response rate) felt satisfied or very satisfied that their faculty were available and responsive. 46% were dissatisfied or very dissatisfied with the availability and responsivity of their faculty. Notably, these results were different from the first administration of the survey in 2018-2018. In that survey, 75% of the students felt satisfied or very satisfied that their faculty were available and responsive. In 2017-2018, 25% were dissatisfied (n=4) or very dissatisfied (n=1) with the availability and responsivity of their faculty. This drop in satisfaction is addressed in the weaknesses and plans for improvement noted below.

6) Qualitative data on student perceptions of class size and availability of faculty (summary in self-study and full results/backup documentation in electronic resource file.)

Within the same Qualtrics survey, students were provided the opportunity to offer qualitative feedback on the two prompts noted above in item five. Not surprising, students offered positive

feedback on the class size and offered insightful feedback on the availability of their faculty and their responsiveness. The primary dissatisfaction themes that emerged from these qualitative data include:

- Difficulty with the accelerated nature of the program and the demands this places on students needing timely support. However, they felt support was variable among the faculty.
- Greater resources needed for additional faculty advising and staff support.
- Increased need for clarity and communication between program faculty and students.
- Increased need for career advising.
- Concerns regarding program organization and leadership were expressed.

Full data sets are available in the electronic resource file (<u>ERF/C2-6/2017-2018 Student Satisfaction Survey Data</u>) (<u>ERF/C2-6/2018-2019 Student Satisfaction Survey Data</u>).

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

#### Strengths:

- Class size and its impact on the quality of learning is a strength of the program.
- CEHHS leadership have assisted the MPH program in addressing some of the program organization and program leadership concerns expressed by the students.

#### Weaknesses:

- The data from the most recent End-of-Program Survey suggest that several students were clearly dissatisfied with several important topics that need attention as noted in C2-6 above.
- While the response rate to the End-of-Program Survey improved between the first and second administration, changing the administration of the survey may yield an even higher response rate.

### Plans for Improvement:

- Due to competing priorities, faculty did not do a comprehensive review of the End-of-Program survey results in the Fall 2019 semester. Faculty reviewed the committee charges during an ad-hoc faculty meeting on February 7<sup>th</sup>, 2020. The charge of the Assessment committee was strengthened to include reviewing the results of all surveys on an ongoing basis and reporting findings to the full MPH Program Committee during regularly scheduled meetings.
- In addition, program faculty will meet during the Fall 2020 retreat to discuss the recent student perceptions noted in the End-of-Program survey results and determine what actions need to be taken to address student concerns. This collection time was included in the roles and responsibilities of the Assessment committee.
- Program faculty have discussed changing the distribution process for the End-of-Program Survey from email to either an activity embedded in a course or into the program completion process to further improve response rates. Faculty decided to continue to distribute the survey via email in Fall 2020, but the emails will be supplemented with reminders from Committee Chairs and Student Services staff to encourage survey completion.

### C3. Staff and Other Personnel Resources

The program has staff and other personnel adequate to fulfill its stated mission and goals. The stability of resources is a factor in evaluating resource adequacy.

1) A table defining the number of the program's staff support for the year in which the site visit will take place by role or function in the format of Template C3-1. Designate any staff resources that are shared with other units outside the unit of accreditation.

Template C3-1. Staff Support

| Role/function   | FTE          |
|---|--------------|
| Administrative Support Coordinator                                  | 1.0          |
| Assessment Specialist, CEHHS Student Services (Shared)              | .17 (shared) |
| Graduate Student Services Coordinator, CEHHS Student Services       |              |
| (Shared)  | .17 (shared) |
| Health Sciences Librarian (Shared)                                  | .25 (shared) |
| Program Administrator, CEHHS, Extended Learning - Programs (Shared) | .17 (shared) |

2) Provide a narrative description, which may be supported by data if applicable, of the contributions of other personnel.

The MPH Program currently has one full-time Administrative Support Coordinator and additional staff support provided by the Office of Extended Learning, CEHHS Student Services and the University Library. Heidi Burney is the Administrative Support Coordinator for the MPH program who oversees the implementation and adherence to program budgets, scheduling meetings, building class schedules, student enrollment and matriculation, procurement, assisting with accreditation-related items, registration, orientation, preparing travel, and being the main contact for the program, and other assigned functions.

Erika Ervin is the Director of Special Session Credit Programs for Extending Learning who supports operational features of the MPH Program. She serves as a liaison between EL and CEHHS and works on issues that may arise in day-to-day functions of the "self-support" program. The team at Extending Learning work with MPH faculty to perform the admissions process for the program.

Nam Nguyen is the Graduate Student Services Coordinator in the CEHHS Student Services department. CEHHS Student Services is charged with the day-to-day advising for matriculated MPH candidates. The staff monitors degree progression, graduation evaluations, and maintains each candidate's Academic Requirement Report (ARR). Staff also supports candidates through university administrative procedures such as leaves of absences, late course registrations and withdrawals, and Office of Graduate Students & Research (OGSR) policy exceptions. In addition, the CEHHS Student Services staff works in collaboration with the OGSR, CEHHS Dean's Office and MPH faculty regarding academic probation, disqualification and statements of concerns.

Kyle Landin is the Assessment Specialist in the CEHHS-Student Services department. This staff position is responsible for supporting the assessment and accreditation efforts of all programs within the college in meeting the standards of regional, state, national, and professional accrediting bodies.

Tricia Lantzy is the Health and Human Services Librarian and is dedicated to assisting our MPH students and faculty with any research related questions.

3) Provide narrative and/or data that support the assertion that the program's staff and other personnel support is sufficient or not sufficient.

The current level of staffing and other personnel support of the MPH is currently considered sufficient. The program has been able to accomplish all administrative and operational duties, efficiently and in a timely manner with the current level of staff and personnel support over the past three academic years. Notably, as a self-support program, the Program Director, in collaboration with the program faculty, review the support needs of the program and will build in additional support needs into their budget as the need arises.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

None identified at this time.

### C4. Physical Resources

The program has physical resources adequate to fulfill its stated mission and goals and to support instructional programs. Physical resources include faculty and staff office space, classroom space, student shared space and laboratories, as applicable.

1) Briefly describe, with data as applicable, the following. (Note: square footage is not required unless specifically relevant to the program's narrative.)

### Faculty office space

In August 2019, the MPH program moved to a new academic building on campus, the Extended Learning Building. In this new building, the MPH faculty have their own MPH area comprising of 6 offices, as well as an open work area with cubicles. These offices and workspaces are utilized by the Program Director, four tenure-track faculty members, one full-time lecturer, and cubicle space is available for lecturer faculty and graduate research assistants as needed.

# Staff office space

The MPH program has one staff, the Administrative Support Coordinator, whose workspace is within the dedicated MPH program area in the new Extended Learning Building.

#### Classrooms

There are 70 classrooms on the main campus, as well as 23 computer labs and 57 laboratories/studios. MPH classes are typically held in classrooms within University Hall and Markstein Hall. Additionally, starting from the Fall 2019 semester the MPH program has access to schedule classes in the new Extended Learning Building. This building consists of an additional 19 instructional spaces (labs/classrooms), one of which is a 72-seat computer lab that can be turned into two 36-seat computer labs with an operable partition wall, along with two Biology Labs. Access to all other campus classrooms is available through the University-wide scheduling program. The MPH Administrative Support Coordinator, in conjunction with the designated EL staff member, coordinates scheduling of classrooms. Typically, faculty have the privilege to request a specific type of classroom to meet their instructional needs (e.g., a computer lab for SPSS or research classes). Considering that CSUSM is a relatively new campus (30 years), several classrooms were constructed as "smart" classrooms equipped with teaching technologies such as built-in computers, projectors, fast wired and wireless networking, and media equipment.

### Shared student space

There are several common spaces available for students to use on campus. The library has a variety of conference rooms and open seating available for use. The Amphitheater is a unique space that can seat around 400 people outdoors and allows students to comfortably connect with one another while enjoying some fresh air. The activity center in the University Student Union provides fun activities for students and members in the community including table games, console gaming, and discount ticket sales. It also has a large lounge area that overlooks the city of San Marcos. The Commuter Lounge is a common space that is available to all students that provides them with a variety of resources, including plentiful seating, microwaves, vending machines, sinks, nearby showers and lockers. CSUSM also has a Serenity Lounge where students can escape the "hustle and bustle" of campus life. This technology free area helps promote a peaceful environment for all users. Furthermore, there are several student lounge areas

in the new Extended Learning Building, as well as study and presentation rooms. The new Extended Learning Building is also home to the Mathematics Lab, Writing Center, Academic Success Center, Language Learning Center, STEM Institute and STEM Center, which are all resources dedicated for students.

Laboratories, if applicable to public health degree program offerings

In 2016, Extended Learning allocated a dedicated lab space to Dr. Emmanuel lyiegbuniwe. The laboratory is equipped with various environmental and occupational health instruments designed for industrial hygiene sampling and analysis.

2) Provide narrative and/or data that support the assertion that the physical space is sufficient or not sufficient.

The current physical space for the MPH program is sufficient for the four tenure-track faculty, one lecturer, and one administrative staff. However, it is anticipated that as the program continues to grow, more office spaces will be needed in the near future. The area dedicated to the MPH program in the new Extended Learning building ensures that there is some room for growth if needed in the near future.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

### Strengths:

- The new Extended Learning Building (ELB) provides a lot more dedicated space for faculty, staff and graduate research assistants, as well as more space for students to study, work on project and receive academic support
- The new computer labs in the ELB have Statistical Package for the Social Sciences (SPSS) software for students to use in the MPH program
- The MPH program is able to utilize the wet labs in the ELB for public health research
- Having the faculty and most of the MPH classes in the ELB provides more opportunity for collaboration and potential research

#### Weaknesses:

 Although not currently at capacity in the Extended Learning Building, if the MPH program continues to grow there will be a need for more offices for faculty and/or staff

# Plans for Improvement:

• If the program grows beyond the current space allocation, then CEHHS and EL may have to consider installing more cubicle pods to accommodate for the growth

### C5. Information and Technology Resources

The program has information and technology resources adequate to fulfill its stated mission and goals and to support instructional programs. Information and technology resources include library resources, student access to hardware and software (including access to specific software or other technology required for instructional programs), faculty access to hardware and software (including access to specific software required for the instructional programs offered) and technical assistance for students and faculty.

- 1) Briefly describe, with data if applicable, the following:
  - library resources and support available for students and faculty

The Kellogg Library at CSUSM is the primary learning resource outside the classroom and has over 300 computers, approximately 30 group study rooms, four copiers, ten print stations, about 300,000 books, and several thousands of journals. CSUSM also funds and maintains computer labs that are available to all students throughout the campus. In addition to resources available at Kellogg Library, students have access to approximately 3 million books that are provided in less than three days from other San Diego area libraries through "Circuit." Circuit member libraries include; San Diego State University, University of California San Diego, the University of San Diego, and the San Diego County and Public Library systems. Also, books can easily be ordered through interlibrary loans with a 5-10-day delivery period). Equipment and technology (library, computers, copiers and printers, etc.) for Public Health faculty and students are provided and available at the 200,000 square foot Kellogg Library. Tricia Lantzy is CSUSM's Health Sciences and Human Services Librarian assigned to Public Health. Library faculty are required to engage in professional development activities as part of their faculty role. Several key databases are available to MPH faculty and students including PubMed, CINAHL, Web of Science. Journals such as the American Journal of Public Health, the International Journal of Public Health, the Journal of Public Health Policy, the Journal of Epidemiology; the Journal of Behavioral Health, and the Lancet as examples.

CSUSM's circulation policies and procedures (policy and procedures to ensure that books or other materials required or recommended in MPH courses are made available to students) are available at <a href="https://biblio.csusm.edu/content/borrowing-books-and-media">https://biblio.csusm.edu/content/borrowing-books-and-media</a>. Additional information about reference/research help for students, faculty and staff in the MPH program are available at <a href="http://biblio.csusm.edu/research\_portal/ask-a-librarian">http://biblio.csusm.edu/research\_portal/ask-a-librarian</a>.

 student access to hardware and software (including access to specific software or other technology required for instructional programs)

CSUSM's Instructional & Information Technology Services (IITS) is responsible for the management and support of technology throughout the CSUSM campus, including the hardware and software that defines our technology infrastructure. There are several smart classrooms and computer labs designed to support classroom instruction that require the use of computers by individual MPH students during classroom instructions. For example, all Biostatistics (PH 504) courses are scheduled in classrooms with computer labs equipped with Statistical Package for the Social Sciences (SPSS) software for faculty and students to use.

The university's IITS staff and subject specialists provide support to all students in their specific software or technology needs and in assessing information and instruction for face-to-face and online or through off-campus educational programs (e.g. Temecula). Students have access to specific software such as SPSS, Geographic Information System or GIS, etc. and other technology that may be required for instructional programs. Additionally, the Technology Learning Center (TLC) is a newly renovated lab in the Kellogg Library that was designed as a direct result of student feedback. The space is now outfitted with new

computers, larger desks, device charging ports at each station, new chairs, and private study pods.

 faculty access to hardware and software (including access to specific software or other technology required for instructional programs)

The MPH program has information and technology resources adequate to fulfill its stated mission and goals and to support all faculty with instruction. Information and technology resources include library resources, faculty access to hardware and software including access to specific software such as SPSS, GIS, etc. and other technology that may be required for instructional programs. In addition, faculty are provided access to or individual computers and related hardware to ensure they are properly equipped to support their instructional programs and related services.

Each faculty member has, at minimum, a laptop computer located in their office and several also have additional hardware for use outside the campus such as at home, during travel, or for field research. Each new full-time tenure-track faculty, or for full-time lecturers at the request of the department, is provided a new laptop computer. These computers are replaced, on the average, every four years.

technical assistance available for students and faculty

CSUSM's Instructional & Information Technology Services (IITS) provides technical support to all students, faculty, and staff related to technology needs in office-use, classrooms, labs, and student housing. Additionally, IITS provides robust Instructional Design services to support faculty in course design, course migration into hybrid and online delivery modes, administering our Cougar Courses online learning management system, course assessment and quality assurance review through our Quality Online Learning and Teaching (QOLT) model. As such, the information and technology resources provided by CSUSM are sufficient for the MPH program.

2) Provide narrative and/or data that support the assertion that information and technology resources are sufficient or not sufficient.

As a part of their ongoing strategic planning process, IITS conducted a focused review of their technology support and services. The following link provides an overarching view of how IITS is providing sufficient supports and services to the campus. https://www.csusm.edu/itstrategicplan/history/index.html

MPH faculty have generally been satisfied with the information and technology supports offered to the program. As needs surface, the MPH Program Director works with IITS and/or the college dean to address supports and services for faculty and staff. A focused look at the data/narrative for the College from a survey conducted in 2017 is provided in our ERF as well (<a href="ERF/C5-2/CEHHS IITS 2017 Survey">ERF/C5-2/CEHHS IITS 2017 Survey</a>).

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

None identified at this time.

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# D1. MPH & DrPH Foundational Public Health Knowledge

The program ensures that all MPH and DrPH graduates are grounded in foundational public health knowledge.

The program validates MPH and DrPH students' foundational public health knowledge through appropriate methods.

1. Provide a matrix, in the format of Template D1-1, that indicates how all MPH and DrPH students are grounded in each of the defined foundational public health learning objectives (1-12). The matrix must identify all options for MPH and DrPH students used by the program.

The program's curriculum is designed to ground students in the foundational public health knowledge areas through our seven (7) core courses, regardless of MPH concentration. Foundational knowledge objectives are grounded through lectures, readings, and assignments. All MPH students are required to take PH 501, Foundations in Public Health, which covers the majority of the foundational public health learning objectives. The Foundations in Public Health course serves as an introduction to public health and its core functions. Additionally, all MPH students are required to take six (6) other core courses (PH 502-PH 507), which further supplement or reinforce the foundational public health learning objectives, as outlined below.

Template D1-1. Content Coverage for MPH Degree

| Content  | Course number(s) & name(s) or other educational requirements |
|--|--|
| Explain public health history, philosophy and values   | PH 501: Foundations of Public Health                         |
| Identify the core functions of public health and the 10     Essential Services   | PH 501: Foundations of Public Health                         |
| 3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health             | PH 504: Biostatistics for Public Health PH 505: Epidemiology |
| 4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program              | PH 501: Foundations of Public Health PH 505: Epidemiology    |
| 5. Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc. | PH 501: Foundations of Public Health                         |
| 6. Explain the critical importance of evidence in advancing  | PH 505: Epidemiology   |
| public health knowledge  | PH 507: Research Methods and                                 |
|  | Proposal Writing   |
| 7. Explain effects of environmental factors on a population's  | PH 501: Foundations of Public Health                         |
| health   | PH 506: Environmental Determinants of Health                 |
| Explain biological and genetic factors that affect a population's health   | PH 501: Foundations of Public Health                         |
| Explain behavioral and psychological factors that affect a   | PH 506: Environmental Determinants of                        |
| population's health  | Health   |
| 10. Explain the social, political and economic determinants of   | PH 502: Foundations of Health Systems                        |
| health and how they contribute to population health and health   |  |
| inequities   | PH 503: Social and Behavioral                                |
|  | Determinants of Health                                       |
| 11. Explain how globalization affects global burdens of disease  | PH 505: Epidemiology   |
| 12. Explain an ecological perspective on the connections   | PH 506: Environmental Determinants of                        |
| among human health, animal health and ecosystem health (eg, One Health)  | Health   |

- 2. Document the methods described above. This documentation must include all referenced syllabi, samples of tests or other assessments and web links or handbook excerpts that describe admissions prerequisites, as applicable.
  - ERF/D1-2/PH 501\_Template\_Course Syllabus
  - ERF/D1-2/PH 502 Template Course Syllabus
  - ERF/D1-2/PH 503\_Template\_Course Syllabus
  - ERF/D1-2/PH 504 Template Course Syllabus
  - ERF/D1-2/PH 505 Template Course Syllabus
  - ERF/D1-2/PH 506 Template Course Syllabus
  - ERF/D1-2/PH 507 Template Course Syllabus
- 3. If applicable, assessment of strengths and weaknesses related to this criterion and plans for improvement in this area.

#### Strengths:

• The strength of this criterion includes the use of all seven (7) core courses to ground all MPH students in foundational public health knowledge. These core courses must be completed before taking concentration-specific courses. While many learning objectives are covered in the Foundations of Public Health course (PH 501), the other core courses supplement or reinforce the foundational knowledge. Through the process of ensuring our curriculum was clearly aligned with CEPH competencies, we have adjusted language in our syllabi to clearly indicate: (1) the competencies and learning objectives that are being addressed in the course and (2) course signature assignments, which are the basis for assessing the learning competencies/learning objectives.

#### Weaknesses:

 While our core courses currently address the objectives in foundational public health knowledge, six of seven core courses have used the revised syllabi language that better indicates alignment with learning objectives/competencies as of Fall 2019. The remaining course (PH 506) is using the revised syllabi language starting January 2020.

# Plans for Improvement:

 Our core curriculum is designed to ground all MPH students in foundational public health knowledge. We plan to continuously evaluate students and our measurement tools (signature assignments), to ensure all MPH students are grounded in foundational public health knowledge.

# D2. Foundational Competencies

The program documents at least one specific, required assessment activity (eg, component of existing course, paper, presentation, test) for each competency, during which faculty or other qualified individuals (eg, preceptors) validate the student's ability to perform the competency.

Assessment opportunities may occur in foundational courses that are common to all students, in courses that are required for a concentration or in other educational requirements outside of designated coursework, but the program must assess all MPH students, at least once, on each competency. Assessment may occur in simulations, group projects, presentations, written products, etc. This requirement also applies to students completing an MPH in combination with another degree (eg, joint, dual, concurrent degrees). For combined degree students, assessment may take place in either degree program.

1. List the coursework and other learning experiences required for the program's MPH degrees, including the required curriculum for each concentration and combined degree option. Information may be provided in the format of Template D2-1 or in hyperlinks to student handbooks or webpages, but the documentation must present a clear depiction of the requirements for each MPH degree.

Template D2-1a. MPH Degree Requirements, Health Education Health Promotion Concentration

| Course number     | Course name*   | Credits<br>(if applicable) |
|-------------------|--|----------------------------|
|                   | Core Courses   | , , ,                      |
| PH 501            | Foundations of Public Health                                     | 3                          |
| PH 502            | Foundations of Health Systems Organization, Delivery, and Policy | 3                          |
| PH 503            | Social and Behavioral Determinants of Health                     | 3                          |
| PH 504            | Biostatistics for Public Health                                  | 3                          |
| PH 505            | Epidemiology   | 3                          |
| PH 506            | Environmental Determinants of Health                             | 3                          |
| PH 507            | Research Methods and Proposal Writing                            | 3                          |
|                   | Concentration-Specific Courses                                   |                            |
| PH 530            | Health Disparities, Diversity, and Culture                       | 3                          |
| PH 531            | Community Engagement and Health Education                        | 3                          |
| PH 532            | Health Program Planning, Implementation, and Evaluation          | 3                          |
| PH 533            | Health Communication   | 3                          |
| PH 563 (elective) | Community-Based Participatory Research                           | 3                          |
|                   | Applied Practice and Integrative Learning Experience             |                            |
| PH 693            | Internship   | 3                          |
| PH 695            | Capstone Seminar in Public Health                                | 3                          |
| or                |  |                            |
| PH 698 A, B, or C | Thesis   | 1-3*                       |
| TOTAL             | All Courses  | 42 units                   |

Template D2-1b. MPH Degree Requirements, Global Health Concentration

| Requirements for MPH degree, Global Health (GH) Concentration |  |                         |  |
|---|--|-------------------------|--|
| Course number   | Course name*   | Credits (if applicable) |  |
|   | Core Courses   |                         |  |
| PH 501  | Foundations of Public Health                                     | 3                       |  |
| PH 502  | Foundations of Health Systems Organization, Delivery, and Policy | 3                       |  |
| PH 503  | Social and Behavioral Determinants of Health                     | 3                       |  |
| PH 504  | Biostatistics for Public Health                                  | 3                       |  |
| PH 505  | Epidemiology   | 3                       |  |
| PH 506  | Environmental Determinants of Health                             | 3                       |  |
| PH 507  | Research Methods and Proposal Writing                            | 3                       |  |
|   | Concentration-Specific Courses                                   |                         |  |
| PH 560  | Principles of Global Humanitarian Emergencies                    | 3                       |  |
| PH 561  | Global Health: Chronic & Infectious Diseases                     | 3                       |  |
| PH 562  | Global Health Policy and Practice                                | 3                       |  |
| PH 563  | Community-Based Participatory Research                           | 3                       |  |
| PH 533 (elective)   | Health Communication   | 3                       |  |
|   | Applied Practice and Integrative Learning Experience             |                         |  |
| PH 693  | Internship   | 3                       |  |
| PH 695  | Capstone Seminar in Public Health                                | 3                       |  |
| or  |  |                         |  |
| PH 698 A, B, or C   | Thesis   | 1-3*                    |  |
| TOTAL   | All Courses  | 42 units                |  |
|   |  |                         |  |
| Note: Students mus  | st complete 3 units of Thesis or Capstone                        |                         |  |
| * PH 698 A, B, and  | C are variable units.  |                         |  |

2. Provide a matrix, in the format of Template D2-2, that indicates the assessment activity for each of the foundational competencies. If the program addresses all of the listed foundational competencies in a single, common core curriculum, the program need only present a single matrix. If combined degree students do not complete the same core curriculum as students in the standalone MPH program, the program must present a separate matrix for each combined degree. If the program relies on concentration-specific courses to assess some of the foundational competencies listed above, the program must present a separate matrix for each concentration.

Template D2-2. Assessment of Competencies for MPH (all concentrations)

| Competency   | Course number(s) and name(s)*  | Describe specific assessment opportunity <sup>n</sup>   |
|--|--|---|
| Evidence-based Approaches  | to Public Health   |   |
| Apply epidemiological methods to the breadth of settings and situations in public health practice                                      | PH 505: Epidemiology   | Mapping Project: Students use mapping software to apply epidemiological mapping to a variety of public health situations and health variables. Using domestic and international health data sources students present results with background, interpretation and a final map (Discussed Week 3, Assessed Week 8).                                   |
| Select quantitative and qualitative data collection methods appropriate for a given public health context                              | PH 504: Biostatistics for Public Health (Quantitative only)            | Weekly Assignments: Each week students are given a dataset to analyze using the appropriate statistical testing/modeling technique and answer questions regarding results and data collection methods. The midterm and final exam assess students' ability to select appropriate data collection methods (Discussed Week 1, Assessed Week 4 and 8). |
|  | PH 507: Research Methods<br>and Proposal Writing<br>(Qualitative only) | The course provides training in qualitative methods using Atlas.ti. The concepts are introduced in Weeks to and 3 with application of the concepts in their thesis. (Discussed Week 2 and 3 on, Assessed Week 3).   |
| 3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate | PH 504: Biostatistics for<br>Public Health (Quantitative<br>only)      | Weekly Assignments: Each week students are given a dataset to analyze using the appropriate statistical testing/modeling technique and answer questions regarding results and data collection methods (Discussed Week 2, Assessed Weekly).  |

| Competency   | Course number(s) and name(s)*   | Describe specific assessment opportunity <sup>n</sup>   |  |  |
|--|---|---|--|--|
|  | PH 507: Research Methods<br>and Proposal Writing<br>(Qualitative only)      | Writing Assignment: Qualitative analysis using ATLAS.ti. Students will upload transcripts from a key informant interviews into ATLAS.ti, software used for qualitative coding and analysis. Students will code and extract themes from the interview transcripts and submit a final write-up of the qualitative analysis (Discussed Week 3, Assessed Week 3). |  |  |
| 4. Interpret results of data analysis for public health research, policy or practice   | PH 504: Biostatistics for Public Health                                     | Final Exam: Students interpret data tables and comment on the meaning of the results for public health research, policy or practice (Discussed Week 2 on, Assessed Week 8).   |  |  |
| Public Health & Health Care Sy   | ystems  |   |  |  |
| 5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings  | PH 502: Foundations of<br>Health Systems Organization<br>and Delivery       | Paper 2: Students report on different systems across national and international settings. Final Paper asks students to construct an ideal system comparing pros and cons of existing models (Discussed Weeks 1-8, Assessed Week 4 and 8).   |  |  |
| 6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels | PH 503: Social and<br>Behavioral Determinants of<br>Health                  | Paper: Students write a one-page reflection paper based on Implicit Bias Assessment, describing how social inequities impact health equity at multiple levels (Discussed Week 6, Assessed Week 8).  |  |  |
| Planning & Management to Promote Health  |   |   |  |  |
| 7. Assess population needs, assets and capacities that affect communities' health  | PH 503: Social and Behavioral Determinants of Health  PH 506: Environmental | PH 503 Literature review in public health: Students must demonstrate an understanding of how to assess population needs and the assets, and capacities that impact health and public health program design (Discussed Week 8, Assessed Week 8).   |  |  |
|  | Health  | PH 506 Case study of Water of Ayole that asks students to assess the activities in the community activity. (Discussed Week 6, Assessed Week 6)  |  |  |

| Competency  | Course number(s) and name(s)*  | Describe specific assessment opportunity <sup>n</sup>   |
|---|--|---|
| 8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs | PH 503: Social and<br>Behavioral Determinants of<br>Health                                   | Literature review in public health: Students must demonstrate an understanding of how to apply cultural practices and values to the design of public health programs (Discussed Week 6, Assessed Week 8).   |
| 9. Design a population-based policy, program, project or intervention   | PH 502: Foundations of<br>Health Systems Organization<br>and Delivery                        | Final Paper: Students synthesize information to compare US/global health care system or organizational structure and function. The purpose is to design a health care delivery system to address a particular population need through policy, programs, or project interventions. (Discussed Weekly, Assessed Week 8).  |
| 10. Explain basic principles and tools of budget and resource management  | PH 507: Research Methods<br>and Proposal Writing   | Thesis or Capstone Project Proposal: The final proposal in PH 507 requires students to demonstrate the use of principles of budget and resource management for a specific public health problem and population, including appropriate evaluation plans and resource management (Discussed Week 2 on, Assessed Week 6 and 7).  |
| 11. Select methods to evaluate public health programs   | PH 507: Research Methods<br>and Proposal Writing   | Final Exam: Students review five public health programs and select appropriate methods of evaluation. (Discussed Week 2 on, Assessed Week 8).   |
| Policy in Public Health   |  |   |
| 12. Discuss multiple dimensions of the policymaking process, including the roles of ethics and evidence                   | PH 502: Foundations of Health Systems Organization and Delivery PH 506: Environmental Health | Forum Discussion: These are smaller assignments throughout the PH 502 course which require students to discuss aspects of policy making, including ethics and evidence-based policy. (Discussed Weeks 1, 3, 5-7; Assessed Weeks 2, 4, 8)  PH 506 Case study, Breathing Easy. The case study requires students to examine the role of different stakeholders in the policy process including the role of ethics and the use of evidence to inform the process. (Discussed in Week 2) |

| Competency   | Course number(s) and name(s)*  | Describe specific assessment opportunity <sup>n</sup>   |
|--|--|---|
| 13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes   | PH 503: Social and<br>Behavioral Determinants of<br>Health                                   | Signature Assignment/Presentation: Students propose strategies to identify stakeholders and potential partners, to develop a brief communication strategy targeting at a specific audience. (Discussed Week 5, Assessed Week 6).  |
| 14. Advocate for political, social or economic policies and programs that will improve health in diverse populations   | PH 502: Foundations of<br>Health Systems Organization<br>and Delivery                        | In preparation for the debate students are exposed to different systems and are required to advocate for policies that would improve health using the merits of each system as evidenced by data and existing literature. (Discussed Week 2 and 3, Assessed Week 4).  |
| 15. Evaluate policies for their impact on public health and health equity  | PH 502: Foundations of<br>Health Systems Organization<br>and Delivery                        | Paper and presentation: students propose an ideal system composed of the best of all models and should evaluate policies that shape the health system for which they advocate. Students justify choices using evidence-based evaluation literature. System models are introduced in Weeks 1-2, Aspects of systems such as medical records and surveillance are introduced Weeks 3-8. Assessment due Week 8 (Discussed Weeks 1-8, Assessed Week 8).  |
| Leadership   |  | 1133.13).   |
| 16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making | PH 502: Foundations of Health Systems Organization and Delivery PH 506; Environmental Health | PH 502 Debate, Papers and presentation: Students analyze health systems to create a vision of an ideal system composed of the best of all models. Group preparation for the debate forces collaborative discussions and decision making in shaping the ideal system.  Students justify choices using evidence-based evaluation literature. System models are introduced in Weeks 1-2, Aspects of systems such as medical records and surveillance are introduced Weeks 3-8.  Assessment due Week 8 (Discussed Weeks 1-8, Assessed Week 8).  PH 506 Systems thinking assignment: "The Water of Ayole" provides an opportunity for students to make decisions in the context of an assignment. (Discussed and Assessed in Week 6) |

| Competency  | Course number(s) and name(s)*                               | Describe specific assessment opportunity <sup>n</sup>  |
|---|---|--|
| 17. Apply negotiation and mediation skills to address organizational or community challenges                        | PH 506; Environmental<br>Health                             | Students are asked to complete the "Campus as Text" exercise. The exercise provides an opportunity for students to think of ways to mediate the resolution to community challenges seen through observational studies (Discussed Week 1-3, Assessed Week 3).   |
| Communication   |   |  |
| 18. Select communication strategies for different audiences and sectors   | PH 503: Social and<br>Behavioral Determinants of<br>Health  | Signature Assignment/Presentation: Students choose a population, identify stakeholders and potential partners, and develop a brief communication strategy targeting at a specific audience. (Discussed Week 5, Assessed Week 6).   |
| 19. Communicate audience-<br>appropriate public health<br>content, both in writing and<br>through oral presentation | PH 506: Environmental<br>Determinants of Health             | Group Project on "Campus as Text": Groups of students, along with environmental health majors (not in public health) explore assigned areas of the campus, make presentations, and submit written assignments based on a set of rubrics. (Discussed Week 1, Assessed Week 3).  |
| 20. Describe the importance of cultural competence in communicating public health content                           | PH 503: Social and<br>Behavioral Determinants of<br>Health) | Signature Assignment/Presentation: Students will include a description of the importance of cultural competence in communicating public health content when students choose a population, identify stakeholders and potential partners, and develop a brief communication strategy targeting at a specific audience for this assignment (Discussed Week 6, Assessed Week 6). |
| Interprofessional Practice  |   |  |
| 21. Perform effectively on interprofessional^ teams   | PH 506: Environmental Determinants of Health                | (Proposed) Group Project "Campus as Text": Groups of students, along with environmental health majors (not in public health), explore assigned areas of the campus, make presentations, and submit written assignments based on a set of rubrics. (Discussed Week 1, Assessed Week 3).   |

| Competency  | Course number(s) and name(s)*                | Describe specific assessment opportunity <sup>n</sup>  |  |
|---|--|--|--|
| Systems Thinking  |  |  |  |
| 22. Apply systems thinking tools to a public health issue | PH 506: Environmental Determinants of Health | Assignment and Written Exam: Students watch the film on "Water of Ayole" and presentations on "Systems Thinking." They provide written answers to essay questions. Students are assessed during a written exam (final) on their understanding of "Systems Thinking" as the cornerstone of a learning organization and are required to provide illustrations of an Archetype of a "Systems Thinking" approach with "Water of Ayole as Shifting the Burden" (Discussed Week 6, Assessed Week 8). |  |

- 3. Include the most recent syllabus from each course listed in Template D2-1, or written guidelines, such as a handbook, for any required elements listed in Template D2-1 that do not have a syllabus.
  - ERF/D1-2/PH 502 Template Course Syllabus
  - ERF/D1-2/PH 503 Template Course Syllabus
  - ERF/D1-2/PH 504 Template Course Syllabus
  - ERF/D1-2/PH 505 Template Course Syllabus
  - ERF/D1-2/PH 506 Template Course Syllabus
  - ERF/D1-2/PH 507 Template Course Syllabus
- 4. If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

### Strengths:

- Some competencies are assessed in multiple courses. Many of the competencies are
  addressed (e.g., through lecture, reading, or activities) across courses to reinforce the
  information and apply competencies in different contexts. Overall, language in the syllabi was
  adjusted to more clearly indicate: (1) the competencies that are being addressed in the
  course and (2) course signature assignments, which are the basis for assessing the
  competencies.
- The core curriculum is designed to ground all MPH students in the 22 foundational competencies. The Curriculum Committee is responsible for continuously evaluate students and our measurement tools (signature assignments), to ensure all MPH students are grounded in foundational competencies.

# Weaknesses:

• Due to sequencing, one core course (PH 506) will begin using revised syllabi language starting January 2020, although it already contained appropriate discussion and assessments for the named competencies.

# Plans for Improvement:

The College of Education, Health and Human Services (CEHHS) has instituted a committee on Interprofessional Education, to address the need for integration of competency 21 between several departments. We have two public health faculty members sitting on the

committee to support both the college and public health department's interest in interprofessional activities for our students.

# D3. DrPH Foundational Competencies

Not applicable to CSUSM.

## D4. MPH & DrPH Concentration Competencies

The program defines at least five distinct competencies for each concentration or generalist degree at each degree level in addition to those listed in Criterion D2 or D3.

The program documents at least one specific, required assessment activity (eg, component of existing course, paper, presentation, test) for each defined competency, during which faculty or other qualified individuals (eg, preceptors) validate the student's ability to perform the competency.

If the program intends to prepare students for a specific credential (eg, CHES/MCHES) that has defined competencies, the program documents coverage and assessment of those competencies throughout the curriculum.

1. Provide a matrix, in the format of Template D4-1, that lists at least five competencies in addition to those defined in Criterion D2 or D3 for each MPH or DrPH concentration or generalist degree, including combined degree options, and indicates at least one assessment activity for each of the listed competencies. Typically, the program will present a separate matrix for each concentration.

Template D4-1a. Assessment of Competencies for MPH in Health Education Health Promotion

Concentration

| Assessment of Competencies for MPH in Health Education Health Promotion (HEHP)  Concentration  |   |   |
|--|---|---|
| Competency   | Course number(s) and name(s)  | Describe specific assessment opportunity <sup>n</sup>   |
| 1. Apply and demonstrate skills and knowledge of intervention planning and evaluation to the development of a research proposal, including the ability to effectively communicate in professional formats. | PH 532: Health Program<br>Planning, Implementation,<br>and Evaluation | Writing Assignment: Mini-Grant Application. Students develop a research study that addresses a specific Request for Application (RFA) by the National Institutes of Health (NIH). Students must address a specific public health problem, identify data sources, and integrate evidence- based research to align their grant proposal with the selected NIH RFA (Discussed Week 2 on, Assessed Week 8).   |
| 2. Design and create appropriate health education materials and evaluation tools that demonstrate alignment with the needs of diverse and underrepresented populations                                     | PH 531: Community Engagement and Health Education                     | Group Project: Students design and implement an intervention that addresses a significant public health problem for a specific underserved community, using principles of leadership. Students develop media or education materials appropriate for the assigned topic. These materials will be presented in class, with a specific issue and audience in mind, in the form of a toolkit that includes a lesson and evaluation plan (Discussed Week 1 on, Assessed Week 8). |

| Concentration Competency   | Course number(s) and name(s)                          | Describe specific assessment opportunity <sup>n</sup>  |
|--|---|--|
| 3. Interpret and articulate the impact of health inequity and power imbalances on the health of diverse populations  | PH 530: Health Disparities,<br>Diversity, and Culture | Health Disparities Paper: Students must choose a population that is historically, economically, socially and/or environmentally disadvantaged, discuss the disparate health outcomes, and integrate effective interdisciplinary teams to evaluate and address health inequities and power imbalances for the population chosen (Discussed Week 2 on, Assessed Week 8).   |
| 4. Plan, design, and implement a theory-driven, multi-media communication campaign to diverse communities to influence health promotion program and policy decisions | PH 533: Health<br>Communication                       | Presentation with Communication Products: Students will develop and implement a theory-driven, community-engaged health communication campaign for a specific public health problem and target population. The final presentation must demonstrate application of research methodologies; how different factors influence the development of health communication strategies; and how students planned, designed and implemented the communication campaign (Discussed Week 1 on, Assessed Week 5).      |
| 5. Apply and synthesize health promotion strategies to community health improvement initiatives through research methodologies and community engaged projects        | PH 533: Health<br>Communication                       | Presentation with Communication Products: Students will develop and implement a theory-driven, community-engaged health communication campaign for a specific public health problem and target population. The final presentation must demonstrate how students applied research methodologies, applied different factors to influence the development of their health communication strategy and developed health communication materials and multi-media forms (Discussed Week 1 on, Assessed Week 5). |

Template D4-1b. Assessment of Competencies for MPH in Global Health Concentration

| Competency   | Course number(s) and name(s)                               | Describe specific assessment opportunity <sup>n</sup>   |
|--|--|---|
| 1. Evaluate how historical, economic, political, and socio-cultural factors facilitate or hinder cooperation among national and non-governmental organizations that address global health issues | PH 562: Global Health Policy and Practice                  | Theory Exam: Conceptual frameworks and foundational theories are introduced, and an exam on the theories and concepts is administered.  Final Paper: Students synthesize the role of multiple socio-economic dimensions and evaluate how a policy changed morbidity/mortality.  (Theory topics introduced in Weeks 1-3 and assessed in Week 4; Additional evaluation topics are introduced in                                       |
| 2. Synthesize global health data to assess their significance and develop strategies to address health problems through the application of evidence-based practice                               | PH 561: Global Health:<br>Chronic & Infectious<br>Diseases | Weeks 4-7 and assessed Week 8)  Forum Posts: Disease topics are introduced each week. Weekly responses to discussion forum prompts require students to look for data about the weekly topic, and to synthesize this information based on the weekly prompts.  (Weeks 1 -7, disease topics are introduced. Weeks 1-7, writing assignments assess knowledge of topic)   |
| 3. Evaluate global health interventions related to national healthcare systems and multilateral institutions/organizations, particularly in underserved and low-resource community settings      | PH 562: Global Health Policy and Practice                  | Evaluation Exercise: Students evaluate interventions and policy as an exposure using social epidemiologic or legal epidemiologic methods.  Final Paper: In part asks students to synthesize the role of multiple socio- economic dimensions and evaluate how a policy changed morbidity/mortality.  (Methods are introduced in Week 4, and reinforced with in-class exercises in Week 5 and 6; assessed with Final Paper in Week 8) |

| Competency   | Course number(s) and name(s)                             | Describe specific assessment opportunity <sup>n</sup>   |
|--|--|---|
| 4. Critique and propose alternative strategies for GH emergency response and recovery  | PH 560: Principles of Global<br>Humanitarian Emergencies | Final Group Report and Presentation: Students critique a humanitarian disaster and propose alternative improved strategies for global health emergency response and recovery in the form of final papers and presentations. These final papers are assembled into a group management and recovery plan based on systems thinking. This plan evaluates activities from a past disaster using evidence-based practices and guidelines. (Foundational frameworks and theory discussed Weeks 1 and 3; Ethics Principals introduced in Week 4; Evaluation overview in Week 5; Additional influences covered in Weeks 6 and 7; Outlines Assessed Weeks 2 and 4; Final product assessed Week 8). |
| 5. Analyze strategies to<br>address cultural intelligence in<br>communicating health<br>disparities across socially,<br>demographical, or<br>geographically defined<br>populations | 563: Community-Based Participatory Research              | Conference-style poster: Based on a key informant interview and literature review, students create a poster to present on a local or global public health research problem; and include interview results and a reflection of how the problem can be addressed by CBPR and cultural intelligence around health disparities issues. (Discussed Week 2 on, Assessed Week 8).  |

2. For degrees that allow students to tailor competencies at an individual level in consultation with an advisor, the program must present evidence, including policies and sample documents, that demonstrate that each student and advisor create a matrix in the format of Template D4-1 for the plan of study. Include a description of policies in the self-study document and at least five sample matrices in the electronic resource file.

Not applicable to CSUSM.

3. Include the most recent syllabus for each course listed in Template D4-1, or written guidelines for any required elements listed in Template D4-1 that do not have a syllabus.

## Health Education Health Promotion (HEHP)

- ERF/D4-3/PH 530 Template Course Syllabus
- ERF/D4-3/PH 531 Template Course Syllabus
- ERF/D4-3/PH 532 Template Course Syllabus
- ERF/D4-3/PH 533 Template Course Syllabus

## Global Health (GH)

- ERF/D4-3/PH 560 Template Course Syllabus
- ERF/D4-3/PH 561 Template Course Syllabus
- ERF/D4-3/PH 562 Template Course Syllabus
- ERF/D4-3/PH 563 Template Course Syllabus
- 4. If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

## Strengths:

- Concentration courses have a strong emphasis on health disparities and community engagement. We have adjusted language in our syllabi to more clearly indicate: (1) the competencies that are being addressed in the course and (2) course signature assignments, which are the basis for assessing the competencies.
- The curriculum is designed to advance our MPH students and apply practical skills in the five concentration-specific competencies in HEHP and GH.

## Weaknesses:

• While the concentration courses align well with the competencies, PH 530 and 533 began using the revised syllabi language in Spring of 2020, due to the sequencing.

## Plans for Improvement:

 The Curriculum committee will be responsible for continuously evaluating our signature assignments in their biweekly meetings. The assessment committee will review data to ensure students are meeting competencies in their biweekly meetings.

## D5. MPH Applied Practice Experiences

MPH students demonstrate competency attainment through applied practice experiences.

The applied practice experiences allow each student to demonstrate attainment of at least five competencies, of which at least three must be foundational competencies (as defined in Criterion D2). The competencies need not be identical from student to student, but the applied experiences must be structured to ensure that all students complete experiences addressing at least five competencies, as specified above. The applied experiences may also address additional foundational or concentration-specific competencies, if appropriate.

The program assesses each student's competency attainment in practical and applied settings through a portfolio approach, which demonstrates and allows assessment of competency attainment. It must include at least two products. Examples include written assignments, projects, videos, multi-media presentations, spreadsheets, websites, posters, photos or other digital artifacts of learning. Materials may be produced and maintained (either by the program or by individual students) in any physical or electronic form chosen by the program.

1) Briefly describe how the program identifies competencies attained in applied practice experiences for each MPH student, including a description of any relevant policies.

Internship Opportunity Coordination: Public Health internship opportunities are coordinated by the MPH Program's Internship Coordinator (IC). The Internship Coordinator follows the CSUSM Office of Internship polices and ensures every MPH internship experience follows the University's policies. Included in this is the requirement for a Memorandum of Understanding between the university and the internship site. The MOU requires the student not be at risk, and that the internship site provides an opportunity to apply skills learned in the classroom. The Internship Coordinator reviews the internship polices as outlined in the Public Health Internship Manual with each internship placement location in person or via email. During the policy review, the Internship Coordinator verifies the appropriateness of the internship placement location, the credentials of the preceptor, and the preceptor's role.

Internship Requirements: All MPH students are required to complete a 180-hour internship placement in a public health setting. Students must identify, apply and secure the internship placement. The process all MPH students take to secure an applied practice experience is detailed in the Public Health Internship Manual on page 10 (<u>ERF/D5-1/CSUSM.Intership.Manual.v4.0.asof8.30.18</u>).

Student Internship Development Process: Once an internship has been secured by the student, the student continues to follow the process outlined on page 10 in the Internship Manual: student notifies the Internship Coordinator of the internship placement; the IC ensures the internship site meets university requirements; students work with the site supervisor and the MPH IC to identify at minimum of three foundational and two track-specific competencies within the Scope of Work; and students identify at least two work products that they will be producing as evidence of attainment of the chosen competencies. Examples of evidence are listed in the student's final portfolios.

Student Internship Approval Process: Once the work products are identified, they are listed in the final Internship Learning Contract (ILC), and the student submits the ILC to the Internship Coordinator for final approval. This process allows for the student to tailor the focus of the internship to their interests, meet the needs of the internship site, and maintain standards required of the curriculum. A final copy of the ILC is provided to the internship site supervisor to assess the student's progress and attainment of competencies.

Internship Duration: During the internship course, the students provide three interim reports to the Internship Coordinator that become part of their internship portfolio. These are reviewed to ensure the student is having a meaningful experience related to applying public health skills and competencies.

Evaluations – Students and Supervisors: Two weeks prior to the end of the internship, the Internship Coordinator sends both the student and the internship site supervisor their specific evaluations (see samples in Internship Manual) and are included in their final portfolio. The Internship Coordinator downloads and reviews both evaluations for each student, and then emails it out to the students to include in their final portfolio. The Internship Coordinator's review includes overall completion of Scope of Work, any outlying concerns, any expressions of exceptionalism, and competency attainment.

Supervisor: The Internship Supervisor's evaluations specifically ask if they believe the chosen competencies were attained and met by the student. Additionally, the Internship Supervisors are asked to rate performance skills, confirm hour completion, achievement of Scope of Work's goals and objectives, to provide development feedback, and if they would like, to nominate the student for the internship award.

Students: The student evaluations specifically ask students about why they chose this opportunity. They provide feedback on the internship site – this provides valuable insight to the Internship Coordinator which can help the internship site and supervisors with their own development opportunity. Students are also asked to identify key responsibilities completed and products developed by the host agency. This helps the students begin to articulate their overall accomplishments to include in their internship portfolio.

Final Portfolio: Student submit their final portfolio at the end of the internship course. The final portfolio contains: the approved Internship Learning Contract, timesheet, reports (literature review and reflection), evaluations (student and supervisor), and internship activities. The faculty on record reviews each student's final portfolio for completeness, and then for competency attainment. The review includes assessing the Internship Learning Contract's listed work to the evaluations and the internship activities. Since the establishment of the program, the Internship Coordinator and the faculty on record have been the same person.

Program implementation of the track specific competencies occurred in February 2017 for the Health Education Health Promotion. Program implementation of track specific competencies occurred in June 2017 for Global Health. Through the CEPH accreditation self-study process the track competencies were updated. The updated competencies are being implemented during the Spring 2020 semester.

Table D5-1. Examples of Student Internship Placements and Associated Competencies

| Specific assignment(s) that demonstrate       | Competency as defined in Criteria D2 and D4           |
|---|---|
| application or practice                       |   |
| Summarize findings from focus groups, and     | PH4. Evidence-based Approaches to Public              |
| develop new patient orientation procedures to | Health: Interpret results of data analysis for public |
| increase multi-service engagement at Vista    | health research, policy or practice.                  |
| Community Clinic                              | PH8. Planning & Management to Promoted                |
|   | Health: Apply awareness of cultural values and        |
| (Student 1 HP)                                | practices to the design or implementation of public   |
|   | health policies or programs.                          |
|   | PH18. Communication: Select Communication             |
|   | strategies for different audiences and sectors        |

| Specific assignment(s) that demonstrate  | Competency as defined in Criteria D2 and D4  |
|--|--|
| application or practice  | Composition as defined in Oritoria DZ and D4   |
|  | HP1. Incorporate understanding of cultural, socioeconomic, and demographic factors into community health education, health policy and health service strategies to improve the health state of a community.  HP5. Apply behavioral science, health education, and communication theories and methods to the analysis of community health problems and the development of effective health promotion strategies.  |
| Interview patients from diverse cultural backgrounds, and analyzing data conduction Research within the Emergency Department at Rady Children's Hospital  (Student 2 HP) | PH1. Evidence-based Approaches to Public Health: Apply epidemiological methods to the breadth of settings and situations in public health practice PH2. Evidence-based Approaches to Public Health: Select quantitative and qualitative data collections methods appropriate for a given public health context. PH3. Evidence-based Approaches to Public   |
|  | Health: Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate.  PH7. Planning & Management to promote Health: Assess population needs, assets and capacities that affect communities' health.  HP1. Incorporate understanding of cultural, socioeconomic, and demographic factors into community health education, health policy and health service strategies to improve the health status of a community.  |
| Conducting Research within the CSUSM Kinesiology Department by developing health education materials and dissemination plan.   | PH1. Evidence-based Approaches to Public Health: Apply epidemiological methods to the breadth of settings and situations in public health practice   |
| (Student 3 HP)   | PH2. Evidence-based Approaches to Public Health: Select quantitative and qualitative data collection methods appropriate for a given public health context  PH3. Evidence-based Approaches to Public Health: Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate  PH4. Evidence-based Approaches to Public Health: Interpret results of data analysis for public health research, policy or practice  PH18. Communication: Select communication strategies for different audiences and sectors |

| Specific assignment(s) that demonstrate               | Competency as defined in Criteria D2 and D4   |
|---|---|
| application or practice                               |   |
|   | PH19. Communication: Communicate audience-appropriate public health content, both in writing  |
|   | and through oral presentation   |
|   | PH21. Interprofessional Practice: Perform   |
|   | effectively on Interprofessional teams  |
|   | HP1. Incorporate understanding of cultural, socioeconomic, and demographic factors into community health education, health policy and health service strategies to improve the health status of a community |
|   | HP5. Apply behavioral science, health education,  |
|   | and communication theories and methods to the analysis of community health problems and the development of effective health promotion strategies  |
| Palomar Health: PRIME Obesity Prevention              | PH6. Public Health & Health Care Systems:   |
| project internship including instruction of nutrition | Discuss the means by which structural bias, social  |
| classes and updating education materials              | inequities and racism undermine health and  |
|   | create challenges to achieving health equity at   |
| (Student 4 HP)  | organizational, community and societal levels   |
|   | PH7. Planning & Management to Promote Health: Assess population needs, assets and capacities that affect communities' health  |
|   | PH8. Planning & Management to Promote   |
|   | Health: Apply awareness of cultural values and  |
|   | practices to the design or implementation of public   |
|   | health policies or programs   |
|   | PH9. Planning & Management to Promote   |
|   | Health: Design a population-based policy, program, project or intervention  |
|   | PH11. Planning & Management to Promote  |
|   | Health: Select methods to evaluate public health programs   |
|   | PH19. Communication: Communicate audience-<br>appropriate public health content, both in writing<br>and through oral presentation   |
|   | PH21. Interprofessional Practice: Perform   |
|   | effectively on Interprofessional teams  |
|   | PH22. Systems Thinking: Apply systems thinking tools to a public health issue   |
|   | HP1. Incorporate understanding of cultural,   |
|   | socioeconomic, and demographic factors into   |
|   | community health education, health policy and health service strategies to improve the health   |
|   | status of a community   |
|   | HP3. Function as a community resource person  |
|   | by demonstrating the skills needed to: listen attentively and purposefully to a group; perform needs assessments based on both first-hand and   |

| Specific assignment(s) that demonstrate  | Competency as defined in Criteria D2 and D4  |
|--|--|
| application or practice  | · '  |
|  | appropriate secondary sources; and to integrate community objectives into verbal, written, and/or mass-media communications  HP4. Prepare clear and concise health education materials tailored appropriately to diverse audience segments |
|  | HP5. Apply behavioral science, health education, and communication theories and methods to the analysis of community health problems and the development of effective health promotion strategies  |
| County wellness program for the Chula Vista Unified School District that updated web-based education materials and developed messaging | PH4. Evidence-based Approaches to Public<br>Health: Interpret results of data analysis for public<br>health research, policy or practice   |
| campaign for the school district (Student 5 HP)  | PH8. Planning & Management to Promote Health: Apply awareness of cultural values and practices to the design or implementation of public health policies or programs   |
|  | PH9. Planning & Management to Promote Health: Design a population-based policy, program, project or intervention PH13. Policy in Public Health: Propose strategies   |
|  | to identify stakeholders and build coalitions and partnerships for influencing public health outcomes  |
|  | PH18. Communication: Select communication strategies for different audiences and sectors   |
|  | PH19. Communication: Communicate audience-<br>appropriate public health content, both in writing<br>and through oral presentation  |
|  | PH20. Communication: Describe the importance of cultural competence in communicating public health content   |
|  | HP1. Incorporate understanding of cultural, socioeconomic, and demographic factors into community health education, health policy and health service strategies to improve the health status of a community                                |
|  | HP2. Articulate the key process steps in the development, implementation, and evaluation of community health promotion programs  |
| Research migration trends and acculturation factors to develop culturally tailored health program at Pacific Islander Community Health | PH1. Evidence-based Approaches to Public Health: Apply epidemiological methods to the breadth of settings and situations in public health practice.  |
| (Student 6 GH)   | PH9. Planning & Management to Promote Health: Design a population-based policy, program, project or intervention.  |

| Specific assignment(s) that demonstrate   | Competency as defined in Criteria D2 and D4   |
|---|---|
| application or practice   | , ,   |
|   | PH22. Systems Thinking: Apply systems thinking tools to a public health issue.  GH1. Background in Global Health: Describe historical, economic, political, social, and cultural factors that influence the health of populations   |
|   | around the world.  GH3. Public Health Ethics: Evaluate and apply global health and global health agreements and ethical frameworks to design programs, policies, and interventions intended to improve health services and health status of individuals, communities, and populations.  GH4. Systems Thinking: Specify global institutions, networks and alliances, and apply |
|   | systems thinking tools to global health issues to improve the health status of individuals, communities and populations.  |
| Exploring the prevalence of bacteriophage use, and training in laboratory techniques to detect and isolate bacteriophages at University of California San Diego.        | PH2. Evidence-based Approaches to Public Health: Select quantitative and qualitative data collection methods appropriate for a given public health context  |
| (Student 7 GH)  | PH3. Evidence-based Approaches to Public Health: Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate PH4. Evidence-based Approaches to Public Health: Interpret results of data analysis for public   |
|   | health research, policy or practice GH1. Background in Global Health: Describe historical, economic, political, social, and cultural factors that influence the health of populations around the world.   |
|   | GH2. Critical Thinking: Critique and design global health approaches affecting the health status of individuals, communities, and populations around the world.   |
| Assessment of technology use in the public health sector, modeling specific technologies for global health applications with the California Department of Public Health | PH3. Evidence-based Approaches to Public Health: Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate PH4. Evidence-based Approaches to Public   |
| (Student 8 GH)  | Health: Interpret results of data analysis for public health research, policy or practice  PH7. Planning & Management to Promote Health: Assess population needs, assets and  |
|   | capacities that affect communities' health PH16. Leadership: Apply principles of leadership, governance and management, which include   |

| Specific assignment(s) that demonstrate   | Competency as defined in Criteria D2 and D4  |
|---|--|
| application or practice   |  |
|   | creating a vision, empowering others, fostering collaboration and guiding decision making  |
|   | GH4. Systems Thinking: Specify global institutions, networks and alliances, and apply systems thinking tools to global health issues to improve the health status of individuals, communities, and populations.  GH5. Leadership: Identify global health actors and how principles of leadership, governance and |
|   | management are used to create a vision, empower others, foster collaboration, and guide decision making.   |
| Compile catalogue of local area resources for refugee communities, and to develop a grant proposal to support the Bridge Organization of San Diego County | PH1. Evidence-based Approaches to Public Health: Apply epidemiological methods to the breadth of settings and situations in public health practice   |
| (Student 9 GH)  | PH5. Public Health & Health Care Systems: Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings   |
|   | PH7. Planning & Management to Promote Health: Assess population needs, assets and capacities that affect communities' health GH3. Public Health Ethics: Evaluate and apply   |
|   | global health global health agreements and ethical frameworks to design programs, policies, and interventions intended to improve health services and health status of individuals, communities, and populations.  |
|   | GH4. Systems Thinking: Specify global institutions, networks and alliances, and apply systems thinking tools to global health issues to improve the health status of individuals, communities, and populations.  |
|   | GH6. Communication: Able to successfully navigate different professional cultural, linguistic and geographic settings, and communicate culturally relevant and audience-appropriate global health content, both in writing and through oral presentation.  |
| With County of San Diego MCH programs staff, conduct focus group of Nurse Family Partnership program graduates, and support development of                | PH4. Evidence-based Approaches to Public Health: Interpret results of data analysis for public health research, policy or practice   |
| outreach programs about breast and cervical cancer  | PH6. Public Health & Health Care Systems: Discuss the means by which structural bias, social inequities and racism undermine health and  |
| (Student 10 GH)   | create challenges to achieving health equity at organizational, community and societal levels  |

| Specific assignment(s) that demonstrate application or practice | Competency as defined in Criteria D2 and D4         |
|---|---|
|   | PH15. Policy in Public Health: Evaluate policies    |
|   | for their impact on public health and health equity |
|   | GH2. Critical Thinking: Critique and design global  |
|   | health approaches affecting the health status of    |
|   | individuals, communities, and populations around    |
|   | the world.  |
|   | GH3. Public Health Ethics: Evaluate and apply       |
|   | global health global health agreements and ethical  |
|   | frameworks to design programs, policies, and        |
|   | interventions intended to improve health services   |
|   | and health status of individuals, communities, and  |
|   | populations.  |

- 2) Provide documentation, including syllabi and handbooks, of the official requirements through which students complete the applied practice experience.
  - PH Internship Manual (ERF/D5-1/CSUSM.Internship.Manual.v4.0.asof8.30.18)
  - Internship Learning Contract (<u>ERF/D5-2/</u> CSUSM.MPH.InternshipLearningContract.v3.asof2.16.18)
  - Internship Interest Form (ERF/D5-2/Internship Interest Form)
  - PH Internship Orientation (ERF/D5-2/MPH.InternshipOrientation.v3)
  - Course Syllabus (ERF/D5-2/PH 693 Course Syllabus)
- 3) Provide samples of practice-related materials for individual students from each concentration or generalist degree. The samples must also include materials from students completing combined degree programs, if applicable. The program must provide samples of complete sets of materials (ie, Template D5-1 and the work products/documents that demonstrate at least five competencies) from at least five students in the last three years for each concentration or generalist degree. If the program has not produced five students for which complete samples are available, note this and provide all available samples.

Provided material for students completing the practical experience in Health Education Health Promotion track starting from Summer 2017. Student 1 (<u>ERF/D5-3/Student 1 HP</u>), Student 2 (<u>ERF/D5-3/Student 2 HP</u>), Student 3 (<u>ERF/D5-3/Student 3 HP</u>), Student 4 (<u>ERF/D5-3/Student 4 HP</u>), Student 5 (<u>ERF/D5-3/Student 5 HP</u>).

Provided material for students completing the practical experience in Global Health track starting from Summer 2018. Student 6 (<u>ERF/D5-3/Student 6 GH</u>), Student 7 (<u>ERF/D5-3/Student 7 GH</u>), Student 8 (<u>ERF/D5-3/Student 8 GH</u>), Student 9 (<u>ERF/D5-3/Student 9 GH</u>), Student 10 (<u>ERF/D5-3/Student 10 GH</u>).

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

## Strengths:

- Students are presented internship information and timelines during the New Student Orientation. This is beneficial because it helps students plan appropriately for an internship that will best suit their interests and needs (<u>ERF/D5-2/Internship Interest Form</u>).
- CSUSM MPH utilizes an intranet to share internship information including housing all of the necessary documents and forms as well as providing the internship opportunity listings that are updated by the Internship Coordinator (ERF/D5-4/CommunicationsToStudents).

- CSUSM MPH has a strong connection with the County of San Diego's Health and Human Services Agency North Regions. Many CSUSM MPH students are afforded exclusive county internship opportunities available only to CSUSM MPH students. The County of San Diego is one of the largest county systems in the country.
- Students are given the opportunity to choose their own internship opportunity. This provides students the opportunity to focus on an area of interest that might not be prioritized in the coursework.
- Public Health Internship Manual is provided by the Internship Coordinator when meeting with prospective internship sites (<u>ERF/D5-1/CSUSM.Internship.Manual.v4.0.asof8.30.18</u>).
   Expectations are explained during the meeting and listed within the manual under "Roles of the Internship Site and Site Supervisor."

## Weaknesses:

- The program lacks rubrics for the internship experiences to adequately capture competency attainment.
- The program needs to strategically develop internship opportunities within the university service area that serve both tracks. North Regions of San Diego County are made up of many municipalities and other communities, like military, agriculture, and Indian reservations.
- Alternate experience opportunities are lacking. This makes it difficult for most of our students who work traditional, full-time hours, and may be caregivers in some way.

## Plans for Improvement:

- Added the competency attainment by the students to an assignment in the internship course in Spring 2020.
- Develop rubrics for all competencies that can be applied to internship experiences during the 2019-2020 academic year for Spring 2021 implementation.
- Continue to recruit more internship site supervisors. For students who work full-time, we will
  continue to assist students with finding opportunities that have alternative times. This
  includes opportunities that are not part of the students' regular job but that the employer
  would like to see accomplished, remote opportunities, and working with the student to
  temporarily adjust their working schedule.

D6. DrPH Applied Practice Experience

Not applicable to CSUSM

## D7. MPH Integrative Learning Experience

MPH students complete an integrative learning experience (ILE) that demonstrates synthesis of foundational and concentration competencies. Students in consultation with faculty select foundational and concentration-specific competencies appropriate to the student's educational and professional goals.

The ILE represents a culminating experience and may take many forms, such as a practice-based project, essay-based comprehensive exam, capstone course, integrative seminar, etc. Regardless of form, the student produces a high-quality written product that is appropriate for the student's educational and professional objectives. Written products might include the following: program evaluation report, training manual, policy statement, take-home comprehensive essay exam, legislative testimony with accompanying supporting research, etc. Ideally, the written product is developed and delivered in a manner that is useful to external stakeholders, such as non-profit or governmental organizations.

Professional certification exams (eg, CPH, CHES/MCHES, REHS, RHIA) may serve as an element of the ILE but are not in and of themselves enough to satisfy this criterion.

The ILE is completed at or near the end of the program of study (eg, in the final year or term). The experience may be group-based or individual. In group-based experiences, the school or program documents that the experience provides opportunities for individualized assessment of outcomes.

The school or program identifies assessment methods that ensure that at least one faculty member reviews each student's performance in the ILE and ensures that the experience addresses the selected foundational and concentration-specific competencies.

Faculty assessment may be supplemented with assessments from other qualified individuals (eg, preceptors). Combined (dual, joint, concurrent) degree students should have opportunities to incorporate their learning from both degree programs in a unique integrative experience.

1. List, in the format of Template D7-1, the integrative learning experience for each MPH concentration, generalist degree or combined degree option that includes the MPH. The template also requires the program to explain, for each experience, how it ensures that the experience demonstrates synthesis of competencies.

Template D7-1a. MPH ILE for Health Education and Health Promotion and Global Health Concentrations

| MPH Integrative Learning Experience for Health Education and Health Promotion Concentration |  |
|---|--|
| and MPH Integrative Learning Experience for Global Health Concentration                     |  |
| Integrative learning experience (list all options)  | How competencies are synthesized   |
|   | Students identify competencies in the capstone proposal stage. Students are asked to work toward at least three foundational and two concentration competencies of their choosing as they build their portfolio. A capstone committee approves the proposal based on the student's ability to integrate and synthesize public health competencies/knowledge appropriately in their proposal. Throughout the capstone process, the committee chair is the primary faculty member who reviews each student's ILE performance and ensures that the experience addresses the selected foundational and concentration-specific competencies. Finally, when defending their capstone project, committee members assess student's public health competencies/knowledge in light of the completed topic/project. |

| MPH Integrative Learning Experience for Health Education and Health Promotion Concentration and MPH Integrative Learning Experience for Global Health Concentration |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| Integrative learning experience (list all options)  | How competencies are synthesized   |  |  |  |  |  |  |
| Thesis  | Students identify competencies in the thesis proposal stage. Students are asked to work toward at least three foundational and two concentration competencies of their choosing as they build their portfolio. A thesis committee approves the proposal based on the student's ability to appropriately integrate and synthesize public health competencies/knowledge into their proposal. Throughout the thesis process, the committee chair is the primary faculty member who reviews each student's ILE performance and ensures that the experience addresses the selected foundational and concentration-specific competencies. Finally, when defending their thesis, committee members assess student's public health competencies/knowledge in light of the completed topic/project. |  |  |  |  |  |  |

# 2. Briefly summarize the process, expectations and assessment for each integrative learning experience.

The Integrative Learning Experience focuses on theoretical and practical application of public health foundational and concentration competencies in a project-based format (thesis or capstone). Emphasis is placed on targeting a specific audience or stakeholder, e.g. non-profit or government organization, and demonstrating critical thinking skills and the application of public health coursework in the research or project. Considerable emphasis is placed on the Integrative Learning Experience including faculty mentoring, assessments, and student presentations. There are two options for the Integrative Learning Experience in the MPH Program, capstone or thesis.

Thesis papers follow MPH Program and Graduate Studies guidelines. Thesis papers consist of original research, written in either chapter form or in the format of a journal article. Students must work with a faculty mentor and committee for approval of topic/project that includes connecting the project with identified foundational and concentration competencies. Upon completion of their work, each student must complete a presentation of their work to a committee of faculty members including discussion on how the project was informed by foundational and concentration competencies. The thesis defense is open to the school, stakeholders (where applicable), and the public.

In lieu of a thesis, students may complete an individual or group capstone project, inclusive of, but not limited to, options such as a grant proposal, community risk assessment, curriculum development, policy analysis, or agency-based project. Students must work with a faculty mentor and committee for approval of the project that includes connecting the project with identified foundational and concentration competencies. Upon completion of their work, students must complete a presentation of their work to a committee of faculty members including discussion on how the project was informed by foundational and concentration competencies. The capstone defense is open to the school, stakeholders (where applicable), and the public.

Towards the end of the program in the PH 507 Course (Research Methods and Proposal Writing), students prepare their thesis or capstone proposal, which is included in a Proposal Portfolio. The entire Proposal Portfolio also includes a 1-2-page narrative reflection on the student's MPH experience, example artifacts from core courses (e.g., paper, group project, final products), and the MPH Thesis/Capstone Competency Form. The MPH Program Portfolio is intended to be reflective in nature and should articulate the student's professional and intellectual growth. It should also demonstrate how MPH core courses have prepared the student to undertake the culminating activity (thesis or capstone). The Portfolio also enables students to meet CEPH-specific requirements of having self-identified MPH foundational and concentration-specific competencies that are connected to, and inform, the culminating activity.

Once students are prepared to give the thesis or capstone defense, students work with their primary faculty member (committee chair) to schedule an appropriate time and date for the defense presentation. The committee must consist of at least two members and the chair must be a tenure-track or tenured faculty person from the public health program. The second member can be another faculty member or outside expert with a PhD. The defense consists of three parts: (1) student presentation of thesis or capstone project, (2) committee questions to the student(s), primarily to assess knowledge, understanding, and interpretation of the results as it aligns with foundational and concentration-specific competencies (using the MPH Thesis/Capstone Competency Form; ERF reference below), (3) questions from the general community, and (4) committee members have a closed-door discussion to assess the student's ability to appropriately integrate and synthesize public health competencies/knowledge in their thesis or capstone project defense. After discussion and based on an assessment using the MPH Thesis/Capstone Competency Form, a decision is reached as to whether the student(s) passes with minor/no revisions, major revisions (conditional), or does not pass.

3. Provide documentation, including syllabi and/or handbooks that communicates integrative learning experience policies and procedures to students.

Documentation of ILE policies and procedures can be found in the PH 507 Course Syllabus, the MPH Thesis/Capstone Competency Form, MPH Proposal Portfolio and the Student Handbook.

- ERF/D1-2/PH 507 Course Syllabus Template
- ERF/D7-3/MPH Thesis-Capstone Competency Form
- ERF/D7-3/MPH Proposal Portfolio
- ERF/D7-3/MPH Student Handbook (Page 11)
- 4. Provide documentation, including rubrics or guidelines that explains the methods through which faculty and/or other qualified individuals assess the integrative learning experience with regard to students' demonstration of the selected competencies.
  - ERF/D7-3/MPH Thesis-Capstone Competency Form
  - ERF/D7-4/MPH Proposal Portfolio Rubric
- 5. Include completed, graded samples of deliverables associated with each integrative learning experience option from different concentrations, if applicable. The program must provide at least 10% of the number produced in the last three years or five examples, whichever is greater.

From Cohorts 1-5, we have 95 graduates. Therefore, 10 examples are provided (7 from the Health Education Health Promotion concentration and 3 from Global Health)

- ERF/D7-5/ILE Example 1 Sean Gruen
- ERF/D7-5/ILE Example 2 Alma Detten Janell Bryant Dalia Fuentes Leon Jasmin Leon
- ERF/D7-5/ILE Example 3 Jacob Atkins
- ERF/D7-5/ILE Example 4 Megan Levi
- ERF/D7-5/ILE Example 5 Luciana Bchir
- ERF/D7-5/ILE Example 6\_Louielyn Lirio
- ERF/D7-5/ILE Example 7 Scott Nester
- ERF/D7-5/ILE Example 8 Jared Zachary
- ERF/D7-5/ILE Example 9 Sheila Ogwang
- ERF/D7-5/ILE Example 10 Nguy, Dang, Shelley

6. If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

## Strengths:

• By having all students complete a thesis or capstone project, we ensure that 100% of students have successfully integrated identified foundational and concentration competencies into their culminating activity on topics which target a specific audience or stakeholder group.

#### Weaknesses:

- A more explicit process is needed to help students identify the foundational and concentration competencies to include in their final project proposal.
- A structured method of assessing final projects is needed.

## Plans for Improvement:

- Starting with cohort 6, students must write a 1-2-page single-spaced narrative reflection connecting their coursework to specific core and concentration competencies. Students must provide two artifacts (e.g., paper, group project, final products) to support the narrative.
- The program created a "MPH Thesis/Capstone Competency Form" that has each students' identified foundational and concentration competencies related to their proposal, which is now used by faculty to evaluate the final thesis/capstone.
- The program will implement the new portfolio rubric with cohort 6 students defending their thesis/capstones in April 2020.
- Included in this culminating Proposal Portfolio will be a rubric by which ILE's are assessed by the
  committee chair who serves as the faculty advisor ensuing that ILE's are integrated and
  synthesized. For thesis and capstone projects, this culminating Proposal Portfolio will ensure the
  individualized assessment of ILE's for each student. Initial implementation began with students
  proposing Spring 2020. The Curriculum Committee will assess the functionality of the rubric and
  adjust for implementation Fall 2020.
- During the 2019-2020 academic year, program faculty will explore how MPH students might be
  encouraged and supported to complete group capstone experiences. Faculty will discuss
  equitable solutions to ensure students have options for their ILE experience while also
  considering how to equitably support faculty workload issues in light of varied student capstone
  options. The alternatives to theses as their ILE will be prioritized in AY 2020-2021.
- The program will explore assessment tools appropriate for a variety of thesis and capstone topics. The Curriculum Committee will propose assessment tools for thesis and capstones and will implement these tools Spring 2021 after consultation with the CAB in Fall 2020.

ERF/D7-3/MPH Thesis-Capstone Competency Form

ERF/D7-3/MPH Proposal Portfolio

ERF/D7-4/ MPH Proposal Portfolio Rubric

## D8. DrPH Integrative Learning Experience

Not applicable to CSUSM.

D9. Public Health Bachelor's Degree General Curriculum

Not applicable to CSUSM.

D10. Public Health Bachelor's Degree Foundational Domains

Not applicable to CSUSM.

D11. Public Health Bachelor's Degree Foundational Competencies

Not applicable to CSUSM.

D12. Public Health Bachelor's Degree Cumulative and Experiential Activities

Not applicable to CSUSM.

D13. Public Health Bachelor's Degree Cross-Cutting Concepts and Experiences

Not applicable to CSUSM.

## D14. MPH Program Length

An MPH degree requires at least 42 semester-credits, 56 quarter-credits or the equivalent for completion.

Schools and programs use university definitions for credit hours.

## Required documentation:

1) Provide information about the minimum credit-hour requirements for all MPH degree options. If the university uses a unit of academic credit or an academic term different from the standard semester or quarter, explain the difference and present an equivalency in table or narrative form.

CSUSM's MPH graduate degree program is a 42-semester unit, cohort-based accelerated program which requires 16 months of study including one summer semester. The program includes seven common core courses with the remaining courses specific to the program concentration offered. All courses contain three units of academic credit with the exception of:

- Special topics Course in Public Health (Units vary from 1-3)
- Independent Study in Public Health (Units vary from 1-3)
- Culminating Experience in Public Health (Units vary from 1-3)

In addition, all students are required to participate in a supervised 180-hour internship experience approved by the Public Health Internship Coordinator.

2) Define a credit with regard to classroom/contact hours.

CSUSM CREDIT HOUR POLICY (Academic Affairs Policy Number APC 374-11 dated 6/27/12)

CSUSM measures student learning in accordance with the WASC Policy on Credit Hour, which relies on the federal regulations on the definition and assignment of credit hours:

Under federal regulations, all candidate and accredited institutions are responsible to comply with the definition of the credit hour as provided in section 600.2, which defines the credit hour as:

Except as provided in 34 CFR 668.8(k) and (l), a credit hour is an amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally established equivalency that reasonably approximates not less than:

- One hour of classroom or direct faculty instruction and a minimum of two hours of out-of-class student work each week for approximately fifteen weeks for one semester or trimester hour of credit, or ten to twelve weeks for one quarter hour of credit, or the equivalent amount of work over a different amount of time; or
- At least an equivalent amount of work as required in paragraph (1) of this definition for other academic activities as established by the institution, including laboratory work, internships, practica, studio work, and other academic work leading to the award of credit hours.

For the purpose of applying this definition, a 50-minute class period is considered to be "one hour" and a semester with 70-75 instructional days is considered to be an "approximately fifteen-week semester."

## D15. DrPH Program Length

Not applicable to CSUSM.

D16. Bachelor's Degree Program Length

Not applicable to CSUSM.

D17. Academic Public Health Master's Degrees

Not applicable to CSUSM.

D18. Academic Public Health Doctoral Degrees

Not applicable to CSUSM.

D19. All Remaining Degrees

Not applicable to CSUSM.

## D20. Distance Education

If this criterion is not applicable, simply write "Not applicable" and delete the criteria language and documentation requests below.

1. Identify all public health distance education degree programs and/or concentrations that offer a curriculum or course of study that can be obtained via distance education. Template Intro1 may be referenced for this purpose.

## Reference Template Intro-1. Instructional Matrix

- 2. Describe the public health distance education programs, including
  - a. an explanation of the model or methods used,

The online course work is the same as the hybrid-format course work. However, instead of in-person lectures and assignments students are required to complete online learning modules and assignments. Due to the asynchronous model, each student can complete the learning modules at their convenience. The students are still required to complete each course module within the assigned 8-week course block.

b. the program's rationale for offering these programs,

The public health program's rational for offering these programs was to increase the educational opportunities available to students. The program priorities to serve underserved and vulnerable communities reflect priorities at the university level. The online MPH degree program allows students to complete the degree requirements around their other work and family obligations.

c. the manner in which it provides necessary administrative, information technology and student support services,

Online orientation mirrors in-person orientation. Faculty and administrative representatives are present in real time to answer any questions that students may have as the orientation slides are played. Additionally, the orientation slides are available asynchronously should students not be able to make the online orientation time. The link to the online orientation is here: <a href="https://youtu.be/GaGfDwYb-\_4">https://youtu.be/GaGfDwYb-\_4</a>.

At the beginning of each term a new cohort is admitted, an online orientation module is made available that provides an overview of the program requirements and resources. This is in addition to other modules students are required to complete for other university systems such as Cougar Courses, our online instruction platform.

In addition to the teaching faculty the students are virtually connected at several points. They are connected to our program's Administrative Coordinator that helps students navigate the university system and program timeline; the CEHHS Graduate Student Services Coordinator who tracks academic milestones and can advise on overall graduate student academic processes; the university's IITS team is available virtually to support student computing and software needs; the Cougar Care Network that is a referral service on campus that can help students if academic performance is being hindered by non-academic factors; and the library, whose collection and librarians can be accessed online.

d. the manner in which it monitors the academic rigor of the programs and their equivalence (or comparability) to other degree programs offered by the university, and

The university regularly reviews its academic programs by engaging in an annual review of individual program student learning outcomes (PSLOs) and do a quinquennial program review. The review schedule is in the ERF. (<u>ERF/B5-1/prog rev timeline flowchart</u>) (<u>ERF/B5-1/program review timeline</u>)

e. the manner in which it evaluates the educational outcomes, as well as the format and methods.

Other online programs exist on our campus that follow the same general format: online, asynchronous program coursework. The online program mirrors the face-to-face hybrid form of the program in curriculum and learning objectives. Our face-to-face program is an 16-month program that offers course work in 8-week blocks (5-week blocks for summer courses). The online program follows this timing as well but utilizes online discussion forums as well as written assignments and online exams. The university requires programs to evaluate program student learning outcomes (PSLOs). The evaluation of these PSLOs follows the University's annual cycle requiring an assessment of at least one PSLO each year. This is done by collecting data from signature assignments from at least one course that addresses the PSLO that is being evaluated. The program evaluates the learning outcomes across both online and face-to-face hybrid modalities.

Course instructional materials are available on Cougar course sites via Moodle – a course management system that has information and technology resources adequate to fulfill its stated mission and goals and to support instructional programs.

The online program offerings are new. The first Global Health online offering was this Fall 2019 with 15 students. Students in the online health promotion classes now total 28 students between the Spring 2019 and Fall 2019 cohorts.

3. Describe the processes that the university uses to verify that the student who registers in a distance education course (as part of a distance-based degree) or a fully distance-based degree is the same student who participates in and completes the course or degree and receives the academic credit.

MPH students enrolled in online courses are required to sign-in to our secure Learning Management System (LMS) using an assigned and confidential username and password. Students cannot log-in to the LMS or participate in and complete courses in our online program without the confidential username and password.

Learning platforms used by the university include document review software that compares student work to existing documents to check for plagiarism. This helps capture students using another students' work.

Each instructor checks-in with individual students to understand where the student is in their learning of the material. In these instances, faculty are able to determine the alignment between the knowledge and language in their written work and their in-person capacity to discuss the class material.

4. If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

#### Strengths:

The Program has successfully initiated the MPH online degree program that mirrors the
existing hybrid coursework and materials. The program had initially planned for one degree
concentration in Health Promotion Health Education to be offered online. After this initial
implementation, the Global Health concentration was also brought online to make the
CSUSM MPH Program available in hybrid and online forms in two distinct degree
concentrations.

## Weaknesses:

- The current online format is still in its infancy. The number of faculty comfortable teaching the in the online format needs to be increased.
- The student verification process needs improvement.

## Plans for Improvement:

- In order to meet the needs of our online program, faculty require better training to offer courses online. The university has an Instructional Design Services (IDS) Team to help with Faculty training to develop and refine online course work. Online course certification is available but not yet required of online faculty.
- Student verification methods and processes need to be further refined. The Program will work
  with CSUSM's Information and Instructional Technology Services (IITS) and the IDS Team to
  create more safeguards to ensure student academic integrity through the 2020-2021 year.

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## E1. Faculty Alignment with Degrees Offered

Faculty teach and supervise students in areas of knowledge with which they are thoroughly familiar and qualified by the totality of their education and experience.

Faculty education and experience is appropriate for the degree level (bachelor's, master's, doctoral) and the nature of the degree (research, professional practice, etc.) with which they are associated.

1) Provide a table showing the program's primary instructional faculty in the format of Template E1-1. The template presents data effective at the beginning of the academic year in which the final self-study is submitted to CEPH and must be updated at the beginning of the site visit if any changes have occurred since final self-study submission. The identification of instructional areas must correspond to the data presented in Template C2-1.

Template E1-1. Primary Instructional Faculty Alignment with Degrees Offered

| Primary Instructional Faculty Alignment with Degrees Offered California State University San Marcos |                            |                                       |                               |   |   |   |  |  |  |
|---|----------------------------|---------------------------------------|-------------------------------|---|---|---|--|--|--|
| Name  | Title/<br>Academic<br>Rank | Tenure<br>Status or<br>Classification | Graduate<br>Degrees<br>Earned | Institution(s)<br>from which<br>degree(s) were<br>earned                  | Discipline in which degrees were earned               | Concentration affiliated with in Template C2-1              |  |  |  |
| Bandong,<br>Lisa  | Internship<br>Coordinator  | Full time<br>lecturer                 | MPH                           | Cal State<br>Fullerton  | Public Health - Health Promotion / Disease Prevention | Health Education<br>& Health<br>Promotion,<br>Global Health |  |  |  |
| Holub,<br>Christina   | Assistant<br>Professor     | Tenure-Track                          | PhD                           | University of<br>North Carolina<br>at Chapel Hill                         | Health Behavior and Health Education                  | Health Education & Health Promotion                         |  |  |  |
| lyiegbuniwe,<br>Emmanuel  | Associate<br>Professor     | Tenured                               | PhD                           | University of Illinois  | Environmental and Occupational Health Sciences        | Global Health   |  |  |  |
| Morton,<br>Deborah  | Assistant<br>Professor     | Tenure-Track                          | PhD                           | University of<br>California San<br>Diego/San<br>Diego State<br>University | Public Health-<br>Epidemiology                        | Health Education<br>& Health<br>Promotion                   |  |  |  |
| Santos,<br>AsherLev   | Assistant<br>Professor     | Tenure-Track                          | PhD                           | University of California San Diego/San Diego State University             | Public Health   | Global Health   |  |  |  |

2) Provide summary data on the qualifications of any other faculty with significant involvement in the program's public health instruction in the format of Template E1-2. Programs define "significant" in their own contexts but, at a minimum, include any individuals who regularly provide instruction or supervision for required courses and other experiences listed in the criterion on Curriculum. Reporting on individuals who supervise individual students' practice experience (preceptors, etc.) is not required. The identification of instructional areas must correspond to the data presented in Template C2-1.

Template E1-2. Non-Primary Instructional Faculty Regularly Involved in Instruction

| Non-Primary Instructional Faculty Regularly Involved in Instruction<br>California State University San Marcos 2019-2020 |                                  |   |  |          |   |                                      |  |  |  |  |
|---|----------------------------------|---|--|----------|---|--------------------------------------|--|--|--|--|
|   |                                  | Title/ Current<br>Employment  | FTE or %<br>Time<br>Allocated<br>(19/20) | Degrees  | degree(s)   | in which                             | Concentration affiliated with in Template C2-1                 |  |  |  |
| <u>Agah,</u><br>Niloufar  | Faculty<br>(non-tenure           | Epidemiologist/Data<br>Analyst, UCSD<br>Division of Public<br>Health                  | .20                                      | MPH      | San Diego<br>State<br>University  | with emphasis<br>on<br>Epidemiology  |  |  |  |  |
| Beach,<br>Diane L   | Faculty<br>(non-tenure<br>track) | Principal, Help Me<br>with My Parent:<br>Geriatric Care<br>Management and<br>Training | .10                                      | MPH, EdD | State<br>University,<br>University of<br>San Diego                        | Education                            | Health Education<br>and Health<br>Promotion                    |  |  |  |
|   | Faculty<br>(non-tenure<br>track) | Assistant Professor,<br>California State<br>University San<br>Marcos                  | .40                                      | PhD      | University of<br>California,<br>Santa Barbara                             |                                      | Global Health &<br>Health Education<br>and Health<br>Promotion |  |  |  |
| El Wardani,<br>Nile R.  |                                  | Lecturer, SDSU and<br>UCSD School of<br>Medicine                                      | .10                                      | PhD      | University of<br>London   | and Public<br>Policy                 | Global Health &<br>Health Education<br>and Health<br>Promotion |  |  |  |
|   |                                  | Consultant, ABH<br>Partners   | .10                                      | PhD      | University of<br>California, Los<br>Angeles                               | Community<br>Health<br>Sciences      | Health Education<br>and Health<br>Promotion                    |  |  |  |
|   | Faculty<br>(non-tenure<br>track) | Services (North<br>Inland & Coastal)  | .20                                      | PhD      | University of<br>California San<br>Diego/San<br>Diego State<br>University | with emphasis<br>on Global<br>Health | Global Health &<br>Health Education<br>and Health<br>Promotion |  |  |  |
| Spite,<br>Sasha   |                                  | Project Coordinator,<br>Indian Health<br>Council                                      | .20                                      | MPH      | Boston<br>University,<br>School of<br>Public Health                       | . 33                                 | Health<br>Education and<br>Health Promotion                    |  |  |  |
| Reyes,<br>Shelby  |                                  | Nutrition Educator,<br>Leah's Pantry  | .10                                      | MPH      | University of<br>Southern<br>California                                   |                                      | Global Health &<br>Health Education<br>and Health<br>Promotion |  |  |  |

3) Include CVs for all individuals listed in the templates above.

ERF/E1-3/Faculty CVs

4) If applicable, provide a narrative explanation that supplements reviewers' understanding of data in the templates.

## Not applicable

5) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

## Strengths:

- The quality of the program's tenure-track faculty is one of the program's greatest strengths.
  As noted in their curriculum vitas, faculty offer high quality teaching, are active researchers,
  actively secure grants in their disciplinary areas of expertise, and offer important service
  contributions to the public health profession.
- CSUSM has four full-time faculty members who primarily teach in the program. This offers students direct instruction with the core program faculty (high tenure-track faculty to student ratio).
- Full-time lecturer faculty members have strong educational backgrounds and practice experience.

#### Weaknesses:

 The lecturer faculty pool is small. We would like to expand our lecturer faculty pool for both online and face-to-face classes to address areas of expertise in Biostatistics, Health Systems Organization and Delivery, and Global Health Policy and Practice.

## Plans for Improvement:

 As the program continues to grow, hire more full-time faculty that will complement our current program faculty's areas of expertise and highlight the desired expectation for faculty who have experience teaching in an online environment.

## E2. Integration of Faculty with Practice Experience

To assure a broad public health perspective, the program employs faculty who have professional experience in settings outside of academia and have demonstrated competence in public health practice. Programs encourage faculty to maintain ongoing practice links with public health agencies, especially at state and local levels.

To assure the relevance of curricula and individual learning experiences to current and future practice needs and opportunities, programs regularly involve public health practitioners and other individuals involved in public health work through arrangements that may include adjunct and part-time faculty appointments, guest lectures, involvement in committee work, mentoring students, etc.

 Describe the manner in which the public health faculty complement integrates perspectives from the field of practice, including information on appointment tracks for practitioners, if applicable. Faculty with significant practice experience outside of that which is typically associated with an academic career should also be identified.

CSUSM's MPH program makes a visible and concerted effort to integrate our curriculum with practice. This ensures that our graduates can successfully bridge "theory to practice" and ensures their success as emerging public health professionals. To this end we:

- Routinely invite guest lecturers from community-based organizations and public health departments to share experiences and knowledge with our students.
  - Examples include:
    - PH 561: Chronic and Infectious Diseases
      - Guest: Dr. Thomas Novotny, MD, MPH Topic: Global tobacco control and the FCTC
    - PH 502: Introduction to Health Systems
      - Rhea-Lanee Lansang Tran, MPH CDC Public Health Associate: topic Healthcare and public health – description surveillance, mandatory reporting, public health recommendations
      - Nannette Stamm, MPH VCC Chief Health Promotion Officer: topic Healthcare in practice and health disparities – description Medicaid, uninsured, community health in actions
      - Jeffrey Johnson, MPH County of San Diego HHSA Epidemiology Branch Chief: topic the digitization of medicine – description electronic records, health information exchanges
      - Gina Merchant, PhD USCD fellow: topic the future of medicine description empowered health care design

The MPH Program strives to place students in community-based organizations and health departments for their internship experiences/requirements (<u>ERF/E2-1/MPH Internship Sites</u>). This process of community organizations recruiting student interns encourages MPH students to address authentic community-based needs in their capstone projects on topical areas provided by our community partners.

Some of our faculty have previous experience in public health practice and bring this focus to the classroom and to discussions about curriculum. Faculty with previous experience in public health practice include:

Between 1989 and 1992, Dr. Emmanuel Iyiegbuniwe served as the NGO Liaison Officer & Occupational Hygienist for the Office of Disease Control & International Health within the Federal Ministry of Health in Lagos, Nigeria, Africa. In this capacity he was responsible for planning, development and implementation of training programs for the National AIDS Control Program;

organizing health and safety workshops, symposia, and seminars in collaboration with international donor agencies; providing leadership and conducting "Train the Trainer" workshops on AIDS prevention and control to various Nigerian NGOs.

Dr. Deborah Morton is deeply involved in supporting American Indian populations. Since 2001, Dr. Morton has served as Founder and Chair of the Indian Health Council, Inc. Institutional Review Board which reviews research proposals for tribal communities in Southern California. She is also currently involved with the Indian Culture and Sovereignty Center at CSUSM that supports numerous projects addressing the needs of regional tribal communities.

Many of our CSUSM faculty are involved in practice that is not necessarily usually associated with academic work. By way of example:

Dr. AsherLev Santos is involved in community organizing around the Getting to Zero initiative. Getting to Zero is a comprehensive initiative approved by the San Diego County Board of Supervisors that seeks to eliminate all new HIV infections in San Diego County within 10 years. The initiative aims to increase public awareness of HIV and embolden countywide prevention efforts by setting clear goals, encouraging collaboration between local organizations and health care providers and pursuing policy changes that support HIV eradication efforts.

Lisa Bandong draws on her deep experience as a yoga instructor supporting pre/post pregnancy and toddler programs for the City of San Marcos Community Recreation Center and with Babies in Bloom in Vista CA. As well, she actively endorses best practices for supporting pregnant and lactating students.

2) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

#### Strengths:

- CSUSM's MPH tenure-track faculty bring a diverse set of prior practice experiences that enhance the curriculum and instruction of our program.
- Our primary lecturer faculty hold titles and positions as current public health professionals which adds to the authenticity that our program integrates curriculum with practice.
- The program maintains strong alliances with our community partners who, both via their participation on our Community Advisory Board and via internship agreements, assist in our integration of practice experience for our students.
- Students complete capstone projects that directly address pressing community needs.

#### Weaknesses:

None identified at this time.

## Plans for Improvement:

None identified at this time.

## E3. Faculty Instructional Effectiveness

The program ensures that systems, policies and procedures are in place to document that all faculty (full-time and part-time) are current in their areas of instructional responsibility and in pedagogical methods.

The program establishes and consistently applies procedures for evaluating faculty competence and performance in instruction.

The program supports professional development and advancement in instructional effectiveness.

1) Describe the means through which the program ensures that faculty are informed and maintain currency in their areas of instructional responsibility. The description must address both primary instructional and non-primary instructional faculty and should provide examples as relevant.

As an institution whose primary mission is teaching and learning, all faculty are expected to uphold high standards for quality teaching. As noted in the Public Health RTP standards, "effective teaching is defined as activity that promotes student learning, reflection, and professional growth in support of the College mission and will be demonstrated by evidence in the Working Personnel Action File" (RTP Standards, section IV.A.1.). In order to maintain currency in their areas of instructional responsibility, full-time tenure-track faculty submit evidence activities that promote teaching excellence which include peer evaluations and in-service education (RTP standard IV.C.3.) and discuss their participation and contributions to their relevant professional associations.

To ensure a high response rate, CSUSM has adopted an optional online student course evaluation process. Paper evaluations and online evaluations are available to the students for 2 weeks prior to the conclusion of the course. During this time students can log in and complete the evaluation or turn in paper copies to drop-boxes located throughout campus. Periodic reminders are sent via email notifications to the students every three days starting the end of the first week that evaluations are open. Also, the instructor receives an email after one week that contains the response rate for the class if the response rate is below 70%. This threshold has been chosen because this was the most recent average response rate for paper evaluations. At the end of each semester, the university complies the data for each course and sends the data sets to each faculty member.

Tenure-track faculty are expected to consider the results and examine patterns and trends in preparation for their required Self-Reflection of Scholarly Teaching included in their Working Personnel Action File. During the period between their initial appointment and tenure/promotion, tenure-track faculty are reviewed for their instructional effectiveness by a Peer Review Committee, the College Dean, a university Promotion and Tenure Committee, and the Provost.

By way of example, Dr. AsherLev Santos participated in a 2018 Summer Teaching Institute with a focus on Service Learning at CSU San Marcos and in 2017 participated in a similar institute with a focus on "Engaging Hard to Reach Students". Considering the need to maintain currency with his field, Dr. Santos holds professional membership with the American Public Health Association in both the Early Career Professional Division and Community Engagement Division.

Similarly, Dr. Christina Holub has been active in staying informed and maintaining currency with her instructional responsibilities. In 2017, she participated in a "Flipped Classroom" course and re-designed her pedagogical practices across all seven courses she commonly teaches. She is an advocate for "Active learning Classrooms" and has also received training on this practice via our Faculty Center that now allows her to now use specialized a classroom on campus (e.g. Markstein Hall-Classroom #202). She also maintains current affiliations with her primary professional associations including the American Public Health Association and the American Cancer Society.

As a non-primary instructional faculty member, Dr. Jessica Miller has expertise in public health pedagogical practices. She routinely consults with various organizations (e.g. Pacific Oaks College) to provide subject matter expertise and assistance with developing public health courses for a new degree concentration program. She maintains currency via professional development opportunities throughout Southern California and her continued membership with the American Public Health Association.

Describe the program's procedures for evaluating faculty instructional effectiveness. Include a
description of the processes used for student course evaluations and peer evaluations, if
applicable.

As noted in the section above, the California State University system's primary mission is to promote student success through opportunity and a high-quality education that prepares students to become leaders in the changing workforce. Our emphasis on student success lavs the groundwork for expecting high-quality teaching from our faculty. To this end, we assess highquality teaching via the annual evaluation of all faculty (primary and non-primary instructional) for all courses they teach. In adherence with the Public Health Program RTP guidelines and CSU Collective Bargaining Agreement, all faculty are required to provide evidence of instructional effectiveness via submission of "compete sets (as specified by the CBA) of university-prepared student evaluation reports from courses taught since the last review or promotion (III.B.3.). These reports offer an overview of instructional effectiveness as identified by 19 required questions, up to four additional questions offered by the faculty and three open-ended/narrative responses options by students (ERF/E3-2/CSUSM Student Evaluation Form). The primary categories/questions that determine instructional effectiveness include the overall quality of the course, instructor effectiveness, course meeting objectives and requirements, required assignments contributed to student learning and instructor responsiveness when help was requested.

Non-primary instructional faculty (lecturer faculty) in our College are also required to submit an annual Self-Reflection of Scholarly Teaching to include in their Working Personnel Action File (WPAF). In lieu of the aforementioned committees for tenure-track faculty, the Associate Dean for each College reviews the WPAF and, as appropriate, the Department Chair, Program Director, or School Director reviews all materials as well to determine the instructional effectiveness of the lecturer faculty. A copy of the CSUSM Lecturer Evaluation policy is included for reference. (ERF/E3-2/Lecturer Evaluation Policy).

Peer evaluations for both our tenure-track and lecturer faculty are encouraged but not required. As noted in the Public Health RTP Standards, peer evaluations are considered evidence of scholarly teaching but are only recommended as additional items to be submitted for review.

3) Describe available university and programmatic support for continuous improvement in faculty's instructional roles. Provide three to five examples of program involvement in or use of these resources. The description must address both primary instructional faculty and non-primary instructional faculty.

Given the high expectations for effective instruction, the university, college and program offer various resources for continuous improvement to all our MPH faculty in support of their instructional roles. All CSUSM faculty have access to our Teaching and Learning Institute. New faculty are required to attend a year-long New Faculty Institute, and all college faculty are offered professional development funds to support travel or other professional development opportunities so they may continually enhance in their teaching/learning. Selected specific examples of program involvement in the use of these resources include:

Dr. AsherLev Santos is the newest faculty member. Like all new faculty in the college, he participated in the New Faculty Institute during his first year of appointment at CSUSM. To support his success, he was offered one course release from teaching for the first two semesters

of his employment so he could participate in this year-long professional development opportunity at CSUSM. The New Faculty Institute (NFI) consists of two kinds of activities. First, there is an orientation provided at the beginning of the fall semester, which is especially designed to help new faculty to be successful in their first semester as a lecturer or tenure-track faculty member. The institute also consists of a number of workshops that occur throughout the year, and two half-day retreats later in the academic year, with additional information and timely guidance. Workshop topics include teaching, research, networking, and campus resources. Primary faculty like Dr. Santos are afforded \$1,000.00 annually for professional development.

Lisa Bandong has participated in numerous professional development activities since joining the Public Health program in October 2016. Ms. Bandong has actively engaged with pedagogical development opportunities through the campus' Faculty Center and Academic Technology Center including participating in the FLIP Camp Active Learning Pedagogy in Summer 2016 – a five-day immersion workshop that introduced the active learning curriculum map process, and actively integrated 'before class' formative assessments and 'in-class' formative assessments immediately into her classroom experiences. She also applied and was accepted into the 2017-18 Faculty Learning Community for Online Learning to develop expertise in online teaching, as the program was preparing for an online course offering. Ms. Bandong's public health professional development included attending conferences and webinars with the Society of Behavioral Medicine (2017); the California Breastfeeding Summits (2018 and 2019); and the American Public Health Association's 2018 annual conference. Non-primary faculty are eligible to request funds to participate in professional development activities associated with their position.

Dr. Christina Holub participated in Summer Teaching Institutes at CSUSM focused on Active Learning and the Flipped Classroom. She subsequently re-tooled her courses with the knowledge acquired from these institutes and offered a thoughtful self-reflection on the impact of these professional development opportunities in her 2018/2019 Self-Reflection of Scholarly Teaching. Primary faculty like Dr. Holub are afforded \$1,000.00 annually for professional development.

# 4) Describe the role of evaluations of instructional effectiveness in decisions about faculty advancement.

Primary instructional faculty (tenure-track faculty) are required to be evaluated on their instructional effectiveness on an annual basis as they pursue tenure and promotion in rank. As noted in our Collective Bargaining Agreement, during years 1, 3 and 5, all tenure-track faculty are reviewed for their instructional effectiveness by a Peer Review Committee (PRC) and the college Dean. During this periodic review, the PRC and Dean evaluate faculty instructional effectiveness and make recommendations on their progress to date. During years, 2, 4, and 6 all tenure-track faculty are reviewed for their instructional effectiveness by a Peer Review Committee (PRC), college Dean, the university Promotion and Tenure Committee and Provost. These evaluations of instructional effectiveness determine if the faculty member is reappointed for a subsequent period. Thus, while all faculty are reviewed each year, decisions about their termination or reappointment occur every other year.

Non-primary (lecturer) faculty are similarly reviewed on a regular basis but are not afforded the opportunity to advance in rank. For new lecturer faculty, if the student evaluations fall below the median of typical courses, at the discretion of the MPH Program Director, that faculty may not be hired to teach that course again. For lecturer faculty who have earned entitlement, the college is required to offer them the equivalent number of units for a subsequent three-year period. The evaluation process for faculty with three-year contracts is a more comprehensive process and decisions about continued employment to teach specific classes is based on a review of the student evaluations, materials submitted for review by faculty and an optional peer observation of their teaching.

5) Select at least three indicators, with one from each of the listed categories that are meaningful to the program and relate to instructional quality. Describe the program's approach and progress over the last three years for each of the chosen indicators. In addition to at least three from the lists that follow, the program may add indicators that are significant to its own mission and context.

Upon review of the available indicators related to instructional quality, program faculty selected the following indicators and offer the subsequent analysis of their progress over the last three years.

## <u>Faculty Currency: Peer/internal review of syllabi/curricula for currency of readings, topics, methods, etc.</u>

Curricular additions or changes are subject to review and oversight by the Office of Academic Programs and Resources. The review process entails a series of internal peer reviews that begin with the program faculty, followed by review by an interdisciplinary college curriculum committee, review and endorsement by the appropriate University Senate Curriculum Committee and final review by the Dean of Academic Programs. As needed, other offices or individuals may be asked to review new or existing curricular proposals as needed (e.g. Graduate Studies).

For all new course proposals or changes, the university uses a tracking program known as Curriculog. Curriculog is the program through which all curriculum approval processes are submitted and reviewed. This web-based system allows for course and program origination, curriculum and program changes, as well as review and approval processes by committee. Each year, the university publishes a calendar by which any who intends to submit a curricular change are informed of the requirements, forms and related deadlines. At each step of the review process, peers and administrators carefully review proposals for currency of readings, the extent to which the topics align with the desired course outcomes, and pedagogical strategies employed among other factors.

Courses are updated before each offering to reflect the current state of science or current affairs that are related to the learning objectives. Input is also solicited at CAB meetings for current needs and events that reflect the community's needs. Such discussions have resulted in the Vista Community Clinic Collaboration with Dr. lyiegbuniwe that has led to several capstone projects that address community needs (ERF/E3-5/MPH Advisory Board Minutes 4-19-19).

#### Analysis

Since the program was originally approved, 100% of all MPH curricular proposals have been vetted and approved by the various College and University peer and administrative review committees.

## Faculty instructional technique: Student satisfaction with instructional quality.

In light of expectations that all MPH faculty submit courses for student feedback, the program has ample data on how our students perceive the instructional quality of our courses. Specifically, each semester, faculty are required to submit their courses for an assessment of their instructional skills and abilities. As noted on the Student Evaluation Form, 15 specific items are asked of each student. Section II of the Student Evaluation addresses numerous items related to instructional quality. Namely, item 2.1 (The overall quality of this course was high) and item 2.3 (The instructor is an effective teacher) offers evidence of our commitment to assessing our student's satisfaction with the instructional quality of our courses.

## Analysis:

Data reviewed by the Program Director suggest that our tenure-track faculty hold high scores (averaging 4 on a 5-point scale from strongly disagree to strongly agree) with regard to items 2.1 and 2.3. For lecturer faculty with lower scores on the Student Evaluations, they have been assigned a "does not meet" rating for their instructional effectiveness and are not re-hired for that course.

School or program-level outcomes: Courses that employ active learning techniques
Since the program was originally launched, program faculty have participated in numerous
professional development activities that support active learning strategies and techniques. This
culminated in a formal mini-grant proposal that was submitted and funded to ensure all primary
instructional faculty would receive training on active learning strategies. In 2017, faculty received
the Flipped Classroom Training and we received an assessment grant for active learning. The
results were presented as a poster paper to the CSUSM Assessment Fair in 2018.

#### **Analysis**

Please refer to the MPH Active Learning Activity for evidence of this program level priority in our ERF (ERF/E3-5/MPH Active Learning Activity).

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

#### Strengths:

- CSUSM MPH faculty bring a genuine passion for teaching and learning as evidenced by their strong teaching evaluations.
- Our CSUSM MPH faculty engaged in a program-wide professional development opportunity that culminated in strengthening their teaching and learning in the area of "active learning".

#### Weaknesses:

CSUSM MPH faculty recognize the need to identify additional opportunities to involve the
part-time (lecturer) teaching faculty in professional development opportunities that support
high quality teaching and learning outcomes.

## Plans for Improvement:

 The Program Director will work with the Faculty Center to identify opportunities for professional development for our lecturer/part-time teaching faculty.

## E4. Faculty Scholarship

The program has policies and practices in place to support faculty involvement in scholarly activities. As many faculty as possible are involved in research and scholarly activity in some form, whether funded or unfunded. Ongoing participation in research and scholarly activity ensures that faculty are relevant and current in their field of expertise, that their work is peer reviewed and that they are content experts.

The types and extent of faculty research align with university and program missions and relate to the types of degrees offered.

Faculty integrate research and scholarship with their instructional activities. Research allows faculty to bring real-world examples into the classroom to update and inspire teaching and provides opportunities for students to engage in research activities, if desired or appropriate for the degree program.

1) Describe the program's definition of and expectations regarding faculty research and scholarly activity.

#### Definition

As a university bound by a system-wide Collective Bargaining Agreement, each department is required to have Retention, Tenure, and Promotion (RTP) standards for all their faculty. When the Public Health Program began, faculty used the School of Nursing's RTP standards but adopted its own RTP standards in May 2018. In addition, all departments are required to follow adopted university RTP standards.

One element of all RTP standards is the expectation for programs to clearly define their standards for faculty research and scholarly activities (known as Scholarly Research/Creative Activities) as well as the assessment of these expectations (Section V-Standards and Criteria for Scholarly Research and Creative Activity) (ERF/A1-2/2018 RTP Standards for Public Health Program). As noted in the Public Health RTP Standards, "It is essential to the University's mission that each faculty member demonstrates continued commitment, dedication, and growth as a scholar. Research/creative activity results in an original contribution to knowledge or understanding in the field and includes the dissemination of that knowledge beyond the classroom (including capstone & thesis projects). Research/creative activity may be basic, applied, integrative, and/or related to teaching". To that end, on an annual basis, faculty prepare a report on how they are progressing with their Scholarly Research/Creative Activities. In this report they offer a reflective statement on their recent Scholarly Research/Creative Activities. In this statement, faculty must specify how they have met the program RTP standards which are divided into Category A and Category B items as follows:

Category A Evidence must include external peer reviews:

- Primary author on papers published or accepted for publication in peer reviewed/refereed
  journals recognized as reputable and of high quality.
- Primary author on peer or editor reviewed published book chapters of original material and original monographs.
- Primary author on peer or editor reviewed books.
- Final author on peer reviewed published papers behind students who contributed to the completion of the manuscript as part of their education and training.
- Editor or associate editor of book.
- Significant department development including applied scholarship, curriculum writing/revision, or accreditation work, which requires outside agency approval and/or peer review.
- PI or co-PI on funded peer reviewed national-level external grants for scholarly research/creative activity work, in progress or completed.

• Secondary or later listed author on peer reviewed published papers, where the authorial activity is comparable or on par with that of primary authorship.

Category B Evidence may include but is not limited to:

- Papers published in refereed proceedings
- Refereed presentations at professional meetings
- Invited presentations at professional meetings
- Editor reviewed articles published in journals
- Co-investigator/consultant/collaborator on funded peer reviewed national- level external grant for scholarly research/creative activity work, in progress or completed
- Published case studies
- Applied scholarly research/creative activity that is published, presented at a conference or meeting, or applied in an educational setting
- Special recognition and awards for research/creative activities
- Funded regional or internal grants for scholarly research/creative activity work (e.g., local organizations, University Professional Development, etc.)
- Unfunded national-level peer reviewed external grants for scholarly research/creative activity work
- Submitted papers (reviewed and in revision) only at the time of RTP submission
- Sponsored or contract research (whether results published or unpublished)
- Later author on peer reviewed published papers where the authorial activity is not comparable or on par with that of primary authorship
- 2) Describe available university and program support for research and scholarly activities.

Given the clear expectations for all our faculty to engage in Scholarly Research/Creative Activities, our campus priority has been to offer dedicated time for these activities. To that end, tenure-track faculty are afforded 3 weighted teaching units (WTU) of release time (equivalent to 20% of their overall workload) for their research and scholarship. In addition to this release time, CSUSM offers faculty several other supports that assist faculty in establishing and maintaining their research agenda, including:

- Our CSUSM Faculty Development Center offers workshops that support faculty in their research activities. In 2018 they offered a workshop for mid-career faculty on how to sustain their research agenda.
- Our CSUSM Faculty Development Center offers new faculty a year-long "New Faculty Institute" that addresses, among other topics, how to establish your research agenda.
- Our CSUSM Office of Graduate Studies and Research offers annual incentive grants for faculty to support their research activities.
- Our CSUSM Office of Graduate Studies and Research offers annual "grant proposal seed money" for faculty to pursue larger external grants.
- The College of Education, Health and Human Services offers an annual interdisciplinary grant that promotes interdisciplinary research/creative activities.
- 3) Describe and provide three to five examples of faculty research activities and how faculty integrate research and scholarly activities and experience into their instruction of students.

Dr. Holub is the Principal Investigator for PIC Health: Pacific Islander Community Health, which engages community partners in the design, implementation, and evaluation of community-driven health promotion projects. These projects have been funded by the American Cancer Society, UCSD Clinical and Translational Research Institute, the Howell Foundation, and CSUSM internal grants. Dr. Holub integrates her research experience into the classroom by designing curriculum that reflects real world, hands-on application of the material, especially as it relates to the following courses: Research Methods (PH 507), Community-based Participatory Research (PH 563), and Health Program Planning, Implementation, and Evaluation (PH 532).

Dr. Deborah J. Morton, epidemiologist, participates in several ongoing research projects and grants which benefit the local and state level American Indian tribal communities. Starting in 2016, Dr. Morton holds a scholarship grant from Indian Health Service for American Indians to attend the CSUSM Nursing School. Most of these students are from California tribes, with a few being from other tribes across Indian Country. Since 2004, Dr. Morton has been the founder and Chair of the Indian Health Council, Inc., Institutional Review Board which, with a tribal focus, reviews academic scientific research projects funded by the National Institute of General Medicine Native American Research Centers for Health (NARCH) in addition to funding provided by several other NIH Institutes. Through this mechanism, Dr. Morton has developed a long-term, successful, trusted relationship with local California tribes, serving to promote research through a tribal health clinic which benefits clinical practice and improves the health of the nine tribes associated with the clinic. Dr. Morton was recently (2019) awarded a grant in collaboration with the University of California San Diego, California Smoker's Helpline (subaward) to collect the California Youth Tobacco Survey among American Indian youth in conjunction with Dr. Joely Proudfit, Director of the CSUSM California Indian Culture and Sovereignty Center. All of Dr. Morton's research work in Indian Country is incorporated into all the courses she teaches in Public Health, even biostatistics, as well as in the American Indian Studies Department course she teaches. Her work is a prime example of what it takes to be involved in ongoing Community Based Participatory Research (CBPR), an extremely important focus of the MPH program at CSUSM.

Dr. Santos' research focuses on Global Health Diplomacy, and specifically South-South cooperation. Global Health Diplomacy (GHD) is the degree and quality of relationships between countries, and how these inter-nation relationships impact public health outcomes. The concept of South-South Cooperation is cooperation between developing nations, also known as the global south. Dr. Santos has focused his work on the group of Portuguese speaking countries while working to develop quantitative analysis methods to assess these relationships. Dr. Santos' current project is building a database and the methodology to analyze these data in an effort to quantify and analyze these international relationships in a meaningful and rigorous way.

Lisa Bandong integrates her research on PCOS health education curriculum development, implementation, and evaluation and lactation supportive environments into her course curriculum providing real word examples as it relates to Health Systems (PH 502), Social and Behavioral Determinants of Health (PH 503), and Health Communication (PH 533). She serves on the California Breastfeeding Coalition, a statewide board for breastfeeding, where they are actively supporting initiatives including Black mother breastfeeding support systems, sponsoring statewide laws to reduce systematic barriers inhibiting breastfeeding, and hosting an annual conference to gather providers throughout the state.

4) Describe and provide three to five examples of student opportunities for involvement in faculty research and scholarly activities.

Dr. Deborah J. Morton's experience as an epidemiologist/biostatistician working on the 40+ year longitudinal Rancho Bernardo Study housed at UCSD, (Dr. Elizabeth Barrett-Connor), as well as her current work in Indian Country, allows Dr. Morton to recruit specific MPH students to use data from these two areas for secondary data analyses for their thesis and capstone projects. One of these articles has been submitted for review and publication with the student as first author.

Dr. Holub's on-going research has involved over 15 CSUSM MPH students, to date, who have had the opportunity to build skills in working with community partners, assist in developing intervention programs, lead data collection efforts, and conduct program evaluation, primarily as Graduate Assistants or Interns. Based on these experiences, students have presented their work at conferences, including the CSUSM Student Symposium, UCSD's Epidemiology Research Exchange, and the American Public Health Association Annual (APHA) Conference. Seven students have used Dr. Holub's projects and data for their thesis or capstone projects (MPH Integrative Learning Experience).

Ms. Lisa Bandong has been spearheading CSUSM's Lactation Supportive Environments campus-wide initiative since 2015, coordinating the 2016 campus assessment conducted by UCSD's Center for Community Health that led to two student capstone projects and another in progress to investigate university students and employee experiences with lactation accommodations. Both capstone groups presented their findings at the California Breastfeeding Coalition Summit. Her latest efforts have included a tri-campus workshop (CSUSM, Palomar College, and Mira Costa College) on best practices to accommodate student parents and has led to chairing a Student Affairs working group charged to streamline CSUSM student lactation accommodations. She has a student research assistant supporting the work group's efforts. Her collaborative efforts have been recognized by the San Diego County Breastfeeding Coalition earning her the 2017 Breastfeeding Champion Award for making breastfeeding a public health priority at CSUSM.

Currently Dr. Santos incorporates students in his research by providing internship opportunities assisting in building a policy database. Once this initial data has been verified and validated, students will continue working on this database by updating and or using these data for their theses. Dr. Santos also has worked with the County of San Diego on community-based projects. One of our students also worked with him to develop, plan and implement the community planning process for the "Getting to Zero" event. This event brought community members together to plan and prioritize activities to support the reduction of new HIV infections.

# 5) Describe the role of research and scholarly activity in decisions about faculty advancement.

All tenure-track faculty are expected to adhere to the RTP program guidelines regarding their Scholarly Research/Creative Activities. Specifically, with regard to the assessment of these standards and ultimate decisions about faculty advancement, the RTP criteria stipulate that "faculty will be assessed on the quality of the evidence provided, the evidence of sustained scholarship, and the totality of their work. A variety of types of work must be provided, including peer reviewed publications. When judged as a group, no one indicator of scholarly research/creative activities may be used to determine the overall rating of quality of scholarly research/ creative activities. In all cases, the scholarly reputation of the publication and/or meeting will be considered when evaluating the contribution. With respect to the required numbers of items, candidates may request that reviewers confer additional weight on items that represent greater scholarly accomplishment, impact, or significance; however, it is up to the candidate to make the case that a particular accomplishment merits additional recognition and weight in the review. (For example, a candidate may reasonably argue that a book-length publication should be weighted as equivalent to two or three "Category A" items, (outlined in section 1 above).

- Requirement for Tenure and/or Promotion from Assistant Professor to Associate Professor:
  - o At least three items from Category A.
  - At least three items from Category B.
- Requirement for Tenure and/or Promotion from Associate Professor to Professor:
  - At least three items from Category A.
  - o At least three items from Category B.

#### Retention

Candidates for retention shall include documentation from the period under review that demonstrates satisfactory progress toward meeting the tenure requirements in the area of scholarship. This documentation may include more items in Category B than A.

The determination of faculty advancement is ultimately made by the President of the university or his/her designee. The recommendations for faculty advancement made to the President are

offered by committees or individual administrators in accordance with existing policies. These committees or individuals include:

- A Peer Review Committee (PRC)
- Dean
- A university-wide Promotion and Tenure Committee (PTC)
- The Provost/Vice President
- 6) Select at least three of the measures that are meaningful to the program and demonstrate its success in research and scholarly activities. Provide a target for each measure and data from the last three years in the format of Template E4-1. In addition to at least three from the list that follows, the program may add measures that are significant to its own mission and context.

The MPH faculty, in consultation with the Program Director selected the following measures to demonstrate the program's success in research and scholarship activities. These align with the aforementioned RTP standards and criteria by which all tenure-track faculty are evaluated. Measures and data from the last three years are in Template E4-1. Faculty demonstrate this activity with documentation of ongoing paper submissions, grant submissions, conference presentations, or other relevant activities in their annual Working Personnel Action File (WPAF).

Template E4-1. Outcome Measures for Faculty Research and Scholarly Activities

| Outcome Measures   | Target | 2017-<br>2018 | 2018-<br>2019 | 2019-<br>2020 |
|--|--------|---------------|---------------|---------------|
| Percent of faculty participating in research activities (tenure-track faculty)                             | 100%   | 100%          | 100%          | *             |
| Presentations at professional meetings during a three-year period (Target is summative across three years) | 15     | 4             | 6             | *             |
| Number of grant submissions during a three-year period (Target is summative across three years)            | 12     | 5             | 4             | *             |
| * 2019-2020 data will be updated accordingly prior to Spring 2020 site visit.                              |        |               |               |               |

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

### Strengths:

Faculty routinely engage in research activities and produce a wide variety of scholarly works
that contribute to our professional field. In examining the data to date, we expect to meet or
exceed our targets established in Table E4.1.

# Weaknesses:

None at this time.

#### Plans for Improvement:

None at this time.

# E5. Faculty Extramural Service

The program defines expectations regarding faculty extramural service activity. Participation in internal university committees is not within the definition of this section. Service as described here refers to contributions of professional expertise to the community, including professional practice. It is an explicit activity undertaken for the benefit of the greater society, over and beyond what is accomplished through instruction and research.

As many faculty as possible are actively engaged with the community through communication, collaboration, consultation, provision of technical assistance and other means of sharing the program's professional knowledge and skills. While these activities may generate revenue, the value of faculty service is not measured in financial terms.

1) Describe the program's definition and expectations regarding faculty extramural service activity. Explain how these relate/compare to university definitions and expectations.

#### **Program Definition**

As a university bound by a system-wide Collective Bargaining Agreement, each department is required to have Retention, Tenure, and Promotion (RTP) standards for all their faculty. The Public Health Program adopted independent RTP standards in May 2018. Previously, the program utilized the School of Nursing RTP standards. In addition, all departments are also required to follow adopted university RTP standards. The program places a high value on service, as noted in the program's opening expectations that "PH views activities that enhance the institution and advance the profession at the local, state, national and international levels as integral components of faculty service. In PH, scholarly service is defined as involvement in activities that contribute to the life of the university, college, department, school districts and/or activities that contribute to professional agencies and organizations."

One element of all RTP standards is the expectation for programs to clearly define their standards for extramural service activities (known as Scholarly Service) as well as the assessment of these service expectations (Section VI-Standards and Criteria for Scholarly Service (ERF/A1-2/2018 RTP Standards for Public Health Program). While CSUSM has expectations for both internal and external service, extramural is noted as "Service to the Profession" and is defined as follows:

Evidence of Service to the Profession may include, but is not limited to:

- 1) Service as peer reviewer for journal, conference proposals, and/or external grant agencies or colleagues
- 2) Service as external reviewer for tenure/promotion of colleagues
- 3) Membership on Editorial Board for peer reviewed/refereed journal or publication/textbook
- 4) Leadership in professional organizations as an officer, on a committee or task force, etc.
- 5) Consultation and expert services, consulting (paid or unpaid) with schools (e.g, presenting professional development sessions, conducting research for the school or district, etc.), or other public or private entities
- 6) Providing continuing education for community
- 7) Assisting schools, districts, or community organizations/agencies in occasional tasks (e.g., advisory boards, committees, etc.)
- 8) Service as chair, as member of thesis or capstone committee
- 2) Describe available university and program support for extramural service activities.

Given the clear expectations for all tenure-track faculty to engage in Scholarly Service Activities, our campus priority has been to offer dedicated time for these activities. To that end, tenure-track faculty are afforded 3 weighted teaching units (WTU) of release time (equivalent to 20% of their overall workload) for their service contributions. This release time offers faculty the time and

flexibility to engage in service contributions which include "Service to the Profession" (extramural service).

3) Describe and provide three to five examples of faculty extramural service activities and how faculty integrate service experiences into their instruction of students.

Dr. Santos integrates community participation activities into his course assignments. Coordinating a group of students to support and participate in AIDS Walk San Diego is an example of community participation. Dr. Santos participates in the APHA abstract peer-review process as a peer reviewer. Although students are not specifically involved, one of the assignments used in the past has been to write an APHA style abstract (of current work or future idea). If the work has been done and a full abstract can be written, the students submit their work to APHA for review.

Dr. Holub's professional extramural service includes serving as a peer-reviewer for various academic journals, such as the American Journal of Preventive Medicine (AJPM), Journal of Physical Activity and Health, Health and Place, and Family and Community Health. Experience as a reviewer is applied directly to student instruction, especially in courses related to academic writing, critical thinking, and research methods (proposal development).

In her role as the Internship Coordinator, Lisa Bandong serves on several local community work groups. This includes the North County Community Leadership Team hosted by North Inland San Diego Health and Human Services Deputy Director, and the San Diego County's Childhood Obesity Initiative Early Childhood Domain Work Group. Ms. Bandong leverages these networks to support internship placements for MPH students. She incorporates what she gains from these networks into the courses she teaches.

4) Describe and provide three to five examples of student opportunities for involvement in faculty extramural service.

Dr. Santos has worked with the County of San Diego on several community-based projects. In an effort to include students in extramural activities, he invited one student to work with him to develop, plan and implement the community planning process for the "Getting to Zero" event. This event brought community members together to plan and prioritize activities to support the reduction of new HIV infections. Dr. Santos has also organized students to attend and support community events such as the San Diego AIDS Walk.

Dr. Holub's community extramural service involves working with the Native Hawaiian and Pacific Islander communities in San Diego County through community organizations, cultural festivals, and other volunteer opportunities. Students have the opportunity to work alongside community members, which builds skills in community development, health communication, and understanding how to integrate culturally appropriate methods for developing community partnerships.

As noted above, Ms. Bandong's work community work has focused on supporting mothers needing lactation support. She has been recognized by the County of San Diego as a lactation champion and has been able to include students in these activities. She recently supported a Prenatal Health Care project with the Vista Community Clinic with one MPH student.

5) Select at least three of the indicators that are meaningful to the program and relate to service.

Describe the program's approach and progress over the last three years for each of the chosen indicators. In addition to at least three from the list that follows, the program may add indicators that are significant to its own mission and context.

The MPH faculty, in consultation with the Program Director selected the following measures to demonstrate the program's commitment and participation in extramural service. Some of these align with the aforementioned RTP standards and criteria by which all tenure-track faculty are

evaluated. Others are programmatic in nature. Measures and data from the last three years are presented in the table below. Faculty demonstrate their activity with documentation of ongoing service contributions in their annual Working Personnel Action File (WPAF).

These measures reflect both faculty requirements, but also the larger values and vision of CSUSM as an institution. In developing these community service and community-based research opportunities, program faculty can identify current issues in the local community as well as current interests among the students. By encouraging faculty external engagement, faculty-student engagement, and program sponsored activities in the community, the MPH program has opportunities to hear from different stakeholders and be exposed to emerging community needs.

6) Describe the role of service in decisions about faculty advancement.

As noted in Section 1 above, all tenure-track faculty are expected to adhere to the RTP program guidelines regarding their Scholarly Service Activities. Specifically, with regard to the assessment of these standards and ultimate decisions about faculty advancement, the RTP criteria (VI.C.1-3) stipulate that:

Assessment of Scholarly Service

- General Standards: Candidates will be assessed on the quality of evidence provided, the evidence of sustained service, and the totality of their work.
- Candidates for promotion from Assistant to Associate Professor must provide evidence of effective sustained internal and external service activities as specified in VI.B.
- Candidates for promotion from Associate Professor to Professor must provide evidence of leadership in one or more service activities in addition to demonstrating sustained active participation in both internal and external service activities.

The determination of faculty advancement based on service expectations is ultimately made by the President of the university or his/her designee. The recommendations for faculty advancement made to the President are offered by committees or individual administrators in accordance with existing policies. These committees or individuals include:

- A Peer Review Committee (PRC)
- Dean
- A university-wide Promotion and Tenure Committee (PTC)
- The Provost/Vice President
- 7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

# Strengths:

 Program faculty offer important service contributions to their profession and our regional community. It is noteworthy to highlight that the faculty support a diverse array of underserved populations in the region including those in the Hispanic and Pacific Islander communities, Native American communities, and those living with HIV/AIDS.

#### Weaknesses:

With a small number of tenure-track faculty, the demands placed on these core faculty are
significant. In addition to maintaining strong teaching evaluations, maintaining current
scholarly research, and expectations for service activities, faculty must also support daily
program operations. Considering these demands, extramural service requirements, while
met, are difficult to sustain. In addition, as a result of completing this self-study process,
program faculty will carefully re-examine shared definition of "community-service projects"
and how these might be leveraged to support program-wide projects to address pressing
community needs.

Plans for Improvement:
 Program faculty will identify target milestones to incorporate more community planning activities during the Fall 2020 meeting at the beginning of the semester.

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# F1. Community Involvement in Program Evaluation and Assessment

The program engages constituents, including community stakeholders, alumni, employers and other relevant community partners. Stakeholders may include professionals in sectors other than health (eg, attorneys, architects, parks and recreation personnel).

Specifically, the program ensures that constituents provide regular feedback on its student outcomes, curriculum and overall planning processes, including the self-study process.

With regard to obtaining constituent input on student outcomes and on the strengths and weaknesses of the school or program's curricula:

- The school or program defines qualitative and/or quantitative methods designed to provide useful information.
- Data from supervisors of student practice experiences may be useful but should not be used exclusively.
- The school or program documents and regularly examines its methods for obtaining this input as well as its substantive outcomes.
- 1. Describe any formal structures for constituent input (eg, community advisory board, alumni association, etc.). List members and/or officers as applicable, with their credentials and professional affiliations.

The purpose of the Community Advisory Board (CAB) is to include and involve public health community partners in all aspects of program development, assessment, and planning. This assures that we regularly solicit feedback on student outcomes, curriculum and overall planning processes, including the self-study process. Each MPH subcommittee reports to the advisory board on key developments or updates that impact our programmatic work. Feedback is regularly solicited from the advisory board to ensure we are meeting the needs of our regional community partners. For example, the Community Advisory Board was consulted regarding the Program's guiding statements and metrics. In addition, the Advisory Board gave specific feedback on how the Program can best measure achievement of the Program's mission (ERF/A1-1/Community Advisory Board Directory 19-20).

2. Describe how the program engages external constituents in regular assessment of the content and currency of public health curricula and their relevance to current practice and future directions.

The program engages external constituents through the program's Community Advisory Board. The development of the initial MPH program, curriculum and concentrations was developed in concert between university faculty and the CAB. In this way, the CAB has a voice in ensuring relevance to the external community. As noted in the meeting minutes and agendas (<a href="ERF/E3-5/MPH Advisory Board Minutes 4-19-19">ERF/E3-5/MPH Advisory Board Minutes 4-19-19</a>), members were asked about and discussed their respective organizational needs and how the CSUSM MPH program can help address those needs. From this initial discussion, student projects have been developed with Vista Community Clinic, to meet its set of goals. Other opportunities are being explored with County of San Diego. The Community Advisory Board also supports the MPH program by reviewing curricular changes proposed by the MPH program. The CAB has provided input on integrated learning experiences and suggested developing a comprehensive exam in lieu of standard thesis and capstone.

# 3. Describe how the program's external partners contribute to the ongoing operations of the program. At a minimum, this discussion should include community engagement in the following:

# a. Development of the vision, mission, values, goals and evaluation measures

Current guiding statements were developed in conjunction with faculty and were brought to the Community Advisory Board for input on metrics to evaluate the achievement of the vision, mission, goals of the program (<u>ERF/E3-5/MPH Advisory Board Minutes 4-19-19</u>).

### b. Development of the self-study document

The development of the self-study document included members of the program faculty and staff, and College of Education Health and Human Services Student Services and Assessment staff. Tenure-track faculty were primary participants of the self-study. As the document developed, the CAB was enlisted to provide feedback on developing metrics for our program goals. Other members of the greater university community also provided input as needed.

### c. Assessment of changing practice and research needs

The program meets with the Community Advisory Board once a semester. During these meetings, the CAB and MPH faculty discuss ongoing research projects conducted by faculty and students and determine future areas of research priorities in light of faculty expertise and changes in practice in the field. Part of this discussion includes how best the program can meet the needs of the greater San Diego community.

# d. Assessment of program graduates' ability to perform competencies in an employment setting

The main way the program assesses students in an employment setting is through Internship Supervisor evaluations. As part of the regular internship process, each student is evaluated by the site supervisor. Supervisors are asked to rate students on several metrics that include public health knowledge per competencies chosen in an employment setting. The student selects foundational and concentration competencies that are applicable to the internship work and are evaluated on their ability to execute those competencies

In working with CAB members, an initial set of key informant interviews will be conducted among CAB members that are also employers of our alumni and brought back to the CAB during the Spring 2020 meeting for feedback. Utilizing the feedback, a specific survey will be developed by the end of the Spring 2020 semester. Input on the final version before implementation will be brought to the CAB meeting in the Fall for implementation in December 2020.

The supervisor reviews of students are included. For Supervisor Evaluation of Student example, see <a href="ERF/D5-3/Student 1 HP"><u>ERF/D5-3/Student 1 HP</u></a> on page 34 of the PDF. The reviews highlight the ability of students to apply public health competencies in a non-classroom/employment setting. The student selects foundational and concentration competencies that are applicable to the internship work and are evaluated on their ability to execute those competencies (<a href="ERF/D5-2/CSUSM.MPH.IntershipLearningContract.v3.asof2.16.18"><u>ERF/D5-2/CSUSM.MPH.IntershipLearningContract.v3.asof2.16.18</u></a>).

4. Provide documentation (eg, minutes, notes, committee reports, etc.) of external contribution in at least two of the areas noted in documentation request 3.

Documentation is provided for Community Advisory Board discussion on community needs, and ways to meet those needs. (ERF/E3-5/MPH Advisory Board Minutes 4-19-19) From the discussion two actionable areas were identified: in-house workshops for those in agencies, and addressing specific needs not covered by grant or project funds. This has developed into the Vista Community Clinic collaboration (ERF/F1-4/VCC Meeting Notes 1-9-19) (ERF/F1-4/VCC Meeting Notes 2-1-19) (ERF/F1-4/Meeting Agenda 2-26-19).

Supervisor input on student learning is essential. Internship supervisors evaluate the student's performance in addressing the competencies that the student is responsible to meet. The site supervisor provides an evaluation and feedback to the program about the student's performance. This serves to inform the ability of the program's students to apply the lessons learned in the classroom and informs the student on their performance as an intern. An example of the Supervisor Evaluation using Student 1 is located in the ERF starting on page 34 (ERF/D5-3/Student 1 HP).

5. If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

#### Strengths:

 The program works very closely with existing partners on the Community Advisory Board. The CAB provides input to the program, but also finds ways the MPH program can help fill gaps or needs in their own agencies. These partnerships are continually growing stronger as local agencies and community clinics are filling with program graduates.

#### Weaknesses:

The specific and close relationships with the north county area community clinics has served the
program well in these early stages of development. However, there may be a tendency to get
myopic with the breadth of relationships. This may skew the perspectives and input the program
receives on its curriculum and potential collaborations.

#### Plans for Improvement:

- A larger survey of various community stakeholders will be implemented by the Assessment Committee directly or as a student capstone project. The results will be shared with the CAB. The program could include aspects of a community needs assessment in what University's Office of Community Engagement already does to ensure the university overall is meeting the needs of the communities CSUSM serves. Development of the community survey has not been initiated. This will be a priority for the 2020-2021 year.
- In working with CAB members, an initial set of key informant interviews will be conducted and brought back to the CAB during the Spring 2020 meeting for feedback. Utilizing the feedback, a specific survey will be developed by the end of the Spring 2020 semester. Input on the final version before implementation will be brought to the CAB meeting in the Fall for implementation in December 2020.
- Surveying employers would provide insight into current skill needs to better train our graduates. A potential employer survey is being developed by Dr. Santos and board member Dr. Hamill.

# F2. Student Involvement in Community and Professional Service

Community and professional service opportunities, in addition to those used to satisfy Criterion D4, are available to all students. Experiences should help students to gain an understanding of the contexts in which public health work is performed outside of an academic setting and the importance of learning and contributing to professional advancement in the field.

1. Describe how students are introduced to service, community engagement and professional development activities and how they are encouraged to participate.

MPH students are routinely involved in community agencies and professional services. These agencies represent well known national associations (e.g. American Diabetes Association, American Heart Association, American Liver Foundation), regional groups (County of San Diego Health and Human Services), and local agencies serving the immediate needs of area populations (Vista Community Clinic). This diversity of agencies offers our students a spectrum of perspectives on how the profession of public health carries out its mission. These agencies provide opportunities for students to participate in community education events, workshop and training sessions, as well as opportunities to apply their skills as an employee (ERF/E2-1/MPH Internship Sites).

Faculty play a critical role in encouraging students to participate in community service projects and professional development activities. Either as an opportunity stemming from a class or as a result of their own community service roles, faculty will routinely ask students to participate in community-based service or events. Faculty have also invited students to attend regional public health conferences as a way to introduce them to the professional development opportunities they can access as future professionals. Finally, students are encouraged to join CSUSM's Public Health Student Association (Graduate Organization of Public Health - GoPH) who actively offer opportunities for students to interact with public health agencies from the community and explore other professional development opportunities.

2. Provide examples of professional and community service opportunities in which public health students have participated in the last three years.

Annually, GoPH organizes two to three events with various community agencies. They utilize both club meetings and a Facebook page to organize and promote these activities throughout the year. <a href="https://www.facebook.com/CSUSMGoPH/">https://www.facebook.com/CSUSMGoPH/</a>

- In 2018-2019 they partnered with several HHS agencies on "What Gives Your Life Meaning" and partnered with the County of San Diego Health and Human Services to sponsor Carey Ricitelli to speak about the public health profession. This was organized and run by the students.
- GoPH also supported the CSU Institute for Palliative Care at Cal State San Marcos and Tri
  City Health Care District to offer regular volunteers to the Vista Soup Kitchen. This activity
  was organized and implemented by the students.
- Faculty-led examples include Dr. Santos coordinating a group of students to support and participate in AIDS Walk San Diego where students participated as representatives of CSUSM MPH program
- In 2017-2018 they partnered with the Indian Health Council to promote "Women Warriors" and partnered with Promises2Kids on a team fundraising event. They also volunteered to support the American Heart Association at the Vista Strawberry Festival. Faculty-led community-focused opportunities included Ms. Lisa Bandong's attendance at San Diego Live-Well with several MPH students. After faculty made initial connections, students took the lead in organizing the day-of logistics of the event.
- In 2016-2017, public health students partnered with the School of Nursing and the American Heart Association on an event entitled "Love Your Heart". After faculty made initial connections, students took the lead in organizing the day-of logistics of the event.

3. If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

# Strengths:

- GoPH is an active student association that regularly plans, promotes and engages in community service opportunities in support of national and regional agencies.
- With support from GoPH, the number of community service projects has steadily increased.
- Faculty are strongly committed to participating in community service projects and regularly solicit student volunteers, offering them guided mentorship while completing community service projects.

# Weaknesses:

• CSUSM supports a high number of non-traditional students. These students are often employed, raising a family or engaged in other important priorities, and consequently these students have not traditionally participated in community service projects beyond required internships.

# Plans for Improvement:

• MPH faculty will continue to partner with GoPH to identify how they can encourage and support non-traditional students in participating in community service projects.

# F3. Assessment of the Community's Professional Development Needs

The program periodically assesses the professional development needs of individuals currently serving public health functions in its self-defined priority community or communities.

1. Define the program's professional community or communities of interest and the rationale for this choice.

At CSUSM, the MPH professional communities include: public health entities, social service agencies, healthcare facilities, government organizations, non-profit organizations, community organizations, service organizations, tribal communities, and other public-health related entities in the San Diego and North San Diego County region. While San Diego County encompasses approximately 4,500 square miles and ranges from the U.S-Mexico Border to Fallbrook, CA, there is a distinctive identity in the North County with particular public health needs. The San Diego and North San Diego region include the cities of: San Marcos, Vista, Escondido, Oceanside, San Diego, Fallbrook, Carlsbad, and La Jolla among others.

The rationale for our choice of professional communities is that CSUSM partners with diverse groups in myriad service activities, our students are often employed with the aforementioned entities, and our faculty have research interests with specific populations within these communities (e.g. Tribal, Pacific-Islander, Latino, etc.).

2. Describe how the program periodically assesses the professional development needs of its priority community/ communities and provide summary results of these assessments. Describe how often assessment occurs.

The MPH program draws on multiple sources of information that assist in assessing the professional development needs of its communities. One source of information is a survey prepared and conducted by the Office of Community Engagement. This report, while focused for CSUSM, offers the MPH program insight on key questions that impact Health and Human Service agency partnerships (ERF/F3-2/2018 Community Survey Impact Results Report).

The Community Impact Survey Report is conducted annually and offers a glimpse of three key areas including an assessment of the university partnership types, program impact, and the top community issues. Notably, our non-profit community partners reported an increased capacity for services (32%) and an enhance of their current services (37%) given internships and other student driven CSUSM collaborations. In addition, the 2018 report identified the top regional concern mentioned by community partners was that of housing insecurity and homelessness (n=24), followed by education access and success (n=17). This reinforces the MPH programmatic commitment to ensuring that our MPH students participate in field-based internships given the needs expressed by our community partners.

The second way our MPH program assesses the professional development needs of its communities is via our bi-annual Community Advisory Board (CAB) meetings. During these meetings, CAB members are formally invited to offer feedback to the program on their professional development needs. As noted in the October 2018 meeting, several community advisory members suggested that the community could benefit from enhanced education regarding Tobacco Education and Hepatitis A (<a href="https://example.com/ERF/A1-5/CAB Minutes October 2018">ERF/A1-5/CAB Minutes October 2018</a>).

Individually MPH program Faculty get informal feedback on the professional development needs of the community through individual projects they spearhead. Ms. Bandong has played a role in assessing and developing trainings for community needs for lactation support. Dr. Morton works with the American Indian Center whose projects help assess community need and support training health professionals in the community. Dr. Holub works with the Asian-Pacific Island community creating opportunities for physical activity interventions. Dr. Santos has worked with the HIV, STD, Hepatitis Branch of Public Health Services for the County of San Diego to hold

community focus groups to identify common priorities. The program faculty are aware of the needs of the communities with whom they work and bring this awareness to group programmatic discussions and adjustments.

3. If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

# Strengths:

• The program draws on multiple sources of information that help understand the professional development needs of the community.

# Weaknesses:

• The MPH program needs to develop a program-specific assessment of the professional development needs of community. The university-wide assessment, while important to understand our larger regional needs, does not offer disaggregated data focused in the field of public health.

# Plans for Improvement:

At the Fall 2019 Community Advisory Committee meeting, a discussion was planned regarding
ways to assess to assess their professional development needs. Due to time constraints this
discussion was tabled until the next meeting Spring 2020.

# F4. Delivery of Professional Development Opportunities for the Workforce

The program advances public health by addressing the professional development needs of the current public health workforce, broadly defined, based on assessment activities described in Criterion F3. Professional development offerings can be for-credit or not-for-credit and can be one-time or sustained offerings.

1. Describe the program's process for developing and implementing professional development activities for the workforce and ensuring that these activities align with needs identified in Criterion F3.

Given the need for tobacco education noted by our community advisory board, MPH faculty are collaborating with Dr. Kim Pulvers from CSUSM's Psychology Department who is a noted expert and innovative clinical tobacco researcher. Potential areas of exploration include the benefits and drawbacks of "designated smoking areas" as well as the disproportionate use "light and non-daily smoking" of ethnic minority populations. Dr. Pulvers will be invited to the next Community Advisory Committee meeting to discuss how the MPH program can leverage her work to support a community tobacco education project and/or related activities to address the Advisory Board's professional development needs. https://news.csusm.edu/dr-kim-pulvers-helping-smokers-kick-the-habit/.

The program faculty also meets the professional development needs of the community in other ways. Lisa Bandong has met the needs of those needing lactation support by working with the campus community to institute lactation support policies on our campus. Dr. Santos has worked with the County of San Diego to engage community partners to hold focus group and priority-setting sessions for communities infected and affected by HIV. Dr. Santos is also working with entities associated with North County Health Services to develop future projects that can involve students.

An area of improvement is to develop processes to target community development needs. As we look at CEPH standards, we need to be better organized to engage in strategic surveying. An initial conversation was had between the CEPH Lead, Dr. Santos, and CAB member Dr. Hamil regarding the involvement of the CAB in the process of creating professional development opportunities. These initial ideas will be brought to the CAB during the Spring 2020 meeting and will be further developed by the incoming Assessment Committee Lead.

2. Provide two to three examples of education/training activities offered by the program in the last three years in response to community-identified needs. For each activity, include the number of external participants served (ie, individuals who are not faculty or students at the institution that houses the program).

Individual faculty support identified communities by targeting their research. Dr. Morton works extensively with American Indian communities in the local San Diego area and across the nation. Dr. Holub works with the Asian Pacific Islander community to increase behaviors that support increased physical activity and has included students in these projects. Some have used this training for their theses and presented at the APHA Annual Meeting. Students are also encouraged to pursue their interests for community-based thesis and capstone projects. Working with the San Diego Community Health Workers Coalition, one of our capstone projects implemented a stakeholder survey to provide the organization with the information needed to conduct effective strategic planning (<a href="ERF/F4-2/CHW">ERF/F4-2/CHW</a> MPH Capstone Project).

3. If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

### Strengths:

The program strengths are seen in the efforts that individual faculty members are making to meet
the needs of the community. The program has implemented a Community Advisory Board and is
working to incorporate the CAB's feedback into programmatic changes.

# Weaknesses:

The systematic manner in which the CAB is assessed for their professional development needs
has room for improvement. Additionally, having a list of community needs ready for students to
develop into theses and capstone projects would aid in meeting the needs of the community.

# Plans for Improvement:

- Dr. Kim Pulvers will be invited to an upcoming CAB to address the tobacco education
  professional development needs of the community. Dr. Pulvers updated the CAB on "Clear the
  Air", the campus smoking cessation initiative. MPH students have participated as interns on this
  project. Dr. Pulvers plans ongoing involvement of MPH students.
- CAB members will be formally assessed regarding workforce development needs and other
  community development issues that the CAB identifies as a priority. As the needs of workforce
  and greater community are more clearly identified, the program will be able to rally students and
  faculty behind our community partner's request for professional development. MPH program
  faculty can then link specific project activities to the professional development needs of the
  community as anticipated in standards F3 and F4.

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#### G1. Diversity and Cultural Competence

Aspects of diversity may include age, country of birth, disability, ethnicity, gender, gender identity, language, national origin, race, historical under-representation, refugee status, religion, culture, sexual orientation, health status, community affiliation and socioeconomic status. This list is not intended to be exhaustive.

Cultural competence, in this criterion's context, refers to competencies for working with diverse individuals and communities in ways that are appropriate and responsive to relevant cultural factors. Requisite competencies include self-awareness, open-minded inquiry and assessment and the ability to recognize and adapt to cultural differences, especially as these differences may vary from the program's dominant culture. Reflecting on the public health context, recognizing that cultural differences affect all aspects of health and health systems, cultural competence refers to the competencies for recognizing and adapting to cultural differences and being conscious of these differences in the program's scholarship and/or community engagement.

1. List the program's self-defined, priority under-represented populations; explain why these groups are of particular interest and importance to the program; and describe the process used to define the priority population(s). These populations must include both faculty and students and may include staff, if appropriate. Populations may differ among these groups.

The program identified the priority under-represented populations that reflect the diverse surrounding community of San Marcos, CA. In 2010, the population of San Marcos comprised of 37% Hispanic, 49% non-Hispanic White, 2% Black, <1% American Indian, 9% Asian, <1% Hawaiian & Pacific Islander, <1% Other, and 3% two or more races. CSUSM is a Hispanic Serving Institution (HSI) and an Asian American Native American Pacific Islander Serving Institution (AANAPISI), which also serves a high percentage of first-generation college students (over 50%). Based on the demographics of our surrounding community, faculty and students identified priority populations are:

- Hispanic
- Black
- Asian
- From the local area or immediate surrounding area (San Diego County; excluding online students)

Additionally, we have identified as priority populations students who are:

• First-generation college students

The identified priority populations are important and of particular interest, as a reflection of the local, diverse community. In order to address the needs of the local community, training public health professionals that reflect the community's demographics is imperative. Hispanic and Black populations experience health disparities, especially as it related to cancer, heart disease, diabetes, and obesity compared to non-Hispanic Whites. Similarly, Asian populations experience health disparities related to diabetes and certain types of cancers. First generation college students, defined as students whose parents or legal guardians have not completed a bachelor's degree, are more likely to be women, come from low socioeconomic backgrounds, older, and belong to an ethnic minority group. Local students are defined as someone who completed an undergraduate degree in San Diego County. For students and faculty, working and learning in a diverse environment promotes better understanding of cultural competence in the context of public health. Working and learning in diverse environments also promotes the type of awareness that is needed to better understand how to develop public health program that address the needs of different cultures and communities.

2. List the program's specific goals for increasing the representation and supporting the persistence (if applicable) and ongoing success of the specific populations defined in documentation request 1.

For students, the program's specific goals are:

1. To recruit and maintain a diverse study body that reflects the surrounding community, with at least 37% Hispanic, 2% Black, and 9% Asian students

- 2. To recruit and maintain at least 40% of the study body who are from the local area (exclusive of online students)
- 3. To recruit and maintain at least 30% of our study body who are first-generation college students

To retain students of our priority populations, we focus on quality and engaged mentorship and regular meetings between the student and their faculty advisor. Our student organization, the CSUSM Graduate Organization of Public Health, or GoPH, develops student programs and activities that aim to increase student bonding and peer mentorship. Our program also holds a mid-year celebration for faculty, staff, and students to promote a positive learning environment and celebrate the accomplishments of the students.

For faculty, the program's specific goals are:

- 1. To recruit and maintain an ethnically diverse faculty; and
- 2. To recruit and maintain at least 20% of faculty who are from the local area (for faculty, defined as place of residence before faculty appointment)

To retain a faculty composition identified as important to the goals of the program, we offer faculty mentorship programs, internal funding opportunities to encourage research and pursuit of external funding. Additionally, during the hiring process, we require to at least one committee member who is specifically trained in Equal Employment Opportunity (EEO) and Diversity. This training helps to diversify pools of applicants and aims to eliminate biases through the faculty hiring process. Additionally, the College of Education and Health and Human Services (CEHHS) has a Committee for Inclusion, Diversity and Equity (CIDE), whose charge is to make recommendations to the Dean regarding policy, programs, curriculum, services, recruitment, and retention to obtain equitable outcomes.

3. List the actions and strategies identified to advance the goals defined in documentation request 2, and describe the process used to define the actions and strategies. The process may include collection and/or analysis of program-specific data; convening stakeholder discussions and documenting their results; and other appropriate tools and strategies.

Extended Learning employs marketing techniques to address student goals 1-3. This involves recruiting students from the area of San Marcos and San Diego County through online marketing techniques (e.g., search engine optimization - SEO) and in-person program presentations by our director and faculty (e.g., recruitment presentations or booth at conferences, classroom presentations, networking with other faculty from nearby universities for recruitment of promising students). To maintain a diverse body of students, we engage students in both faculty and peer mentorship opportunities through GoPH, and, when students struggle, we work together as a faculty to provide the student with greater guidance and resources that can assist them in their success in the program. We also host social events that promote a student bonding and a positive learning environment.

Hiring follows guidelines of the hiring process, which includes advertising that targets racial and ethnic minority populations, through local and national searches. University guideline also include the training of faculty in the area of Equal Employment Opportunity (EEO) and diversity, for which there needs to be at least one trained faculty representative in each hiring committee. Marketing for full-time faculty positions are advertised locally, nationally, and through public health-related communication channels.

To develop and inform the strategies that support the program's goals and ensure success, we:

- Discuss plans and strategies with the MPH Community Advisory Board and report progress back to the board. The Community Advisory Board meets once per semester.
- Collect end-of year student and alumni surveys to evaluate our goals.
- Hold optional faculty summer meetings and retreats to discuss and brainstorm strategies, in addition to our usual academic year program committee meetings.

4. List the actions and strategies identified that create and maintain a culturally competent environment and describe the process used to develop them. The description addresses curricular requirements; assurance that students are exposed to faculty, staff, preceptors, guest lecturers and community agencies reflective of the diversity in their communities; and faculty and student scholarship and/or community engagement activities.

To ensure a culturally competent environment for our students and faculty, we developed and integrated learning and practical opportunities using a multi-pronged approach, through course work, outside guest lectures and panels, and through student-faculty projects that are community-engaged. Specifically:

- 1. Our program includes a course titled, *Community-based Participatory Research (CBPR)* (PH 563), which is a requirement of all MPH students, whether through their primary concentration or as the elective.
- 2. The program also includes two other related courses in (1) Health Disparities (PH 530) and (2) Methods of Community Health Education (PH 531), which is part of the Health Promotion and Health Education (HPHE) concentration.
- 3. In Fall of 2016, Dr. Holub obtained a Social Justice grant from the university and created a panel of guest speakers titled, Community Perspectives on Cultural Intelligence and Health Research, in which a panel of speakers discussed the community needs for the Indigenous Oaxacan, Native Hawaiian and Pacific Islander, and American Indian communities. This panel occurred in PH 503 (Social and Behavioral Determinants of Health) and continued in subsequent offerings of the course (similar panel format of community speaker).
- 4. The Distinguished Public Health Lecturer series began in fall of 2018 and exposes faculty, staff, and students in the MPH program and larger university to speakers that have worked with the Hispanic, American Indian, and Asian/Native Hawaiian and Pacific Islander community. The goal of the series is to expose students, faculty, and staff at CSUSM to public health researchers from a diverse background with a national or international reputation presenting their program of research.

Students are exposed to faculty and preceptors (within internship opportunities) who are both reflective of diversity in the community and who are involved in community engagement activities and scholarship. For example, Dr. Morton has a strong partnership with the Indian Health Council and conducts research in partnership with American Indian communities. Additionally, Dr. Holub's research focuses on reducing health disparities among Native Hawaiian and Pacific Islander communities; and students have the opportunity to work with her in the field in collaboration with community partners. To ensure continuous opportunities, activities, and an environment that is culturally competent, we maintain coursework that focuses on health disparities and CBPR and we continue to include students in faculty scholarship that reflects a culturally competent program.

5. Provide quantitative and qualitative data that document the program's approaches, successes and/or challenges in increasing representation and supporting persistence and ongoing success of the priority population(s) defined in documentation request 1.

Table G1-5 below depicts the diversity goals for our study body, specifically as it aligns with local community characteristics. While almost one-third of our study body comprise students who are Hispanic, we are 7% short of meeting the goal that reflects the proportion of Hispanics in San Marcos. However, we met and exceeded our goals for the proportion of Asian and Black students. Using the undergraduate university attended as a proxy for locality of students, the table below shows that we have met and exceeded the goal, with about two-thirds of our students coming from universities in San Diego County.

Table G1-5. Priority Student Populations

| Priority Population<br>(Students)                   | Goal (% of students) | Actual (% of students) | Goal Status    |
|---|----------------------|------------------------|----------------|
| Ethnicity   |                      |                        |                |
| Hispanic/Latino                                     | 37%                  | 30%                    | Not met        |
| Asian   | 9%                   | 21%                    | Met (exceeded) |
| Black   | 2%                   | 10%                    | Met (exceeded) |
|   |                      |                        |                |
| Local Student (proxy:<br>bachelor's from SD County) | 40%                  | 66%                    | Met (exceeded) |
| First-generation college student                    | 30%                  | 51%                    | Met (exceeded) |

Our primary faculty (n = 5) exemplify the diversity and locality goals identified for our program, where 4 of 5 faculty represent the student priority population identifying as Asian, Hispanic, or Black. Similarly, 4 of the 5 faculty were recruited from San Diego County (1 from San Marcos, CA and 3 from the greater San Diego area). We are confident in our process and ability to continue meeting faculty diversity goals in future recruitment and hiring events.

# 6. Provide student and faculty (and staff, if applicable) perceptions of the program's climate regarding diversity and cultural competence.

Student Perceptions: In an End-of-Program survey reflecting graduating cohorts 1 and 2 (conducted in August 2019), 92% of survey respondent (n=24) replied that they were very satisfied or satisfied with the program's diversity and cultural competence. All surveyed students (100%) reported that, as a result of the MPH program they felt well-prepared or prepared to: (1) discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels (competency D2-6), (2) apply awareness of cultural values and practices to the design or implementation of public health policies or programs (competency D2-8), and (3) describe the importance of cultural competence in communicating public health content (competency D2-20).

Similarly, in an End-of-Program survey (also conducted in August 2019), capturing graduating cohort 3, all (100%) of survey respondents (n=15) replied that they were very satisfied or satisfied with the program's diversity and cultural competence. A majority of survey respondents reported that, as a result of the MPH program they felt well-prepared or prepared to: (1) discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels (100%; competency D2-6), (2) apply awareness of cultural values and practices to the design or implementation of public health policies or programs (94%; competency D2-8), and (3) describe the importance of cultural competence in communicating public health content (100%; competency D2-20).

One student from cohort 3 mentioned, "... I believe this program has prepared me and better my skills to be a culturally competent in the workplace and in my personal life."

Faculty Perceptions: Among our 5 faculty, 4 reported feeling very satisfied or satisfied and 1 reported feeling neutral about the program's climate regarding diversity and cultural competence. One faculty member felt that the MPH program should improve the intentionality of creating a diverse body of students. Another faculty member felt that the students were knowledgeable in the areas of health disparities and cultural competence, stating that on the first day of a health disparities class, students

were able articulate reasons why health disparities exist and why cultural competency is important "indicating they have learned a lot during the program."

7. If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

# Strengths:

- Meeting the student diversity goal for percent Asian
- Meeting the student diversity goal for percent Black
- Meeting the student diversity goal for percent from local area
- Meeting the student diversity goal for percent first-generation college student
- Perceptions of the students and faculty related to diversity and culture in the program and related to achieving cultural competence related competencies is very high.

# Weaknesses:

- Not meeting the student diversity goal for percent Hispanic
- Using a proxy to indicate whether a student is from the local area or not

#### Plans for Improvement:

- Work with our marketing team to develop specific strategies to increase recruitment of Hispanic students.
- Strategize with the Program Director and faculty on presenting to local community colleges, with a high proportion of Hispanic students, for recruitment purposes.
- Refine evaluation of whether a student identified as being from the local community, we will include a new question in the end-of-year survey to capture this information.
- To establish qualitative data collection processes that continue to inform our approach and strategies.

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#### H1. Academic Advising

The program provides an accessible and supportive academic advising system for students. Each student has access, from the time of enrollment, to advisors who are actively engaged and knowledgeable about the program's curricula and about specific courses and programs of study. Qualified faculty and/or staff serve as advisors in monitoring student progress and identifying and supporting those who may experience difficulty in progressing through courses or completing other degree requirements. Orientation, including written guidance, is provided to all entering students.

1) Describe the program's academic advising services. If services differ by degree and/or concentration, a description should be provided for each public health degree offering.

MPH program faculty serve as academic and professional advisors, guiding students to understand program policies and procedures, assisting students in exploring their interests, and helping students determine which electives and internship settings best fit with their career goals. Students are instructed to meet with their faculty advisor at the beginning of each semester and may meet as needed throughout the program to discuss progress and/or concerns related to coursework or field practicum.

In addition, the College of Education, Health and Human Services (CEHHS) Student Services Department provides advising services for MPH students about university administrative policies and initiating the recommendation for candidacy and degree conferral. CEHHS Student Services also addresses guestions on class enrollment and program requirements.

Students and advisors have access to the CSUSM online Academic Requirement Report (ARR). The ARR outlines all degree requirements and allows users to track student progression towards program completion.

2) Explain how advisors are selected and oriented to their roles and responsibilities.

All students are assigned a tenure-track faculty or full-time lecturer as a faculty advisor upon entering the program. Efforts are made to align a student's concentration to faculty expertise; however, this cannot always occur due to the limited number of faculty in the program and need to balance student ratios. Currently, all primary faculty serve as advisors.

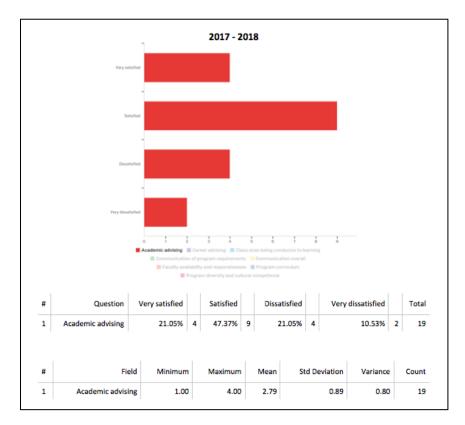
The MPH Program Director and CEHHS Student Services collaborate to ensure faculty advisors are given guidance and resources to support their students during program committee meetings. Student services provide guidance regarding the timely completion of regular administrative requirements such as forms; advising on course of action should student diverge from standard schedules; and offers policy related information on University catalog rights.

- 3) Provide a sample of advising materials and resources, such as student handbooks and plans of study, that provide additional guidance to students.
  - MPH Student Handbook (<u>ERF/D7-3/MPH Student Handbook</u>)
  - Program Planning Worksheet (<u>ERF/H1-3/MPH Program Planning Worksheet</u>)
- 4) Provide data reflecting the level of student satisfaction with academic advising during each of the last three years. Include survey response rates, if applicable.

At the conclusion of the program, students complete an *End-of-Program Survey* administered through Qualtrics. This survey was conducted at the close of the 2017-2018 and 2018-2019 academic years. The survey included the question, *"Please indicate your level of satisfaction with the following elements your program"* in which Academic Advising was a listed element.

In 2017-2018 there were 19 responses in which 68.42% indicated that they were either Very Satisfied or Satisfied with the program's Academic Advising. In 2018-2019 there were 20 responses in which 85% indicated that they were either Very Satisfied or Satisfied with the program's Academic Advising.

Figure H1-4a. Student Satisfaction with Academic Advising AY 2017-2018



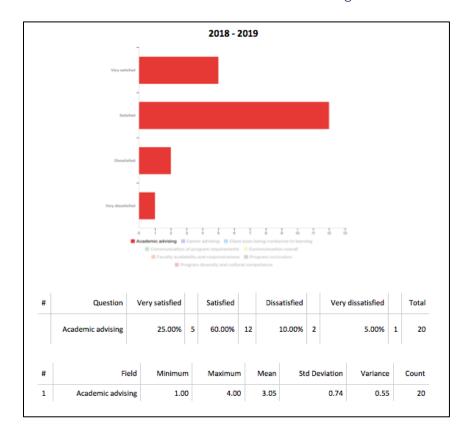


Figure H1-4b. Student Satisfaction with Academic Advising AY 2018-2019

5) Describe the orientation processes. If these differ by degree and/or concentration, provide a brief overview of each.

All newly admitted students are required to attend an orientation. The orientation is designed for students from both concentrations and allows them the opportunity to meet other members of their cohort, MPH faculty and staff. The orientation addresses:

- MPH program overview
- Academic requirements
- Internship requirement
- Student resources

With the offering of our first online Health Promotion and Education cohort in Spring 2019 and online Global Health cohort in Fall 2019, students participated in an online orientation using GoToWebinar and Zoom. Although the content aligned with the in-person orientation, this method allowed the program to reach our 100% online students. The sessions were also recorded and closed captioned and are available for students to view and refer to as needed.

Students also have access to a self-paced resources orientation located in their Moodle (learning management system). This online orientation provides in-depth information and services to aid students in their success with the program.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

# Strengths:

Survey results indicate growth in student satisfaction surrounding academic advising.

#### Weaknesses:

 There has been some ambiguity between the roles of the faculty advisor and thesis/capstone chair. The program can improve our communication with the students regarding the distinction of these roles.

# Plans for Improvement:

- Through the year, Student Services will continue to be present at MPH Program Committee meetings to provide updates on students that require more attention and offer strategies for success.
- At the Fall 2020 CAB meeting, Student Services will provide any new University wide or system policies pertaining to graduate students as well as update on new administrative processes concerning degree progression.
- Student Services will continue to help in the creation and execution of orientation as a reminder to students and faculty of the process and administrative milestones required to complete the degree.

#### H2. Career Advising

The program provides accessible and supportive career advising services for students. Each student, including those who may be currently employed, has access to qualified faculty and/or staff who are actively engaged, knowledgeable about the workforce and sensitive to his or her professional development needs and can provide appropriate career placement advice. Career advising services may take a variety of forms, including but not limited to individualized consultations, resume workshops, mock interviews, career fairs, professional panels, networking events, employer presentations and online job databases.

The program provides such resources for both currently enrolled students and alumni. The program may accomplish this through a variety of formal or informal mechanisms including connecting graduates with professional associations, making faculty and other alumni available for networking and advice, etc.

1) Describe the program's career advising and services. If services differ by degree and/or concentration, a brief description should be provided for each. Include an explanation of efforts to tailor services to meet students' specific needs.

At CSUSM, career advising is facilitated both at the programmatic and campus level. At the programmatic level, faculty serve as de facto advisors on curricular and programmatic matters. In the course of these interactions with their students, they also provide ad hoc career advising given their active community-service work and career histories as public health professionals. Similarly, in the course of class meetings, faculty members discuss with students their interests and suggest contacts or resources to help develop student career goals. In some courses, professionals from the field are asked to speak about their organizations and careers within the field of public health. Faculty have also facilitated in students attending both state and national conferences through APHA and the CSU Health Policy Conference.

By way of example, guest speakers such as those in class provide some insight to the job market. Ms. Bandong who taught PH 502 in Spring 2018 had several topic guest speakers mostly from the instructor's network of colleagues, and most of the guest speakers shared career advisement at the end of their presentation. Rhea Lansang Tran, a CDC Public Health Associate Fellow, spoke about her work in Opioid Overdose Prevention at the Minnesota Department of Health, and then encouraged students to apply for the CDC Public Health Associate Fellowship program.

Programmatic career advising also occurs during our Student Orientation to the program. During each admissions cycle, all students are required to attend an orientation to the MPH program during which career advising is addressed when we discuss the internship expectations within the program. Via survey (Qualtrics), students are asked to complete a form that solicits information about their internship needs and career interests. This data assists our Internship Coordinator in developing an electronic internship database hosted in MPH Central via Moodle (LMS) where all students have access to this database. As career-related internship opportunities surface, this database reflects those opportunities.

The MPH Student Organization, GoPH has also supported career advising by inviting several guest speakers from the professional to speak on selected topics and offer career advice. For example, on October 2018, GoPH invited Carey Riccitelli to speak about the County of San Diego Health and Human Services including career opportunities for public health professionals.

Finally, CSUSM also has an office dedicated to career advising/services. The CSUSM Career Center offers Career Services staffed by professionals who specialize in providing all phases of career advice. As noted on their website, "The Career Center offers several services to assist you on your individual journey to success. No matter how busy your schedule, we have resources to

accommodate your needs." Their mission is to "Empower students and alumni to design and manage their career paths with clarity, competence, and confidence."

Key resources that the Career Center offer include:

- A Career Guide
- Individual student advising
- Web-based resources including videos and practice guides
- Workshops
- Connections to employers
- Job Fairs and Career Events
- Handshake (a web-based software accessed that supports students with varied career services)
- 2) Explain how individuals providing career advising are selected and oriented to their roles and responsibilities.

Faculty serve as experts within their disciplinary areas of specialty and offer career advice based upon their own experiences as professionals from the field. When community partners come and speak to specific classes, their current employment and position serves as a testament to their expertise. Faculty prepare them for these roles by asking community partners to provide an overview of their organization, populations they serve, personnel needs, career opportunities, and major issues they face as an organization. Finally, the Career Center is staffed by professional advisors whose sole function is to provide career services to all CSUSM students.

3) Provide three examples from the last three years of career advising services provided to students and one example of career advising provided to an alumnus/a. For each category, indicate the number of individuals participating.

#### 2016/2017: 40 Participants

In PH 533 (Health Communication), Lecture 1 includes reading and discussion on "Developing Professionalism as a Health Educator." Largely, they talk about practice in health education and the benefits of obtaining a Certified Health Education Specialist (CHES) certification. The lecture transitions into discussing the different types of careers students can pursue in the area of health education. This course is a concentration class for Health Behavior and Health Education students; however, it is also the elective class for Global Health students. Therefore, all students in the MPH program are exposed to this lecture and career advising session.

#### 2018/2019: 150+ participants

In concert with the CSUSM Health Disparities Work Group and Department of Kinesiology, MPH students attended the *Distinguished Public Health Speaker Series* giving them access to notable public health practitioners and scholars as well as provided networking opportunities. Topics included "Population-Based Approaches to Promoting Healthy Eating" and "Conducting Community Based Participatory Research in American Indian Communities". At each event, speakers also discussed their own career pathways and prospective career opportunities within their fields of research.

2018/2019: 8 MPH participants and 22 unique MPH student appointments to Career Services The CSUSM Office of Career Services tracks services to students including students in the MPH program.

2018/2019: Two MPH students participated on a panel hosted by the Career Center on "Careers in Public Health" but data on the number of attendees was not collected.

### Alumni Support

According to the Career Center, MPH alumni have access to their services for up to six months after their graduation. After six months, they can pay a nominal fee to become a CSU Alumni and access the Career Center at any time.

4) Provide data reflecting the level of student satisfaction with career advising during each of the last three years. Include survey response rates, if applicable.

At the conclusion of the program, students complete an *End-of-Program Survey* administered through Qualtrics. This survey was conducted at the close of the 2017-2018 and 2018-2019 academic years. The survey included the question, *"Please indicate your level of satisfaction with the following elements your program"* in which Career Advising was a listed element.

In 2017-2018 there were 24 responses in which 45.84% indicated that they were either Very Satisfied or Satisfied with the program's Career Advising. 54.17% indicated that they were Dissatisfied or Very Dissatisfied with the Career Advising they received. In 2018-2019 there were 15 responses in which 53.33% indicated that they were either Very Satisfied or Satisfied with the program's Career Advising. 54.67% indicated that they were Dissatisfied or Very Dissatisfied with the Career Advising they received.

2017 - 2018 Count Count Answer Satisfied 29.17% 1 Very dissatisfied 29.17% 2 Dissatisfied 25.00% 6 4 Very satisfied 16.67% 4 24 Total 100% Mean Std Deviation Maximum Variance Count 1 Career advising 4.00 2.33 24

Figure H2-4a. Student Satisfaction with Career Advising AY 2017-2018

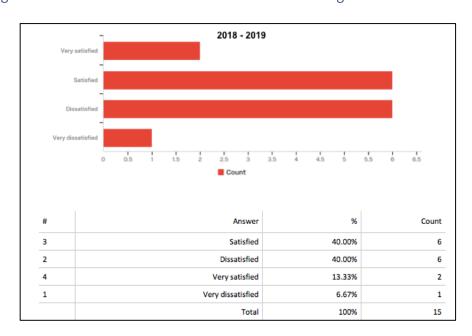


Figure H2-4b. Student Satisfaction with Career Advising AY 2018-2019

5) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

#### Strengths:

• The MPH program offers a multi-faceted approach to career advising that includes both individual programmatic advising by expert faculty and professional practitioners within the community. As well, CSUSM provides professional staff to support a Career Center and delineated Career Services for all CSUSM students including MPH graduate students. Finally, GoPH also addresses some elements of career advising based on their needs which has included inviting guest speakers to campus to discuss, in part, career opportunities within the region.

#### Weaknesses:

 As reflected in the survey results, the program can improve on our communication with the students as to how we inform or support them of the career services that are available.
 Feedback from the survey also displays a desire for more dedicated time to prepare students for the job search process through resume building and networking with local public health partners in the community to build a more structured employment pipeline.

### Plans for Improvement:

 The outcome of this self-study highlighted the need to develop a comprehensive and strategic approach to career advising for candidates within our program and, importantly, career support services for alumni. Plans already under development include a Career Readiness Workshop that has a scope of work developed (<u>ERF/H2-5/MPH Career</u> <u>Readiness Workshop Proposal</u>). The initial proposal was for Summer 2019 but was postponed until Summer 2020.

#### H3. Student Complaint Procedures

The program enforces a set of policies and procedures that govern formal student complaints/grievances. Such procedures are clearly articulated and communicated to students. Depending on the nature and level of each complaint, students are encouraged to voice their concerns to program officials or other appropriate personnel. Designated administrators are charged with reviewing and resolving formal complaints. All complaints are processed through appropriate channels.

1) Describe the procedures by which students may communicate any formal complaints and/or grievances to program officials, and about how these procedures are publicized.

The Student Grievance Policy is a means for students to seek redress of complaints regarding matters other than grade appeals or allegations of discrimination, harassment, retaliation, or concerns regarding university compliance, federal and state disability related laws. Grade appeals can be filed by following the Student Grade Appeal Policy. Students concerned with matters of discrimination, harassment, retaliation, compliance with disability related laws, or any similar matter are directed to contact the Dean of Students Office for assistance. These policies can be found in the Campus Catalog and Office of Dean of Students website.

As indicated in the MPH Student Handbook, students are expected to use informal channels to resolve grievances, beginning with a faculty-student, or faculty advisor-student, meeting. If no resolution is achieved, the student then meets with the Program Director and the concerned party. After all informal channels have been exhausted without successful resolution, the student is directed to the College's Assistant Dean, who either works with the student, or directs the student to the Associate Dean who examines the case and determines the next course of action in light of our university student complaint policies.

2) Briefly summarize the steps for how a complaint or grievance filed through official university processes progresses. Include information on all levels of review/appeal.

# Formal Student Grade Appeal Policy

A good faith effort to settle a dispute must be made before filing a formal grade appeal. Even after a formal appeal is filed, efforts to resolve the dispute by informal means should continue. The Student Grade Appeal Committee (SGAC) Chair may facilitate the resumption of the informal appeal.

- 1. Basic Guidelines for Grade Appeals
  - a. The SGAC presumes that the grade assigned is correct. It is the responsibility of the student appealing an assigned grade to demonstrate otherwise.
  - b. Students may only appeal grade assignments on the following bases:
    - i. An instructor refuses to (or cannot) assign a grade;
    - ii. The instructor is not available to review possible computational error;
    - iii. The student believes the grade assigned is inequitable or capricious, unreflective or course performance, or inconsistent with other grade assignments in the course.
  - c. The SGAC shall only recommend grade changes when a preponderance of the evidence supports the student's claim that the grade was improperly assigned, based on appeal grounds.
  - d. The burden of proof shall lie with the student.
- 2. How to File: Where the informal resolution process fails, the student may file a formal grade appeal electronically using the SGAC website, stating the specific allegations and the desired remedy, accompanied by available documentary evidence. The complete formal grade appeal requires submission of:

- a. the "Agreement to follow the Student Grade Appeals Policy" and the "Acknowledgement and Release" statement:
- b. the "Informal Resolution Process Log and Supporting Documentation";
- c. the "Formal Grade Appeal Form"; and,
- d. "Supporting Documentation to the Formal Grade Appeal Form.

#### 3. Filing Deadline

All parts of the grade appeal must be uploaded to the SGAC secured website no later than March 29 for the prior Fall session or October 29 for the prior Spring/Summer sessions. In the event of extenuating circumstances, the Provost (or designee) shall be able to waive the deadline.

4. Withdrawal and Termination of Formal Grade Appeal Process
A student has the right to withdraw the grade appeal at any stage of the proceedings, in which case the proceedings shall terminate immediately. Efforts to resolve the dispute by informal means may continue throughout the formal process.

#### 5. Preliminary Screening

Upon receipt of the uploaded written formal grade appeal, the Chair of the Student Grade Appeals Committee will review the grade appeal to determine if:

- The Student Grade Appeals Committee has jurisdiction (See section "Purpose" and "Jurisdiction" page I.); and
- The filing deadline has been met; and
- The informal resolution process, steps I through 3, has been completed.

# 6. Consideration of Grade Appeals

Upon review of documentation from the instructor and the student, the committee Chair shall establish and distribute to the principals a timeline for resolution of the appeal. If additional information is needed, the committee shall use appropriate means to collect relevant data. Any party within the University community who is contacted by the Student Grade Appeals Committee Chair for information relevant to a specific appeal shall cooperate and provide full disclosure of information. This may include, but is not limited to, requesting that the instructor(s) provide academic records such as grade roster, graded materials in their possession and other documents such as syllabi and assignments that may be pertinent to the appeal.

# 7. Hearing Process

The committee shall attempt to make its recommendation on the basis of the documentation provided by the student, the instructor, and any other parties from whom it has requested information. If, by a majority vote. the committee determines a need for a hearing, the hearing process will proceed as follows:

- The committee shall determine who will be involved in the hearing process.
- The committee may seek advice from a "panel of experts" from the appropriate area as noted above.
- The committee may invite persons having information related to the grade appeal to testify in the hearing.
- The committee Chair shall reserve the appropriate facility and notify all parties involved of the hearing date(s) and location.

#### 8. Recommendation

The SGAC shall recommend one of two courses of action. Either:

- The original grade was properly assigned and should therefore remain on the student's record; or,
- The original grade was improperly assigned, and the student's work should therefore be reevaluated, and the assigned grade should be changed.

9. Appeal of Violations Procedure
The only possible further action after the SGAC reaches its recommendation(s) is
allegation of violation of procedure. Either the student or the instructor may appeal the
procedure by which a decision of the SGAC is reached.

\* Student Grade Appeal Policy is located in the ERF (<u>ERF/H3-2/CSUSM Student Grade Appeal Policy</u>).

# Formal Grievance Hearing

Filing of Grievance and Rebuttal
 At any point in the proceedings, the grievant may withdraw the Request for a Formal
 Grievance Hearing or accept an informal resolution. Should an informal resolution be
 under negotiation or consideration during the formal process, the Committee Chair may
 elect to pause the timeline for the formal grievance until the attempt at informal resolution
 is exhausted.

2. Preparing Witnesses and Evidence
The grievant and respondent are responsible for obtaining their own witnesses and documentation. Participation in this process by prospective witnesses is voluntary.

3. Grievance Hearing Procedures
Grievance proceedings are held only during the fall and spring semesters. At the
discretion of the Committee Chair, an exception may be allowed if the committee is
available, and if the exception is requested by and/or acceptable to both the grievant and
the respondent. The grievant and respondent are responsible for securing the availability
of their witnesses and/or advisors (if any) prior to requesting or approving the exception.

- 4. Closed Hearing and Confidentiality
  - a. The formal grievance hearing is closed proceeding. Attendance in the hearing is limited to the grievant, the respondent, their advisors (if any), witnesses while giving evidence, the Student Grievance Committee, and a recorder (if any), to provide administrative support for the Chair. The content of the proceedings and the committee recommendations resulting where from must not be made public by any participant in the hearing. In the event these matters should become public, further public statements may only be made by the President or designee. This closed proceeding does not prohibit referral by the committee to an appropriate unit for review of a party's conduct following appropriate procedures on the basis of evidence presented at the hearing.
  - b. Communication Guidelines: All written documentation and recommendation relating to individual grievances shall be marked and handled per the university's practice for confidential material. The Committee Chair may consult with the Dan of Students Office for further information.
  - c. Committee Deliberation and Recommendation
  - d. Decision

List any formal complaints and/or student grievances submitted in the last three years. Briefly
describe the general nature or content of each complaint and the current status or progress
toward resolution.

The program received three written complaints during the time period 2017–2019. Two student grade appeals were received in 2017 regarding PH 505 Epidemiology. Both appeals were denied by the Academic Senate Student Grievance Committee. The program also received a Petition for Reinstatement from a student whose admission was rescinded. The student had not fulfilled the

<sup>\*</sup> Formal Grievance is located in the ERF (ERF/H3-2/CSUSM Student Grievance Policy).

conditions of admission and was therefore discontinued. The student petitioned to be reinstated to the program. The CSUSM Dean of Graduate Studies & Research consulted with the program faculty and subsequently denied the petition.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

#### Strengths:

The student complaint policy and procedures within the program, college, and University are
detailed and thorough. The college has an established process for how to address student
concerns and complaints and provides the program clear protocols for how to inform students
of the policy. The college also liaises with appropriate units at the University and provides
advisement to students on how to seek appropriate redress.

#### Weaknesses:

 Anecdotal student feedback suggests that the student complaint process might still be confusing for our students.

#### Plans for Improvement:

The program will continue to improve how we communicate and inform students of our
policies and practices related to the student complaint process for students. CEHHS Student
Services will collaborate with the program to improve these practices based on feedback from
prior cases.

# H4. Student Recruitment and Admissions (SPH and PHP)

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

#### Required documentation:

1) Describe the school or program's recruitment activities. If these differ by degree (e.g., bachelor's vs. graduate degrees), a description should be provided for each. Schools should discuss only public health degree offerings.

The MPH program at CSUSM aims to recruit a diverse and qualified cohort of students through various outreach and awareness efforts. In order to spread awareness of our graduate programs within the Southern California region, CSUSM Extended Learning (EL) outreach staff attend the follow graduate fairs annually:

- Cal Poly Pomona Graduate Fair
- CSU Dominguez Hills Graduate Fair
- CSU Fullerton
- CSU Graduate Education Diversity Fair in Spring
- CSU Graduate Education Diversity Fair in Fall
- CSU Long Beach Graduate Fair
- CSU Los Angeles Graduate Fair
- CSU Northridge Graduate Fair
- CSU San Bernardino Graduate Fair
- CSUSM GradFest
- SDSU Graduate Fair
- UC Davis Pre-Health Professions Conference
- UC Irvine Graduate Fair
- UC Los Angeles Graduate Fair
- UC Riverside Graduate Fair
- UC San Barbara Graduate Fair
- UC San Diego Graduate Fair
- UC Santa Cruz Graduate Fair
- Biola University Graduate Fair
- University of San Diego Graduate Fair

Furthermore, apart from general graduate programs awareness, the EL outreach team engage in additional activities very specific to recruitment for the MPH program such as:

- CSUSM classroom presentations and materials distribution to graduating undergraduate seniors from the majors of Human Development, Child and Adolescent Development, Kinesiology, Environmental Studies, Political Science, Social Sciences and Women's Gender and Sexuality Studies.
- CSU San Bernardino classroom presentations and materials distribution to students enrolled in Ethnic Studies 300, Health Sciences 301, 311, 315, 404, 445 & 480, Public Administration 305, and Public Administration 380.
- Attending the following public health related fairs:
  - Health and Wealth Fair in Solano Beach
  - o Fullerton Community Center Health & Wellness Fair
  - North County Health & Wellness Fair
  - Scripps College Fairs (at Encinitas, La Jolla, Mercy)
  - o City of Carlsbad Employee's Health Fair
  - Vista Irrigation District Health Fair
  - Women's Health Expo

- Moreno Valley College Healthcare Majors/Career Showcase
- CSU Long Beach Health Professions Fair

The EL marketing team also develops and implements a comprehensive digital and on-ground marketing strategy tailored to prospective students. Some of the tactics and activities that make up the marketing strategy are:

- GOOGLE ADWORDS: Targeted advertising to increase visibility on the Google Search Engine triggered by popular MPH base Keywords.
- SOCIAL MEDIA ADVERTISING: Targeted advertising with Facebook and Instagram focusing to core demographics based on historical data.
- RETARGETING: Tracks and targets users who have previously visited an MPH web page. Users will be presented with specific advertising to encourage application.
- ON CAMPUS A-FRAMES: A-frames will be positioned across campus to spread awareness and encourage inquiries and application.
- CSU APPLY QUADRANT EDITTING: Content will be curated to present key benefits that separate CSUSM from other MPH options in the program spotlight in the CSU Apply system.
- EMAIL MARKETING: Information session advertising and reminders, building and maintaining email drip campaigns for inquiries and CSU Apply Reminders
- PRINT COLLATERAL: Design, print and distribute program flyers, handout cards and posters
- 2) Provide a statement of admissions policies and procedures. If these differ by degree (e.g., bachelor's vs. graduate degrees), a description should be provided for each. Schools should discuss only public health degree offerings.

The minimum requirements for admission to the MPH program at CSUSM are in accordance with University regulations as well as Title 5, Chapter 1, Subchapter 3 of the California Code of Regulations. In order to be admitted to CSUSM as a graduate student, students must meet the following requirements:

- Have completed a four-year college course of study and hold a baccalaureate degree from an institution accredited by a regional accrediting association, or have completed equivalent academic preparation as determined by appropriate campus authorities;
- Be in good academic standing at the last college or university attended:
- Have attained a grade point average of at least 2.5 in the last 60 semester (90 quarter) units attempted; and
- Satisfactorily meet the professional, personal, scholastic, and other standards for graduate study, including qualifying examinations, as determined by each graduate program.

Supplementary Criteria for Admission into the MPH program:

- Copy of official transcript(s) from all college work.
- Two letters of recommendation from persons familiar with the student's academic qualifications and/or professional experience relevant to the MPH degree. (These MUST be on letterhead AND signed to be considered).
- A 300-500 word narrative statement describing how the program relates to applicant's professional goals.
- A current resume demonstrating experience (paid or volunteer) in public health, health education, health science, or a related area if bachelor's degree is not in a health-related area
- A grade of C (2.0) or better in Statistics.

In order to ensure transparency with our admissions expectations, we publicly post this information including via a video overview for students locally as well as for our prospective online students. <a href="https://www.youtube.com/watch?v=fR0E">https://www.youtube.com/watch?v=fR0E</a> ofoU6l&feature=youtu.be

- 3) Select at least one of the following measures that is meaningful to the school or program and demonstrates its success in enrolling a qualified student body. Provide a target and data from the last three years in the format of Template H4-1. In addition to at least one from the list that follows, the school or program may add measures that are significant to its own mission and context.
  - Quantitative scores (e.g., GPA, SAT/ACT/GRE, TOEFL) for newly matriculating students
  - Percentage of designated group (e.g., undergraduate students, mid-career professionals, multi-lingual individuals) accepting offers of admission
  - Percentage of priority under-represented students (as defined in Criterion G1) accepting offers of admission
  - Percentage of newly matriculating students with previous health- or public health-related experience
  - Number of entering students with distinctions and/or honors from previous degree (e.g., National Merit Scholar)
  - Percentage of multilingual students

#### Measure 1: GPA

The MPH program seeks to attract, retain, and graduate high qualified students into the program. While the minimum GPA requirement for admission to the MPH program at CSUSM is set at 2.5 for the last 60 semester (90 quarter) units attempted, the program has established a desired GPA of 3.0 to align student expectations with the university's graduation requirement. The table below shows that the MPH program at CSUSM, is on average, matriculating students above the minimum, as well as above the target average.

Template H4-3a. Outcome Measure 1 for Recruitment and Admissions

| Outcome Measure                      | Target | AY 16-17 | AY 17-18 | AY 18-19 |
|--------------------------------------|--------|----------|----------|----------|
| GPA for newly matriculating students | >3.0   | 3.18     | 3.23     | 3.19     |
|                                      |        | n=45     | n=32     | n=74     |

Measure 2: Percentage of priority under-represented students (as defined in Criterion G1) accepting offers of admission.

To address Measure 2, the program's specific goals are:

- 1. To recruit and maintain a diverse study body that reflects the surrounding community, with at least 37% Hispanic, 2% Black, and 9% Asian students.
- 2. To recruit and maintain at least 40% of the study body who are from the local area (exclusive of online students).
- 3. To recruit and maintain at least 30% of our study body who are first-generation college students.

Template H4-3b. Outcome Measure 2 for Recruitment and Admissions

| Priority Population (Students)    | Goal (% of students) | Actual (% of students) | 3-year Goal Status | С |
|-----------------------------------|----------------------|------------------------|--------------------|---|
| Ethnicity                         |                      |                        |                    |   |
| Hispanic/Latino                   | 37%                  | 30%                    | Not met            |   |
| Asian                             | 9%                   | 21%                    | Met (exceeded)     |   |
| Black                             | 2%                   | 10%                    | Met (exceeded)     |   |
| Local: bachelor's from SD County) | 40%                  | 66%                    | Met (exceeded)     |   |
| First-generation college student  | 30%                  | 51%                    | Met (exceeded)     |   |

primary faculty (n = 5) exemplify the diversity and locality goals identified for our program, where 4 of 5 faculty represent the student priority population identifying as Asian, Hispanic, or Black. Similarly, 4 of the 5 faculty were recruited from San Diego County (1 from San Marcos, CA and 3 from the greater San Diego area). We seek to enroll, retains and graduate diverse professionals in the field of public health.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

# Strengths:

• The program has been successful in attracting applicants with the desired GPA for our newly matriculated students, which is above our desired target metric. Similarly, we have been successful in attracting a diverse local pool of applicants in most areas.

#### Weaknesses:

• The program has not formally adopted a higher GPA expectation.

# Plans for Improvement:

 The MPH faculty will continue to examine the data on our admissions pool and determine if adopting a higher GPA ensures a well-qualified student body or if adopting another measure will ensure diversify our applicant pool as identified in Measure 2 while still ensuring high quality graduates.

# H5. Publication of Educational Offerings (SPH and PHP)

Catalogs and bulletins used by the school or program to describe its educational offerings must be publicly available and must accurately describe its academic calendar, admissions policies, grading policies, academic integrity standards and degree completion requirements. Advertising, promotional materials, recruitment literature and other supporting material, in whatever medium it is presented, must contain accurate information.

# Required documentation:

1) Provide direct links to information and descriptions of all degree programs and concentrations in the unit of accreditation. The information must describe all of the following: academic calendar, admissions policies, grading policies, academic integrity standards and degree completion requirements. (self-study document)

#### Academic calendar:

The MPH program offers courses throughout the year during the fall, spring and summer terms each academic year. The program follows the overall CSUSM Academic Calendar and the most recent academic calendar can be found here:

https://www.csusm.edu/academic programs/calendars.html

#### Admissions policies:

The MPH program admission standards and requirements are publicly posted and can be found here: <a href="https://www.csusm.edu/publichealth/prospectivestudents/admissionrequirements.html">https://www.csusm.edu/publichealth/prospectivestudents/admissionrequirements.html</a>

# Grading policies and Academic integrity standards:

All MPH students are provided with the MPH Student Handbook at orientation into the program, and this handbook outlines the Grading Standards, as well as Academic Integrity Standards detailed under the Academic Honesty and Cheating Policy, the Writing and Plagiarism Policy, and other aspects of Student Conduct.

# ERF/D7-3/MPH Student Handbook

#### Degree completion requirements:

The MPH Program Overview page outlines the main aspects of the program and what is needed to complete the program for each concentration. The MPH Graduate Student Materials page provides further information for students related to their thesis or capstone project required for graduation.