

Self-Study

Prepared for the Council on Education for Public Health

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Table of acronyms

AA	Academic advisor
AAPHD	American Association of Public Health Dentistry
ABDPH	American Board of Dental Public Health
ADP	Academic degree plan
APE	Applied practice experience
APHA	American Public Health Association
APPQMR	Applying the Quality Matters (QM) Rubric
ASDOH	Arizona School of Dentistry & Oral Health
ASHS	Arizona School of Health Sciences
ASPPH	Association of Schools and Programs of Public Health
ATSMLib	A.T. Still Memorial Library
ATSU	A.T. Still University
AY	Academic year
CDC	Centers for Disease Control and Prevention
CEO	Chief executive officer
CEPH	Council on Education for Public Health
CGHS	College of Graduate Health Studies
cGPA	Cumulative grade-point average
CODA	Commission on Dental Accreditation
Co-I	Co-investigator
CPH	Certified in Public Health
CV	Curriculum vita or vitae
DMD	Doctor of Dental Medicine
DNAZ	Donor Network of Arizona
DPH	Dental Public Health (residency)

DO	Doctor of Osteopathic Medicine
ERF	Electronic resource file
ESL	English as a second language
HLC	Higher Learning Commission
ILE	Integrated learning experience
IRB	Institutional Review Board
IRMA	Integrated Records Management Application (CGHS internal database)
ITS	Information Technology Services
KCOM	Kirksville College of Osteopathic Medicine
LGBTQ	Lesbian, gay, bisexual, transgender, and queer or questioning
LMS	Learning management system
MHFA	Mental Health First Aid
MOSDOH	Missouri School of Dentistry & Oral Health
MPH	Master of Public Health
MPH-D	Master of Public Health – Dental Emphasis
NCCHR	National Center for Community Health Research
PH	Public health
PI	Primary investigator
PIF	Primary instructional faculty
QM	Quality Matters
SAP	Satisfactory academic progress
SDF	Silver diamine fluoride
SME	Subject matter expert
SOMA	School of Osteopathic Medicine in Arizona
SZ4A	SafeZone for All
TOEFL	Test of English as a Foreign Language

Troop B	16 county health departments comprising the Northeast Missouri County Healthcare group: Adair, Chariton, Clark, Knox, Lewis, Linn, Macon, Marion, Monroe, Putnam, Rolls, Randolph, Schuyler, Scotland, Shelby, and Sullivan
UWC	University Writing Center

Introduction

1. Describe the institutional environment, which includes the following:

- a. year institution was established and its type (e.g., private, public, land-grant, etc.)
-

A.T. Still University of Health Sciences (ATSU), a private, non-profit university, is the founding institution of osteopathic healthcare, established in 1892 by Andrew Taylor Still, DO.

- 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)
-

ATSU is comprised of two campuses (Kirksville, Missouri, and Mesa, Arizona) with six schools. Following are the six schools and degrees offered:

Arizona School of Dentistry & Oral Health (ATSU-ASDOH)

- Doctor of Dental Medicine
- Master of Science in Orthodontics (residency)
- Certificate in Orthodontics (residency)

Arizona School of Health Sciences (ATSU-ASHS)

- Doctor of Athletic Training (online)
- Doctor of Audiology
- Doctor of Medical Science (online) (Physician Assistant studies)
- Doctor of Occupational Therapy
- Doctor of Physical Therapy
- Master of Science in Advanced Physician Assistant (online)
- Master of Science in Athletic Training
- Master of Science in Occupational Therapy
- Master of Science in Physician Assistant Studies
- Certificate in Clinical Decision-Making in Athletic Training (online)
- Certificate in Leadership and Education in Athletic Training (online)
- Certificate in Orthopaedics in Athletic Training (online)
- Certificate in Rehabilitation in Athletic Training (online)
- Certificate in Sport Neurology and Concussion in Athletic Training (online)
- Orthopedic Physical Therapy Residency (certificate)
- Neurologic Physical Therapy Residency (certificate)
- Post-Professional Doctor of Audiology (online)
- Post-Professional Doctor of Physical Therapy (online)

College of Graduate Health Studies (ATSU-CGHS)

- Doctor of Education
- Doctor of Health Administration
- Doctor of Health Sciences
- Master of Health Administration
- Master of Public Health (MPH)

- Master of Public Health, Dental Emphasis (MPH)
- Master of Public Health, Dental Emphasis and Dental Public Health Residency (MPH)
- Master of Science in Kinesiology
- Certificate in Adaptive Sports
- Certificate in Corrective Exercise & Orthopedic Rehabilitation
- Certificate in Exercise and Sport Psychology
- Certificate in Fundamentals of Education
- Certificate in Geriatric Exercise Science
- Certificate in Global Health
- Certificate in Leadership and Organizational Behavior
- Certificate in Sports Conditioning

Kirksville College of Osteopathic Medicine (ATSU-KCOM)

- Doctor of Osteopathic Medicine
- Master of Science in Biomedical Sciences

Missouri School of Dentistry & Oral Health (ATSU-MOSDOH)

- Doctor of Dental Medicine

School of Osteopathic Medicine in Arizona (ATSU-SOMA)

- Doctor of Osteopathic Medicine

c. number of university faculty, staff and students

As of fall 2019, ATSU has 760 faculty, 1,162 staff, and 3,857 students.

d. brief statement of distinguishing university facts and characteristics

ATSU is renowned as a multidisciplinary healthcare educator. The University is focused on integrating the tenets of osteopathic medicine and advancing knowledge of today's science. ATSU continually earns distinctions as a graduate health sciences university with best-in-class curriculum and a community outreach mission to serve the underserved. The University has a rich history of leadership in both healthcare education and correlated research. ATSU instills within students the compassion, experience, and knowledge required to address the whole person and shape healthcare in communities where needs are greatest. Inspired to influence whole person healthcare, ATSU graduates contribute to the future of integrated care while also leading with a selfless passion in the communities they serve.

ATSU was established in 1892 by Dr. Andrew Taylor Still. The school was originally established as the American School of Osteopathy and, after several name changes, became Kirksville College of Osteopathic Medicine (ATSU-KCOM) in 1971. The North Central Association/Higher Learning Commission (HLC) accredited ATSU-KCOM in 1994.

In response to the rapidly expanding population in Arizona and need for additional healthcare professionals in the area, ATSU-KCOM established the Southwest Center for Osteopathic Medical Education and Health Sciences in Phoenix, Arizona, in 1995. The name was changed to the Arizona School of Health Sciences (ATSU-ASHS) in 1998; a new, stand-alone campus in

Mesa, Arizona, was built the following year.

In 1999, on the Kirksville, Missouri campus, the School of Health Management (ATSU-SHM) began offering online master's degrees in public health, geriatric health, and health administration. The new focus on public health was consistent with the overall mission of the University. The Arizona School of Dentistry & Oral Health (ATSU-ASDOH) was one of the first dental schools to require all students to take public health courses preparing them for a public health-focused dental career. In 2014, ATSU consolidated all non-clinical online degree programs into ATSU-SHM and renamed it College of Graduate Health Studies (ATSU-CGHS).

HLC, as an outcome of its 1999 accreditation visit, recommended ATSU-KCOM change its organizational structure, as its plans and goals were better suited to a university model, rather than those of a college. ATSU's Board of Trustees restructured the College, and in 2002, changed its name to A.T. Still University of Health Sciences (ATSU). In 2010, ATSU adopted a new mission statement reflecting the diversity of its degree programs and created an institutional mandate for its long-range goals. In 2006, the School of Osteopathic Medicine in Arizona (ATSU-SOMA) was established in cooperation with the National Association of Community Health Centers as a unique model for community-based medical education. In 2018, HLC granted another full accreditation with no reporting requirements.

Today, ATSU is comprised of six schools: two medical schools (ATSU-KCOM and ATSU-SOMA), two dental schools (ATSU-ASDOH and Missouri School of Dentistry & Oral Health (ATSU-MOSDOH)), a health sciences school (ATSU-ASHS), and an online college of graduate health studies (ATSU-CGHS).

-
- 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
-

ATSU is accredited by the Higher Learning Commission (HLC). Four of ATSU's schools attain accreditation through the following accreditors:

Arizona School of Health Sciences (ATSU-ASHS):

- Athletic Training – Commission on Accreditation of Athletic Training Education
- Doctor of Audiology – Council on Accreditation in Audiology & Speech Language Pathology
- Occupational Therapy – Accreditation Council for Occupational Therapy Education
- Physician Assistant – Accreditation Review Commission on Education for the Physician Assistant
- Physical Therapy – Commission on Accreditation in Physical Therapy Education
- Neuro Residency and Ortho Residency – American Board of Physical Therapy Residency and Fellowship Education

Arizona School of Dentistry & Oral Health (ATSU-ASDOH) – Commission on Dental Accreditation (CODA)

Predoctoral dental education
Orthodontics & dentofacial postgraduate orthodontics residency certificate
Advanced education in general dentistry

Kirksville College of Osteopathic Medicine (ATSU-KCOM)

Doctor of Osteopathic Medicine – American Osteopathic Association/Commission on Osteopathic College Accreditation (AOA-COCA)
Still OPTI LLC – AOA/Council on Osteopathic Postdoctoral Training

Missouri School of Dentistry & Oral Health (ATSU-MOSDOH) – Commission on Dental Accreditation (CODA)

Predoctoral dental education

College of Graduate Health Studies (ATSU-CGHS)

Master of Public Health – Council on Education for Public Health (CEPH)
Dental Public Health Residency – Commission on Dental Accreditation (CODA)

School of Osteopathic Medicine in Arizona (ATSU-SOMA)

Doctor of Osteopathic Medicine – AOA-COCA
Still OPTI LLC – AOA/Council on Osteopathic Postdoctoral Training

ERF INTRO.1.e_List_of_ATSU_Accreditors.pdf includes a full list of the accreditor information for each of ATSU's various schools and individual programs. ERF INTRO.1.e_Accreditation_Status_Summary_September_2019.pdf provides more detail on all accreditors and reaccreditation timelines.

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

The Master of Public Health (MPH) program is housed within ATSU-CGHS. This 48-credit-hour degree program utilizes a fully online delivery format that allows the College to reach the widest possible audience. Competencies adopted from the Association of Schools and Programs of Public Health (ASPPH) were instrumental in the planning, development, and initial evaluation of the MPH program, which was officially launched in September (fall term) 1999.

In 1999, online education opened a way for a university committed to the underserved to provide an education that would prepare others for working with this population and to extend that education to a larger potential student body. The first two students graduated from the MPH program in 2003. Since then, more than 938 students have earned degrees. Initially, courses were taught exclusively by adjunct faculty members, and the dean supervised the program through the MPH program adjunct chair. In 2009, ATSU supported the MPH program with eight full-time faculty members for the program and two full-time program chairs who shared responsibility for the MPH program. In 2013, the organizational chart was changed to show one

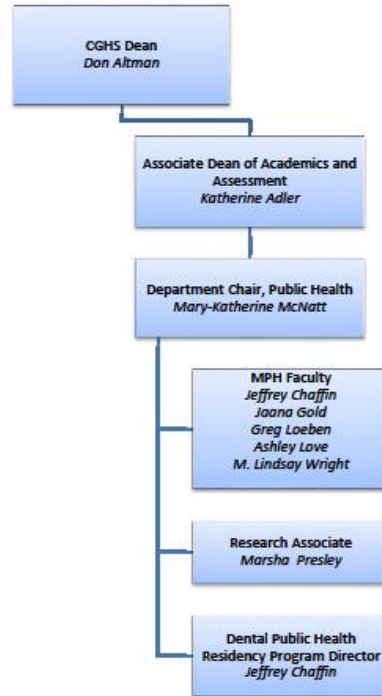
public health (PH) department chair supervising the program and reporting directly to ATSU-CGHS' dean. In 2016, ATSU-CGHS' reporting structure was changed to have all program and department chairs report to the associate dean of academics and assessment. In 2017, one full-time faculty member passed away and was not replaced, and in 2019, because of funding issues within the College, full-time faculty members were reduced to a total of six, including the department chair.

The MPH program's success is related to its academic, professional PH faculty and the close involvement of ATSU-CGHS' dean and associate dean of academics and assessment.

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
-

ATSU | College of Graduate Health Studies

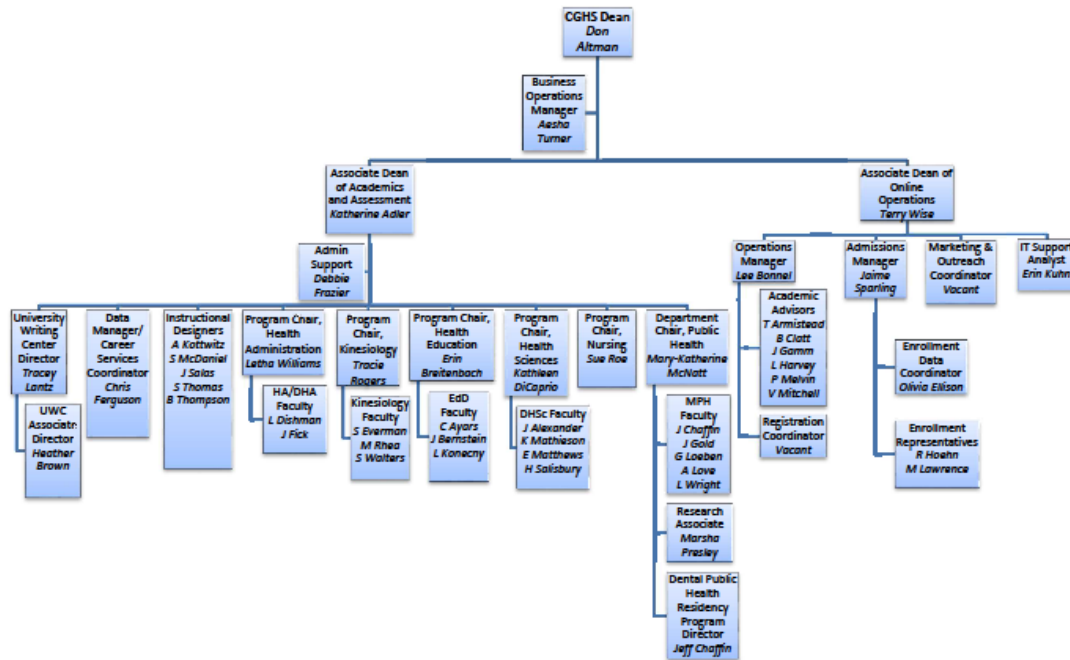


CGHS-MPH Organizational Chart
11.15.2019

A copy of the chart is in ERF INTRO.2.a_MPH_Org_Chart_11.15.19.pdf

- 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

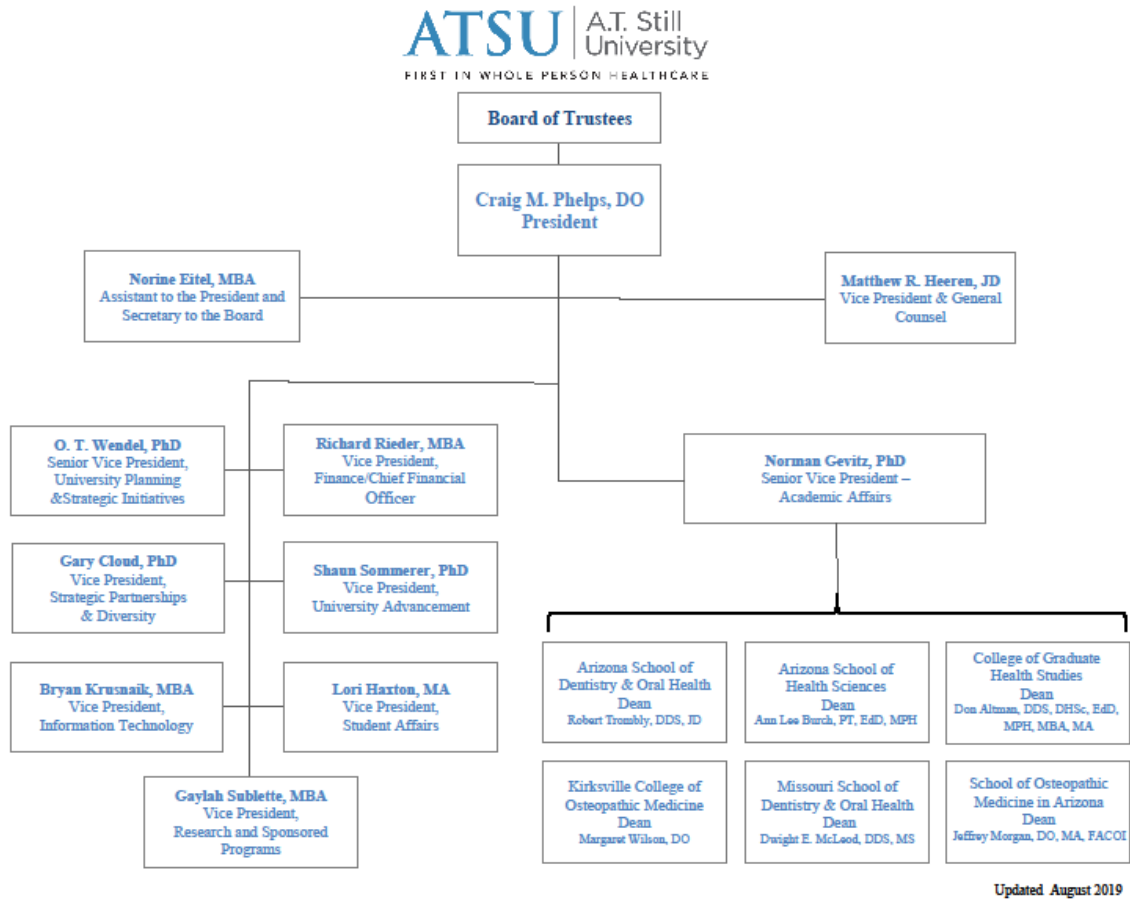
ATSU | College of Graduate Health Studies



CGHS Organizational Chart
11.15.2019

A copy of the chart is in ERF INTRO.2.b_CGHS_Org_Chart_11-15-19.pdf

- 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)



A copy of the chart is in ERF INTRO.2.c_ATSU_Administrative_Org_Chart_8-2019.pdf

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

Not applicable.

- 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.

Instructional matrix - degrees and concentrations				Categorized as public health*	Campus-based	Executive	Distance-based
Master's degrees		Academic	Professional				
MPH (Generalist)			MPH	X			MPH
MPH (Dental emphasis)			MPH	X			MPH
Joint degrees (dual, combined, concurrent, accelerated degrees)		Academic	Professional				
Second degree area	Public health concentration						
Doctor of Osteopathic Medicine	MPH (Generalist)		MPH	X			MPH
Doctor of Medicine in Dentistry	MPH (Dental emphasis)		MPH	X			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.

Enrollment			
Degree		Current enrollment	
Master's		AY 2019-20 *	AY 2018-19 *
	MPH generalist	157	133
	MPH dental emphasis	94	108

* Enrollment as of Day 1 of the academic year (AY).

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 (e.g., 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.

Significant committees and formula for membership are listed below. Full-time faculty members in the PH department are core members of all committees. Various stakeholder groups do not have a maximum number of members in any committee. Additional members are sought based on need and expertise, depending on the nature of the committee.

Public Health Curriculum Committee

Under leadership of the chair, Dr. Mary-Katherine McNatt, the committee is tasked with developing, writing, reviewing, and editing program curriculum.

Membership includes all full-time PH faculty members, appropriate staff, and external representatives from students, alumni, and public health community. Membership for the last three academic years is listed below:

Public Health Curriculum Committee	
2019-2020	
McNatt, Mary-Katherine	Chair
McCarty, Amy (Registrar's Office)	Consultant
Chaffin, Jeff	Full-time faculty member
Gold, Jaana	Full-time faculty member
Loeben, Greg	Full-time faculty member
Love, Ashley	Full-time faculty member
Wright, M. Lindsay	Full-time faculty member
Turner, Aesha	Adjunct faculty member
Kinser, Lauren	Alumni representative
Presley, Marsha	Staff representative; alumna
Fellner, Bernie	Alumni representative
Sparling, Jaime	Student representative
Bonnel, Lee	Academic support
Kottwitz, Andrew	Staff representative (instructional designer)

Public Health Curriculum Committee	
2018-2019	
McNatt, Mary-Katherine	Chair
McCarty, Amy (Registrar's Office)	Consultant
Chaffin, Jeff	Full-time faculty member
Gold, Jaana	Full-time faculty member
Loeben, Greg	Full-time faculty member
Love, Ashley	Full-time faculty member
Shanti, S.D.	Full-time faculty member
Leafman, Joan	Adjunct faculty; community representative
Hermann, Julie	Community representative; alumna
Kocour, Jennifer	Community representative; alumna
Presley, Marsha	Student representative
Hezarkhani, Amrita	Student representative
Fellner, Bernie	Alumni representative
Bonnel, Lee	Academic support
McDaniel, Sue	Staff representative (instructional designer)
Public Health Curriculum Committee	
2017-2018	
McNatt, Mary-Katherine	Chair
McCarty, Amy (Registrar's Office)	Consultant
Chaffin, Jeff	Full-time faculty member
Gold, Jaana	Full-time faculty member
Loeben, Greg	Full-time faculty member
Love, Ashley	Full-time faculty member
Shanti, S.D.	Full-time faculty member
Turner, Aesha	Adjunct faculty
Zinzeleta, Ellen	Community representative
Kocour, Jennifer	Community representative; alumna
Presley, Marsha	Student representative
Fellner, Bernie	Alumni representative
Bonnel, Lee	Academic support
McDaniel, Sue	Staff representative (instructional designer)

CEPH Committee

Under leadership of the chair, Dr. Mary-Katherine McNatt, the committee is tasked with ensuring the PH curriculum is aligned with Council on Education for Public Health (CEPH) outcomes and the program and college structure meets stated CEPH requirements. The CEPH Committee consists of all PH full-time faculty and staff and external representatives from alumni, students, and the public health community.

CEPH Committee membership is listed below.

CEPH Committee	
McNatt, Mary-Katherine	Chair
Adler, Katherine	Ad hoc member
Love, Ashley	Full-time faculty member
Loeben, Greg	Full-time faculty member
Wright, M. Lindsay	Full-time faculty member
Chaffin, Jeff	Full-time faculty member
Gold, Jaana	Full-time faculty member
Turner, Aesha	Adjunct representative
Presley, Marsha	Adjunct representative; alumni representative
Bonnel, Lee	Academic support
McDaniel, Sue	Staff representative
Clatt, Bethany	Staff representative
Kinser, Lauren	Alumni representative
Fellner, Bernie	Alumni representative
Ferguson, Christopher	Data analyst
Melvin, Presley	Student representative
Sparling, Jaime	Student representative
Leafman, Joan	Community representative
Burch, Ann Lee	Community representative

Public Health Research Committee

Under leadership of the chair, Dr. Marsha Presley, the committee is tasked with advising the dean on development of ATSU-CGHS research programs. The Public Health Research Committee encourages and advises faculty members and students in development of, or participation in, research projects.

Committee members are listed below. All full-time PH faculty and appropriate research staff are included. Select adjunct faculty have been added in an effort to start building research collaborations.

Public Health Research Committee	
Presley, Marsha	Chair
McNatt, Mary-Katherine	Full-time faculty member
Chaffin, Jeff	Full-time faculty member
Gold, Jaana	Full-time faculty member
Loeben, Greg	Full-time faculty member
Love, Ashley	Full-time faculty member
Wright, M. Lindsay	Full-time faculty member
Leafman, Joan	Adjunct faculty member
Dhar, Sohini	Adjunct faculty member
Kamat, Preeti	Adjunct faculty member
Rankin, Scott	Adjunct faculty member
Bonnel, Lee / Clatt, Bethany	Staff support

PH Faculty Hiring Committee

Under leadership of the chair, Dr. Mary-Katherine McNatt, the committee is tasked with hiring adjunct and full-time faculty through review of resumes and interviews with promising candidates.

The PH faculty hiring committee consists of the PH department chair, one full-time faculty from the MPH general concentration, one full-time faculty from the MPH-dental concentration, and the practicum coordinator. For a full-time faculty hire, all full-time faculty are invited to participate in the interview process once the committee identifies candidates meeting the necessary criteria and qualifications.

Current membership of the PH faculty hiring committee consists of:

Public Health Faculty Hiring Committee	
McNatt, Mary-Katherine	Chair
Gold, Jaana	Full-time faculty member – dental
Love, Ashley	Full-time faculty member – general
Loeben, Greg	Full-time faculty member – practicum coordinator

Delta Omega Honor Society

Under leadership of Dr. Mary-Katherine McNatt, faculty advisor and chair, Delta Omega Honor Society is tasked with recognizing excellence in practice, research, education, and academic achievement in the field of public health, as well as actively engaging in service activities aligning with the values of Delta Omega and the PH department.

Delta Gamma chapter members are either graduate inductees or alumni inductees. Delta Omega criteria for graduate inductees are being in the top 25% of their graduating class based on cumulative grade-point average (cGPA) and a demonstrated history of community service. No more than 20% of each graduating class may be inducted. Alumni inductees need only have a demonstrated history of community service. Ten alumni may be inducted each AY.

Honor society members vote for their leaders every two years. Current honor society leadership consists of:

Delta Omega – Delta Gamma Chapter Leadership	
McDowell, Tamala Sandifer	President; alumni
Branch, Michel	Vice president; alumni
Kumar, Naresh	Secretary; alumni
Jenkins, Karen	Treasurer; alumni
McNatt, Mary-Katherine	Faculty advisor
Presley, Marsha	Staff support

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

Degree requirements and curriculum design are primarily the responsibility of the MPH Curriculum Committee and associate dean of academics and assessment. The MPH Curriculum Committee, led by the department chair and consisting of all full-time PH faculty, appropriate staff, and adjunct faculty, student, alumni, and community representatives, meets monthly. Degree requirements and curriculum are reviewed and monitored to ensure CEPH compliance, links between learning objectives and competencies, and all degrees meet requirements (HLC, etc.) and are in alignment with the mission and vision of the program and the University.

Any degree requirement changes must be proposed or addressed by the MPH Curriculum Committee and approved through a majority vote. Approved changes are submitted to the associate dean of academics and assessment, and then to the dean, for approval. Once changes have been approved by ATSU-CGHS administration, they are forwarded to ATSU Enrollment Services for incorporation into the University Student Catalog.

b. curriculum design

The MPH Curriculum Committee is responsible for changes to the curriculum. Courses are reviewed in an ongoing rotation by the MPH Curriculum Committee. This process includes review and approval of current courses and new courses to ensure the most effective and up-to-date program competencies and educationally sound delivery methods. Before implementation, all proposed course revisions must be approved by a majority of MPH Curriculum Committee members through a vote.

c. student assessment policies and processes

The PH department assesses students using ASPPH public health competencies. The MPH Curriculum Committee reviews and approves all course content and assessments used to judge student mastery of competencies. The decision to use ASPPH competencies was made prior to the initial CEPH accreditation self-study and have remained in use since then. In 2015, the program and curriculum committee elected to realign the competencies with the updated 2014 ASPPH version.

d. admissions policies and/or decisions

Admissions requirements are set by ATSU-CGHS faculty, program chairs, and administration. Minimum requirements are listed below and posted in the ATSU-CGHS catalog (catalog.atsu.edu/preview_entity.php?catoid=10&ent_oid=75#admissions). Admission representatives discuss these requirements with all applicants. If all requirements are met with supporting documentation, the applicant is qualified and accepted into the PH program. Any

concerns related to an application are discussed with the PH department chair to determine if minimum qualifications are met.

1. Academic:

1. Minimum cGPA of 2.5 (on a 4.0 scale) at the qualifying degree institution.
 1. ATSU-ASDOH, ATSU-MOSDOH, or ATSU-SOMA students who apply to the Master of Public Health – Dental Emphasis (MPH-D) or MPH programs are admitted by virtue of being a residential student in good standing.
 2. Students who withdraw from a program of study, after completing a minimum of 16 credit hours and applying through admissions for re-entry, will be considered for re-entry based on the cGPA attained in the program at the time of withdrawal.
2. An accredited degree from a university recognized by the Department of Education (bachelor's degree or higher for master's programs and a master's degree or higher for doctoral programs).
 1. Applicants who graduated from a university outside the U.S. may be required to provide a degree equivalency evaluation.
3. Official transcript from qualifying degree-granting institution.
 1. For students using Veterans Affairs benefits, transcripts for all institutions attended are required.
4. Some degree programs may require experience or credentialing relevant to the field.

2. Elements of success:

1. A current resume
2. Completion of an essay
3. English proficiency*
4. Meeting of technology requirements**

*Applicants are required to demonstrate proficiency in English when applying to ATSU-CGHS. Written and spoken proficiency in the English language may be demonstrated by one of the following options:

- Option 1 – English is the applicant's first language.
- Option 2 – Graduated from an accredited four-year college or university recognized by the Department of Education in the U.S. with a bachelor of arts, bachelor of science, or graduate degree.
- Option 3 – Demonstrated English proficiency by submitting acceptable scores on the Test of English as a Foreign Language (TOEFL).
 - Computer-based test (CBT), internet-based test (iBT), or paper-based test (PBT) is accepted. Minimum required score based on test type are:
 - CBT – minimum total score of 213
 - iBT – minimum total score of 80
 - PBT – minimum total score of 550
 - TOEFL is administered by TOEFL/ETS Services, PO Box 6151, Princeton, NJ, 08541-6151, USA 609.771.7100. Information is available at ets.org/toefl. ATSU's institutional code is 0339.

**Technology requirements as outlined at: its.atsu.edu/knowledgebase/cghs-technology-requirements/

e. faculty recruitment and promotion

The PH department chair, one full-time faculty from the MPH general concentration, one full-time faculty from the MPH-dental concentration, and the practicum coordinator are on the PH Faculty Hiring Committee. Any potential faculty member, either full-time or adjunct, must formally apply to the program through ATSU Human Resources. Applications are forwarded to the PH department chair, and qualified candidates are interviewed via videoconferencing. All full-time faculty are invited to interview full-time faculty candidates.

Promotion applications are forwarded to ATSU-CGHS' Promotion Committee. Each program in ATSU-CGHS, including the PH department, has one representative on the Promotion Committee. Dr. Jaana Gold is the current PH representative. Committee decisions are forwarded to ATSU-CGHS' dean for advancement consideration.

f. research and service activities

The PH department chair works with each individual faculty member to determine how much time the faculty member plans to spend on research and service in the coming AY. This is documented in the faculty development as part of the annual performance evaluation. The PH department does not dictate a faculty member's research agenda. The A.T. Still Research Institute (www.atsu.edu/research/) was established in 2001 and directs and supports all employees wishing to conduct research. Department faculty follow the University research policies. All researchers must have IRB approval before the research can begin.

There are no external or internal service requirements for faculty, however as stated earlier, faculty work with the department chair to set their yearly goal for service activity. Faculty do need to participate in service activities if they wish to be promoted, per the University Faculty Handbook.

-
- 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.
-

Governance documents are in ERF folder A1-3_Governance and include ATSU bylaws, ATSU Faculty Handbook, ATSU-CGHS Faculty Handbook, faculty council bylaws and constitution, University Student Handbook, and University Student Catalog.

-
- 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.
-

PH department faculty members participate in institutional committees. Opportunities are limited as University committees often ask for one member from each of the colleges/schools. Because of this, the CGHS representative is not always a PH Department faculty member. Committees are often one or two years in length, so turn over in representation is infrequent. Dr. Jaana Gold

represents CGHS on the University Benefits Committee and University Student Scholarship Committee. Dr. S.D. Shanti served on the University Diversity Committee. Dr. Gregory Loeben serves on the University Interdisciplinary Research Committee and the Standards & Ethics Board. Dr. M. Lindsay Wright serves on the ad hoc University Artificial Intelligence Team. All participants are voting members of the committees on which they serve.

-
- 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.
-

All-faculty meetings are held at the beginning of each block. Department meetings, which involve full-time faculty, are held twice a month. The first meeting is formal and recorded. The second meeting each month is considered an informal meeting and is not recorded; faculty are free to socialize or discuss department issues informally. Full-faculty meetings are held at the beginning of each block. The ATSU-CGHS Research Webinar Series (described in Criterion E4-2) is open to all ATSU faculty and students. Adjunct faculty have been especially encouraged to participate as a way to interact with their colleagues. Full-time PH faculty interact with other ATSU-CGHS full-time faculty through the faculty council and face-to-face at graduation. They also interact with other University faculty through the University Faculty Senate. All faculty are invited and encouraged to attend University-wide presentations, particularly those provided through the University's Teaching & Learning Center and Research Nexus.

Documentation of these interactions are contained in ERF folder A1-5_Faculty_Interaction and includes minutes of formal department meetings, attendee lists for department meetings, and an example of a full-faculty meeting and attendee list, example invitation to present an ATSU-CGHS Research Webinar, and example invitation to attend an ATSU-CGHS Research Webinar.

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

Strengths

While living across the country, PH faculty are connected through meetings using videoconferencing. Virtual meetings, whether within the PH department or throughout the institution, enable faculty to interact and participate within the governance of the College and University.

Weaknesses

PH adjunct faculty are spread out throughout the U.S. Adjunct faculty may work for more than one institution or other organizations. These two factors make it more difficult for adjunct faculty to connect, and many do not feel compelled to attend meetings or professional development offerings.

Plans for improvement

The PH department chair and faculty will personally reach out to adjunct faculty to let them know they are important to the department, and their participation and contributions are valued.

A2. Multi-Partner Programs

Not applicable.

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.

Students are included in the MPH Curriculum Committee. Their input into content for courses is invaluable. Dr. Marsha Presley was a student representative on the MPH Curriculum Committee during AYs 2017-2018 and 2018-2019. Amrita Hezarkhani was also a student representative during AYs 2018-2019. Jaime Sparling is the current student representative. Students are also included in the CEPH Accreditation Committee. Dr. Marsha Presley was a student representative during AYs 2017-18 and 2018-19. Presley Melvin and Jaime Sparling are current student representatives. University Student Association has one representative from each school/college; the current ATSU-CGHS representative is not in the MPH program.

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

Strengths

None

Weaknesses

Student participation in committees is neither consistent nor abundant. Being an online program, students are not as connected to the program as they may be in a residential setting where they know other students, faculty, and administration personally. MPH students typically are working professionals who are in an online program for a specific reason. Enticing them to spend additional time outside of classwork has not been as effective as hoped.

Plans for improvement

The PH faculty will identify students in their classes whom they feel are the most engaged and may be willing to serve on committees. Having the request coming from a faculty member may have more of an impact than coming from the department chair whom they may or may not know.

A4. Autonomy for Schools of Public Health

Not applicable.

A5. Degree Offerings in Schools of Public Health

Not applicable.

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.*
-

The PH department's **vision** is to be "a leader in educating and empowering a diverse student population to promote health and reduce disparities in underrepresented communities locally and globally." This vision is aligned with the ATSU Board of Trustees' 15-year vision, which focused on four distinct criteria to be "the preeminent University for the health professions:" 1) Leading innovator in health professions education, 2) Superior students and graduates who exemplify and support the University's mission, 3) Osteopathic philosophy demonstrated and integrated, and 4) Pioneering contributions to healthcare education, knowledge, and practice. The University is currently developing a new strategic plan that will include updating its vision and mission. When that plan is complete, the PH department will revisit its vision to ensure it continues to align with the University's vision.

The PH department's **mission** is "to prepare a diverse population of public health professionals for careers in public health; to inspire a commitment to lifelong learning through excellence in education and evidence-based practices; to strengthen and diversify the public health workforce by providing opportunities to non-traditional students through innovative distance learning."

The PH department mission statement is an extension of ATSU's mission statement:

A.T. Still University of Health Sciences serves as a learning-centered university dedicated to preparing highly competent professionals through innovative academic programs with a commitment to continue its osteopathic heritage and focus on whole person healthcare, scholarship, community health, interprofessional education, diversity, and underserved populations.

It is also an extension of ATSU-CGHS' purpose statement:

The College of Graduate Health Studies is a learning-centered online school focused on academic excellence. We are dedicated to preparing leaders for socially responsible practice, policy, and scholarly activity to improve prevention initiatives, wellness, and healthcare delivery to the underserved.

The PH department has adopted the **values** of ATSU-CGHS, which are reflected in all its programs. The PH department is committed to these values and incorporates them into interactions with others, as well as in the curriculum.

Leadership: We value leadership development for our students, faculty, and staff and encourage participation in community and professional service.

Integrity: We value the highest ethical principles of fairness and honesty in all of our interactions.

Scholarship: We value critical thinking and the generation of ideas through innovation and analysis.

Diversity: We value differences among people and their personal and professional perspectives.

Interprofessional education: We value the combined contributions of our educational community and work to achieve an environment of teamwork and collaboration.

Innovation: We value the development of progressive and efficient mechanisms for learning, teaching, and technological delivery.

The PH department strives to:

Goal 1: Recruit and retain diverse, qualified students and prepare them for a career in public health.

Goal 2: Enhance the student educational experience through pedagogy that is best practice in online education.

Goal 3: Sustain qualified faculty and staff committed to lifelong learning.

Goal 4: Create public health opportunities for research and service.

Core principles and qualities the PH department embrace are: critical thinking, cultural proficiency, interprofessional collaboration, interpersonal skills, and social responsibility. These also represent ATSU's core professional attributes, as well as inform stakeholders of the department's commitment to the vision and mission.

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

The PH department functions as an integral part of the University and College. Its faculty participates in College and University strategic planning to ensure the MPH strategic plans are aligned. ATSU-CGHS' Strategic Plan is located in ERF B1-2_CGHS_Strategic_Plan_2016-2020_FINAL.pdf.

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

Strengths

The PH department has clearly outlined goals for meeting the program's central values and mission as stated above. These are in alignment with the University and College Strategic Plans.

Weaknesses

None

Plans for improvement

None

B2. Graduation Rates

The program collects and analyzes graduation rate data for each degree offered (e.g., BS, MPH, MS, PhD, DrPH).

The 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.
-

Template B2-1 below includes graduation data for cohorts beginning in 2013-2014 and continuing through 2018-2019. Because CGHS accepts students four times a year, the department receives graduation data at the end of the academic year. The 2018-2019 graduation data is, therefore, the most recent graduation data available. 2019-2020 graduation data will not be available until the year concludes in June.

Template B 2-1: Table 1. MPH Degree Cohort Detail								
Cohort of Students		2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020
2013-2014	Continuing at beginning of AY/ Entered	108						
	Withdrew, Dropped, etc.	19						
	Graduated	3						
	Cumulative graduation rate	2.78%						
2014-2015	Continuing at beginning of AY/ Entered	81	83					
	Withdrew, Dropped, etc.	5	8					
	Graduated	22	0					
	Cumulative graduation rate	23.15%	0.00%					
2015-2016	Continuing at beginning of AY/ Entered	55	75	88				
	Withdrew, Dropped, etc.	15	14	13				
	Graduated	17	21	0				
	Cumulative graduation rate	38.89%	25.30%	0.00%				
2016-2017	Continuing at beginning of AY/ Entered	22	40	75	121			
	Withdrew, Dropped, etc.	2	5	6	12			
	Graduated	12	24	28	0			
	Cumulative graduation rate	50.00%	54.22%	31.82%	0.00%			
2017-2018	Continuing at beginning of AY/ Entered	9	11	41	107	129		
	Withdrew, Dropped, etc.	2	2	5	17	5		
	Graduated	2	7	19	26	0		
	Cumulative graduation rate	51.85%	62.65%	53.41%	21.49%	0.00%		
2018-2019	Continuing at beginning of AY/ Entered	5	3	18	63	123	125	
	Withdrew, Dropped, etc.	0	0	1	1	11	8	
	Graduated	3	0	4	28	23	1	
	Cumulative graduation rate	54.63%	62.65%	57.95%	44.63%	17.83%	0.80%	
2019-2020	Continuing at beginning of AY/Entered		3	13	34	89	116	*
	Withdrew, Dropped, etc.		*	*	*	*	*	*
	Graduated		*	*	*	*	*	*
	Cumulative graduation rate		*	*	*	*	*	*

*These numbers are not yet available: CGHS accepts students four times during the academic year. Students may withdraw temporarily. Withdrawals and graduations thus are determined at the end of the academic year.

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

Not applicable.

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.

To address Criterion B2, the PH department continues its focus on a more solid support system and strong sense of community among the administration, faculty, and student body to better retain students through graduation. The structural reorganization ATSU-CGHS developed and implemented to improve internal communication between faculty and administration, while moving the program toward improved communication and support for current and future students, has so far proven to be a success. Since this reorganization, graduation rates, retention, and student satisfaction have been trending in the upward direction. Since implementing the improved communication plans, the college continues to refine them. Communication plans are in place for student statuses, including probation, at-risk, academic, and writing assistance. ATSU-CGHS quickly identifies and connects with students in need of greater support. These strategies offer encouragement to students and help address and prevent academic problems and program withdrawal. This restructuring has enabled ATSU-CGHS to engage in timely collaboration with support services and enhance student accessibility to these services. The academic advisor (AA) continuously monitors student grades, and if a student falls into an at-risk status, contacts the student within one week. The AA maintains close communication with faculty and the department chair regarding student status and academic delivery.

At the start of 2016-17 AY, a retention-focused communication plan was implemented along with a continuous enrollment policy. This plan has proven effective, as the cumulative graduation rate for the 2012-13 cohort (not included in Table B2-1) exceeded 70%, and the graduation rate continues to trend upward.

ATSU-CGHS' cohort graduation rates continue to strengthen, with the exception of the 2013-14 cohort, whose completed graduation rate was anomalously low (concluding at just 54.63%). By contrast, the previous cohort (2012-13) completed with a 76.84% graduation rate. The following cohort (2014-15) has already exceeded the previous cohort with a fourth-year graduation rate of 62.65% (See Template B2-1 and Table 2.). Furthermore, recent efforts appear to be improving student retention, significantly decreasing first- and second-year cohort withdrawal rates (See Table 3.). Cohorts previous to AY 2014-15 regularly reported first-year withdrawal rates of 15-20%. The 2016-17 cohort, by contrast, reported a first-year withdrawal rate of just 9.92%. The subsequent 2017-18 cohort demonstrated further retention improvement with a withdrawal rate of just 3.88%. A similar trend is noted in recent second-year withdrawal rates, and this trend is anticipated to continue as the department works to improve student engagement.

Table 2. Graduation rate by cohort

Cohort year	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-2020
1		*	*	*	*	*	*
2	2.78%	0.00%	0.00%	0.00%	0.00%	0.80%	
3	23.15%	25.30%	31.82%	21.49%	17.83%		
4	38.89%	54.22%	53.41%	44.63%			
5	50.00%	62.65%	57.95%				
6	51.85%	62.65%					

*These numbers are not yet available: CGHS accepts students four times during the academic year. Students may withdraw temporarily. Withdrawals and graduations thus are determined at the end of the academic year.

Table 3. Cumulative withdrawal rate by cohort

Cohort year	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-2020
1		*	*	*	*	*	*
2	17.59%	9.64%	14.77%	9.92%	3.88%	6.40%	
3	22.22%	26.51%	21.59%	23.97%	12.40%		
4	36.11%	32.53%	27.27%	24.79%			
5	37.96%	34.94%	28.41%				
6	39.81%	34.94%					

*These numbers are not yet available: CGHS accepts students four times during the academic year. Students may withdraw temporarily. Withdrawals and graduations thus are determined at the end of the academic year.

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

Strengths

The program is adapted to students' needs based on feedback. Students frequently report they are gaining applicable knowledge through courses. AAs work collaboratively not only with students, but also with faculty members and the department chair to support students within the program. AAs identify students at-risk and connect them to appropriate intervention programs available to assist students (e.g., help for students for whom English is a second language (ESL)).

Weaknesses

The PH program has had little control over assigning and monitoring students' statuses. Typically, student statuses have been assigned at the University-level by the University's registrar. These University-wide student statuses, however, are designed to monitor residential students in defined annual cohorts. Because the program admits students four times a year, and because PH students often do not take courses every block, the University's status codes cannot meet the unique needs of the program. ATSU-CGHS is working to build its own student status assignment system – one that will better suit the online program.

Plans for improvement

The PH department plans to address this deficiency through:

1. AAs and students working together to ensure the MPH program course sequence is followed.
2. Continuing to carefully advise MPH students on coursework progression for successful completion of the coursework for degree completion.
3. Continuing to automate to better account for each student's status.

B3. Post-Graduation Outcomes

The program collects and analyzes data on graduates' employment or enrollment in further education post-graduation, for each degree offered (e.g., 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.
-

Alumni surveys have been switched to a new, more familiar platform (Qualtrics). Students and recent grads should be more familiar with this platform as it is the same survey platform currently used to administer the graduate exit survey.

The CGHS alumni email list was split. Master of Public Health graduates now receive the alumni survey separately from other CGHS graduates. This change will allow the program to more directly track and manage survey distribution and follow-up.

Follow-up reminders will switch from the previous automated process to include a manual process. While PH graduates will continue to receive a 2-week reminder if they have not yet completed the alumni survey, the program will also follow-up in-person. PH faculty will personally call 12-month cohort graduates to check in with them and to remind the graduate to complete the alumni survey.

The above changes outline the new survey delivery methods designed to increase response rates to 80% and to be in compliance with CEPH Criterion B-3. This new method was initiated in winter of 2019. For 2019 data, 6 alumni have responded to the survey so far and reminder emails were sent at the end of February and mid-March. Faculty will begin calling alumni in spring 2020.

Template B3-1

Post-graduation outcomes	2018 Number and percentage	2017 Number and percentage	2016 Number and percentage	2015 Number and percentage	2014 Number and percentage
Employed	4 (7%)	8 (12%)	10 (19%)	13 (28%)	14 (28%)
Continuing education/training (not employed)	2 (3%)	3 (4%)	1 (2%)	1 (2%)	2 (6%)
Not seeking employment or not seeking additional education by choice	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Actively seeking employment or enrollment in further education	0 (0%)	1 (1%)	2 (4%)	1 (2%)	0 (0%)
Unknown	49 (89%)	57 (83%)	41 (76%)	32 (68%)	34 (68%)
Total graduates (known + unknown)	55 (100%)	69 (100%)	54 (100%)	47 (100%)	50 (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.
-

The primary factor affecting results shown in Template B3-1 is low response rate. Many students specifically choose to enroll in the online program because they are already employed. This observation is demonstrated in the cumulative response rate, as discussed in Criterion B4-2.

Plans to improve the rates in Table B3-1, therefore, depend on plans to improve the response rate as described above. Once the response rate is increased, data will be more meaningful and will allow the program to determine whether additional improvements are required.

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

Strengths

None

Weaknesses

Based on the CEPH 2018 Annual Report, ATSU's PH department did not meet the criterion of collecting and analyzing data on graduates' employment or enrollment in further education post-graduation from the MPH degree at the rates of 80% or greater. The response rates for the alumni survey are very low.

Plans for improvement

- Alumni surveys have been switched to a new, more familiar platform (Qualtrics). Students and recent graduates should be more familiar with this platform as it is the same survey platform currently used to administer the graduate exit survey.
- The CGHS alumni email lists are now split. Master of Public Health graduates have received an alumni survey separately from other CGHS graduates. This process will allow the program to more directly track and manage survey distribution and follow-up.
- Follow-up reminders will switch from the previous automated process to include a manual process. While PH graduates will continue to receive a 2-week reminder if they have not yet completed the alumni survey, the program will also follow-up in-person. PH faculty will personally call 12-month cohort graduates to check in with them and to remind the graduate to complete the alumni survey.

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 alumni survey does not ask the respondent to assess his/her success in achieving competencies. This question is asked in the program's exit survey. The alumni survey asks the following question:

Do you feel the curriculum offered prepared you for your career?

Over the past five years, only one alumnus (1.9%) who answered the survey responded "no."

-
- 2) Provide full documentation of the methodology and findings from alumni data collection.
-

A new alumni survey process is currently in progress for 2018-2019. The methodology of the new system was described in Criterion B3-1. Previous alumni surveys were administered via an online survey platform, Zarca, with a single automated reminder email generated to remind recipients to complete the survey two weeks after the initial invitation date.

A 27-item survey is administered annually in the summer to all ATSU-CGHS graduates. This alumni survey is in ERF B4-2_Alumni_Survey_MPH.pdf.

The alumni self-assessment conducted in 2017-18, which included PH graduates from 2013-18 (n=53), showed 91.8% of the alumni felt ATSU's MPH curriculum prepared them for their professional career. About 47.6% of the alumni received advancements, bonuses, or promotions as a direct result of obtaining ATSU's MPH degree. Only 5% of the alumni did not find any employment after attaining ATSU's MPH degree. ATSU's MPH alumni are unique – 26.8% of the graduates worked in a dental clinic or dental practice; about 53.7% worked in healthcare organizations; and the remaining 19.5% worked in education, consulting, and/or government agencies.

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

Strengths

None

Weaknesses

Not enough MPH alumni have answered the new survey to make any determination about the results.

Plans for improvement

Plans for improvement are detailed in Criterion B3-3. Based on student feedback and low response rates, the alumni survey was recently revised to sufficiently capture alumni's mastery and application of competencies and relevance of the curriculum, as well as their perceptions and experiences of their time in the program. Alumni surveys have been switched to a new, more familiar platform, Qualtrics; students and recent graduates are accustomed to Qualtrics since it is the survey platform currently used to administer the graduate exit survey. Additionally, PH graduates have received an alumni survey separately from other ATSU-CGHS graduates. In addition to the automated two-week reminder follow-up email, a manual process will be in place, so either faculty members and/or AAs directly contact the PH graduates if they have not completed the alumni survey within three months.

A copy of the survey is located in ERF B4-2_Alumni_Survey_MPH.pdf

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.

Evaluation measures	Identify data source(s) and describe how raw data are analyzed and presented for decision making*	Responsibility for review
1. Recruit and retain diverse, qualified students and prepare them for a career in public health		
<i>Students are under-represented minorities.</i>	Admissions/recruitment records (Salesforce, CampusNexus student records) compiled by Academic Computing Analyst; reviewed each quarter by department chair.	PH department chair & associate director of admissions – decision makers
<i>Students retained during an AY</i>	Canvas/CampusNexus student records compiled by Academic Computing Analyst; reports reviewed each quarter by department chair.	Associate dean of operations – decision maker; PH department chair; PH department faculty; AAs
<i>Students graduating within five years of matriculation</i>	CampusNexus student records; reports generated annually by Academic Computing Analyst.	PH department chair; associate dean of academic assessment; PH department faculty; AAs

2. Enhance the student educational experience through pedagogy that is best practice in online education		
<i>Courses designed using Quality Matters (QM) Standards</i>	Course syllabi and Canvas courses are designed using the 6 th edition of QM course design rubric standards.	PH department faculty (course developers); instructional designers; PH department chair; associate dean of academic assessment - decision maker
<i>New faculty oriented to online best practice and the learning management system (LMS)</i>	Canvas orientation course; completion certification stored in IRMA database by associate dean of academics and assessment.	Associate dean of academic assessment – decision maker.
<i>PH courses, QM certified</i>	QM review records; summary reporting stored in IRMA database by Academic Computing Analyst	Associate dean of academic assessment – decision maker; instructional designers; PH department faculty; PH department chair
<i>Courses integrate various methods to engage students (e.g., Wikis, Blogs, live Zoom meetings, faculty-student and student-AA phone calls)</i>	Course syllabi and Canvas courses; reporting generated upon course review (every three years)	PH department faculty; instructional designers; PH department chair; associate dean of academic assessment – all are decision makers at various levels during course development
3. Sustain qualified faculty and staff committed to lifelong learning		
<i>Full-time faculty have earned a doctorate.</i>	Application materials; faculty personnel files; IRMA database	ATSU-CGHS administration; PH department chair – decision maker
<i>Adjunct faculty have an appropriate advanced degree and previously and/or currently work in public health.</i>	Application materials; faculty personnel files; IRMA database	ATSU-CGHS administration; PH department chair – decision maker
<i>Full-time faculty will participate in one professional development activity each year.</i>	Faculty-entered information in IRMA database	PH department faculty; PH department chair – decision maker
<i>Instructional designers will attend a professional conference each year.</i>	Staff information in IRMA database	Instructional designers; ATSU-CGHS administration – decision makers

4. Create public health opportunities for research and service		
<i>Scholarly presentations</i>	Faculty-entered information in IRMA database	PH department faculty
<i>Publish papers in quality, peer-reviewed journals annually</i>	Faculty-entered information in IRMA database	PH department faculty
<i>Grants awarded</i>	Faculty-entered information in IRMA database	PH department faculty; PH department chair
<i>Faculty and staff participate in community service activity</i>	Faculty-entered information in IRMA database	PH department faculty
<i>Host community project annually</i>	corbinslegacy.org/our-initiatives/corbins-legacy-atsu-back-2-school-day/	PH department chair; ATSU-CGHS administration
<i>Host a webinar series for public health professionals and students</i>	Student Corner (guides.atsu.edu/CGHS/Public_Health/Student_Corner/Research_Webinars); ATSU YouTube channel; updated each block.	PH department research associate; PH department faculty; ATSU-CGHS faculty; ATSU-CGHS students and alumni

*IRMA is the acronym for the Integrated Records Management Application, a purpose-built and internally maintained MySQL database utilized by ATSU-CGHS.

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- 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.
-

ATSU-CGHS' evaluation methods and measures are designed so the PH department may achieve its goals and objectives. Reaching these milestones enables the program to ensure its mission and values are fulfilled and align with the overall mission of the University. Educating the next generation of public health workers, who are leaders in their community, value individuals for their differences, and display the highest ethical principles, is only possible with quality competency-based instruction that meets community needs.

Data collected through the college information system, Integrated Records Management Application (IRMA), allows for full-time faculty to report all scholarship and service activities in one place for ease of access and reporting. Data shows how faculty research and service are contributing to the scientific body of knowledge in public health as well as making an impact in their respective communities.

Data collected through IRMA provides real-time, ongoing evidence that allows faculty, chairs, and advisors to make immediate and long-range improvements to practices, courses, and behaviors. Depending on the situation, evaluation of data takes place daily, weekly, end of term, and/or every time a course is redeveloped. Using data to drive evidence-based decisions provides for a better learning experience for students.

Educational evaluation is conducted at multiple times throughout a student's tenure in the program. For example:

- Students now start the program with a self-evaluation of core public health principles.

- Student progress is monitored by faculty and the AA on a weekly basis. If intervention is needed because of poor or no attendance in the online course activities, or a student does poorly on a graded assignment, the AA contacts the student immediately to provide any assistance that may be needed.
- Students complete a mid-term evaluation of the course/instructor.
- Information received and in need of immediate attention is addressed by the department chair.
- Students complete an end-of-course evaluation. This information is stored and used when redeveloping the course.
- Students evaluate their comfort level with the public health competencies near the end of the program (after completion of the practicum). This information is also used when redeveloping courses.

This continuum of data evaluation allows for a better educational experience that in turn better prepares students to meet the needs of diverse populations in their respective 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.
-

Student body demographics are presented and discussed in Criterion G1-5. Student body retention and graduation rate is presented and discussed in Criteria B2-1 and B2-3. Grants received by PH faculty are presented and discussed in Criterion E4-3. The annual community project is documented at corbinslegacy.org/our-initiatives/corbins-legacy-atsu-back-2-school-day/. ATSU-CGHS' Research Webinar Series is documented at guides.atsu.edu/CGHS/Public_Health/Student_Corner/Research_Webinars and [youtube.com/playlist?list=PLP3UDRKqVJV_EsUFo9XTgN-Y9w85xEs_d](https://www.youtube.com/playlist?list=PLP3UDRKqVJV_EsUFo9XTgN-Y9w85xEs_d). MPH syllabi are located in ERF folder D1-2_MPH_Syllabi. PH faculty CVs are located in ERF folder E1-3_Full-time_Faculty_CVs and ERF folder E1-3_Adjunct_Faculty_CVs. Other documentation and reports are located in ERF Folder B5-3_Evaluation_Implementation.

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

Strengths

The PH department has developed the ability to accurately collect and report data. The PH department also has a solid evaluation plan designed to promote student success through continuous quality improvement and alignment with the department and University missions.

Weaknesses

None

Plans for improvement

None

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.
-

Course changes

All PH courses are reviewed and revised every three years. This schedule allows the PH department to apply continuous quality improvement based on evaluation results in a timely fashion and ensure all course content is current and relevant.

For each course review, the MPH Curriculum Committee is provided the following items: 1) current course syllabus, 2) end-of-course survey results, 3) student comments, 4) final grade distribution, 5) grade distribution for individual course assessments, and 6) the associate dean's appraisal of items 1-5. The committee carefully assesses all the items and provides suggestions for improvement to the subject matter expert (SME) and instructional designer assigned to redevelop the course. Once the course is redeveloped, the committee is provided the new syllabus, along with the items listed above, so it may re-assess if identified issues were successfully addressed in the redevelopment.

One example of this process is redevelopment of BIOS7000, which was revised three times during the past five years to address students' comments below:

- There are far too many discussion posts required for this class. Writing 3 response posts on non-controversial issues such as linear regression is extremely difficult and I felt as though I was simply repeating myself over and over, not really learning or contributing anything.
- Excel is not compatible for the assignments. SPSS or another statistical software should be utilized if we are truly (sic) expected to do data analysis.
- Excel made this course very difficult.
- The structure of the textbook was confusing and the statistical analyses were performed using excel that required more time than when using a statistical program like SPSS.
- I feel the textbook, while very complete, was VERY confusing and difficult to follow.
- The Rosner textbook was very difficult to understand.
- The largest concern I have with this course is that the textbook is extremely verbose and examples are difficult to follow.

Course revision addressed these concerns by changing the textbook, requiring students to purchase SPSS to use on homework problems, and removing many of the journals, wikis, and discussions. The final paper was replaced with synchronous live presentations from students to demonstrate application of biostatistical skills acquired in the class on their topic of choice. Discussion forums remaining in the course were redesigned to prompt an actual dialog and help

students understand how to apply statistical concepts relevant to their current or future careers. Discussions are now regarded as a plus:

- [I liked] discussion activities. It enhances learning when getting input from peers.
- I really enjoyed using SPSS as part of the statistical calculations for the course. This is one of the main software products that the industry uses, so it was highly beneficial and advantageous to learn how to use this software.
- I liked the SPSS program. It was fun to use and create graphs.
- [I liked] the presentation. I liked how we got to apply what we have learned in the course to a real life data set.
- [I liked] the final presentation because we had a bit of interaction with the instructor and other students.
- I learned the most from the final presentation because it required distilling all knowledge from the course into one project

While SPSS is user-friendly, the program is still difficult for students to learn in such a short period of time. Several students have requested instructional videos from the professor:

- I would have appreciated if the professor had pre-recorded lectures explaining the material instead of only having the book
- ...it would have been much more helpful to have video lectures where the same person offered explanations of the material in one consistent manner and was available to give individualized responses to questions about the lectures.

The subject matter expert (SME) is developing and creating videos to fill this need.

Student retention

The PH department's graduation rates, as shown in Criterion B2-1, indicated the program needed to make a change to improve student retention. The associate dean of operations is in charge of retention and oversees the AAs. One change was to adjust academic advising to a more assertive advising style. Prior to this change, communication with students was primarily through email, and phone calls were used mostly when a student was deemed at risk, on probation, or had called the AA. With the change, students now receive a wellness check phone call at least once per block from the AA. The AAs call new students more frequently in their first few blocks and, if appropriate, reduce the frequency of the calls as the student progresses. Students may be called more frequently if their grade falls below 75% and they are identified as at risk, or if they are on probation. In these cases, the AA will talk with the student to identify the issue and help him/her devise a plan to improve performance.

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

Strengths

The PH department has a solid evaluation plan involving continuous data collection relevant to instruction, research, and service. Real time reporting allows continuous quality improvement in programmatic plans, including the curriculum and student success.

Weaknesses

None

Plans for improvement

None

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.

ATSU-CGHS' PH department operates primarily on tuition revenue. Tuition dollars are generated through student enrollment for each course. Tuition rates are considered annually. An overall average annual tuition increase in excess of 4% must be approved by ATSU's Board of Trustees. In addition, the PH department has received research grants over the past five years (See Criterion E4-3.).

PH faculty salaries are paid from tuition revenue. As outlined in ATSU Policy No. 20-112, if a faculty member receives a research grant that covers a portion of his/her salary, the salary savings are reinvested into the department through the annual budget process. (Available in ERF C1-1a_ATSU_POLICY_NO._20-112_GRANTS_AND_RESEARCH_REINVESTMENT.pdf). Faculty salaries are guaranteed (since 2017), and faculty receive rolling three-year contracts as stated in the faculty handbook.

-
- 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.
-

Like all schools and colleges within ATSU, the PH department maintains an annual balanced budget and has the resources required to fulfill the department's mission and goals, which it has successfully achieved throughout its 20-year history. If sufficient revenue is generated through tuition, fees, and external grants, then additional budget initiatives may be supported.

Each budget cycle, program chairs may request budget initiatives. Budget initiatives are changes in the current processes significantly impacting the department budget. Requesting new faculty, because of the budget implication, would be submitted at this point in the budget process (fall of each year). Justification for new faculty and proof revenues generated by the department that may fund the position are included in the budget initiative. All requests are prioritized, first by the ATSU-CGHS dean and then by the senior vice president of academic affairs. ATSU's president makes the final determination.

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

ATSU-CGHS, including the PH department, follows ATSU’s financial policies and procedures (below).

ATSU’s operating budget represents normal unrestricted revenues earned and expenses incurred through standard business operations as a graduate health education institution. Operating costs are funded primarily through tuition and fee revenue, which produce approximately 90% of budgeted revenue. The remaining 10% of operating revenue is comprised of investment income, operating leases, auxiliary enterprises, and clinic services. The budget development process spans a six-month timeframe and requires input from all schools, departments, deans, and vice presidents. Budget managers begin by submitting budget requests for capital, new positions, new programs, and initiatives. Educational and University support budget requests are combined, and prioritization is given to accreditation, mission and vision, and strategic initiative fulfillment.

- b. student support, including scholarships, support for student conference travel, support for student activities, etc.
-

The PH department offers the Michael E. and Sandra P. Samuels Scholarship Award fund to help students defray the cost of sitting for the Certified in Public Health examination. This award was established in 2009 as a non-endowed fund. While funds are limited, funds have been made available for students to apply for reimbursement of examination costs. The chair and PH faculty determine distribution of any and all awards given each year.

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

Full-time faculty receive an annual faculty development allowance of \$2,500 per AY to help defray costs of continuing education courses and resources, attendance at professional meetings, and associated travel. Also, these funds may be used for license renewal and/or professional association membership dues. The amount does not vary based on faculty rank and is the same across the University.

Additional funding for faculty development may be secured through the recently enacted ATSU tenure policy. In June 2018, the University instituted a tenure policy for full-time faculty. At ATSU, tenure does not guarantee academic position or length of employment contract. Instead, tenured faculty are eligible for an additional \$2,000 per year for a 10-year period. These additional funds are intended to provide resources to tenured faculty for professional growth.

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

Additional funding for operational costs is requested by the chair to the dean. If funds exceed \$5,000, the chair must request monies through the annual budget initiative process outlined in

Criterion C1-1.b. For initiatives under \$5,000, the chair requests those funds be added to the next fiscal year when expenses are submitted by the dean for the entire college. Should funds be needed in the current fiscal year, the chair asks the dean to identify the funds at the college level for immediate use.

Additional funding for student support is more difficult as the non-endowed fund is dependent on others for donations. As long as monies remain in the fund, students may make monetary requests.

-
- e) 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.
-

Tuition and fees are budgeted and credited to the department. The department is responsible for generating enough revenue to be self-supporting and to cover its portion of required University support (overhead) expenses. The required contribution for University support (overhead) is calculated utilizing a variety of appropriate drivers to allocate support expenses to each school/college.

-
- f) 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.
-

For applicable research grants, ATSU Policy No. 20-112 outlines distribution of indirect cost. (Available in ERF C1-1a_ATSU_POLICY_NO._20-112_GRANTS_AND_RESEARCH_REINVESTMENT.pdf). 25% of the indirect cost approved through a grant or contract will be allocated for general departmental expenditures to include, but not limited to, purchase of equipment, attendance at scientific meetings, purchase of research supplies, and/or employment of additional technical assistance. The remaining 75% of the indirect cost will be applied to meeting the University's cost of maintaining and administering its research facilities and programs.

ATSU Policy No. 20-108 and No. 20-109 outlines how faculty honorariums, if appropriate, are administered (not indirect costs). (Available in ERFs C1-1f_ATSU_POLICY_NO._20-108_OFF_CAMPUS_CONSULTATION.pdf and C1-1f_ATSU_POLICY_NO._20-109_HONORARIA_FOR_ATSU_FACULTY_MEMBERS_PARTICIPATING_IN_CE_PROGRAMS.pdf)

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.

- 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 by major category, 2015-19					
	Year1	Year 2	Year 3	Year 4	Year 5
	2014-15*	2015-16*	2016-17	2017-18	2018-19
Source of funds					
Tuition & fees	(1,418,506.85)	(1,648,898.27)	(2,063,837.18)	(2,610,929.21)	(2,970,422.64)
Total	(1,418,506.85)	(1,648,898.27)	(2,063,837.18)	(2,610,929.21)	(2,970,422.64)
Expenditures					
Faculty salaries & benefits	557,804.47	494,312.15	866,253.01	945,371.28	1,012,824.09
Staff salaries & benefits	242,966.77	325,522.46	84,110.13	60,943.57	67,504.85
Operations	22,958.77	21,192.40	114.60	507.27	1,705.27
Travel	25,854.35	24,214.50	14,004.93	18,724.62	18,790.93
Memberships & dues	6,690.43	7,001.06	6,453.00	41,415.00	41,695.00
Salary recoveries	(29,882.80)	(8,025.61)	2,500.00	-	-
Other-misc	5,369.89	10,254.80	-	-	-
Total	831,761.88	874,471.76	973,435.67	1,066,961.74	1,142,520.14

*MPH program expenditures were not recorded separately as a department until 2016-17. For prior years, expenditures have been calculated at 22% of general department expenditures.

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

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

Strengths

ATSU operates with a consistent budgeting process that allows colleges and programs to request additional resources each year. The University recently increased the amount of faculty development monies for each full-time faculty member from \$1,100 to \$2,500. This demonstrates commitment to faculty development. The PH department continues to be profitable, and this profitability will eventually support additional full-time faculty members.

Weaknesses

None

Plans for improvement

None

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.

Template C2-1 (programs)

	FIRST DEGREE LEVEL			ADDITIONAL FACULTY
CONCENTRATION	PIF 1	PIF 2	FACULTY 3	
Generalist MPH	Gregory Loeben 1.0	Ashley Love 1.0	Mary-Katherine McNatt 1.0	PIF: 0 , Non-PIF: 18
Dental emphasis MPH	Jaana Gold 1.0	Jeffrey Chaffin 1.0	M. Lindsay Wright 1.0	PIF: 0 , Non-PIF: 10

TOTALS:	Named PIF	6
	Total PIF	6
	Non-PIF	28

Template C2-1 shows the number of full-time faculty in the PH department. While faculty members are primarily associated with either the generalist program or the dental public health concentration, faculty members may be called upon to teach in either concentration as needed.

The department also employs 28 adjunct faculty who assist in teaching courses each 10-week block.

-
- 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.
-

Primary instructional faculty (PIF) in the PH department are all full-time faculty solely within the program. ATSU considers faculty with at least 75% effort to be full-time. All PIFs listed by name in Table C2-1 are 100% effort. Non-PIF are adjunct faculty who teach one or two courses per block per AY. The adjunct faculty pool is fairly dynamic. Course sections are managed block-by-block, as not all courses are offered every block and some courses might have multiple sections to staff.

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

Because of the size of the program and number of full-time and adjunct faculty, the table provides a sufficient explanation of the data.

-
- 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, mentoring and the integrative experience

Advising in MPH integrative experience

Average	Min	Max
9.86	5	18

At the beginning of the integrated learning experience (ILE), the student is assigned a faculty advisor who will work with the student to determine the nature of his/her final written document. The faculty advisor will have access to the student's applied practice experience (APE) materials in the Canvas LMS to fully review and discuss with the student to help develop the ILE document. In consultation with the faculty advisor, the student will select a minimum of three competencies (at least two must be foundational) appropriate to the student's educational and professional goals. The faculty advisor reviews and edits the student's final document until the document is substantive and well written (publishable quality). While the student works primarily with his/her faculty advisor, s/he will also have a second PH faculty member assigned as an ILE committee member for additional guidance and review of the ILE.

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

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

ATSU-CGHS caps all course sections at 15 students to ensure faculty may adequately meet the needs of each attending student. Respondents to end-of-course evaluations administered at the conclusion of AY 2018-19 courses show 87% of respondents (n=1,714) are satisfied with the amount and quality of instructor interaction in their courses. Of these responses, 66.1% of respondents "strongly agreed" they were satisfied with the amount and quality of instructor interaction in their courses. Students also report being "very satisfied" (57%) or "satisfied" (32%) with their interactions with fellow students in their courses and course discussions enhanced their learning in their courses (81% of respondents "agree" or "strongly agree").

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

In end-of-course evaluations for AY 2018-19, 91.5% of all respondents "agreed" or "strongly agreed" instructors established an active presence within their PH courses. As noted above, 87% report being very satisfied with the amount and quality of instructor interaction in their courses. Furthermore, 89.9% "agreed" or "strongly agreed" instructors responded to emails and requests for formative feedback in a timely fashion. Finally, 91.1% of respondents "agreed" or "strongly agreed" instructors provided summative feedback and grades in a timely manner.

- 5) Qualitative data on student perceptions of class size and availability of faculty.
-

The vast majority of PH graduates (85.1%) frequently report being "very satisfied" (44.7%) or "satisfied" (40.4%) with their overall educational experience at ATSU-CGHS. Respondents frequently cite program faculty and their fellow students as central to their degree experience – a large plurality of graduates report being "satisfied" or "very satisfied" with program faculty (87.2%) and their fellow students (78.7%). When asked about memorable moments from their program, students frequently cite faculty:

- "There are so many but in particular the feedback I got from my doctors (instructors)."
- "Professors' Support and Teaching; Academic Advisors"
- "This was a good experience with very helpful faculty."
- "I have been fortunate to have great guidance when applying and completing my MPH. Ms. B, Dr. L, and Dr. S were helpful with giving me advice when trying to complete my practicum."
- "Great learning experience with very supportive faculty!"

And fellow classmates:

- "Working with fellow classmates from around the country sharing our experiences and ideas for the future in course discussions. Great collaborations, building on ideas from each classmate."
- "Connecting with classmates from all across the country"

- "Working together with the other dual degree students"

Similarly, comments provided on end-of-course evaluations frequently highlight faculty availability:

- "I felt the instructor did a great job and being present in the discussion group and asking follow up questions that helped move the conversation along."
- "Dr. L is easily the absolute best online instructor I have ever had (including ATSU CGHS courses in addition to various undergraduate institutions!). She was very present in the course"
- "Every module had its difficulties, however, through the resources my instructor provided I was able to accomplish my studies throughout the semester."
- "I enjoyed the diversity of the type of assignments in this course. I also really appreciated how incredibly responsive to emails the course instructor has been and how she was understanding and helpful when I emailed her with questions."

And interactions with classmates:

- "I enjoyed the discussions with fellow classmates over topics pertaining to the course."
- "I like discussions because of the conversation between students and I learn a lot from what the other students are sharing."
- "I liked the discussions and particularly being able to/required to respond to other classmates' discussion postings. This made the interpersonal collaboration more meaningful and realistic (like in-person/face to face)."
- "As time consuming as the discussions may be, I find that taking the time to research what I need to discuss and then openly discussing it with my peers actually brings a lot of relevant information to the table that I normally would have missed."
- "Discussions are very helpful when learning new information because each student has their own perspective that each student can learn from."

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

Strengths

Small class sizes support one-on-one interactions between students and dedicated faculty who go the extra mile to connect with their online students.

Weaknesses

None

Plans for improvement

None

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

Staff member	Title	Role/function	FTE
Aesha Turner	Administrative Assistant	Provides support for ATSU-CGHS administration and PH department chair	0.5
Lee Bonnel	Academic Advisor (AA), Operations Manager	Provides support for PH faculty and PH AAs; manages all ATSU-CGHS AAs	0.2
Debbie Frazier	Administrative Assistant	Provides support for PH department chair, faculty, and staff	0.5
Andrew Kottwitz	Instructional Designer	Provides course design services and support for the Canvas LMS	0.2
Sue McDaniel	Instructional Designer	Provides course design services and support for the Canvas LMS	0.2
Laura Harvey	Academic Advisor (AA)	Provides support for PH faculty and students	0.5
Bethany Clatt	Academic Advisor (AA)	Provides support for PH dental concentration faculty and students	1
Susan Thomas	Instructional Designer	Provides course design services and support for the Canvas LMS	0.2
Beth Thompson	Instructional Designer	Provides course design services and support for the Canvas LMS	0.2
Susan Swogger	Distance Support Librarian	Provides library support for PH faculty and students	0.4
Marsha Presley	Research Associate	Provides support for full-time PH faculty	1
12 people	Totals		4.9

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

Other personnel who support students through their program are employees in University Student Affairs (i.e., Financial Services and Enrollment Services) and the University Writing Center (UWC).

Financial services

Financial aid advisors are available to answer questions about affording graduate school and federal loan repayment plans, and to provide guidance on funding the students' education.

Enrollment services

Enrollment Services assists ATSU students, faculty, and staff in many areas, including proof of enrollment, transcripts, loan deferment, course registration, and student privacy issues.

University Writing Center

UWC is a free academic support service for current ATSU students and accepts documents for review 24 hours per day, Monday through Saturday. Handouts on APA formatting, improving paraphrasing, and citing web resources are available through sites.google.com/a/atsu.edu/online-writing-center/.

UWC has four writing coaches who specialize in working with ESL students. They have also helped with writing handouts designed specifically for ESL students.

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

Support is sufficient to meet the needs of PH students. Graduate exit questionnaires indicate AY 2018-19 graduates (n=48) are overwhelmingly satisfied with the staff and academic support provided by ATSU-CGHS. For example, 89.6% of MPH graduates report being "satisfied" or "very satisfied" with the support received from their AA. Similarly, 81.3% of graduates report being "satisfied" or "very satisfied" with the academic support provided by UWC. Additionally, of the students who made use of career services provided by ATSU-CGHS, 77.4% reported being "satisfied" or "very satisfied" with assistance received.

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

Strengths

Highly knowledgeable full-time and adjunct faculty members who have real-world experience provide a stimulating educational experience for students. The MPH program is fortunate to have so many willing PH professionals asking to become adjunct faculty.

Weaknesses

None

Plans for improvement

None

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
-

On the Mesa, Arizona, campus, academic support is available to the dental concentration students at ATSU-ASDOH via one full-time faculty member, who has office space in the ATSU-CGHS administration area. The remaining full-time faculty members and chair are located throughout the country. Faculty and committee meetings are held via conference call or Zoom video conferencing.

- Staff office space
-

The MPH program's administrative offices are housed on the Kirksville, Missouri, campus. This includes office space for administrative support, instructional designers, and the AAs providing academic support to students.

- Classrooms
-

PH students are 100% online students, so classroom and laboratory space on the Kirksville, Missouri, campus, where the program is based, is not needed. Dual-degree students have residential dental or medical courses on the Mesa, Arizona, and Kirksville, Missouri, campuses, in addition to the online MPH courses.

- Shared student space
-

Dental students on both campuses are residential students, as are ATSU-SOMA students. They have access to all ATSU study space and the library as needed.

- Laboratories, if applicable to public health degree program offerings
-

Because the MPH program is an online program, laboratory space is not applicable.

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

Because the MPH program is 100% online, the only space needed on either campus is related to administrative staff. There are enough offices for administrative staff to carry out their duties.

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

Strengths

Because the program is 100% online, the amount of necessary on-campus space is minimal. This helps to keep operational costs down for the department.

Weaknesses

None

Plans for improvement

None

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
-

A.T. Still Memorial Library (ATSMlib) provides library and multimedia resources and services to support ATSU's schools and programs on the Missouri and Arizona campuses and online. ATSMlib provides an array of online, evidence-based resources and services supporting students in their educational activities and faculty in their teaching and research.

Access to and use of ATSMlib's electronic resources is facilitated through its website (atsu.edu/library) and Still OneSearch, a single search box capable of searching all Library e-books and e-journals and many of its databases. The website provides access to and facilitates use of more than 20,000 electronic, full-text clinical journals, more than 200,000 e-books (including more than 20,000 full-text, health-related books), and an array of web-based health information-based databases.

PH resources maintained by ATSMlib (guides.atstu.edu/publichealth) include:

- **Evidence-based interventions resources** – Links to various evidence-based intervention databases, including HealthyPeople 2020 evidence-based resource database, CDC community health improvement navigator database of interventions, database of promoting health effectiveness reviews (DoPHER), guide to community preventive services, etc.
- **Measurement instrument resources** – Links to instrument databases, including Health and Psychosocial Instruments (HAPI), PsycTESTS, TestLink, etc., and a library guide to help locate appropriate measurement instruments.
- **Special population resources** – Links to resources relating to special populations, including native health database, LGBTQI health research and practice, REHABDATA, rural health information hub, etc.
- **Environmental sciences and toxicology resources** – Links to GreenFILE and TOXNET.
- **Public health foundations** – Links to Commonwealth Fund, Guttmacher Institute, and the Kaiser Family Foundation.
- **Dental public health resources** – Includes dental public health e-books and journals, public health data and statistical sources, oral health data resources, oral health promotion, and dental public health organizations.
- **Global health resources** – Includes global health e-books and journals, global health data and statistical sources, maternal and child health, infectious diseases and vaccination, and global health policy and foundations.

- **Research article resources** – Direct links to databases include:
 - **PubMed with LinkOut** – Access to Medline via the National Library of Medicine interface with direct links to ATSMlib’s full-text journals.
 - **Ovid Technologies** – Medline, e-books, and e-journals published by Lippincott Williams & Wilkins.
 - **EBSCO – CINAHL** (Cumulative Index to Nursing and Allied Health Literature) – The database provides indexing for 2,960 journals from the fields of nursing and allied health.
 - **Thieme Electronic Book Library** – Provides access to Thieme's Flexibook Atlases and Textbooks Series, a series of review textbooks, published in basic as well as medical sciences.
 - **ProQuest Psychology** – Provides access to more than 400 psychology-related journals, many of which are available in full text.
 - **ProQuest Dissertations & Theses** – Provides a comprehensive collection of dissertations and theses. More than 930,000 are available in PDF format for immediate free download.

To facilitate faculty and staff browsing recent issues of digital journals, ATSMlib subscribes to Browzine, an app that enables users to view tables of contents of current and previous issues of journals to which the library has access. They may view and/or save PDFs of the journals’ contents.

The library has an online librarian, dedicated exclusively to aiding online students and faculty. Thus, in addition to providing an extensive, web-based digital library, ATSMlib provides a full range of mediated services, including training and assistance in subject searching, strong document delivery and interlibrary loan services, and one-on-one, small-group, and classroom training in effective use of ATSMlib’s resources and collections, as well as web-based research tutorials. A weekly research tip email keeps online students connected with library services and the online librarian.

The library also provides library resources and support for ATSU alumni and preceptors via special websites providing access to select evidence-based resources and library services including free document delivery.

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

Students in the PH program are expected to own computers, or have frequent, regular access to a computer, and a reliable internet connection. Minimum expectations are stated in the admissions requirements. Students have free access to Google apps (which includes their University email, Google Drive, and Google Groups), Microsoft Office 365, and Zoom videoconferencing software.

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

Faculty in the PH department are expected to own computers or have frequent, regular access to a computer and a reliable internet connection. Minimum expectations are stated in each faculty member's employment contract. Faculty have free access to Google apps (which includes their University email, Google Drive, and Google Groups), Microsoft Office 365, and Zoom videoconferencing software. The department may also purchase additional software, including Adobe Pro and SPSS statistical software, as needs arise and budgets allow.

-
- technical assistance available for students and faculty
-

Information Technology Services' (ITS) helpdesk is available 24 hours a day, seven days a week, to students, faculty, and staff. The helpdesk staff assists with support for Canvas LMS and University technology, including email through Google. Tutorials are available for Canvas LMS and Google Apps software within ITS' web pages.

The majority of PH faculty are subject ATSU Policy No. 90-108 Remote Employee Policy, which outlines procedures for employees hired for off-campus, remote employment (ERF C5-1_ATSU_POLICY_NO._90-108_REMOTE_EMPLOYEE_POLICY.pdf).

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- 2) Provide narrative and/or data that support the assertion that information and technology resources are sufficient or not sufficient.
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Information and technology resources are sufficient. Students may purchase computers with financial aid. Faculty, students, and staff have access to select free software. All employees housed at the two campuses are supplied with computers. Faculty members are not currently provided computers, but University Faculty Senate is working on a proposal that could provide additional technology support for remote PH faculty.

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

Strengths

As part of a graduate health professions institution, the College/program has access to beneficial library resources, which are easily accessed by current students and alumni. The 24/7 helpdesk is also readily available to faculty and students. ATSU regularly provides continuing education related to technology, library resources, and information to students, staff, and faculty.

Weaknesses

None

Plans for improvement

None

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.

Template D1-1

Learning objectives	Describe how the SPH/PHP ensures grounding
Profession & science of public health	
1. Explain public health history, philosophy, and values.	PUBH 5000: Introduction to Public Health Concepts PUBH 5050: Introduction to Dental Public Health PUBH 5400: Professionalism and Ethics in Dental Public Health PUBH 7500: Development of Community-Based Programs PUBH 7600: Community-Based Programs - Development
2. Identify the core functions of public health and the 10 essential services.	PUBH 5000: Introduction to Public Health Concepts PUBH 5050: Introduction to Dental Public Health PUBH 6100: Identifying Community Health Needs
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health.	BIOS 7000: Biostatistics EPID 6100: Epidemiology RESH 5200: Fundamentals of Research in Public Health PUBH 5800: Community Health Informatics PUBH 6100: Identifying Community Health Needs PUBH 6500: Public Health Systems Policy and Management PUBH 7500: Development of Community-Based Programs PUBH 7600: Community-Based Programs - Development
4. List major causes and trends of morbidity and mortality in the U.S. or other community relevant to the school or program.	ENVR 6200: Environmental Health Sciences EPID 6100: Epidemiology PUBH 5850: Community Health and Social Media PUBH 6100: Identifying Community Health Needs PUBH 6500: Public Health Systems Policy and Management PUBH 6550: Dental Healthcare Policy and Management PUBH 6700: Public Health Policy and Politics PUBH 7500: Development of Community-Based Programs PUBH 7600: Community-Based Programs - Development SHMG 6000: Global Health Issues

<p>5. Discuss the science of primary, secondary, and tertiary prevention in population health, including health promotion, screening, etc.</p>	<p>BIOS 7000: Biostatistics ENVR 6200: Environmental Health Sciences EPID 6100: Epidemiology PUBH 5000: Introduction to Public Health Concepts PUBH 5050: Introduction to Dental Public Health PUBH 6100: Identifying Community Health Needs PUBH 7500: Development of Community-Based Programs PUBH 7600: Community-Based Programs - Development</p>
<p>6. Explain the critical importance of evidence in advancing public health knowledge.</p>	<p>BIOS 7000: Biostatistics ENVR 6200: Environmental Health Sciences EPID 6100: Epidemiology HLTH 6500: Behavior Sciences and Educational Concepts PUBH 5000: Introduction to Public Health Concepts PUBH 5050: Introduction to Dental Public Health PUBH 5800: Community Health Informatics PUBH 5850: Community Health and Social Media PUBH 6100: Identifying Community Health Needs PUBH 6500: Public Health Systems Policy and Management PUBH 6700: Public Health Policy and Politics PUBH 7500: Development of Community-Based Programs PUBH 7600: Community-Based Programs - Development RESH 5200: Fundamentals of Research in Public Health</p>
<p>Factors related to human health</p>	
<p>7. Explain effects of environmental factors on a population's health.</p>	<p>ENVR 6200: Environmental Health Sciences PUBH 5000: Introduction to Public Health Concepts PUBH 5050: Introduction to Dental Public Health PUBH 6100: Identifying Community Health Needs PUBH 6500: Public Health Systems Policy and Management PUBH 6700: Public Health Policy and Politics SHMG 6000: Global Health Issues</p>
<p>8. Explain biological and genetic factors that affect a population's health.</p>	<p>ENVR 6200: Environmental Health Sciences HLTH 6500: Behavior Sciences and Educational Concepts PUBH 5000: Introduction to Public Health Concepts PUBH 5050: Introduction to Dental Public Health PUBH 6100: Identifying Community Health Needs SHMG 6000: Global Health Issues</p>

9. Explain behavioral and psychological factors that affect a population's health.	ENVR 6200: Environmental Health Sciences HLTH 6500: Behavior Sciences and Educational Concepts PUBH 5000: Introduction to Public Health Concepts PUBH 5050: Introduction to Dental Public Health PUBH 6100: Identifying Community Health Needs PUBH 6500: Public Health Systems Policy and Management SHMG 6000: Global Health Issues
10. Explain the social, political, and economic determinants of health and how they contribute to population health and health inequities.	PUBH 5000: Introduction to Public Health Concepts PUBH 5050: Introduction to Dental Public Health PUBH 5500: Financing Dental Care PUBH 5850: Community Health and Social Media PUBH 6500: Public Health Systems Policy and Management PUBH 6550: Dental Healthcare Policy and Management PUBH 6700: Public Health Policy and Politics PUBH 7500: Development of Community-Based Programs PUBH 7600: Community-Based Programs - Development SHMG 6000: Global Health Issues
11. Explain how globalization affects global burdens of disease.	ENVR 6200: Environmental Health Sciences PUBH 5000: Introduction to Public Health Concepts PUBH 5050: Introduction to Dental Public Health PUBH 5500: Financing Dental Care SHMG 6000: Global Health Issues
12. Explain an ecological perspective on the connections among human health, animal health, and ecosystem health (e.g., One Health).	ENVR 6200: Environmental Health Sciences PUBH 5000: Introduction to Public Health Concepts PUBH 5050: Introduction to Dental Public Health SHMG 6000: Global Health Issues

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- 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.
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MPH course syllabi may be found in ERF D1-2_MPH_Syllabi.

- 3) If applicable, assessment of strengths and weaknesses related to this criterion and plans for improvement in this area.
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Strengths

None

Weaknesses

None

Plans for improvement

None

D2. MPH Foundational Competencies

The program documents at least one specific, required assessment activity (e.g., component of existing course, paper, presentation, test) for each competency, during which faculty or other qualified individuals (e.g., 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 (e.g., 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.
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Courses Required for All MPH Students

BIOS 7000	Biostatistics
ENVR 6200	Environmental Health Sciences
EPID 6100	Epidemiology
HLTH 6500	Behavior Sciences and Educational Concepts
PUBH 5300	Public Health Administration
PUBH 5850	Community Health and Social Media
RESH 5200	Fundamentals of Research in Public Health
SHMG 6000	Global Health Issues
PUBH 7800	Public Health Practicum

Courses Required for General MPH Only

PUBH 5000	Introduction to Public Health Concepts
PUBH 5800	Community Health Informatics
PUBH 6100	Identifying Community Health Needs
PUBH 6500	Public Health Systems Policy and Management
PUBH 6700	Public Health Policy and Politics
PUBH 7500	Community-Based Programs Development

Courses Required for Dental MPH Only

PUBH 5050	Introduction to Dental Public Health
PUBH 5400	Professionalism and Ethics in Dental Public Health
PUBH 5500	Financing Dental Care
PUBH 6550	Dental Healthcare Policy and Management
PUBH 7600	Community-Based Programs-Development
PUBH 7650	Community-Based Programs-Implementation and Evaluation

Links to ATSU Student Catalog:

MPH (general)

catalog.atsu.edu/preview_program.php?catoid=10&poid=252&returnto=327

MPH (dental emphasis)

catalog.atsu.edu/preview_program.php?catoid=10&poid=253&returnto=327

DPH residency

catalog.atsu.edu/preview_program.php?catoid=10&poid=254&returnto=327

- 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 (MPH – general)

Assessment of competencies for MPH (general)		
Competency	Course number(s)	Specific assessment opportunity
Evidence-based approaches to public health		
1. Apply epidemiological methods to the breadth of settings and situations in public health practice.	EPID6100: Epidemiology	M8 Case study paper Based upon the articles from CNN and NPR, apply epidemiological methods to the breadth of settings and situations found in public health practice. For each step, outline and describe in a few sentences what it involves and what needs to be considered.
2. Select quantitative and qualitative data collection methods appropriate for a given public health context.	EPID6100: Epidemiology	M4 Study design group discussion Perform effectively on your interprofessional team to develop a study to gather more information on a specific public health topic. Briefly state your topic and which data you would need to collect (1-2 sentences). Select quantitative and qualitative data collection methods appropriate for your given public health context. Provide feedback to your classmates on the study examples and chosen study designs. Be sure to do this for at least two classmates.
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming, and software, as appropriate.	BIOS7000: Biostatistics	M2-8 Homework problems In the M2-M8 Homework Problems and the M9 Data Analysis Project, analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate. Use the M4_Homework document to complete these homework problems. You may use SPSS but it is optional this week. If you do work out the problem by hand, please

		<p>scan the work and copy and paste in the word document that you submit.</p> <p>M9 Data analysis project In the M2-M8 Homework Problems and the M9 Data Analysis Project, analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate. This project will give you an opportunity to conduct a statistical analysis to address a public health topic (or dental public health topic) of interest to you using appropriate statistical methods covered in this course. You will present your findings to your peers in an 8-10 minute presentation. Your instructor provided you with the live presentation schedule (by Module 6), and you will use Zoom (www.zoom.us/) for delivering your presentation. Please download Zoom and become familiar with this communication tool prior to your scheduled presentation. Please see the Data Analysis Project document (available in the course) for detailed information on this project.</p>
<p>4. Interpret results of data analysis for public health research, policy, or practice.</p>	<p>BIOS7000: Biostatistics</p>	<p>M2 Health data blog Please go to the website wonder.cdc.gov/Welcome.html. Search for a topic related to your professional interests and experience. (If you are a dental MPH track student, please try to select a topic related to dentistry or oral health.) The results of this topic search will include an interactive data table, if it is available. Next, interpret these tables, graphs, and the charts on your topic and write a 250-word blog post that addresses the following prompts: What was the topic you selected, and why did you select this topic? Is it a public health concern? (2-3 sentences)</p> <ol style="list-style-type: none"> 1. Interpret the results of the data analysis for public health research, policy, or practice: 2. Clearly state which data table was used (e.g., mental health, serious psychological distress, ages 18 + US, 1997-2011 [Source: NHIS]) <ul style="list-style-type: none"> • Identify the types of variables and measurement scales that were used in the table. Please make sure you define them. • Describe the types of descriptive statistics that were used to summarize the findings on your topic. • State your findings. 3. What is the best way to graphically present your findings and why? You will need to make your initial post before you can see the posts of others. Feel free to read and comment on the blogs posted by your peers, but keep in mind that your grade for this assignment is based on your blog post--not comments to your peers. References required: total of 2 - 1 can be textbook.

	<p>ENVR6200: Environmental Health Sciences</p>	<p>M4 Blowing in the wind discussion In your initial post create a dual y-axis graph illustrating the impact of a specific aspect of air quality on a specific aspect of health. This can be positive and negative. The comment associated with the graph should describe what is being presented and identify the air quality aspect and the health outcome. However, it should not describe the air quality aspect or the health outcome. For example, this comment should describe the population being represented, the time period, the x-axis, the left y-axis, and the right y-axis. This comment will provide the foundation for others to describe the prevalence of the air quality aspect and the health outcome. To do this, review Christopher Vejil's videos on making dual y-axis graphs. As part of your three response posts, expand on the postings of two of your peers by interpreting the results of the data analysis. The first post should review the air quality aspect in approximately 150 words and introduce the prevalence of the aspect, and if the issue is a biological, chemical, or physical issue. The second post should describe the toxicokinetics and significance of their health outcome. In approximately 150 words review this health concern. For both of these posts indicate targets associated with Healthy People 2020. Be sure to provide references for the principle points you are making.</p>
Public health & healthcare systems		
<p>5. Compare the organization, structure and function of health care, public health, and regulatory systems across national and international settings.</p>	<p>PUBH 5000: Introduction to Public Health Concepts</p>	<p>M7 Levels of public health presentation Create a five-minute presentation comparing the organization, structure, and function of health care, public health, and regulatory systems across local, state, national, and international settings. What is the role of non-governmental organizations at these different levels? Be sure to refer to the Learning Activities in creating content for your presentation, but also seek out additional materials online from appropriate sources. Create the visual components of your presentation using PowerPoint (or a similar presentation software); you will submit this to your instructor. You will use Zoom (which is connected to your ATSU email) to deliver your presentation.</p>
<p>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.</p>	<p>PUBH6700: Public Health Policy and Politics</p>	<p>M1 Importance of citizenship discussion After reviewing the Newt Gingrich and Justice Breyer videos in the learning activities, post a 100- to 150-word descriptive question you would like to ask either of them regarding the implications on health of the Dred Scott Decision, the Emancipation Proclamation, or the 13th, 14th, or 15th Amendments to the U.S. Constitution. Start your question by identifying the person you are addressing (Gingrich or Breyer).</p>

		<p>In response to your peers' initial posts, classify their questions as either a "gotcha question" or a "critical thought" question. "Gotcha" questions try to elicit a specific response or illustrate a fault in a line of reasoning. Critical thought questions indicate an honest attempt to learn more. Once this has been answered, move on to answering at least one of your peers' questions with a well-reasoned and supported response.</p>
Planning & Management to Promote Health		
<p>7. Assess population needs, assets, and capacities that affect communities' health.</p>	<p>PUBH 6100: Identifying Community Health Needs</p>	<p>M9 Johnson County Community Health Assessment Plan For the duration of this course, you will be working to create a community health assessment plan that assesses the population's needs, assets, and capacities that affect communities' health for Johnson County, Missouri. You will gather the information from a variety of sources, particularly online sources and websites. You will be working on the various components of a community health assessment throughout the course. Using the document entries you've created throughout the course, complete your own community health assessment. Your final project will have two parts:</p> <p>Johnson County CHA Plan Written Document (250 points) For Johnson County, Missouri, please address the following issues in six to eight pages:</p> <ol style="list-style-type: none"> 1. Write an Executive Summary that briefly provides an overview and description of the community. The summary should include the health, social, and environmental issues and resources found during the assessment. The Executive Summary should be brief enough so it can be easily reproduced for distribution to key individuals and groups in the community but long enough to present the important information clearly. Emphasize health priorities and emerging issues and the information that supports them. The Executive Summary is very important as this may be the only part of the document that many people read. 2. Provide a brief community description that includes the geographic, historical, and demographic population. 3. State the health data collection process and the health assessment format used. 4. Provide the health data results, be sure to include data sources including date data was collected/reported. Use trend data, graphs, charts, or other visual displays. 5. Describe the asset mapping used and the results of your process. 6. Summarize the analysis of the data that describes the strategic priority issues for

		<p>your community. Include how your community selected their priority issues.</p> <p>7. Describe how you will disseminate your community health assessment to key stakeholders in your community, including the use of social media.</p> <p>Johnson County CHA Plan PowerPoint Presentation (250 points) Create a PowerPoint Presentation that graphically presents the key findings in your community health assessment. You should include between 10 and 15 slides that address the following points, at a minimum:</p> <ol style="list-style-type: none"> 1. Title slide 2. Outline 3. Description of community of interest 4. Identification of stakeholders 5. Description of the type of assessment process used 6. Key primary and secondary data including key research questions 7. Analysis of the data 8. Implications of the findings 9. Conclusion and next steps <p>Be sure to include in the Notes for each slide, the narrative that the speaker would be using to present the information to the stakeholders. This will keep your slides from becoming too text-heavy.</p>
<p>8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs.</p>	<p>PUBH 7500: Development of Community-Based Programs</p>	<p>M9 Program PowerPoint presentation You will develop a 10-12 slide PowerPoint presentation on your proposed project. The instructor will break you into groups and you will give these presentations to your peers over a web-based tool. In your PowerPoint, you will apply awareness of cultural values and practices to the design of your public health program. Communicate audience-appropriate public health content, both in writing in your M10 Final Paper and through your oral presentation. Your presentation should not exceed 10 minutes.</p>
<p>9. Design a population-based policy, program, project, or intervention.</p>	<p>PUBH 7500: Development of Community-Based Programs</p>	<p>M10 Final plan paper This week you will finalize your design of a population-based policy, program, project, or intervention. Your paper should not be a "cut and paste" of previous submissions, but should be a comprehensive plan and should contain the following sections:</p> <ol style="list-style-type: none"> 1. Abstract 2. Introduction to the problem and statement of need 3. Comprehensive Review of the Literature (Projects are evidence based and must be adequately supported by the literature.) 4. Description of the Project/Plan (This section includes goals and objectives, strategies, partners, resources, funding and budgets.) 5. Evaluation Plan 6. Barriers to Success

		<p>7. Conclusion of Plan (including a timeline of implementation)</p> <p>8. Appendices as necessary</p> <p>This 5-page paper should follow APA guidelines.</p>
10. Explain basic principles and tools of budget and resource management.	PUBH 7500: Development of Community-Based Programs	<p>M7 Potential funding paper</p> <p>Identify three sources of potential funding for community-based research; this need not be related to your current project, but about public health research.</p> <p>Briefly summarize the sources including their focus, eligible applicants, funds available, funding cycles, and technical assistance available (if noted). Explain the basic principles and tools of budget and resource management.</p> <p>NOTE: If you think public health research could be funded under these programs as a stand-alone proposal or incorporated into a broader proposal, explain how.</p> <p>This 2-page paper should follow APA guidelines.</p>
11. Select methods to evaluate public health programs.	PUBH 7500: Development of Community-Based Programs	<p>M8 Evaluations paper</p> <p>Select and develop a method to evaluate processes and outcomes for your public health program. You should have a minimum of two detailed process evaluations. For the outcome evaluation section, provide a detailed description of at least one of your ideas. You should explain in general terms at least two more outcome evaluations.</p> <p>The introduction to your paper should provide a short overview of the project/plan.</p> <p>This 2-3 page paper should follow APA guidelines.</p>
Policy in public health		
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence.	PUBH 6700: Public Health Policy and Politics	<p>M8 Policy cycle PowerPoint assignment</p> <p>Develop a PowerPoint (or other slide-generating software) presentation illustrating and mapping out policies pertaining to your assigned determinant of health. This should include the multiple dimensions of the policy-making process, including the roles of ethics and evidence. Be sure to include a history of formulation, implementation, modifications, and evaluations from the legislative, executive, and judicial branches of government. Appendices 1 and 9 are an example of material that should be covered if your policy was Medicare. This information would be included in the notes section of your slides.</p> <p>On the slides, you should present key points and events. You should also illustrate relationships. Do not overload your slides with text. Your presentation should be 8-10 slides, not including title and reference slides.</p>
13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.	PUBH 7500: Development of Community-Based Programs	<p>M5 Partners paper</p> <p>Write a two-page paper identifying at least three potential partners and describing how each partner may contribute to the project or program.</p>

		Describe the location or facility and logistically how it will be able to accommodate the project or program. Include a one-page letter from a partner showing commitment to your project and describing how that partner will participate. Your paper should be written following current APA style guidelines.
14. Advocate for political, social, or economic policies and programs that will improve health in diverse populations.	PUBH 6700: Public Health Policy and Politics	<p>M2 Gun control position discussion</p> <p>Using the ASTDD definition of a policy statement, provide a policy statement on any gun control issue from one of the suppliers, demanders, or providers associated with the issue. You should cut and paste these policy statements from the stakeholder organizations with proper referencing and quotations. This should be done with full references, a link to the original document, and a 75- to 125-word summary of the policy statement. In your responses to policy statements included in your peers' initial posts, develop a policy resolution (100-150 words) to advocate for political, social, or economic policies and programs that would improve the health of diverse populations and that would be acceptable to the majority of the positions represented in this discussion. Include a list of organizations you are representing in your policy resolution.</p> <p>When you are reviewing your peers' resolutions, indicate if you think the organization you introduced into the discussion would sign onto their policy resolution.</p>
15. Evaluate policies for impact on public health and health equity.	PUBH 6700: Public Health Policy and Politics	<p>M5 Access to healthcare discussion</p> <p>In "How the 'pox' epidemic changed vaccination rules," Michael Willrich presents an interesting perspective on the use of subject matter experts as tools of the state. The discussion of Jacobson v Massachusetts also illustrates how rulemaking and the implementation of policy play an important part in outcomes.</p> <p>For this discussion, post a well-constructed "gotcha" question (see discussion in Module 1 for explanation) intended to address the coercive and unregulated nature of vaccinations from 1880 to 1905. This could include questions about vaccination raids, the requirement to be vaccinated in order to travel, the self-fulfilling prophecy of racial profiling in diseases as described by Willrich, and/or the use of public health authorities as agents of the state.</p> <p>In two of your response posts, provide a rebuttal to two of your peers' questions. Evaluate these policies for their impact on public health and health equity. Be sure to include some of the key points from Chapter 5 in your textbook.</p>

Leadership		
16. Apply principles of leadership, governance, and management, which include creating a vision, empowering others, fostering collaboration, and guiding decision-making.	PUBH5300: Public Health Administration	<p>M3 AIDS outbreak leadership paper Evaluate how leadership, ethics, and conflict management played into the effects of the AIDS outbreak on the U.S. blood supply and donations. What leadership styles were evident in the resources you found? This paper should be 3-4 pages, not including title and reference pages, and should be formatted according to current APA guidelines. You may use sources from the learning activities, but you must use at least one reference not included in this course.</p>
17. Apply negotiation and mediation skills to address organizational or community challenges.	PUBH5300: Public Health Administration	<p>M5 Flourtown Farms negotiation case Based upon the role your instructor assigned to you in Module 4, work through the Flourtown Farms Exercise. You and your partner will perform the negotiation either through a discussion forum or a synchronous chat (with the text copied and pasted into a Word document and submitted by both students). Work to secure yourself the best deal possible in your negotiation scenario.</p>
Communication		
18. Select communication strategies for different audiences and sectors.	PUBH5300: Public Health Administration	<p>M7 Professional development wiki – communication This week's resources should focus on the selection of strategies for different audiences and sectors for communication of public health information. Your contribution should be approximately 250 words.</p>
19. Communicate audience-appropriate public health content, both in writing and through oral presentation.	PUBH 7500: Development of Community-Based Programs	<p>M9 Program PowerPoint presentation You will develop a 10-12 slide PowerPoint presentation on your proposed project. The instructor will break you into groups and you will give these presentations to your peers over a web-based tool. In your PowerPoint, you will apply awareness of cultural values and practices to the design of your public health program. Communicate audience-appropriate public health content, both in writing in your M10 Final Paper and through your oral presentation. Your presentation should not exceed 10 minutes.</p>
20. Describe the importance of cultural competence in communicating public health content.	HLTH 6500: Behavior Sciences and Health Education Concepts	<p>M3 Health Communications Examples Discussion Choose a print or online example of health communication that targets a specific group defined by ethnicity, sexual orientation, age, geography, language, etc. This "communication" should be different than the one used for the Module 2 discussion. For this assignment, do not use a video. Please attach or include a link to this communication. Briefly critique the communication in terms of cultural appropriateness, and describe the importance of cultural competence in communicating the public health content. What do you find to be successful, and what might be improved? In</p>

		<p>your response posts, discuss how you might adapt the topic and message of your classmates' examples for another target audience. For example, if a classmate's initial post is information on the importance of monthly breast self-exams and annual mammograms for African-American women, how might you adapt this message for rural, migrant, farm workers? If an initial post is on how veterans can access mental health services, how might you adapt this for urban adolescents? In your recommendations for adaptation to another target audience, what kinds of modifications might you make in terms of language, illustrations, guidelines for accessing care (e.g., change of mammogram venue from a fixed clinic to a mobile mammogram service).</p>
Interprofessional practice		
<p>21. Perform effectively on interprofessional teams.</p>	<p>EPID6100: Epidemiology</p>	<p>M4 Study design group discussion Perform effectively on your interprofessional team to develop a study to gather more information on a specific public health topic. Briefly state your topic and which data you would need to collect (1-2 sentences). Select quantitative and qualitative data collection methods appropriate for your given public health context. Provide feedback to your classmates on the study examples and chosen study designs. Be sure to do this for at least two classmates.</p>
Systems thinking		
<p>22. Apply systems thinking tools to a public health issue.</p>	<p>PUBH 6500: Public Health Systems Policy and Management</p>	<p>M9 Occupation Brief and Presentation Create a 5-minute presentation on the state of your occupation as if you were preparing to testify in front of a legislative subcommittee. Review your notes on the Module 1 Energy and Commerce Democrats video for guidance. Apply systems thinking tools to your public health issue to illustrate the connections of all of the parts generated in your group discussions in Modules 4-7. You will each create your own presentation. In addition to submitting it to your instructor here, you should also share it with the members of your Occupational Presentation group. You will select one of your group members' presentations as the basis for your M9 Group Subcommittee Brief.</p>

Template D2-2 (MPH – dental)

Assessment of competencies for MPH (dental)		
Competency	Course number(s)	Specific assessment opportunity
Evidence-based approaches to public health		
1. Apply epidemiological methods to the breadth of settings and situations in public health practice.	EPID6100: Epidemiology	<p>M8 Case study paper Based upon the articles from CNN and NPR, apply epidemiological methods to the breadth of settings and situations found in public health practice. For each step, outline and describe in a few sentences what it involves and what needs to be considered.</p>
2. Select quantitative and qualitative data collection methods appropriate for a given public health context.	EPID6100: Epidemiology	<p>M4 Study design group discussion Perform effectively on your interprofessional team to develop a study to gather more information on a specific public health topic. Briefly state your topic and which data you would need to collect (1-2 sentences). Select quantitative and qualitative data collection methods appropriate for your given public health context. Provide feedback to your classmates on the study examples and chosen study designs. Be sure to do this for at least two classmates.</p>
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming, and software, as appropriate.	BIOS7000: Biostatistics	<p>M2-8 Homework problems In the M2-M8 Homework Problems and the M9 Data Analysis Project, analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate. Use the M4_Homework document to complete these homework problems. You may use SPSS but it is optional this week. If you do work out the problem by hand, please scan the work and copy and paste in the word document that you submit.</p> <p>M9 Data analysis project In the M2-M8 Homework Problems and the M9 Data Analysis Project, analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate. This project will give you an opportunity to conduct a statistical analysis to address a public health topic (or dental public health topic) of interest to you using appropriate statistical methods covered in this course. You will present your findings to your peers in an 8-10 minute presentation. Your instructor provided you with the live presentation schedule (by Module 6), and you will use Zoom (www.zoom.us/) for delivering your presentation. Please download Zoom and become familiar with this communication tool prior to your scheduled presentation. Please see the Data Analysis Project document (available in the course) for detailed information on this project.</p>

<p>4. Interpret results of data analysis for public health research, policy, or practice.</p>	<p>BIOS7000: Biostatistics</p>	<p>M2 Health data blog Please go to the website wonder.cdc.gov/Welcome.html. Search for a topic related to your professional interests and experience. (If you are a dental MPH track student, please try to select a topic related to dentistry or oral health.) The results of this topic search will include an interactive data table, if it is available. Next, interpret these tables, graphs, and the charts on your topic and write a 250-word blog post that addresses the following prompts: What was the topic you selected, and why did you select this topic? Is it a public health concern? (2-3 sentences)</p> <ol style="list-style-type: none"> 1. Interpret the results of the data analysis for public health research, policy, or practice: 2. Clearly state which data table was used (e.g., mental health, serious psychological distress, ages 18 + US, 1997-2011 [Source: NHIS]) <ul style="list-style-type: none"> • Identify the types of variables and measurement scales that were used in the table. Please make sure you define them. • Describe the types of descriptive statistics that were used to summarize the findings on your topic. • State your findings. 3. What is the best way to graphically present your findings and why? <p>You will need to make your initial post before you can see the posts of others. Feel free to read and comment on the blogs posted by your peers, but keep in mind that your grade for this assignment is based on your blog post--not comments to your peers. References required: total of 2 - 1 can be textbook.</p>
	<p>ENVR6200: Environmental Health Sciences</p>	<p>M4 Blowing in the wind discussion In your initial post create a dual y-axis graph illustrating the impact of a specific aspect of air quality on a specific aspect of health. This can be positive and negative. The comment associated with the graph should describe what is being presented and identify the air quality aspect and the health outcome. However, it should not describe the air quality aspect or the health outcome. For example, this comment should describe the population being represented, the time period, the x-axis, the left y-axis, and the right y-axis. This comment will provide the foundation for others to describe the prevalence of the air quality aspect and the health outcome. To do this, review Christopher Vejjil's videos on making dual y-axis graphs. As part of your three response posts, expand on the postings of two of your peers by interpreting the results of the data analysis. The first post should review the air quality aspect in approximately 150 words and introduce the prevalence of the aspect, and if the issue is a</p>

		biological, chemical, or physical issue. The second post should describe the toxicokinetics and significance of their health outcome. In approximately 150 words review this health concern. For both of these posts indicate targets associated with Healthy People 2020. Be sure to provide references for the principle points you are making.
Public health & healthcare systems		
5. Compare the organization, structure, and function of health care, public health, and regulatory systems across national and international settings.	PUBH 5050: Introduction to Dental Public Health	M7 Levels of public health presentation Create a five-minute presentation comparing the organization, structure, and function of health care, public health, and regulatory systems across local, state, national, and international settings. What is the role of non-governmental organizations at these different levels? Be sure to refer to the Learning Activities in creating content for your presentation, but also seek out additional materials online from appropriate sources. Create the visual components of your presentation using PowerPoint (or a similar presentation software); you will submit this to your instructor. You will use Zoom (which is connected to your ATSU email) to deliver your presentation.
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.	PUBH6700: Public Health Policy and Politics	M1 Importance of citizenship discussion After reviewing the Newt Gingrich and Justice Breyer videos in the learning activities, post a 100- to 150-word descriptive question you would like to ask either of them regarding the implications on health of the Dred Scott Decision, the Emancipation Proclamation, or the 13th, 14th, or 15th Amendments to the U.S. Constitution. Start your question by identifying the person you are addressing (Gingrich or Breyer). In response to your peers' initial posts, classify their questions as either a "gotcha question" or a "critical thought" question. "Gotcha" questions try to elicit a specific response or illustrate a fault in a line of reasoning. Critical thought questions indicate an honest attempt to learn more. Once this has been answered, move on to answering at least one of your peers' questions with a well-reasoned and supported response.
Planning & Management to Promote Health		
7. Assess population needs, assets, and capacities that affect communities' health.	PUBH 6100: Identifying Community Health Needs	M9 Johnson County Community Health Assessment Plan For the duration of this course, you will be working to create a community health assessment plan that assesses the population's needs, assets, and capacities that affect communities' health for Johnson County, Missouri. You will gather the information from a variety of sources, particularly online sources and websites. You will be working on the various components of a community health

		<p>assessment throughout the course. Using the document entries you've created throughout the course, complete your own community health assessment. Your final project will have two parts:</p> <p>Johnson County CHA Plan Written Document (250 points)</p> <p>For Johnson County, Missouri, please address the following issues in six to eight pages:</p> <ol style="list-style-type: none"> 1. Write an Executive Summary that briefly provides an overview and description of the community. The summary should include the health, social, and environmental issues and resources found during the assessment. The Executive Summary should be brief enough so it can be easily reproduced for distribution to key individuals and groups in the community but long enough to present the important information clearly. Emphasize health priorities and emerging issues and the information that supports them. The Executive Summary is very important as this may be the only part of the document that many people read. 2. Provide a brief community description that includes the geographic, historical, and demographic population. 3. State the health data collection process and the health assessment format used. 4. Provide the health data results, be sure to include data sources including date data was collected/reported. Use trend data, graphs, charts, or other visual displays. 5. Describe the asset mapping used and the results of your process. 6. Summarize the analysis of the data that describes the strategic priority issues for your community. Include how your community selected their priority issues. 7. Describe how you will disseminate your community health assessment to key stakeholders in your community, including the use of social media. <p>Johnson County CHA Plan PowerPoint Presentation (250 points)</p> <p>Create a PowerPoint Presentation that graphically presents the key findings in your community health assessment. You should include between 10 and 15 slides that address the following points, at a minimum:</p> <ol style="list-style-type: none"> 1. Title slide 2. Outline 3. Description of community of interest 4. Identification of stakeholders 5. Description of the type of assessment process used 6. Key primary and secondary data including key research questions 7. Analysis of the data 8. Implications of the findings 9. Conclusion and next steps
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		Be sure to include in the Notes for each slide, the narrative that the speaker would be using to present the information to the stakeholders. This will keep your slides from becoming too text-heavy.
8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs.	PUBH7600: Community-Based Programs - Development	M9 Program PowerPoint presentation You will develop a 10-12 slide PowerPoint presentation on your proposed project. The instructor will break you into groups and you will give these presentations to your peers over a web-based tool. In your PowerPoint, you will apply awareness of cultural values and practices to the design of your public health program. Communicate audience-appropriate public health content, both in writing in your M10 Final Paper and through your oral presentation. Your presentation should not exceed 10 minutes.
9. Design a population-based policy, program, project, or intervention.	PUBH 7600: Community-Based Programs - Development	M10 Final plan paper This week you will finalize your design of a population-based policy, program, project, or intervention. Your paper should not be a "cut and paste" of previous submissions, but should be a comprehensive plan and should contain the following sections: <ol style="list-style-type: none"> 1. Abstract 2. Introduction to the problem and statement of need 3. Comprehensive Review of the Literature (Projects are evidence based and must be adequately supported by the literature.) 4. Description of the Project/Plan (This section includes goals and objectives, strategies, partners, resources, funding and budgets.) 5. Evaluation Plan 6. Barriers to Success 7. Conclusion of Plan (including a timeline of implementation) 8. Appendices as necessary This 5-page paper should follow APA guidelines.
10. Explain basic principles and tools of budget and resource management.	PUBH 7600: Community-Based Programs - Development	M7 Potential funding paper Identify three sources of potential funding for community-based research; this need not be related to your current project, but about public health research. Briefly summarize the sources including their focus, eligible applicants, funds available, funding cycles, and technical assistance available (if noted). Explain the basic principles and tools of budget and resource management. NOTE: If you think public health research could be funded under these programs as a stand-alone proposal or incorporated into a broader proposal, explain how. This 2-page paper should follow APA guidelines. M7 Funding examples discussion Give two examples of each of the following:

		<ol style="list-style-type: none"> 1. Government funding sources for oral health programs. 2. Private funding for oral health programs. <p>Tell which type of funding you think you are more likely to use in your current community oral health program or project and why.</p>
11. Select methods to evaluate public health programs.	PUBH 7600: Community-Based Programs - Development	<p>M8 Evaluations paper Select and develop methods to evaluate processes and outcomes for your public health program. The introduction to the paper should provide a good overview of the project/plan. You should have a minimum of three process evaluations. Please give maximum detail about the process evaluation plan. For the outcome evaluation section, please provide a detailed description of at least one of your ideas. You should explain in general at least two more outcome evaluations. You need to identify all process and outcome measures. This 2-3 page paper should follow APA guidelines.</p>
Policy in public health		
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence.	PUBH 6700: Public Health Policy and Politics	<p>M8 Policy cycle PowerPoint assignment Develop a PowerPoint (or other slide-generating software) presentation illustrating and mapping out policies pertaining to your assigned determinant of health. This should include the multiple dimensions of the policy-making process, including the roles of ethics and evidence. Be sure to include a history of formulation, implementation, modifications, and evaluations from the legislative, executive, and judicial branches of government. Appendices 1 and 9 are an example of material that should be covered if your policy was Medicare. This information would be included in the notes section of your slides. On the slides, you should present key points and events. You should also illustrate relationships. Do not overload your slides with text. Your presentation should be 8-10 slides, not including title and reference slides.</p>
13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.	PUBH 7600: Community-Based Programs - Development	<p>M5 Partners paper Write a two-page paper identifying at least three potential partners and describing how each partner may contribute to the project or program. Describe the location or facility and logistically how it will be able to accommodate the project or program. Include a one-page letter from a partner showing commitment to your project and describing how that partner will participate. Your paper should be written following current APA style guidelines.</p>
14. Advocate for political, social, or economic policies and programs that will improve health in diverse populations.	PUBH 6700: Public Health Policy and Politics	<p>M2 Gun control position discussion Using the ASTDD definition of a policy statement, provide a policy statement on any gun control issue from one of the suppliers,</p>

		<p>demanders, or providers associated with the issue. You should cut and paste these policy statements from the stakeholder organizations with proper referencing and quotations. This should be done with full references, a link to the original document, and a 75- to 125-word summary of the policy statement. In your responses to policy statements included in your peers' initial posts, develop a policy resolution (100-150 words) to advocate for political, social, or economic policies and programs that would improve the health of diverse populations and that would be acceptable to the majority of the positions represented in this discussion. Include a list of organizations you are representing in your policy resolution.</p> <p>When you are reviewing your peers' resolutions, indicate if you think the organization you introduced into the discussion would sign onto their policy resolution.</p>
<p>15. Evaluate policies for impact on public health and health equity.</p>	<p>PUBH 6700: Public Health Policy and Politics</p>	<p>M5 Access to healthcare discussion</p> <p>In "How the 'pox' epidemic changed vaccination rules," Michael Willrich presents an interesting perspective on the use of subject matter experts as tools of the state. The discussion of Jacobson v Massachusetts also illustrates how rulemaking and the implementation of policy play an important part in outcomes.</p> <p>For this discussion, post a well-constructed "gotcha" question (see discussion in Module 1 for explanation) intended to address the coercive and unregulated nature of vaccinations from 1880 to 1905. This could include questions about vaccination raids, the requirement to be vaccinated in order to travel, the self-fulfilling prophecy of racial profiling in diseases as described by Willrich, and/or the use of public health authorities as agents of the state.</p> <p>In two of your response posts, provide a rebuttal to two of your peers' questions. Evaluate these policies for their impact on public health and health equity. Be sure to include some of the key points from Chapter 5 in your textbook.</p>
Leadership		
<p>16. Apply principles of leadership, governance, and management, which include creating a vision, empowering others, fostering collaboration, and guiding decision-making.</p>	<p>PUBH5300: Public Health Administration</p>	<p>M3 AIDS outbreak leadership paper</p> <p>Evaluate how leadership, ethics, and conflict management played into the effects of the AIDS outbreak on the U.S. blood supply and donations. What leadership styles were evident in the resources you found?</p> <p>This paper should be 3-4 pages, not including title and reference pages, and should be formatted according to current APA guidelines. You may use sources from the learning activities, but you must use at least one reference not included in this course.</p>

<p>17. Apply negotiation and mediation skills to address organizational or community challenges.</p>	<p>PUBH5300: Public Health Administration</p>	<p>M5 Flourtown Farms negotiation case Based upon the role your instructor assigned to you in Module 4, work through the Flourtown Farms Exercise. You and your partner will perform the negotiation either through a discussion forum or a synchronous chat (with the text copied and pasted into a Word document and submitted by both students). Work to secure yourself the best deal possible in your negotiation scenario.</p>
<p>Communication</p>		
<p>18. Select communication strategies for different audiences and sectors.</p>	<p>PUBH5300: Public Health Administration</p>	<p>M7 Professional development wiki – communication This week's resources should focus on the selection of strategies for different audiences and sectors for communication of public health information. Your contribution should be approximately 250 words.</p>
<p>19. Communicate audience-appropriate public health content, both in writing and through oral presentation.</p>	<p>PUBH7600: Community-Based Programs - Development</p>	<p>M9 Program PowerPoint presentation Please submit a PowerPoint presentation slide deck (with notes explaining each slide) of your program to date. Assume that you are presenting this as a program update to the course instructor. The PowerPoint presentation should be 10-15 slides long. In your PowerPoint, you will apply awareness of cultural values and practices to the design of your public health program. This presentation should communicate audience-appropriate public health content. Be professional and creative!</p>
<p>20. Describe the importance of cultural competence in communicating public health content.</p>	<p>HLTH 6500: Behavior Sciences and Health Education Concepts</p>	<p>M3 Health Communications Examples Discussion Choose a print or online example of health communication that targets a specific group defined by ethnicity, sexual orientation, age, geography, language, etc. This "communication" should be different than the one used for the Module 2 discussion. For this assignment, do not use a video. Please attach or include a link to this communication. Briefly critique the communication in terms of cultural appropriateness, and describe the importance of cultural competence in communicating the public health content. What do you find to be successful, and what might be improved? In your response posts, discuss how you might adapt the topic and message of your classmates' examples for another target audience. For example, if a classmate's initial post is information on the importance of monthly breast self-exams and annual mammograms for African-American women, how might you adapt this message for rural, migrant, farm workers? If an initial post is on how veterans can access mental health services, how might you adapt this for urban adolescents? In your recommendations for adaptation to another target audience, what kinds of modifications might you make in terms</p>

		of language, illustrations, guidelines for accessing care (e.g., change of mammogram venue from a fixed clinic to a mobile mammogram service).
Interprofessional practice		
21. Perform effectively on interprofessional teams.	EPID6100: Epidemiology	M4 Study design group discussion Perform effectively on your interprofessional team to develop a study to gather more information on a specific public health topic. Briefly state your topic and which data you would need to collect (1-2 sentences). Select quantitative and qualitative data collection methods appropriate for your given public health context. Provide feedback to your classmates on the study examples and chosen study designs. Be sure to do this for at least two classmates.
Systems thinking		
22. Apply systems thinking tools to a public health issue.	PUBH 6550: Dental Healthcare Policy and Management	Module 2: Oral Healthcare Systems in the U.S. & Abroad Table Apply systems thinking tools to compare the U.S. oral healthcare system to the oral healthcare system in a country of your choice. Create a table to summarize your findings. Address the following questions: Where are oral health services provided? <ul style="list-style-type: none"> • Who delivers oral health services? • Does everyone have equal access to oral healthcare services? • How is the oral health workforce educated and trained? • How is the oral health workforce regulated? This table should be approximately 2 pages, not including title and references pages. Although you are creating a table, remember to properly cite your information using APA format.

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.

MPH course syllabi may be found in ERF D1-2_MPH_Syllabi.

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

Strengths

ATSU-CGHS' data system (IRMA) allows for easy display of competencies within each course. Using QM rubrics to build courses enables the program to ensure learning objectives, learning activities, and competencies align (as described in more detail in Criterion E3-3).

Weaknesses

None

Plans for Improvement

None

D3. DrPH Foundational Competencies

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

Not applicable.

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 (e.g., preceptors) validate the student's ability to perform the competency.

If the program intends to prepare students for a specific credential (e.g., 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 D4-1

Assessment of competencies for MPH (general)		
Competency	Course number(s) and name(s)	Describe specific assessment opportunity
1. Analyze significance of public health journal articles.	RESH5200: Fundamentals of Research in Public Health	<p>M2 Annotated bibliography Determine a public health problem or topic that is of interest to you. This topic will be used throughout this course and in writing the culminating research proposal. If you have questions, please contact your instructor. Conduct a PubMed search (not a Google search) to find five quality, recent, peer-reviewed articles for your review. Using the guides.library.cornell.edu/annotatedbibliography, prepare an annotated bibliography of these five research articles (one page per article). Each annotation should include a full citation and a summary of the main points and purpose of the work, including:</p> <ul style="list-style-type: none"> • Evaluation of the authority, or background of the author (1-2 sentences) • Purpose of the study (1 sentence) • Study design (1 sentence) • Description of methods--including a description of the study subjects and methods for data collection (3-5 sentences) • Main results and conclusions (2-5 sentences) <p>At the end of each annotated bibliography entry, assess and analyze the significance of public health journal articles to your topic. Discuss how this work will be useful for your own research proposal, and discuss any limitations of the article. These articles will be used in the next module of this course to draft a literature review for your research proposal.</p>

<p>2. Use theory, principles, and perspectives to analyze ethical dimensions of public health problems.</p>	<p>SHMG6000: Global Health Issues</p>	<p>M3 Global health ethics paper Examine the ethics of one of the issues below, and take a stand on the issue:</p> <ol style="list-style-type: none"> 1. Dumping of electronic waste in less developed countries. 2. Counterfeit pharmaceuticals. 3. Selective abortion of female fetuses. 4. Another topic of your choice related to global health. <p>Please email your instructor by Wednesday with your choice of topic. Use ethical theories, principles and perspectives to analyze the dimensions of public health problems, then justify your position. Support your statements with at least two extra references from accredited sources.</p>
<p>3. Apply health behavior models to address public health problems.</p>	<p>HLTH6500: Behavior Sciences and Health Education Concepts</p>	<p>M8: Policy proposal letter This week you will apply your knowledge of health behavior models to address needs in a priority population. Compose a 1-2 page letter to a local representative advocating for health policy in support of one of the following goals:</p> <ul style="list-style-type: none"> • Preventing smokeless tobacco among middle and high school students • Smoking cessation for pregnant women • Alcohol counseling and treatment after first DUI (driving under the influence) offense • Primary prevention of alcohol misuse among college undergraduates <p>Provide background information to describe the need for this health policy change. Include a description of relevant statistics, morbidity/mortality rates, and health equity concerns. Base your proposed policy change on one of the health behavior theories discussed so far in this course.</p>
<p>4. Demonstrate approaches to assess, prevent, and control environmental and/or occupational health hazards.</p>	<p>PUBH6500: Public Health Systems Policy and Management</p>	<p>M6 Hazards Discussion Using your assigned occupational area, demonstrate approaches to assess, prevent, and control environmental and occupational health hazards by discussing if professional oversight leads to workplace safety. In response to your peers, use case examples to illustrate how leadership style, quality management, and quality improvement impact workplace safety in their occupational areas. Please respond to a classmate from another group.</p>
<p>5. Evaluate organizational structures, culture, and political factors to initiate and sustain organizational change.</p>	<p>SHMG6000: Global Health Issues</p>	<p>M10 Communicable diseases discussion Evaluate organizational structures, culture, and political factors to initiate and sustain organizational change. What factors enabled success in the campaign to fight river blindness? What can you take away from this and apply to address HIV/AIDS, tuberculosis, or malaria? In your responses to others, please respond to diseases that you did not address in your main post.</p>

Template D4-1

Assessment of competencies for MPH (dental)		
Competency	Course number(s) and name(s)	Describe specific assessment opportunity
1. Integrate social determinants of health into dental public health practice.	PUBH5050: Introduction to Dental Public Health	M6 Health disparities discussion Integrate the social determinants of health into dental public health practice. Identify a culturally and/or economically disparate group in your area. What are the oral health disparities that affect this group? What are the social justice issues that affect this group? What other social determinants impact this group and as an oral health provider, how would you best address these? Think beyond the most frequently identified problems (i.e., African-Americans and infant mortality, Hispanics and obesity, Native Americans and diabetes). Consider variables such as violence, workforce safety, depression, alcohol and other substance misuse, tobacco use, breast and prostate cancer, occupation-related injuries and illnesses, accidents and injuries, HIV, malnutrition and food insecurity. You are not limited to this list; these are offered to you as suggestions and you are welcome to discuss any topic not mentioned.
2. Demonstrate ethical decision-making in the practice of dental public health.	PUBH5400: Dental Public Health Ethics	M6 Lack of resources discussion Considering the lack of resources available for dental care, and considering the central values of dental practice, demonstrate ethical decision-making in the practice of dental public health by explaining one model that you think could be adopted so that more people would have access to quality dental care. If you choose a model that is currently in operation, how could this model be improved? If you use rationing of dental care in your model(s), give concrete examples of how this would work.
3. Apply and evaluate evidence to address oral health issues for individuals and populations.	PUBH6550: Dental Healthcare Policy and Management	M2 Policy issues paper Apply systems thinking tools to compare the U.S. oral healthcare system to the oral healthcare system in a country of your choice. Create a table to summarize your findings. Address the following questions: <ul style="list-style-type: none"> • Where are oral health services provided? • Who delivers oral health services? • Does everyone have equal access to oral healthcare services? • How is the oral health workforce educated and trained? • How is the oral health workforce regulated? This table should be approximately 2 pages, not including title and references pages. Although you are creating a table, remember to properly cite your information using APA format.

4. Lead collaborations on oral and public health issues.	PUBH7650: Community-Based Programs - Implementation & Evaluation	M4 Implementation discussion Highlight any significant progress or changes you have made while leading collaborations on your oral public health issue during the implementation of your community oral health plan. Include any barriers you have encountered or successes you have enjoyed. Offer assistance to your classmates to help with challenges they identify.
5. Evaluate systems of care that impact oral health.	PUBH5500: Financing Dental Care	M3 ACA paper In your paper, address what the term "essential health benefit" means for the Affordable Care Act (ACA). Start with a very brief introduction of the ACA. Address pediatric dental coverage as an "essential health benefit," evaluate how this system of care impacts oral health, and discuss how that benefit could change dental coverage for children. Finally, address how the pediatric essential health benefit was operationalized. Is it different than originally planned? Also address if the pediatric essential health benefit is still in effect.

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- 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.
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Not applicable.

- 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.
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MPH course syllabi may be found in ERF D1-2_MPH_Syllabi.

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

Strengths

None

Weaknesses

None

Plans for improvement

None

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.
-

After identifying and receiving program approval of a site and preceptor, students work collaboratively with their site preceptor and practicum coordinator to complete the applied practice experience (APE) learning agreement. Once the learning agreement is approved by the practicum coordinator, it is signed by the student and site preceptor and submitted online. This document requires a project description as well as a list of each product to be created (minimum of two), a list of primary tasks required in the creation of each product, and a list of competencies each product will demonstrate (minimum of five total, three of which must be foundational). APE assessment is based on the products generated demonstrating the stated competencies. In addition, students must keep a time sheet of all hours spent on the APE, which must total a minimum of 180 hours.

Students submit products at the completion of the APE project. To identify competencies attained in the APE for each MPH student, the practicum coordinator, a second MPH faculty member, and the site preceptor will evaluate products for successful demonstration of competencies stated in the learning contract. This includes discussion with the student as to how his/her experience and understanding of the products demonstrate the competencies. If five competencies in total are not demonstrated by a minimum of two products, the student will be required to improve or expand the products or generate additional ones for the site or a new site to demonstrate the necessary competencies.

While it is generally recommended to use a single organization, students may propose and utilize more than one site to complete their APE. Use of more than one site requires approval by the practicum coordinator and completion of all the required documentation for each site, including a separate learning contract.

-
- 2) Provide documentation, including syllabi and handbooks, of the official requirements through which students complete the applied practice experience.
-

Documents regarding APE are in ERF folder D5-2_APE_Documents and include the syllabus (PUBH7800), a copy of the foundational and program competencies, a list of acceptable products for the APE, information on finding a site for the APE, and a copy of the APE learning agreement. Additional student support is available at guides.atsu.edu/CGHS/Public_Health/Student_Corner/Practicum.

- 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 (i.e., 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.
-

As a result of transitioning to new accreditation criteria, the new curriculum went into effect in fall 2019. At this time, the department provides a limited number of completed APE learning agreements and completed products for that year only. Five sets of completed products are located in ERF folder D5-3_APE_Examples.

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

Strengths

Overall, the new curriculum has streamlined the process for students in a way they find helpful. Under the new curriculum, the practicum coordinator, site preceptor, and student have a more direct and effective working relationship. This has resulted in greater clarity on the part of the student and preceptor about the department's expectations, as well as the relationship between the student's project and competencies demonstrated. Having the practicum coordinator directly oversee all APE projects and learning agreements provides a clear line of communication for students and consistency, which helps students in all steps of the APE. Also, students may download and upload all materials directly within the online course in Canvas, which is more accessible than the former system. A specific faculty member has been placed in the role of working with the practicum coordinator on the APE portion of the practicum course. All APE learning agreements and APE products are reviewed by the practicum coordinator and this specific PH faculty member, which increases consistency in evaluative standards and facilitates communication about the process.

The new APE learning agreement helps students articulate specific products as well as tasks necessary to accomplish each product and how those tasks are connected to the demonstration of specific competencies. This provides additional focus to the practice experience.

In addition, the new APE curriculum, documents, and procedures are more accessible, understandable, and friendly to the needs of dual-degree students in the program, who historically found it difficult to balance competing time and administrative demands of two programs.

Weaknesses

As an online institution, students are required to identify and secure a practice site in their own location. While this may create stress for some students, guidance on this process is provided within the course, as well as in the informational live video introduction at the beginning of the course. The practicum coordinator also stresses his availability to discuss and help with this process. However, additional guidance might help students understand their options and how best to present themselves and their skills to potential practice sites.

Plans for improvement

The PH department will continuously evaluate and refine the new process and procedures, including continued development of specific and detailed instructional/informational guides as well as interactive instructional sessions with students individually and in groups.

D6. DrPH Applied Practice Experience

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

Not applicable.

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.

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

The 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 (e.g., preceptors).

- 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 D7-1

MPH integrative learning experience for X concentration	
Integrative learning experience (list all options)	How competencies are synthesized
Final written document	Students self-identify competencies in the proposal stage; an advisor approves the proposal and identified competencies; two faculty readers use a rubric that includes identified competencies to assess the student's ability to appropriately integrate and synthesize.

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

Students enroll into a four academic block course (PUBH7800) referred to as the MPH Practicum. The course requires completion of both the APE and integrated learning experience (ILE) in order. Once students complete the APE portion of their MPH curriculum, they begin the ILE. The ILE is completed at or near the end of all coursework for the student. The ILE requires the student to produce a high-quality written document aimed at external stakeholders that demonstrates synthesis of public health foundational and program competencies.

In general, ILE students build upon their APE through development and completion of a more thoroughly written final document thoughtfully and meaningfully expanding the student's previous APE experience and work. The ILE written document must do more than describe the work done by the student in the APE. Students are allowed to complete an ILE document unrelated to their APE but must get approval from their ILE faculty advisor and practicum coordinator.

At the beginning of the ILE, the student will be assigned a faculty advisor who will work with the student to determine the nature of the student's final written document. The faculty advisor will have access to the student's APE materials in the LMS (Canvas) to fully review and discuss the materials with the student to help develop the ILE document. In consultation with the faculty advisor, the student will select a minimum of three competencies (at least two must be foundational) appropriate to the student's educational and professional goals. The ILE final document should demonstrate synthesis of these selected competencies. The final document must be substantive and well written (publishable quality).

The ILE final written document may take one of numerous forms, including but not limited to:

- Practice project paper (template available in Canvas)
- Research paper
- Evaluation report to organization
- Grant application
- Evaluation of a public health program
- Analysis of a public health policy
- Policy brief/proposal
- Training manual
- Educational curriculum or resource
- Data management protocol

Once the student and faculty advisor agree on the type of final written document to be developed and competencies to be demonstrated, the student will complete the ILE Final Document Agreement form and submit it online in Canvas where it must be formally approved by the faculty advisor and practicum coordinator.

If a student wishes to change the ILE Final Document Agreement form after it has been approved, the student must discuss this with the faculty advisor and practicum coordinator. If both the faculty advisor and practicum coordinator approve the change, the student must create a new ILE Final Document Agreement form and submit it in Canvas for approval.

The student will principally work with the faculty advisor but will also have a second MPH faculty member assigned as a second ILE committee member for guidance and review of the ILE. The second committee member's primary role will be to provide feedback on the substantive quality of the written document once the student and faculty advisor agree the document is fairly well developed and is ready for the second committee member's input. The student is welcome to seek the second committee member's input earlier, if wanted. The second committee member will also evaluate whether and when the ILE final document is finished and ready for final submission.

When committee members reach consensus the final document is ready for submission, the student will formally submit the document in the proper location in Canvas. Once submitted, each member of the student's ILE committee will complete a grading rubric in Canvas for the final product. To pass the ILE, the student must receive a passing score in each criterion on the rubric from each committee member.

Ideally, committee members will have already reached consensus prior to the student's submission of the ILE final document in Canvas. Requirement of a final formal rubric evaluation in Canvas by each committee member is intended to encourage earlier communication and consensus, as well as ensuring each committee member sees and approves the final document.

Failure to receive a passing grade means the student must address and improve elements of the paper any committee member has judged as non-passing. The committee member must provide useful, specific feedback on what the final product needs to improve.

If a formal submission within Canvas is not passed, the student is allowed to continue to work on the ILE final written product until it meets the committee member's expectations. The student has completed the ILE when the official submission receives a passing score in each criterion on the rubric from each committee member.

This entire process is overseen and monitored by the practicum coordinator.

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

Documents regarding the ILE are in ERF folder D7-3_ILE_Documents and include the syllabus (PUBH7800), a copy of the foundational and program competencies, a copy of the ILE Final Document Agreement, and a practice project paper template. Additional student support is available at guides.atsu.edu/CGHS/Public_Health/Student_Corner/Practicum.

-
- 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.
-

See Criterion D7-2 for details. The rubric used to assess the ILE is in ERF D7-4_Rubric_for_ILE_Final_Document.pdf.

-
- 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.
-

As a result of transitioning to the new accreditation criteria, the new curriculum went into effect in fall 2019. No student has yet completed an ILE. Instead, ERF folder D7-5_Practicum_Final_Report_Examples contains 16 practicum final reports completed under the previous practicum guidelines from the last three years; eight are from the general MPH, and eight are from the MPH-D.

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

Strengths

All MPH students complete an ILE to demonstrate synthesis of foundational and concentration competencies. Students work closely with a faculty advisor on all aspects of the ILE. Utilizing the

APE as a bridge to the ILE provides students the opportunity to expand their APE into a deeper, more substantive written document. Students have the option of redirecting their ILE away from their APE if they have a strong interest in something else.

Weakness

The process was recently implemented in the new curriculum, so initial feedback and student experience is limited. Good examples of various types of written products students produce for the ILE, especially previous students' completed ILEs, will be useful as guidance for current students but have not yet been created.

Plans for improvement

None

D8. DrPH Integrative Learning Experience

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

Not applicable.

D9. Public Health Bachelor’s Degree General Curriculum

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

Not applicable.

D10. Public Health Bachelor’s Degree Foundational Domains

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

Not applicable.

D11. Public Health Bachelor’s Degree Foundational Competencies

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

Not applicable.

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

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

Not applicable.

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

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

Not applicable.

D14. MPH Program Length

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

Programs use university definitions for credit hours.

- 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.
-

The University uses semester credit hours for all courses. The MPH program consists of 15 courses – 14 courses are three credit hours, and one (practicum) is six credit hours. The entire MPH program is 48 credit hours.

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

ATSU has adopted the semester credit hour. ATSU's registrar defines one credit hour as equivalent to approximately 45 hours of student activity.

D15. DrPH Program Length

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

Not applicable.

D16. Bachelor’s Degree Program Length

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

Not applicable.

D17. Academic Public Health Master’s Degrees

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

Not applicable.

D18. Academic Public Health Doctoral Degrees

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

Not applicable.

D19. All Remaining Degrees

Not applicable.

D20. Distance Education

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

The university provides needed support for the program, including administrative, communication, information technology and student services.

There is an ongoing effort to evaluate the academic effectiveness of the format, to assess learning methods and to systematically use this information to stimulate program improvements. Evaluation of student outcomes and of the learning model are especially important in institutions that offer distance learning but do not offer a comparable in-residence program.

- 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 Intro-1 may be referenced for this purpose.

All ATSU-CGHS programs, including the MPH program, are offered only in online format. There are no residential courses in the MPH program.

The MPH program has joint degree partnerships with ATSU-SOMA, ATSU-ASDOH, and ATSU-MOSDOH. ATSU-SOMA's partnership offers doctor of osteopathic medicine (DO) students the opportunity to receive instruction in public health and earn the MPH degree simultaneously with the DO degree. The first cohort of ATSU-SOMA students was accepted in summer 2012. ATSU-ASDOH's partnership offers doctor of dental medicine (DMD) students the opportunity to earn the MPH degree simultaneously with the DMD degree. The first cohort of ATSU-ASDOH students began MPH courses in the winter term 2008.

ATSU-MOSDOH's partnership offers DMD students the opportunity to earn the MPH degree simultaneously with the DMD degree. The first cohort of ATSU-MOSDOH students began MPH courses in fall 2014. The partnerships with ATSU-SOMA, ATSU-ASDOH, and ATSU-MOSDOH produce graduates subject to the same assessment procedures as all other MPH students.

ATSU-CGHS also offers a distance DPH residency program. Residents enter the 25-month program where they earn an MPH-D and certificate in dental public health. The curriculum for this residency includes earning an MPH within the 25-month course duration.

Instructional matrix - degrees and concentrations						
			Categorized as public health*	Campus-based	Executive	Distance-based
Master's degrees		Academic	Professional			
MPH (Generalist)			MPH	X		MPH
MPH (Dental emphasis)			MPH	X		MPH
Joint degrees (dual, combined, concurrent, and accelerated degrees)		Academic	Professional			
Second degree area	Public health concentration					
Doctor of Osteopathic Medicine	MPH (Generalist)		MPH	X		MPH
Doctor of Medicine in Dentistry	MPH (Dental emphasis)		MPH	X		MPH

2) Describe the public health distance education programs, including

a) an explanation of the model or methods used,

MPH program details and its degree are available on ATSU websites:

atsu.edu/master-of-public-health-degree,

atsu.edu/master-of-public-health-dental-emphasis-degree, and

atsu.edu/master-of-public-health-dental-emphasis-dental-public-health-residency.

The course description for each course is also available on the MPH, MPH-D, and MPH DPH residency web pages.

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

The PH department focuses on educating and preparing public health professionals to be leaders in their fields, including students in ATSU's dental and osteopathic medicine programs, through partnerships with ATSU-SOMA, ATSU-ASDOH, and ATSU-MOSDOH. This allows students pursuing these professional degrees to develop a knowledge and appreciation of public health perspectives beneficial to their future patients and communities.

MPH program courses meet the mission of educating and preparing public health professionals to be leaders in their fields. Courses provide a solid public health foundation for graduates and prepare them to meet modern challenges in a variety of public health domains. All courses are taught by qualified faculty with extensive public health experience.

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

The PH department requires students to complete 48 credit hours of coursework, including the 6-credit-hour public health practicum. Details on how the courses are organized (by courses and concentrations) are available in the MPH academic degree plans (ADPs) available to students through their AAs. These ADPs are in ERF folder D20-2c_MPH_Academic_Degree_Plans.

Full-time faculty develop courses using their individual expertise. If an outside SME is needed to develop a course, contracts will be written to secure such service. ATSU-CGHS employs instructional designers. Faculty are required to work with these instructional designers to develop courses using QM standards resulting in consistent course layout and design, thus allowing students to concentrate on content rather than course navigation.

To ensure student persistence and completion, ATSU offers student support staff and services, including AAs, UWC, and an online community. AAs maintain frequent contact with students through email and phone. They are usually the first point of contact for student issues. They are well trained on University support services and may refer students appropriately. For instance, if a student is struggling with writing, the AA will refer the student to UWC, and let students know how to access ESL services from UWC, if appropriate. Or, if a student has a question about financial aid, the AA may refer the student to Enrollment Services.

Each student is required to maintain a cGPA of 3.0. Students who attain a cGPA of less than the minimum required 3.0 will be placed on academic probation. AAs reach out to the student, walk him/her through the probation process and requirements, and then maintain contact until the student comes off probation. AA duties are covered in more detail in Criterion H1.

The ITS helpdesk is the central point of contact for problems and questions concerning technology at ATSU. Support staff will make every effort to resolve technology problems or answer questions. When appropriate, the issue may be assigned to another group for resolution. In-house technicians are available to assist during business hours, and an outsourced call center assists with issues during evenings, weekends, and holidays.

ATSU's portal is the main gateway for accessing many of the University's online resources. The portal enables faculty, staff, and students to access their most frequently used online resources and websites from one central place. The portal also automates login procedures to other University resources using one University login.

-
- 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
-

Within ATSU-CGHS, academic rigor is monitored by assessing the level at which students master program competencies, grade distribution, students' perception on how the program prepared them for a public health career, and measurement of Carnegie unit by course.

Courses are routinely reviewed for content (every three years), at which point grade distribution, student feedback, and overall Carnegie unit content are summarized by the associate dean for academics and assessment and presented to the Curriculum Committee for review. Assessments with a grading curve skewed to the higher end of the curve are reviewed to be sure students are assessed at an appropriate level.

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

Student mastery of program competencies is monitored via assessment grades and student feedback. If students indicate on the end-of-course survey the assessments did not improve their understanding of concepts or were not authentic in nature, then these specific assessments are reviewed and revised accordingly, either immediately or during the three-year course review process.

Mastery of course competencies is monitored via assessment grades. Competencies not meeting program outcomes are also re-evaluated in terms of associated assessments.

-
- 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.
-

ATSU recognizes its responsibility to take appropriate measures to verify student identity for both residential and distance programs. The University further recognizes the U.S. Federal Higher

Education Opportunity Act (HEOA), Public Law 110-315, requires accrediting agencies to ensure institutions have processes through which the institution establishes the student who registers in a distance education or correspondence education course or program is the same student who participates in and completes the program and receives the academic credit. Thus, ATSU has developed processes and taken appropriate measures to ensure student identity. These include:

1. A secure UserID login and password:

Students must authenticate themselves first in the ATSU portal and then again through Google by entering their unique UserID and password combination to access University information systems, including email, Canvas LMS, library databases, and related academic services. Students are responsible for maintaining security of their usernames, passwords, and any other access credentials assigned to them. These are not to be shared or given to anyone other than the user to whom they were assigned. Responsibility is outlined in the University Student Handbook.

2. Administrative procedures:

As students progress through University admissions, registration, and payment processes, personally identifiable information may be used to verify student identity.

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

Strengths

ATSU has been offering an MPH degree since 1999 and has expanded its distance education offerings to other schools in the University. Faculty and staff are very experienced in distance education, and this provides for a better learning experience for the students.

Weaknesses

None

Plans for improvement

None

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						
Name	Title/ academic rank	Tenure status or classification^	Graduate degrees earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Concentration affiliated with in Template C2-1
Jeffrey Chaffin	Assistant Professor	Full-time faculty	DDS, MHA, MPH	University of Nebraska, Baylor University, University of Michigan	Dentistry, Health Administration, Public Health	Dental Public Health
Jaana Gold	Associate Professor	Full-time faculty	DDS, PhD, MPH	University of Oulu, University of Florida	Dentistry, Cariology, Public Health	Dental Public Health
Gregory Loeben	Associate Professor	Full-time faculty	PhD, MA	University of Arizona	Philosophy, Medical Ethics	General
Ashley Love	Associate Professor	Full-time faculty	DrPH, MPH, MS	Columbia University	Sociomedical Sciences	General
Mary-Katherine McNatt	Associate Professor	Full-time faculty	DrPH, MPH	University of North Texas, Texas A&M	Social and Behavioral Health	General
M. Lindsay Wright	Assistant Professor	Full-time faculty	DMD, MPH	Southern Illinois University, University of Illinois	Dentistry, Public Health	Dental Public 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							
Name	Academic rank	Title and current employment	FTE or % time allocated	Graduate degrees earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Concentration affiliated with in Template C2-1
Katherine Adler	Associate Professor	Associate Dean, Academics & Assessment	0.25	DHA, MS	Medical University of South Carolina, Central Michigan University	Health Administration, Business Administration	General
Donald Altman	Professor	Dean, College of Graduate Health Studies	0.25	DDS, DHSc, EdD, MPH, MBA, MA	University of Texas, A.T. Still University, Southern New Hampshire University, Midwestern University	Dental Public Health	Dental Public Health
Marjorie Belizaire	Instructor	Adjunct Faculty	0.25	MD, MS	Meharry Medical College, Hofstra University	Health Education	General
Anneta Bitouni	Instructor	Adjunct Faculty	0.25	DDS, MPH, MS	National and Kapodistrian University of Athens, A.T. Still University, Baylor College of Dentistry	Dentistry	Dental Public Health
Ray Borges	Instructor	Adjunct Faculty	0.25	DHSc, MBA, MA	Nova Southeastern University, Wayland Baptist University, Texas Tech University	Health Sciences	General
Stacy Braiuca	Instructor	Adjunct Faculty	0.25	MPH, MSW	University of Kansas, University of Missouri	Community Health	General
Ann Lee Burch	Instructor	Adjunct Faculty	0.25	EdD, MPH, MS PT	Columbia University	Sociomedical Sciences	General
Kerin Burdette	Instructor	Adjunct Faculty	0.25	DDS, MPH	University of Missouri, A.T. Still University	Dental Public Health	Dental Public Health

Sohini Dhar	Instructor	Adjunct Faculty	0.25	BDS, MPH	Sri Ramchandra University, Western Kentucky University	Public Health Education	Dental Public Health
Paul Emeka	Instructor	Adjunct Faculty	0.25	PhD, MPA	Walden University, Indiana University	Epidemiology, Health Policy and Administration	General
Arealle Franklin	Instructor	Adjunct Faculty	0.25	DMD, MPH	A.T. Still University	Dental Public Health	Dental Public Health
Carey Gaukler	Instructor	Adjunct Faculty	0.25	MPH	Texas A&M	Epidemiology	General
Aaron Hunt	Instructor	Adjunct Faculty	0.25	PhD, MPH	University of Nevada	Global & Environmental Health, Social and Behavioral Health	General
Samuel Imarhiagbe	Instructor	Adjunct Faculty	0.25	PhD, MA	Wayne State University	Economics	General
Preeti Kamat	Instructor	Adjunct Faculty	0.25	BDS, MPH-D	Patal Dental College and Hospital, A.T. Still University	Dental Public Health	Dental Public Health
Joan Leafman	Instructor	Adjunct Faculty	0.25	PhD, MS	Northwestern University, CUNY	Health Policy and Administration	General
Rochelle Mascarenhas	Instructor	Adjunct Faculty	0.25	MPH	A.T. Still University	Dental Public Health	Dental Public Health
Michael McCunniff	Instructor	Adjunct Faculty	0.25	DDS, MS	University of Missouri, University of Iowa	Dental Public Health	Dental Public Health
Chris Miller	Instructor	Adjunct Faculty	0.25	DHSc, MS	Nova Southeastern University, St. Thomas University	Health Policy and Administration	General
Trisha Miller	Instructor	Adjunct Faculty	0.25	PhD, MA	Claremont University	Political Science & Public Policy	General
Jill Moore	Instructor	Adjunct Faculty	0.25	EdD, MHA	A.T. Still University	Health Education, Health Administration	General
Karin Polifko	Instructor	Adjunct Faculty	0.25	PhD, MSN	Old Dominion University, University of Pennsylvania	Urban Health	General
Marsha Presley	Instructor	Adjunct Faculty	0.25	PhD, MPH	A.T. Still University	Geology, Public Health	General
Scott Rankin	Instructor	Adjunct Faculty	0.25	DDS, MS, MBA, MHA	University of Missouri, University of Iowa, Baylor University	Dental Public Health	Dental Public Health

Aesha Turner	Instructor	Adjunct Faculty	0.25	MS	American University	Health Education	General
Meghan Wendland	Instructor	Adjunct Faculty	0.25	DDS, MPH	University of Southern California, Dartmouth College	Health Policy and Clinical Practice	General
Andrea Wilson	Instructor	Adjunct Faculty	0.25	DMD, MPH	A.T. Still University	Dental Public Health	Dental Public Health
Josefine Wolfe	Instructor	Adjunct Faculty	0.25	PhD, MSPH	Walden University	Community Health	General

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

Curriculum vitae (CV) for each faculty member are in ERF folders E1-3_Full-time_Faculty_CVs and E1-3_Adjunct_Faculty_CVs.

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

During the 2016-17 and 2017-18 AY, the PH department was supported by seven primary faculty members; three are dentists who support the MPH-D program. These include six full-time faculty members and the PH department chair.

At the end of the 2017-18 AY, full-time faculty member David Line left for a position at Eastern Washington University. Due to budgetary constraints, his position was not replaced, leaving six primary faculty members for the 2018-19 AY.

At the end of the 2018-19 AY, full-time faculty member S.D. Shanti left for health reasons. Her position has been filled for the 2019-20 AY by M. Lindsay Wright, whose information populates Table E1-1 in her place.

All faculty members have earned doctoral degrees. All but one have master or doctorate of public health degrees from CEPH-accredited schools of public health or public health programs; that faculty member is in the middle of his MPH program. Two faculty members are board certified in dental public health by the American Board of Dental Public Health (ABDPH), and three are certified in public health (CPH) by the National Board of Public Health Examiners.

As discussed in more detail in Criterion E2, all faculty members are active outside of academia and bring extensive public health experience to their positions and the classroom. Their areas of expertise span public health core functions, including health policy, rural health services, emergency preparedness, epidemiology, and dental clinical health.

MPH dental public health concentration courses are supported by adjunct faculty who are working in public health and possess a dental degree and/or a PhD. Ten of the MPH dental public health concentration adjunct faculty also have a master of public health degree from CEPH-accredited schools of public health or public health programs, and four are board certified in dental public health by the ABDPH. All but three of the adjunct faculty supporting the MPH general concentration courses have doctoral degrees; two of these supporting faculty members have

MPH degrees from CEPH-accredited schools of public health or public health programs, and one is in the dissertation stage of a doctorate in health education. All supporting faculty members have extensive experience in the public health field as discussed in Criterion E2.

Qualifications and areas of instruction for current full-time and adjunct faculty members are presented in tables E1-1 and E1-2.

Criterion E2 reviews the extensive professional backgrounds complementing the academic experience of each adjunct faculty member. Their specific expertise, whether in public health, public administration, health education, or social work, brings added depth and knowledge to the classroom.

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

Strengths

None

Weaknesses

None

Plans for improvement

None

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.

- 1) 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.

Primary full-time faculty members for the PH department bring diverse backgrounds and experience in public health into the classroom. This experience includes epidemiology and emergency preparedness; work in community health centers as clinicians, directors, and program planners; and leadership in healthcare ethics, including ethics advisor for the Donor Network of Arizona. Moreover, faculty members are leaders in their fields, including one former state dental director (Wisc.), one former chief of the bureau of epidemiology and state epidemiologist (Del.), and one who served as a dental officer in the U.S. Army Dental Command and retired as a colonel and chief of the dental branch of TRICARE (the healthcare program serving uniformed service members, retirees, and their families), where he also served as a consultant to the U.S. Surgeon General, U.S. Army Surgeon General, and Assistant Secretary of Defense for Health Affairs on issues pertinent to dental public health.

The public health experience of the supporting and adjunct faculty is just as diverse. Four adjunct faculty founded their own business or charity, including a public charity dedicated to improving outcomes of underrepresented elementary school children through elimination of food and medical insecurity; a home care office; a consulting firm to elicit change, improve quality outcomes and deliverables, human resource assessment, development and training, grant writing, new program development, and curriculum revision; and a consulting firm in social media and promotion of health literacy and overall wellness, particularly in minority and disadvantaged populations. Other positions held or formerly held by adjunct faculty include vice president of operations and academic affairs for Remington College, dean of ATSU-ASHS, associate dean of the College of Education at Northeastern Illinois University, associate dean of academic and student affairs at the University of Florida, commander and CEO of Fort Gordon Dental Activity, CEO for two different rehab hospitals, clinical and program director of Morningstar Wellness programs, director of oral health at the Texas Health Institute, and vice president of a homeless shelter.

The public health experience of full-time and adjunct faculty members encompasses working with culturally diverse populations, including a variety of global health programs. Faculty members have public health experience across five continents, particularly in the countries of Cambodia, Costa Rica, Finland, Germany, Greece, Honduras, India, Italy, Nigeria, Panama, South Korea,

and Vietnam. They have also worked with a variety of underserved populations within the U.S., including Asian, black, creole, Hispanic, Puerto Rican, physically and developmentally disabled, homeless, low-income, recent immigrants, indigenous, and lesbian, gay, bisexual, transgender, and queer or questioning (LGBTQ). For example, a faculty member currently works as a research associate for the Center of American Indian Community Health, University of Kansas Medical Center. Another worked for the California Black Women's Health Project; and another served on the African American and Hispanic Task Forces of the Cultural Health Initiative of the American Heart Association.

For more detail, CVs of full-time PH faculty are available in the ERF folder E1-3_Full-time_Faculty_CVs, and CVs of adjunct faculty are available in the ERF folder E1-3_Adjunct_Faculty_CVs.

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

Strengths

Full-time, supporting, and adjunct faculty members associated with the PH department represent a spectrum of experience across public health. These faculty members have worked in government, military, and global public health institutions. They have experience in research, advocacy, healthcare financing, preventive health measures, and service to the underserved and diverse cultural populations. Their diverse backgrounds and experiences provide a multitude of practical perspectives adding to the educational experiences with the PH department.

Weaknesses

None

Plans for improvement

None

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.
-

Faculty are encouraged to take the initiative to determine their professional enhancement goals. Every full-time faculty member must complete a faculty development plan each year and discuss it with the department chair during the annual review. Through this discussion, the faculty member and PH department chair identify professional development opportunities appropriate to achieve the faculty member's goals and maintain currency in his or her field.

Adjuncts are required as part of their contract to update their professional records twice a year. The department chair will review records annually for compliance and to ensure each is maintaining currency in his/her field.

Full-time and adjunct faculty have access to University-wide presentations (See Criterion E3-3.) to serve their professional development in instructional effectiveness. All faculty are informed of these presentations, which are offered with videoconferencing access through their ATSU email. At least one reminder email is sent for each presentation.

All new faculty go through a faculty orientation course. The orientation course introduces them to the University and ATSU-CGHS mission, vision, and purpose statements. ATSU and ATSU-CGHS policies applicable to online instruction, different pedagogies and learning theories, and methods of engagement are discussed. New faculty are also oriented to use of assignment rubrics, grading guidelines, and Canvas LMS.

-
- 2) 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.
-

Eyes on the classroom

The department chair reviews classrooms at least once, and often several times, during the course of the academic block (equivalent to a quarter). While instructor-learner interactions may take place outside of the classroom (either by phone, email, or videoconferencing), the department chair can still assess instructor quality by gauging the amount and quality of interaction within discussion forums, weekly announcements, and amount and quality of instructional feedback. In addition to periodic checking, the department chair gets a report at the end of each week and at the end of the course. The report includes degree of participation in discussions, excerpts from those discussions, whether weekly discussions are posted in a timely

fashion, whether grades for each module were posted in a timely fashion, and excerpts from student evaluations pertinent to the instructor's performance, including whether the instructor was courteous and gave useful feedback.

Annual evaluation for full-time faculty

ATSU-CGHS demonstrates its commitment to retaining quality faculty and ensuring they maintain currency in their fields through the annual faculty evaluation. Full-time faculty rate their performance and provide examples on initiative, dependability, communication, judgment, planning and organizing, knowledge of position, cooperation, institutional commitment, people skills, and diversity and inclusion. They also state their goals regarding the percentage of their time they will spend on teaching, scholarly activity, and service. The faculty chair also rates faculty performance in these areas. The department chair sets up time to spend with each faculty member individually to assess evidence presented in the evaluation, assess what is observed in the classroom, and suggest areas of improvement.

ATSU-CGHS' Faculty Council is currently reviewing the full-time faculty evaluation form and is in the process of designing an evaluation form more closely aligned with faculty responsibilities in instruction, scholarly activity, and service.

Quarterly evaluation of adjunct faculty

Adjunct faculty are evaluated at the end of each term. They are assessed on the end-of-course report discussed previously, in addition to observations made by the department chair in the classroom. The department chair then determines whether each adjunct should be retained or not invited to return.

Student evaluations

Questions in the student evaluation for each course include assessment of the amount and quality of instructor-learner interaction as well as whether the instructor was able to demonstrate above average knowledge of the subject.

Students are requested to anonymously complete course evaluations for all courses taken midway through the term and are required to anonymously complete them at the end of the term. Adherence to the requirement is accomplished by restricting the student's access to Module 10 until the survey is submitted. Surveys are available through Canvas LMS and use survey software contained with the LMS. These evaluation forms are standard for all ATSU-CGHS courses. The mid-course survey, taken during week five, consists of rating four statements regarding instructor performance on a five-point Likert scale and request for comments. The end-of-course survey, taken during week nine, consists of rating items on a five-point Likert scale, with nine statements related to teaching effectiveness; three items related to pace and effort required in the course; 10 items related to course content, organization, and effectiveness; seven items on the instructor's ability to add value to the course; and five open-ended questions. Course surveys completed by students also contain information about course content, as well as how the course compares to other courses they have taken. Responses to these questions are forwarded to the Curriculum Committee for review and possible action.

Copies of the mid-course and end-of-course surveys and sample summary reports for instructors are available in ERF folder E3-2_Course_Evaluation_Instruments.

-
- 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.
-

ATSU-CGHS offers full-time faculty members a \$2,500 stipend per year to:

- Travel to and participate in various public health and health-related conferences across the U.S.;
- Purchase books, subscriptions to public health or health-related journals, other periodicals, or software;
- Take courses at other institutions;
- Participate in any other networking activity exposing the faculty member to research and/or teaching methodologies; or
- Participate in other activities the faculty member and PH department chair deem appropriate to achieve the faculty member's goals.

This stipend is not carried over to the next academic or budget year and, thus, encourages faculty to seek out professional development activities each year. At the current time, a faculty development stipend is not available to adjunct faculty. Full-time faculty members are encouraged to submit a faculty development plan at the time of their annual review.

Quality Matters

ATSU-CGHS is a subscriber of Quality Matters (QM). QM has produced a collaborative peer-review process designed to support continuous improvement of online course design. QM consists of three components: the QM rubric, with eight general standards and 42 specific review standards designed to measure and ensure quality in the design of online courses; the peer-review process to ensure continuous quality improvement; and professional development to help faculty continue to improve their ability to design a quality online course.

The QM subscription allows ATSU-CGHS to facilitate the "Applying the QM Rubric" (APPQMR) workshop, which all full-time and adjunct faculty have been encouraged to complete. It provides access to the fully annotated QM higher education rubric and delivers discounts on other professional development courses and workshops. In addition to the QM subscription, ATSU-CGHS absorbs the cost for the APPQMR course for all full-time and adjunct faculty. The associate dean of academics and assessment has completed all QM review courses, is a certified QM master peer reviewer, and is certified to facilitate the APPQMR course. The entire instructional design team is certified or in the process of becoming certified as QM reviewers. The dean and department chair are APPQMR certified. With leadership modeling the importance of QM to developing and reviewing courses, four full-time PH faculty and six adjunct PH faculty have also become APPQMR certified. All full-time faculty are scheduled to complete the training, and all adjunct faculty are encouraged to participate.

ATSU Teaching & Learning Center

ATSU's Teaching & Learning Center offers several workshops and presentations on teaching and learning throughout the year. Workshops have included "Assessment Week" and "Applying the Scholarship of Teaching and Learning | Writing" series. Examples of presentations include:

- How can I help students develop critical thinking skills?
- Teaching critical thinking to students
- Disability laws
- The true test: Authentic assessment
- Learning assessment techniques: How to integrate new activities that gauge what and how well students learn
- Preparing faculty for academic leadership

Information Technology Services (ITS)

ATSU ITS holds quarterly Lunch & Learns, as well as weekly virtual office hours, to answer questions and provide technical assistance regarding Canvas LMS. Examples of presentations include:

- Tips and tricks to make your job easier
- Videoconferencing at ATSU
- Coping with stress and coping with the holidays
- File storage at ATSU & the cloud
- Data & Qualtrics

The majority of presentations, workshops, and Lunch & Learns are presented live through videoconferencing, and many are recorded for later playback. Announcements of upcoming events are sent through email to all faculty, often followed by reminder emails. Recording links are sent by email so anyone who was unable to attend live, may still view the presentation. Archives of presentations from the Teaching & Learning Center and ITS Lunch & Learns are available on ATSU's YouTube channel.

LinkedIn learning

ATSU has a subscription to lynda.com, now "LinkedIn Learning," a repository of several thousand video courses for skill development in a wide variety of topics.

ATSU tuition discount

Full-time and adjunct faculty and staff who wish to attend classes in any online ATSU program receive a 50% discount on tuition. Periodically, ATSU has offered faculty scholarships covering 100% tuition for full-time faculty to attend the MPH program. ATSU alumni receive a 20% tuition discount.

Dr. Marsha Presley, a research associate and adjunct faculty with the PH department, started out with ATSU-CGHS as an AA and used the 50% tuition discount to complete her MPH. Dr. Greg Loeben, full-time faculty and practicum coordinator, received one of the faculty scholarships and is in the process of completing his MPH. In addition to providing professional development, these

educational opportunities give these two faculty a unique dual perspective of instructor and learner, which they have shared during the course design process and use to inform their teaching.

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

Details for promotion requirements may be found in the ATSU Faculty Handbook, available in ERF E3-4_at-still-faculty-handbook. Activity in three categories, teaching, scholarly activity, and professional/community service, is examined when considering faculty advancement. Sustained activity must be presented for all three categories. The candidate must be rated superior in at least two categories and at least average in the remaining category.

In the teaching category for promotion to rank of associate professor, the candidate must exhibit

- Teaching experience and teaching effectiveness as evidenced through student and peer evaluations.
- Development of new educational programs or teaching materials.

In the teaching category for promotion to rank of professor, the candidate must exhibit

- Ongoing innovation in teaching resulting in improved student outcomes.

-
- 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.
-

Faculty currency

External review

As described in Criterion E3-3, ATSU-CGHS is a subscriber of QM. ATSU-CGHS was already applying "best practices" in terms of course delivery and design, but with the subscription, ATSU-CGHS instructional designers and faculty became APPQMR certified, and the quality of course design improved further. The next step is to get all PH courses QM certified. QM certification requires review of the course by a team of at least three people. One of the team members must be certified as a master reviewer and serve as team chair. At least one of the other two members must be an SME for the course subject, and at least one of the team members must be external to the organization (Quality Matters | Why QM? | Process, qualitymatters.org/why-quality-matters/process).

Review of the courses involves careful investigation of eight general standards and 42 specific review standards as delineated in the most recent version of the QM rubric. Essential standards must be met during the review process, and the course must attain an overall score of 85% of the points possible to be certified (QM | Higher Ed Course Design Rubric, qualitymatters.org/qa-resources/rubric-standards/higher-ed-rubric). In addition to noting whether a specific review standard is "met" or "not met," the reviewers must also suggest improvements, even if they determine the standard is "met." The faculty member in charge of the course design or revision

may then collaborate with the course instructional designer to incorporate suggestions and meet certification. This process provides quality assurance and continuous improvement of PH courses (QM | Why QM? | Process).

At this time, three PH courses have been QM certified: PUBH5000: Introduction to Public Health Concepts, RESH5200: Fundamentals of Research in Public Health, and PUBH5300: Public Health Administration. The PH department intends to have two to three courses certified per year.

Faculty instructional technique

Student satisfaction with instructional quality

Student end-of-course evaluation - faculty assessment questions	Average response score by AY (5 = max)			
	18-19	17-18	16-17	Three-year average
The instructor was knowledgeable in the subject matter.	4.72	4.77	4.69	4.72
The instructor treated students with respect.	4.75	4.80	4.73	4.75
Course grades were an accurate reflection of my performance.	4.56	4.61	4.54	4.56
The instructor's grading expectations were clear and applied consistently.	4.52	4.61	4.49	4.53
I am very satisfied with the amount and quality of instructor interactions, including feedback, in this course.	4.49	4.59	4.47	4.51
The instructor was timely in response to emails and requests for formative feedback (48 hours).	4.60	4.71	4.58	4.63
The instructor was timely in providing grades with summative feedback (96 hours, seven days for ARP project submissions).	4.62	4.75	4.61	4.66
The instructor established an active presence within the course.	4.63	4.71	4.61	4.65
The instructor added value to the course discussions by sharing relevant knowledge.	4.54	4.64	4.54	4.57
The instructor added value to the course discussions by building on contributions of students.	4.55	4.64	4.53	4.57
The instructor added value to the course discussions by providing useful insights.	4.54	4.64	4.53	4.57

Questions in the table above are asked of students at the end of Module 9 (out of 10) in each course. Students are required to complete the survey before they are allowed access to Module 10. Students answer each of these questions on a Likert scale from 1-5, with 5 representing the highest level of agreement with each statement. The table is an average of responses over all PH courses for each of the last three AYs. Results suggest students are generally very satisfied with the instructional quality provided by PH faculty.

School- or program-level outcomes

Implementation of grading rubrics

Prior to 2015, use of grading rubrics was sporadic and depended upon the individual SME designing the course. Most rubrics used were very simple. In 2015, ATSU-CGHS began requiring all new courses and redesigned courses use analytic grading rubrics, which are embedded in the LMS for each assessment. At that time, the instructional design team held informational meetings with each program to orient faculty to the use and design of rubrics. Students were introduced to rubrics in the orientation course, and PH students were reminded of them in the welcome videoconference held at the beginning of each block. Faculty were encouraged to put feedback

directly into the rubric. This action reminds students to check for the rubric while completing the assignment.

Since 2017, rubrics developed for PH courses have separate point spreads for each criterion. Instructional designers provided rubric templates and encouraged SMEs to develop rubrics with clear criteria. The example rubric in ERF E3-5_PUBH5500_Rubric_Examples.xlsx demonstrates how rubrics are currently designed.

Across ATSU-CGHS, program and department chairs anecdotally report grade complaints have dropped since ATSU-CGHS started implementing rubrics and were reduced even further when rubrics were made more specific.

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

Strengths

The program has well-defined policies and procedures to recruit, appoint, and promote qualified faculty, evaluate competence and performance of faculty, and support professional development and advancement of faculty. The program's faculty have a broad range of public health experiences and have worked with a wide variety of cultures and underserved populations.

Historically, end-of-course evaluations were voluntary, and the response rate from students was poor. Therefore, end-of-course evaluations are now required. This required participation has not only increased completion of end-of-course evaluations, but has also increased voluntary participation in the mid-course evaluations.

Weaknesses

None

Plans for improvement

None

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.
-

One of the PH department goals is to conduct scholarly research that advances public health knowledge. All research activities are based on and implemented in support of this goal. These activities include:

- Conducting funded research that advances public health knowledge or improves public health education.
- Conducting unfunded research that advances public health knowledge or improves public health education.
- Applying for grants to fund public health or public health education research.
- Dissemination of research results.
 - Presentations at professional conferences or to professional organizations
 - Submission of research results to prominent, peer-reviewed public health or higher education journals
 - Publication of research results in prominent, peer-reviewed public health or higher education journals

Individually, all full-time PH faculty members are expected to contribute to three University efforts – providing quality instruction, advancement of academic fields (i.e., scholarly activity), and support for community efforts – to advance the field of public health. However, not all faculty members are expected to contribute to all three at the same level. Each faculty member, with oversight of the PH department chair, has a weighted assignment, depending upon the individual faculty member's interests and expertise and departmental objectives. In general, all faculty members will have their annual assignments weighted 30%-80% teaching, 10%-45% service, and 10%-60% research and scholarly activity. All full-time faculty members are expected to have some portion of their time devoted to each of the three areas.

-
- 2) Describe available university and program support for research and scholarly activities.
-

ATSU and ATSU-CGHS encourage and support research through their strategic plans, mission and value statements, and other documents, including ATSU's faculty employment contract. The

PH department operates within ATSU's research structure with its strong research staff elements and generous faculty research incentives. These research incentives are defined in ATSU policy 20-112 (ERF E4-2_ATSU_POLICY_NO_20-112_GRANTS_AND_RESEARCH_REINVESTMENT.pdf). ATSU emphasizes the importance of research to faculty in the ATSU-CGHS Faculty Handbook and ATSU Strategic Plan 2016-2020. ATSU's mission statement expresses a commitment to continue its focus on scholarship.

ATSU-CGHS embraces ATSU's research support structure and policies. The ATSU-CGHS Faculty Handbook (2018, page 15) states: "Full-time faculty status may only be granted to persons who ... perform research/scholarly activity." ATSU academic appointment and compensation contract for PH faculty states compensation is based on contributing to research and scholarly activity as assigned and agreed upon with the department chair and/or dean. Faculty teaching loads were reduced from three course sections per term to two course sections per term, starting in spring term 2013 to provide faculty more time to develop their research.

Time, space, and salaries

ATSU supports research in the PH department by contributing significant resources for this activity, including:

- ATSU provides space and other resources from Research Support and ITS; Sponsored Programs; A.T. Still Research Institute; and offices for faculty and staff.
- ATSU provides time and financial support for scholarly activity and for support activities, including attending conferences and creation, publication, and dissemination of newsletters and other research-related publications, documents, and materials.
- ATSU funds salaries of research faculty and staff.
- ATSU provides space, time, and salaries for research support activities, including the Institutional Review Board (IRB).
- ATSU provides funding for initial research project development through competitive internal grants.

Intramural funding programs

Sponsored Programs maintains information on resources and research funds available to all schools and programs within the University at: grants.atsu.edu/resources/###internal_grants.

ATSU manages the following intramural funding programs for faculty and students in all departments and programs:

- **Warner/Fermaturo and ATSU Board of Trustees Research Fund.** Funds from the Warner Endowments and Fermaturo Charitable Trust enable full-time faculty to gain initial and/or interim support for promising research projects.
- **ATSU Strategic Research Fund.** This mechanism is ideal for interdisciplinary teams, novice ATSU faculty, and/or student research team members. The fund provides seed money to advance development of a strong clinical research base for the scientific study of whole person healthcare by supporting small studies to collect pilot data.
- **ATSU National Center for Community Health Research (NCCHR) Grant.** This mechanism enables full-time faculty, including at least one member of the ATSU PH department, to test

promising pilot projects and/or conduct short-term continuation of existing research projects, including:

- Research demonstrating public health solutions that may be implemented by communities themselves.
- Projects contributing to the existing public health body of knowledge.
- Projects promoting multi-disciplinary interaction to provide multi-faceted solutions.
- Support for a cadre of public health researchers to help communities find solutions to their local problems.

ATSU Department of Sponsored Programs

The ATSU Sponsored Programs department (grants.atsu.edu) provides staff support to the PH department for faculty and students through space, time, and funding for:

- A pre-awards office
- A post-awards office
- Statistical support
- Manuscript support for development and submission

ATSU Sponsored Programs serves the Kirksville, Missouri, and Mesa, Arizona, campuses. The department advances ATSU's mission, strategic directions, and priority areas through acquisition of extramural grants and contracts for innovative research, training/educational, and related healthcare initiatives to elevate ATSU's contributions to science and health and elevate ATSU to the level of a premier health sciences university.

The department provides research support through its pre- and post-awards offices and by publishing the "Grants and You" newsletter, which keeps faculty up to date on issues related to grant funding, development, and submission.

Newsletters, magazines, and other publications

ATSU provides research-related information to faculty and students through a variety of printed and electronic formats.

Faculty, students, and staff may access information through ATSU's portal (my.atsu.edu) and by going to ATSU's website (atsu.edu) and searching for A.T. Still Research Institute. A third method is to visit iconnect (iconnect.atsu.edu) and search various headings for research-related activities and publications. Information included in these publications about research activities of faculty and students is self-reported. Information about faculty and student research for these publications is acquired by requesting this information from faculty on a quarterly basis.

- *Spark*
Spark, ATSU's scholarly activity magazine, is published biennially by Communication & Marketing in partnership with Research & Grants. It is designed to celebrate and foster the University's continued commitment to scholarly activity contributing to healthcare education, knowledge, and society.
- "ATSU Research" newsletter
"ATSU Research" is published quarterly by the A.T. Still Research Institute to provide information about faculty research.

- “Grants and You” newsletter
Information related to the “Grants and You” newsletter is available at the following website: grants.atsu.edu/resources/###newsletter.
“Grants and You” is a publication of Sponsored Programs. It includes information about University-wide sponsored program submissions and awards, upcoming funding opportunities and deadlines, announcements of research-related procedural and policy changes or updates, upcoming conferences, and calls for research papers, abstracts, and posters.
- iconnect
The electronic publication, “iconnect” (iconnect.atsu.edu) is a University-wide news source published by ATSU Communication & Marketing. It is accessible online by anyone and provides highlights of major research accomplishments and access to research publications by other university departments.

Other research resources

A.T. Still Research Institute

The web page for A.T. Still Research Institute is available at atsu.edu/research/index.htm.

The goal of the research institute is to "explore and advance the scientific evidence base of osteopathic medicine and associated health professions within A.T. Still University" (About the Institute, Goals and Objectives, atsu.edu/research/our_researchers/GoalsObjectives.htm).

A.T. Still Research Institute is available to “assist, mentor, and nurture” faculty in “applying for and conducting sponsored research projects” (About the Institute, Administration Team, atsu.edu/research/our_researchers/AdministrativeTeam.htm). As part of its mission, A.T. Still Research Institute formed NCCHR, which includes a partnership with the National Association of Community Health Centers. Research Nexus is an internal seminar series for presentation of ATSU research projects. Most sessions are recorded and may be viewed by PH faculty either live through videoconferencing or later on ATSU’s YouTube channel. While many presentations involve clinical research, they also feature research projects of interest to PH faculty and students, including:

- More accurate oral cancer screening with fewer salivary biomarkers
- Statistical significance is ruining science: Try effect sizes instead
- What you need to know about education research
- Body weight perception predictors and trends in U.S. adults

Institutional Review Board (IRB)

This University-wide committee meets regularly to ensure human subjects are protected in all research activities in accordance with federal guidelines. Members of the IRB include representatives from ATSU faculty and community.

Interdisciplinary Research Committee

ATSU’s Interdisciplinary Research Committee meets monthly to discuss issues involving research throughout ATSU. The committee administers the annual application review and reward processing for three internal research funds. Members come from all University departments. Dr.

Gregory Loeben, of the PH faculty, serves on the University Interdisciplinary Research Committee.

ATSU-CGHS Research Webinars

ATSU-CGHS Research Webinars, sponsored by the PH department, debuted in spring term 2014 and have since become a University-wide resource. These webinars help faculty keep abreast of developments in the field of public health, share knowledge gained from their ongoing research activities, and network with outside speakers. Both the webinar schedule and archive of ATSU-CGHS Research Webinars are listed at guides.atsu.edu/CGHS/Public_Health/Student_Corner/Research_Webinars. Most of the webinars are also posted on the “ATSU-CGHS Research Webinars” playlist on the University’s YouTube channel.

Presentations from PH faculty include:

- Predictors of low birth weight in Kansas – Dr. Jim Guillory
- Exploring the ethical underpinnings of healthcare workers refusals to participate: Ebola, flu vaccinations and conscientious objection – Dr. Greg Loeben
- Visualizing data: Arizona oral health data and Geographical Information Systems (GIS) – Dr. Marsha Presley

Dental public health residents are required to participate in ATSU-CGHS’ Research Webinar Series at the end of their resident program.

Outside speakers have included:

- A stream is always giving life: Perspectives for health practitioners working with American Indian/Alaska Native Communities – Aiko Allen, New Mexico Department of Health Tribal Liaison
- Pitching research ... to an academic expert – Dr. Robert Faff, University of Queensland (Australia)

Public Health Grant Resources

“Public Health Grant Resources” is a folder contained in Google Drive, with a shareable link (drive.google.com/drive/folders/1BXVkk2MTOq56bPWG9k9wK5YA5dAhNVvE?usp=sharing). The link is shared with all faculty, including adjuncts through ATSU’s *CGHS Instructor Island* within Canvas LMS. The folder contains the following three items:

- A document describing where to find government grants and tips on how to search for appropriate grants.
- A document listing various potential grant sources (government and non-government) and links to their websites.
- A database of select grants from these various funding sites that may be appropriate for public health. The database is updated once a month.

This resource is not intended to replace ATSU Sponsored Programs. Rather, these resources may inspire reflection on new research directions. The database is intended to be an inspirational resource, not a full list of all public health grant opportunities.

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- 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.
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Research and scholarly activities

Interdisciplinary research and scholarly activities

“Population health case studies: Impacting health through evidence-based community and clinical interventions”

PI: Dr. Barbara Maxwell, director, interprofessional education and collaboration

Co-I's: Dr. Ann Lee Burch, dean of ATSU-ASHS and adjunct PH faculty; Dr. Lise McCoy, co-director of faculty development, ATSU-SOMA; and Dr. S.D. Shanti, PH faculty

Funding source: Centers for Disease Control and Prevention (CDC) and Association for Prevention Teaching and Research

A series of interprofessional, problem-based case studies focused on population health for students in public health and health professions programs were created for this project. The cases highlighted three CDC initiatives: Health Impact in 5 years (HI-5), Racial and Ethnic Approaches to Community Health (REACH), and Million Hearts. The goal is that the case studies will deepen students' understanding of population health concepts and improve their ability to apply public health principles. Through exploration and analysis of case studies, students will learn different approaches to improving population health.

“Hi-5: Health Impact in 5 years”

Team members: Dr. Barbara Maxwell, lead; Dr. David Line, full-time PH faculty; Dr. Joan Leafman, adjunct PH faculty; Dr. Marsha Presley, PH research associate; and Brandi Buchanan, occupational therapy, ATSU-ASHS

“500 Corazones”

Team members: Dr. Lise McCoy, lead; Dr. Mary-Katherine Smith (McNatt), PH department chair; Aesha Turner, adjunct PH faculty; and an MPH student

“REACH: Racial and Ethnic Approaches to Community Health”

Team members: Dr. Ann Lee Burch, lead; Monica Fernandez, ATSU-SOMA; Lizette Romero, Diversity and Inclusion; and Vikki Driving-Hawk, ATSU's National Center for American Indian Health Professions

Public health workforce

“Oral Health Workforce Training and Medical-Dental Integration Initiatives to Increase Access to Oral Health Care in Florida”

PI: Florida Department of Health

Consultant: Dr. Jaana Gold

Funding source: Health Resources and Services Administration workforce grant

Dr. Gold acts as a consultant for the sub-project: “Developing Evidence-based and Community Informed Training for Florida's Oral Health Workforce on Risk Factors for Obesity and Dental Health.” She is developing evidence-based and community-informed training and education

materials on risk factors and prevention of childhood obesity and dental caries. She will provide training for Florida's dental providers in 2020-22.

Public health outreach and the classroom

“MPH – Troop B Collaboration Assessment”

PI: Dr. Mary-Katherine McNatt (Dr. Katherine Adler was the original PI)

Co-I's: Dr. David Line; Dr. Joshua Bernstein, health professions programs, ATSU-CGHS; Dr. Meg Sheppard, health professions programs, ATSU-CGHS

Research support: Dr. Marsha Presley, research associate and adjunct PH faculty

Subject matter expert: Dr. Rochelle Mascarenhas, adjunct PH faculty

Funding source: ATSU

The PH department entered a collaborative partnership with Troop B – a group of counties in northeast Missouri – in 2015. ENVR6200: Environmental Health Sciences has a variety of learning activity assignments asking students to design communications (e.g., Twitter campaigns, trifold, scripts for audio or video public service announcements (PSAs), and research briefs) for public consumption. Students are told about Troop B and asked to keep needs of this locale in mind during the design of their assignments. Students are also asked to sign a form granting permission for the PH department to give their creations to Troop B counties. If students do not sign this form, their assignments will not be forwarded on to Troop B counties.

This research project is to assess collaboration and determine whether students' creations were being utilized, and if not, why. Results of this assessment will be taken into account during revision of the course. The intent is to create a course where students get real-life experience designing public health communication materials for public consumption, while achieving learning objectives appropriate for course material and meeting public health communication needs of Troop B counties where possible.

“Connecting Kids and Health Information via Community Partnerships”

PI: Margaret Hoogland, librarian, ATSU

Co-I: Dr. Ashley Love

Funding source: National Library of Medicine

Partner: YMCA

The purpose of this study was to improve health literacy of sixth grade children in Adair County, Missouri, through use of interactive web-based information. The project was a pilot study in partnership with a local YMCA to determine feasibility and effectiveness of integrating web-based information focused on nutrition, physical activity, and cardiopulmonary resuscitation in a school curriculum.

Programs for the underserved

“Improving tribal mind, body, and spiritual wellness through cultural connections”

PI: Dr. Mary-Katherine McNatt

Co-I's: Dr. Ashley Love, Dr. Marsha Presley

Curriculum design: An MPH student

Funding source: ATSU (NCCHR grant).

The Urban Intertribal Center of Texas and ATSU seek to collaboratively develop and implement a 12-week diabetes prevention and management program to include social and cultural components to improve health and wellness of indigenous members through increased cultural connectedness. Research demonstrates such cultural connection impacts health outcomes. The goal is to connect tribal members with strengths of their heritage through use of culture and social connectedness in a health intervention that promotes a healthy lifestyle.

“Establishing a Relationship Between Vertical MS Transmission and Early Childhood Caries”

PI: Dr. V. Singh, ATSU-KCOM

Consultant: Dr. Jaana Gold

Funding source: ATSU

Unfunded research

- Systematic review of the effects of Cannabis on oral health – Dr. Jaana Gold
- Determining the relationship between body-mass index and dental caries – Dr. M. Lindsay Wright
- Silver Diamine Fluoride (SDF) and caries control – Dr. Jaana Gold
- Application of GIS to oral health survey of kindergarten and third grade children data – Dr. Marsha Presley

Integrating research into MPH coursework

Research within the PH department has two primary functions: advance the discipline of public health and improve health through research in public health. These functions are achieved by scholarly activities of faculty and through infusing the role of research in public health practice into the curriculum.

In 2013, the MPH Research Committee developed a rationale and set of guidelines to assist faculty members in integrating research into their courses. The underlying premise is research must be integrated into the classroom to provide students with valuable tools for their careers in applied public health practice, as well as a passion for advancing public health knowledge through research. Faculty members discussed this goal and methods to achieve it in a face-to-face meeting of the MPH Research Committee in Kirksville, Missouri, in July 2013.

Integrating research into individual courses is an opportunity to broaden the scope and depth of students’ knowledge of public health issues and evidence-based practices. Faculty members lead students by example of their research. This integration and interface with students benefits faculty members by encouraging them to expand research activities. Within this context, faculty and students share their interests, contribute new information, and develop new ideas. Some of the topics emphasized in the classroom are:

- Select a research topic and generate hypotheses
- Design variables
- Gather data
- Coding
- Research methods
- Ethical issues
- Write a research proposal
- Dissemination

The MPH Research Committee intends to revisit this topic at the end of the 2019-20 AY. The intent is to reassess how well these efforts succeeded in infusing research into the classroom. Where gaps are identified, the committee plans to work collaboratively to design innovative assignments that reinforce research skills and stress the importance of public health research throughout the public health curriculum and various public health career paths.

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- 4) Describe and provide three to five examples of student opportunities for involvement in faculty research and scholarly activities.
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ATSU-CGHS research webinars, sponsored by the PH department, debuted in spring term 2014 and helped students keep abreast of developments in the field of public health. Students are encouraged to attend by multiple email announcements and a global announcement within Canvas LMS. Webinars are recorded, and links to the recording are sent to all students, so those who were unable to attend live may watch the webinars at their convenience. Both the webinar schedule and archive of ATSU-CGHS Research Webinars is listed at guides.atsu.edu/CGHS/Public_Health/Student_Corner/Research_Webinars. Most webinars may be found in the ATSU-CGHS Research Webinar playlist on ATSU's YouTube channel (youtube.com/channel/UC-nazOgdRLQABiKstOjKIXQ).

An MPH-D student turned her completed practicum project into a research project, with mentoring from Dr. Ashley Love. The student studied oral health needs of female jail inmates in Phoenix, Arizona. Women with a history of incarceration have significant barriers to accessing routine dental care. Lack of utilization of dental services, drug habits, and limited oral health knowledge place women with a history of incarceration at a higher risk for oral diseases. The student designed an oral health needs survey to gain information on access to dental care, self-perception of oral health, and past emergency department use for dental pain. Seventy-six incarcerated women responded to the survey. The student also conducted focus groups on oral health needs. She presented her project results at the 2017 American Public Health Association (APHA) conference and 2018 National Oral Health Conference and won first prize among student merit award winners at the 2018 American Association of Public Health Dentistry (AAPHD) conference.

As part of ATSU's NCCHR initiative, an internal grant is available annually to initiate research with community health centers. Dr. Mary-Katherine McNatt (department chair), Dr. Ashley Love (full-time faculty), and Dr. Marsha Presley (research associate and adjunct faculty) received one of these internal grants to work with the Urban Inter-Tribal Center of Texas in a participatory research project, "Improving tribal mind, body, and spiritual wellness through cultural connections." After their project was selected, they were mentored through the proposal process with extensive feedback. To obtain funding, they were required to rewrite the proposal to federal grant acceptance standards. They are currently setting up their project in Dallas, Texas, and an MPH student is being sought to develop a diabetes intervention for the program.

Dr. Presley was an MPH student when the proposal was written and submitted. She wrote the background for the proposal based on work she completed in PUBH6700: Public Health Policy and Politics. Moreover, she wrote objectives for the proposal based on coaching she received in PUBH7500: Development of Community-Based Programs. The proposal mentoring process for the grant was an invaluable part of her public health education.

Each dental public health resident is required to complete an independent study project as part of the residency requirements. While the research is independent and not part of faculty research, they are mentored throughout the research project by the dental PH faculty, Drs. Jeffrey Chaffin, Jaana Gold, and S.D. Shanti (replaced by Dr. M. Lindsay Wright).

Published research projects include:

Angelopoulou, M.V., Shanti, S.D., Gonzalez, C.D., Love, A., & Chaffin, J. (2019). Association of food insecurity with early childhood caries. *Journal of Public Health Dentistry*, 79(2), 102-108. <https://doi.org/10.1111/jphd.12299>

Clemens, J., Gold, J., & Chaffin, J.G. (2018). Effect and acceptance of silver diamine fluoride treatment on dental caries in primary teeth. *Journal of Public Health Dentistry*, 78(1), 63-68. <https://doi.org/10.1111/jphd.12241>

Examples of unpublished research include:

- Assessing the oral health status of those awaiting decisions regarding their immigration status while in the custody of an Immigration and Customs Enforcement Facilities in Oregon.
- Assessing the knowledge and perception of Iowa dental hygienists regarding SDF use as an alternative dental caries treatment.

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

Details for promotion requirements may be found in the ATSU Faculty Handbook, available in ERF E3-4_at-still-faculty-handbook.pdf. Activity in three categories, teaching, scholarly activity, and professional/community service, is examined when considering faculty advancement. Sustained activity must be present for all three categories. The candidate must be rated superior in at least two categories and at least average in the remaining category.

In the scholarly activity category for promotion to rank of associate professor, the candidate must exhibit:

- A sustained record of publishing original scholarly work in peer-reviewed professional journals
- A sustained record of presenting scholarly work at national meetings
- Acquire extramural support for scholarly work
- Obtain professional certification (e.g., CPH or ABDPH certification)
- Participation in professional development programs

In the scholarly activity category for promotion to rank of professor, the candidate must exhibit:

- A continuing record of publication of original scholarly work in peer-reviewed professional journals
- Publication of a textbook, manual, or monograph by a nationally or internationally known publisher or professional organization
- Regularly making scholarly presentations at regional, national, or international meetings of professional societies
- Acquire sustained extramural support for scholarly activity
- Maintain professional certification (e.g., CPH or ABDPH certification)

- 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.

Outcome measures for faculty research and scholarly activities				
Outcome measure	Annual target	2016-17	2017-18	2018-19
Number of professional presentations by PH full-time faculty	3	21	17	5
Number of peer-reviewed publications by PH full-time faculty submitted	3	6	6	7
Number of peer-reviewed publications by PH full-time faculty accepted	1	6	8	4
Percentage of PH full-time faculty who are participating in research and scholarly activities	100%	85%	85%	85%

Full-time PH faculty are meeting annual objectives set for the number of professional presentations and publications accepted in peer-reviewed publications. Participation in research and scholarly activities includes funded and unfunded research, mentoring residents or students in research activities, and publishing relevant public health manuscripts in peer-reviewed journals. The one faculty member not participating in research is mentoring students through APE and has been providing professional development in public health ethics (See Criterion F4-2.).

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

Strengths

The MPH program pursues an active research program. This program is supported within the department, as well as by ATSU Research Support. Policies and procedures are in place to support research. Research is promoted in strategic plans, policies, and procedures within the department and the University.

ATSMLib actively assists PH faculty with literature searches related to research projects.

The PH department produces a bi-monthly, online research webinar series in which ATSU-CGHS faculty members present their research to other faculty in the College and the University, as well as to others invited to attend.

Weaknesses

Involvement of students in faculty research may be particularly difficult in the online environment. Even in situations where students are local to the project and are available, or the project may be done remotely, students require an appropriate incentive to participate.

Plans for improvement

The MPH Research Committee intends to pursue the following two initiatives:

1. Provide collaborative support to identify and recruit outside speakers to contribute to ATSU-CGHS Research Webinars. Outside speakers will add to the richness of public health topics and could provide students and faculty opportunities to explore additional areas of public health, find mutual interests for collaboration, and expose students to potential career paths.
2. Revisit integration of public health research into the classroom. Where gaps are identified, the committee plans to work collaboratively to design innovative assignments that reinforce research skills and stress the importance of public health research throughout the public health curriculum and career paths.

The PH department will also work on determining additional ways to recruit *and retain* students for ongoing research projects. Faculty will seek funding for their projects, including sufficient funds for student labor, and explore various remote ways for students to participate.

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.
-

ATSU-CGHS "encourages participation in community and professional service" as one of its commitments and values under leadership (ATSU-CGHS Faculty Handbook, page 8, available in ERF E5-1_CGHS_Faculty_Handbook_03142018_FINAL.pdf). ATSU-CGHS defines professional service as (page 15):

Professional service specifically refers to contributions made to the academic mission of the College, and may include, but is not limited to, the following: committee membership, admissions recruitment, screening, interviewing, course development, development of the program or school, professional association membership and contributions, and use of their expertise to benefit the mission of ATSU-CGHS at local, state, or national levels.

ATSU-CGHS includes community service in its definition of professional development (emphasis added), where it requires faculty to (page 22):

Submit an annual professional development plan and report professional development activities as requested, but at least annually, that may include attendance at workshops, continuing education activities, service to the institution *and community* in which one resides, and publication.

As delineated in Criterion E3-1, full-time faculty are expected to state their goals regarding percentage of time they will spend on teaching, scholarly activity, and service during their annual evaluation. These percentages must be approved by the department chair.

These definitions and expectations are consistent and aligned with those provided by the University.

ATSU lists "leadership in community health" as a core institutional value and "social responsibility" as a core professional attribute (ATSU Faculty Handbook, page 6, available in ERF E3-4_at-still-faculty-handbook.pdf). Under "Faculty Promotion Guidelines" (pages 21-28), ATSU defines five different types of "faculty scholarship" to serve as a guide for "productivity and scholarly activity" to be considered for promotion purposes. "Scholarship of engagement" is defined as (page 22):

A faculty member may be doing research, teaching, and/or professional or public service in partnership with a community organization. This research, teaching, and

service should also be shared publicly and provide others with the opportunity to apply, use, and evaluate findings.

- *Engaged research* occurs when a university-community partnership is used to identify, evaluate, and solve a societal problem for mutual benefit of the University and community. Outcomes of the research lead to improved evidence-based practice for the public good.
- *Engaged teaching* occurs when learning opportunities happen in community-based environments. This includes service learning, internships, clinical experience, field trips, or practicums to enhance the student's educational experience while simultaneously contributing to the public good.
- *Engaged service* occurs when a faculty member, as a subject matter expert, partners with a community organization for mutual benefit. This may include lending research expertise about a specific issue, serving on a board (private, public, or organizational), offering research-based policy recommendations to legislators at a committee hearing, or providing expertise through media for the benefit of the public good.

2) Describe available university and program support for extramural service activities.

As discussed in Criterion E3-3, ATSU-CGHS offers faculty members an annual stipend of \$2,500 for faculty development. These funds may be used for professional membership dues and travel to and from professional meetings and conferences. Faculty are encouraged to pursue leadership positions within their professional organizations. ATSU and ATSU-CGHS provide rewards for participation in meaningful activities for these organizations. These rewards include advances in faculty rank, awards for service, and time to participate in these activities.

The PH department has policies and procedures encouraging faculty to engage in professional and community service. They are included in the ATSU-CGHS Faculty Handbook and ATSU's academic appointment and compensation contract.

The PH department has faculty dispersed across the U.S. This gives the department a unique opportunity to develop service-related public health activities across the country and to participate in many different ongoing public health activities at multiple levels of public health. Faculty members serve on community boards, review journal articles, serve as members of community-based committees, or volunteer their time for community service to improve health.

The PH department, with support from ATSU-CGHS administrative leadership and the University, has formed partnerships with the following two organizations to serve as foci for service-oriented activities for faculty and students.

In 2013, ATSU-CGHS' dean met with and formed a partnership among the PH department and 16 county health departments composing the Northeast Missouri County Healthcare group, also known as Troop B. These counties include Adair, Chariton, Clark, Knox, Lewis, Linn, Macon, Marion, Monroe, Putnam, Rolls, Randolph, Schuyler, Scotland, Shelby, and Sullivan.

In 2015, the department chair formed a partnership with Corbin's Legacy, a 501(c)3 public charity started by public health adjunct faculty member Joan Leafman. The mission, vision, and core values of Corbin's Legacy are (corbinslegacy.org):

Mission: To improve outcomes of underrepresented elementary school children through the elimination of food and medical insecurity

Vision: That no child in Arizona goes hungry or without medical care.

Core values:

Service: Commitment to providing food and medical services to children in need

Inclusiveness: Helping all children in need without question, judgement, or prejudice

Caring: Willingness to act to help children in need

Voice: For those who cannot speak for themselves

One outcome of this partnership is ATSU-CGHS administration approved an annual opportunity for students to earn course credit for sharing their service activities performed during National Public Health Week/Corbin's Legacy Challenge Day in the week's course discussion forums (This opportunity will be described in greater detail in Criterion E5-4.).

In 2017, this partnership expanded to include ATSU schools at the Mesa, Arizona, campus and Corbin's Legacy. Outcomes of this partnership are the annual "Back to School Day" on ATSU's Mesa, Arizona, campus and opening of a school clinic at Emerson Elementary School in Mesa, Arizona (Both of these opportunities will be described in greater detail in Criterion E5-4.).

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

All faculty members belong to professional organizations appropriate for their specialties, including American Public Health Association (APHA), Society of Public Health Education, National Rural Health Association, Center for Public Health Systems and Services Research, American Society of Bioethics and Humanities, Arizona Bioethics Network, Association of State and Territorial Dental Directors, American Association of Public Health Dentistry (AAPHD), Association of Military Surgeons of the United States, Society for Epidemiologic Research, National Network for Oral Health Access, and the American College of Epidemiology, among others. These memberships augment the faculty's experience by helping them keep current in their fields and facilitate networking opportunities with other public health professionals. Many have served in leadership roles in these organizations and have received awards for their service and leadership. Leadership examples from full-time PH faculty include, but are not limited to, the following:

- President, AAPHD, 2017-18
- Associate editor, Surgeon General Report on Oral Health 2020
- Chair, American Dental Education, evidence-based dentistry special interest group, 2018-present
- Chair, Educational Council, AAPHD, 2017-18

Integration of faculty professional service activities with instruction

Faculty members bring these experiences into the classroom as they design the curriculum and individual courses. Faculty maintain course currency by incorporating materials they encounter through their professional service. Textbook readings are augmented by up-to-date, peer-reviewed journal articles. Students are expected to be familiar with websites for CDC, APHA, AAPHD, Department of Health and Human Services, Centers for Medicare and Medicaid Services, healthypeople.gov, etc., as well as local departments of public health across the nation. Multimedia materials are incorporated into the curriculum as appropriate. These materials include resources from government centers, news reports on recent issues pertinent to public health, documentaries, tutorials, and other educational materials.

Faculty members observe asynchronous student discussion forums on a daily basis and participate frequently to help stimulate and focus discussions. Through these online conversations, they share their experiences to provide a context for the discussion topic and make a subject come alive.

For instance, Dr. Jeff Chaffin uses his experience as a member of the ASTDD to connect students with the organization. Two dental public health residents developed White Papers for the ASTDD for their practicum projects in 2018-2019 AY. Both papers were published on the ASTDD website.

Dr. Ashley Love uses her experience as a state epidemiologist to help EPID6100: Epidemiology students explore current outbreaks. For instance, Dr. Love was in Korea during the MERS outbreak and could inform her students about measures Korea was implementing during the outbreak as well guiding students to follow information available on the World Health Organization sites. Currently stationed at Travis Air Force Base, she was able to discuss with students the coronavirus quarantine order on base and perceptions of military families living in on-base housing during the quarantine; she also helps students learn to track the coronavirus outbreak as it occurs in real time.

Dr. M. Lindsay Wright volunteered to be the lead author for an American Public Health Association policy proposal statement focused on integrating dental benefits into Medicare and Medicaid. She integrates her experiences with collaboration and advocacy into her teaching.

As chair of the American Dental Education Association, evidence-based dentistry special interest group, Dr. Jaana Gold is able to share her experiences in the classroom to enforce concepts of evidence-based practices as the importance of public health research in all of her courses. She was recently awarded an oral health scholarship to attend the Health Action Conference in Washington, DC. She can take what she learns about key current issues, advocacy, and policy opportunities into classroom discussions to inspire the next generation of dental public health advocates.

Faculty community service activities

In addition to contributing to community service activities described in Criterion E5-4, faculty volunteer with:

- Susan G. Komen Breast Cancer Foundation – Komen Race for the Cure
- Day for Special Smiles – clinical dental work on special needs patients

- Smiles Beyond Bars – ambassador for the Smile for Success Gala
- Coconino Humane Association – volunteer
- Flagstaff Family Food Center – volunteer
- St. Mary’s Foodbank – volunteer
- Flagstaff Fall Festival – volunteer
- WIC Oral Health Program (Fla.) – director
- Dental screening program (third grade) – volunteer

Integration of faculty extramural service activities with instruction

In each class they teach, faculty members may pass on service experiences to PH students through instructor-learner interactions within discussion forums. Service experiences also are integrated into the design of course learning activities that deepen a student’s understanding of effects of social determinants of health, history and characteristics of different populations, and interventions for and service to underserved populations.

One example is PUBH5400: Dental Public Health Ethics. Dr. Greg Loeben volunteers as a clinical ethicist for pediatric and adult hospitals, hospice organizations, and the regional donor organ procurement organization. In addition, he volunteers for a local food bank and with other local public health organizations such as Soft Landing, which is a refugee resettlement program. As the instructor for PUBH5400, Dr. Loeben integrates this exposure into real-life discussions with students about ethical dimensions of public health, such as the impact of social determinants of health, justice and access, diversity, ethical sensitivity, community versus individualism and more. Dr. Loeben developed course discussions to involve questions about students’ own service experiences and how they relate to topics under discussion.

PUBH6700: Public Health Policy and Politics. The course was developed to encourage students to consider how policies have affected immigrant populations and LGBTQ rights and how recent policy changes affect the populations’ well-being. Then, students are required to choose three social determinants of health. From those three choices, the instructor assigns a social determinant of health to each student, ensuring as many social determinants are represented as possible. Throughout the course, students focus their responses on their assigned social determinant of health. They then summarize what they learned in the class through a presentation they share with classmates. Faculty use their own service experiences to inform discussions and push students to learn more about how their assigned social determinant affects life experiences and abilities to prevent illness or access healthcare.

ENVR6200: Environmental Health Sciences. Assignments in the course ask students to design public health communication campaigns for public consumption. These campaigns take the form of Twitter campaigns, scripts for audio and video public service announcements (PSA), trifold, and research briefs. When the partnership with Troop B counties was formed, an opportunity arose for students to direct their communications to a specific population – the rural population of northeast Missouri. The course was redesigned with this population in mind, and students were told their campaigns may be used by county health departments in each of the 16 counties, if they signed a form providing permission for their creations to be used. Students are clearly informed they do not have to sign the form, and their grades do not depend on signing the form. Nor are the students reminded to sign the form, so they do not feel pressure to sign.

The PH department determined campaigns forwarded to Troop B counties were not being used, and a grant to assess the partnership was obtained so barriers could be identified and addressed. This study determined three changes may improve efficacy of student products: (1) introduce students to the Troop B population via video to provide a better understanding of the population; (2) distribute student creations through a secure folder on the cloud, rather than a USB flash drive that may be tossed aside and forgotten; (3) expand course assignments to include production of infographics, posters, or billboards.

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- 4) Describe and provide three to five examples of student opportunities for involvement in faculty extramural service.
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One initial initiative resulting from Corbin's Legacy partnership was Corbin's Legacy Challenge Day, an annual event inspired by Dr. Mary-Katherine McNatt, PH department chair. Once a year, in conjunction with APHA's National Public Health Week, the partnership sponsors a "Day of Service" and "invite(s) everyone to serve a child or children in need in a way that makes them feel healthier and more secure" (Challenge Day, corbinslegacy.org/challengeday/).

ATSU-CGHS staff model this event by hosting an annual children's (used) clothing drive during National Public Health Week on the Kirksville, Missouri, and Mesa, Arizona, campuses. Clothing collected on the Kirksville, Missouri, campus is donated to the Community Action Partnership of Northeast Missouri. Clothing collected on the Mesa, Arizona, campus is donated to Clothes Cabin. Neither organization resells clothes; donations go directly to children in need.

Students and faculty are encouraged to participate through emails and announcements in the classrooms. If students participate, they may get course credit if they post their service activity in that week's discussion forum *and* explain how their service activity contributes to public health. Selected examples include:

One student wrote he used to tutor children, but fell away from it. Corbin's Legacy Challenge Day inspired him to start again. Since he was only at the application phase by Challenge Day, he and his husband committed to "set aside \$50 each week to buy food in bulk that can make tasty but healthy 'snack bags' that (the Jubilee Family Development Center (JFDC)) hands out on Fridays." "JFDC serves more than 6,000 children and adolescents from central Virginia."

Another student took on two projects for Challenge Day: (1) She publicized a film for the IF PROJECT. "The project began with one police detective, one inmate, and a question about what might have made a difference." She encouraged "attendance with my colleagues at work, my neighbors, and any others who I thought might have insight, influence, or information to share." ... "I think one of the most influential statements out of the film for me happened when one of the women in the film asked if there would be a place for her in the world – after she completed her debt to society. I found myself thinking, 'why wouldn't there be?' until I thought about the harsh realities she will face as she re-enters society outside of the bars she now lives behind." (2) She raised \$300 for the local elementary school lunch account program. "I recently found out that my town [near Atlanta, Georgia] is approximately 40% Hispanic, 30% black, and 30% white. Legal status, family income, language barriers, racial divide, and a host of other factors are still very prolific here."

Another student commented she wanted to get involved because she has “two small children so the health and well-being of children hit close to home for me. In addition, I live in the San Francisco Bay area where the contrast between those who have and those who don’t is quite stark. Housing is terribly expensive here, and many families struggle to afford the basic necessities. Even families who make a decent income find the cost of living to be overwhelming. Areas once predominantly low-income have become gentrified, and those who lived there have been displaced due to the rising rental prices. Many families with children have been impacted, and find themselves in transitional housing or homeless shelters. My participation in Corbin’s Legacy will be to conduct a book and crayon/art supply drive for children living in a local homeless shelter. The reason I picked these items are twofold: crayons and art in general are a wonderful form of self-expression and can provide healing as well as escape. In addition, books serve as similar benefit but also remind us about the potential we can harness and use to create a new future.” ... “These materials will most likely be donated to GRIP, the Greater Richmond Interface Program, which offers housing to homeless families and works in partnership with the local school district to meet the needs of these kids.”

Back to School Day is another event enthusiastically adopted by the other schools on ATSU’s Mesa, Arizona, campus. A few hundred children are bussed from Title I elementary schools in the Phoenix metropolitan area. They spend their school day on ATSU’s campus, where they receive a dental screening, dental education, toothbrush, toothpaste, and floss; physical exam; vision screening; audiology screening; and structured physical activity (fun) – all from ATSU students overseen by ATSU faculty.

Corbin’s Legacy follows up to help children obtain identified needs (e.g., glasses, hearing aids, medication, etc.).

In addition to the four health screenings, students all receive a hot lunch, school supplies (thanks to Treasures 4 Teachers), and gift cards for food and uniforms. Students are also be inducted to Corbin’s Legacy Kid’s Club “Kids Helping Kids To Make Change For Good.”

At the inaugural event in September 2017, 200 underprivileged students were served by over 100 volunteers. They arrived on seven school buses from six different elementary schools in the Phoenix, Arizona, metropolitan area.

Corbin’s Legacy followed up with six children for physicals, six children for hearing, 32 children for dental, and five children for vision. A medical practice in Scottsdale, Arizona, agreed to do all of the physical follow-ups, no matter how complex, for free, and an optometrist from Tempe, Arizona, donated services for free.

Many students who volunteer include dual-degree students. These students not only get practice with clinical skills, but they also gain a deeper understanding of the impact poverty and other social determinants of health have on these children. Many non-clinical volunteers are needed to make this day a success as well. PH department students, faculty, and staff, who are local to the area, turn out to volunteer. Some ATSU-CGHS faculty fly across the country to support the event.

After the first Back to School Day, ATSU professor Dr. Harvey Simon, a public health pediatrician and attorney, felt concern about the health status of children screened and proposed, in

partnership with Corbin’s Legacy, a clinic be opened in a Title I elementary school to ensure regular and easy access to healthcare for at-risk children. In partnership with Mesa Public Schools, a clinic was opened at Emerson Elementary School. Care is provided by ATSU-SOMA physicians and ATSU-ASHS physician assistants and their students (Corbin’s Legacy/ATSU pediatric screening program, corbinslegacy.org/our-initiatives/corbins-legacy-atsu-pediatric-screening-program/).

These three events that blossomed from the seed of the PH department – Corbin’s Legacy partnership not only provide opportunities for student service activities but also opportunities for student practicum experiences.

For instance, one student took two years of data from the Back to School Day event, coded and analyzed it, and presented a report for the Mesa Public Schools. From the report, Mesa Public Schools instituted changes in health screenings for its students and made more resources available. Another student interviewed over 800 Title I children to determine whether children thought they were healthy and living healthy lifestyles, and a pair of students looked at the landscape of Title I schools across the Phoenix metropolitan area to determine whether access to food and healthcare were available and parents were unaware or not taking advantage of that access, or whether children really lived in food and/or healthcare deserts.

-
- 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.
-

Percent of full-time faculty participating in extramural service

One hundred percent of ATSU-CGHS’ full-time PH faculty participate in extramural service. Faculty recruitment for the PH department has focused on applicants who have served in leadership positions or demonstrated leadership potential and a strong record of community service. Faculty work with the PH department chair to develop their allocation between research, service, and teaching each year. While faculty are not required to participate in service, all do and service is a requirement for promotion.

Number of community-based service projects

Currently, there are two primary community-based service projects. The first is Back to School Day, which takes place on ATSU’s Mesa campus, as described in Criterion E5-4. This project serves Title I elementary school children all over the Phoenix metropolitan area, with a focus on Mesa Public Schools.

Corbin’s Legacy Challenge Day is a day (or week) of service directed at underserved children all over the world – wherever ATSU-CGHS PH students may be. Development and progress of both of these projects is described in Criterion E5-4.

Public/private or cross-sector partnerships for engagement and service

The primary partnership for engagement and service is the PH department – Corbin’s Legacy – partnership, which was developed as described in Criterion E5-4. The primary population served through this partnership is Title I elementary school children. Title I schools have high

concentrations of low-income students. To qualify as a Title I school, at least 40% of the students must be enrolled in free and reduced lunch programs.

Another partnership is with Troop B, a collection of 16 rural counties in northeast Missouri. Currently, the primary interaction with Troop B is to provide health education materials as described in Criterion E5-3. Last year, through an internal research grant, select faculty conducted an evaluation of this project. The PH department will change delivery of materials to a cloud-based method to better serve Troop B counties. The PH department is also currently redeveloping the ENVR6200 course to adapt additional health education delivery techniques, as previously described. As part of that redevelopment, the department plans to introduce students to Troop B counties at the beginning of the course to better orient students to Troop B's rural population and help them align their health education messages. Finally, this project will be expanded to include other courses to broaden the ability to supply their health education needs.

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

Details for promotion requirements may be found in the ATSU Faculty Handbook, available in ERF E3-4_at-still-faculty-handbook. Activity in three categories, teaching, scholarly activity, and professional/community service, are examined when considering faculty advancement. Sustained activity must be presented for all three categories. The candidate must be rated superior in at least two categories and at least average in the remaining category.

In the professional/community service category for promotion to rank of associate professor, the candidate must exhibit

- Leadership in professional societies
- A sustained record of service to the department, College, University, and/or community

In the professional community service category for promotion to rank of professor, the candidate must exhibit

- Ongoing leadership in state, regional, national, or international professional societies or organizations
- Outstanding and sustained service to the program, department, College, or University

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

Strengths

The PH department actively pursues service needs in the community and rewards faculty for service activities. These activities include serving local health departments and community agencies, and by serving as a member or in roles of leadership for state and national government and non-government agencies. The University provides clear guidelines for the requirement to do this in the ATSU-CGHS Faculty Handbook and ATSU's academic appointment and compensation contract.

The PH department and University have formed partnerships to provide foci for faculty and student service activities. Moreover, one partnership seed has blossomed into a campuswide commitment having a tremendous impact on schoolchildren in Mesa and across the Phoenix metropolitan area.

Weaknesses

None

Plans for improvement

None

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.

- 1) Describe any formal structures for constituent input (e.g., community advisory board, alumni association, etc.). List members and/or officers as applicable, with their credentials and professional affiliations.
-

The PH department includes community members, adjunct faculty, and alumni members on its committees. These members are invited to meetings via a videoconferencing link, are asked for feedback, and have voting rights.

Stakeholders include (See Criterion A1 for the full list of committee members.):

Curriculum Committee:

- Bernie Fellner, MPH – Alumnus, retired
- Julie Hermann, MPH, CHES – University of North Texas Health Science Center
- Joan Leafman, PhD, MS – Corbin’s Legacy
- Jennifer Kocour, MPH – Accelerated Enrollment Solutions

CEPH Committee:

- Ann Lee Burch, PT, EdD, MPH – ATSU-ASHS
 - Bernie Fellner, MPH – Alumnus, retired
 - Lauren Kinser, MPH – Carol Martin Gatton Academy of Mathematics and Science
 - Joan Leafman, PhD, MS – Corbin’s Legacy
-

- 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.
-

As established in Criterion A1, the Curriculum Committee includes a community member, an alumnus, and a student. All members receive invitations to meetings, which include a videoconferencing link, courses up for approval and/or redevelopment, student feedback on the old version of the course, final grade distribution, grade distribution for individual assessments, and the associate dean’s assessment of the feedback received on the old course and whether assignments are appropriately rigorous. All members are asked for feedback on the course up for redevelopment or the redeveloped course and have voting rights. Feedback is used by the SME and instructional designer in charge of redeveloping the course to improve the course during redevelopment.

-
- 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

The vision, mission, values, goals, and evaluation measures are discussed within department and CEPH Committee meetings. These are revisited and revised as appropriate during CEPH self-study processes and within department meetings following revision of the University's strategic plan to ensure continuing alignment. As established in Criterion A1, the CEPH Committee includes two members of the community, three alumni, and two staff representatives. All members receive invitations to meetings, which include a videoconferencing link. All members are asked for feedback and participate in revisions.

b) Development of the self-study document

CEPH criteria are assigned to individual full-time faculty, staff, or administration to write as appropriate. As the CEPH self-study document is compiled, the CEPH Committee meets weekly to biweekly to review, strategize, and revise. As established in Criterion A1, the CEPH Committee includes two community members, two alumni, and two staff representatives. All members receive invitations to meetings, which include a videoconferencing link. All members are asked for feedback and participate in revisions.

c) Assessment of changing practice and research needs

Full-time faculty members, including the department chair, are required to demonstrate one faculty development activity per year. Most often, faculty use their faculty development stipend to attend conferences appropriate for their subject matter expertise. Instructional designers are also required to attend one conference appropriate for instructional design annually. By attending public health conferences, reading professional journals, and networking with other public health experts, faculty may make note of and assess changes occurring in either public health practice or research.

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

The PH department assesses graduates' ability to perform competencies in an employment setting in two ways:

1. At the end of a student's APE, preceptors are required to complete an evaluation before the student receives a passing grade. One question asked of the preceptor is whether the student demonstrated an ability to perform competencies while working on his/her APE.

2. At the end of the practicum course, students are similarly surveyed on their experience, and one question asked is whether students felt their MPH courses prepared them to perform competencies expected of him/her during his/her APE.

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

Documentation of external contributions to the CEPH self-study report in the form of emails (Phone calls were not recorded.) and assessment of program graduates' ability to perform competencies in an employment setting in the form of preceptor evaluations of student performance during their practicum are included in the ERF folder F1-4_External_Contributions.

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

Strengths

None

Weaknesses

Although ATSU-CGHS' online format allows public health practitioners and students to attend meetings from any location without having to travel, finding community members and students who have the time and/or are willing to attend meetings or provide feedback has proven to be difficult.

Plans for improvement

Plans are to recruit more widely and rigorously for committee positions.

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.
-

Professional development

Announcements are placed in the Student Corner and/or on the Master of Public Health Student & Alumni Association Facebook page for internships, travel scholarships to conferences, etc.

Service and community engagement

Students are introduced to the importance of service within the curriculum. Examples were provided in Criterion E5-2. For Corbin's Legacy Challenge Day, an annual event described in Criterion E5-4, students are encouraged to participate through emails and announcements in the classrooms. If students participate, they may get course credit if they post their service activity in that week's discussion forum *and* explain how their service activity contributes to public health.

Back to School Day is held on ATSU's Mesa, Arizona, campus annually, as described in Criterion E5-4. Students and alumni are sent emails with details describing services provided and population served (Title I children) and a link to register as a volunteer. ATSU's Student Affairs department in Mesa follows up with registered volunteers, assigns them duties, and orients them to their assignment.

Delta Omega – Delta Gamma Chapter

In fall 2016, the PH department initiated a chapter of Delta Omega, a public health honors society. Members consist of alumni and recent graduates. Recent graduate inductees must have a cGPA putting them in the top 25% of their class, which so far has been a cGPA of 4.0. All inductees must demonstrate a history of service to the community.

The chapter is in the process of putting together its mission, vision, goals, and bylaws. Once goals are finalized, the chapter will begin strategizing how to be more productive. While primary goals have yet to be voted on, goals are likely to consist of service activities centered on Corbin's Legacy Challenge Day (See Criterion E4.), raising money for Corbin's Legacy Back to School Day (See Criterion E4.), and raising enough money to start mentoring and sponsoring students to participate in Delta Omega's poster session at the annual APHA meeting.

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

Professional development

Professional development opportunities on behalf of students are yet to be tracked.

Service and community engagement:

Corbin's Legacy Challenge Day examples are highlighted in Criterion E5-4. Additional selected examples include:

- Town councilman
 - Developed and implemented greenway trails
- Created a program evaluation for a medical-dental co-location program
- Provide dental care to at-risk children and the underserved
- Program coordinator for a breast cancer support and advocacy group (Americorps)
- Health policy advocacy to Congress
- DOCARE International volunteer (Uganda)
- Educated Tanzanians on HIV/AIDS transmission and prevention
- Testing and counseling on sickle cell disease in Nigeria
- Coordinator for We Serve Day – Pacific Dental Services
- Implemented an alcohol and drug prevention program and anti-bullying program for elementary and middle-school children
- Serve in the Public Health Service Commissioned Corps
- Give Kids a Smile volunteers
- Volunteer at Pos Pelayanan Terpadu in Indonesia (community health initiative)
- Testified at the Minnesota State Capitol on early dental disease prevention
- Muslim Community Support Services volunteer
- Special Olympics volunteer
- Raising awareness on antimicrobial resistance
- Blue Cares – San Antonio Police Officers Association – volunteer
- Presented Tuberculosis prevention programs to South Asian ethnic populations

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

Strengths

ATSU-CGHS PH students are compassionate and eager to work with the underserved. Since ATSU-CGHS PH students come from all over the U.S., and even the world, their impact is felt across the nation and even the globe.

Weaknesses

Students self-report community activities. As such, the list above represented just a small subset of ATSU-CGHS PH students.

Plans for improvement

Plans are to solicit reports of student contributions more frequently. Questions about professional organizations to which students belong, and what contributions, if any, they are making to those professional organizations, will be included.

ATSU-CGHS' Chapter of Delta Omega, Delta Gamma, has indicated an interest in mentoring and sponsoring a student to attend Delta Omega's poster session at the APHA annual meeting.

In addition, plans are to be more proactive in advertising travel scholarship opportunities offered by various organizations through email, Canvas announcements, and Facebook postings.

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.
-

The PH department faculty is spread out over the United States. This dispersal is both a strength and a weakness. Because the department does not exist in a single locale, the ability to form a community with the department as a single unit is diminished. The strength is the department can effect change across the U.S.

1. Dentists providing clinical or other dental services to underserved populations
2. Individual professional organizations with which PH faculty have developed connections

Rationale

1. One PH department strength is its dental public health component. The PH dental faculty have strong ties to professional organizations, often in leadership positions, and the PH department has its partnerships with ATSU-ASDOH and ATSU-MOSDOH to draw from as well.
 2. Allows faculty to connect to others in their specific field of interest in public health and address professional development needs uniquely met through their specific skill sets.
-

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

The PH department counts provision of professional development opportunities as part of professional service. Not all faculty are expected to participate. As such, the PH department has no plans to formally assess needs. Individual faculty assess needs informally through their interaction with professional organizations to which they belong, and through interactions with their local public health community. These informal assessments have the advantage of being more flexible and responsive to immediate needs.

Through their interaction with public health boards and other dental public health organizations, the ATSU-CGHS dean and the dental public health faculty were able to assess there was a need for additional public health residency programs:

For dentists interested in pursuing a career in public health, board certification in dental public health by ABDPH requires a DPH residency. There are currently only 16 institutions offering an accredited dental public health residency (AAPHD | Accredited Dental Public Health Residencies, aaphd.org/accredited-dental-public-health-residencies). Two will no longer be accepting residents after 2019. Most of these residencies only accept one to three residents per year.

The ATSU-CGHS dean developed plans for a DPH residency when he was PH department chair. He developed plans in consultation with other dental faculty and dentists external to the program who were familiar with dental public health residencies and with CODA accreditation.

In addition to acting as the current DPH residency director, Dr. Chaffin has served on three dental public health boards over the last three years. He served on the Board of the American Association of Public Health Dentistry (AAPHD) for three years, with one year serving as president. He also has served as a board director for the American Institute of Dental Public Health and Oral Health America. Through these associations, he is often invited to lecture dental students on dental public health at various dental schools.

Under HRSA Oral Health Workforce three-year grant, Dr. Jaana Gold is developing evidence-based and community-informed training materials for Florida dental providers and community partners on common risk factors for childhood obesity and dental caries and disseminating these trainings and tools statewide in Florida. In 2019, Dr. Gold completed a survey on Florida dental providers' attitude, knowledge and practice of obesity; dental caries and sugar sweetened beverages; and overall needs for professional development in these topics. Survey results will aid Dr. Gold in developing effective training resources for dental providers to educate their patients about childhood obesity and oral health. Florida dental providers were invited to participate in this survey by the email sent by the Florida Department of Health to community health departments, dental clinics, and school-based sealant programs' dental providers, which include dental directors, dentists, dental hygienists, and dental assistants.

Another PH faculty, Dr. Greg Loeben, has attended board meetings of the Donor Network of Arizona (DNAZ). Through dialogue at these meetings and other meetings with the DNAZ leadership team, they informally assess professional development needs he may fulfill. Although Dr. Loeben recently moved from Arizona to Montana, he maintains his connection to DNAZ, and they will continue to informally assess how he can meet their professional development needs.

Since moving to Missoula, Montana, Dr. Loeben has reached out to and met with the director of pediatric intensive care at Community Medical Center in Missoula to discuss their ethics consultation system and needs. They are developing plans for Dr. Loeben to become involved with their hospital which does not have an active ethics consultation service, but would like to develop one. Dr. Loeben also reached out to the executive director of the Mansfield Center and discussed ways he might be able to contribute at the School of Public and Community Health Sciences at the University of Montana. Through his connection to the School of Public and Community Health Sciences, Dr. Loeben also connected with director of the organization Soft Landing Missoula (a refugee resettlement organization), and they are informally assessing how he can meet their professional development needs.

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

Strengths

The PH department has individual faculty who are leaders in their professional communities and are eager to share their expertise. Informal assessments lend to flexible and responsive actions that can meet immediate needs.

Weaknesses

With the exception of Dr. Gold's community survey that was part of the HRSA workforce grant, the PH department does not, and has no immediate plans to, formally assess any professional community.

Plans for improvement

None.

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.
-

Again, because the PH department does not exist in one locale, the process of developing and implementing professional development activities is carried out by individual faculty members based on informal discussions they have within their professional and local public health communities. Alignment to needs is confirmed through these same informal dialogs.

For example, Dr. Loeben served as an ethics consultant to DNAZ, which is the federally designated, nonprofit organ procurement organization serving the state of Arizona. In this relationship, Dr. Loeben attended quarterly board meetings with DNAZ leaders, healthcare transplant specialists, patient advocates, and community members to collect information about ethical issues confronting the organization, including policy development, resource allocation, community relations, and clinical ethical dilemmas. Through dialogue at these meetings and at other meetings with the DNAZ leadership team, Dr. Loeben creates and provides a variety of professional development training sessions for various members of the DNAZ staff. Continuation of these dialogs affirm alignment to needs.

An exception is the HRSA oral health workforce grant. In addition to the survey conducted in 2019, Dr. Gold will use results and insights from ongoing community assessments, combined with existing research, to develop and host webinars, provide in-person seminars in the providers' clinics (within identified HPSAs), and provide online resources to train dental professionals. Each training opportunity will also include assessments. These assessments will allow Dr. Gold to ensure alignment of her trainings with community needs. If assessments uncover any weaknesses in the training, Dr. Gold can then adjust future trainings for better alignment to the community's needs.

- 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 (i.e., individuals who are not faculty or students at the institution that houses the program).
-

Dental public health

Dental public health residency. CODA granted initial accreditation for the ATSU-CGHS DPH residency program in 2011. The first residents were accepted in 2013, and CODA granted full accreditation the same year. The first two residents graduated in 2015. The program now graduates two to three residents each year.

The dental public health residents were not getting a chance to develop public speaking skills during their residency. Public speaking skills are essential for most public health careers. As part

of the residency, residents are expected to develop and complete an independent research project under mentorship of the department's full-time dental PH faculty and present their research. Residents first participated in the ATSU-CGHS Research Webinar Series in 2017, and participation is now a requirement at the end of their residency.

Another feature of the residency is a journal club. Residents are required to read and discuss dental public health literature monthly. Discussions are held via conference call with residents, dental PH faculty, and the dean. Faculty challenge resident assumptions during these discussions so residents develop critical thinking skills related to the topic and methodology.

HRSA oral health workforce grant. Dr. Jaana Gold is developing evidence-based and community-informed training materials for Florida dental providers and community partners on common risk factors for childhood obesity and dental caries and disseminating these trainings and tools statewide in Florida. The priority community consists of dental providers and other community partners who provide care for children in Florida.

The primary outcome will be to increase knowledge among Florida's oral health workforce of the risk factors and prevention for obesity and dental caries to improve the overall health of vulnerable populations. This objective will be accomplished by developing culturally competent training material and education to be disseminated statewide.

The project will provide training to the oral health workforce specific to conditions of the underserved in Florida and create a Florida-specific toolkit of resources. The project will provide in-person trainings in at least five dental HPSAs statewide and also provide webinars for partners and providers. Five selected counties are Bradford, Duval, Hillsborough, Marion, and Miami-Dade. Eventually resources and materials could be distributed nationwide.

Using results and insights from ongoing community assessments, combined with existing research, Dr. Gold will develop and host webinars, provide in-person seminars in the providers' clinics (within identified HPSAs), and provide online resources to educate dental professionals to: 1) improve their capability to educate patients about childhood obesity and caries, 2) identify common risk factors for obesity and caries, 3) discuss prevention modalities and 4) provide patient referrals to pediatric primary care health professionals or dietitians.

Dr. Gold will provide in-person trainings between October 1, 2020, and December 31, 2021. She will provide webinars between April 1, 2021, and December 31, 2021. Online educational modules will be available after February 2022.

Dental public health education and continuing education. Through informal networks as discussed above, Dr. Gold also develops and presents continuing education for dental educators and dental providers. For example, at ADEA2020 (American Dental Education Association) she will present within a workshop for dental educators. During that workshop, they also plan to assess how educators are assessing evidence-based dentistry competency in their schools. She also will present a continuing education seminar to dentists and hygienists in Michigan.

Dr. Chaffin has lectured on dental public health to dental faculty and students at University of California, Los Angeles, Virginia Commonwealth University, Boston University, the University of Iowa, and ATSU-MOSDOH.

Medical ethics

Dr. Loeben has been asked to attend hospital ethics committee discussions on behalf of and with DNAZ representatives to help clarify issues causing problems. For example, in Flagstaff, Arizona, at the University Medical Center, he presented how to handle staff discomfort with the legal requirement family be presented the option of donation. This issue was a particular problem for some staff when the patient was indigenous because cultural attitudes of common tribal populations, at least of elderly members, do not approve of such donations. Staff felt forcing this discussion was inappropriate. Dr. Loeben has gone into DNAZ to lead half-day educational sessions with their staff on end-of-life decision-making, including ethical issues of withholding, withdrawing, definition of death, medical futility, etc. DNAZ once asked Dr. Loeben to participate in a Sunday news show where he and a current prisoner discussed the appropriateness of allowing donations from prisoners, whether they have been executed or are living donors.

Since his move to Montana, last year, Dr. Loeben has developed a medical and public health ethics course, which he also teaches as an adjunct professor, within the School of Public and Community Health Sciences at the University of Montana. On February 24 he spoke about medical ethics as part of a semester lecture series open to the entire campus and public.

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

Strengths

The PH department has individual faculty who are leaders in their professional communities and are eager to share their expertise.

Weaknesses

None.

Plans for Improvement

None.

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 PH department is committed to diversity and cultural competence in learning, research, and service practices.

The PH department's commitment aligns with the diversity commitment of ATSU. In 2013, ATSU initiated the Department of Diversity and Inclusion to establish a University-wide plan for diversity among students, faculty, and staff. ATSU defines diversity as follows:

"Diversity encompasses an authentic understanding and appreciation of difference and, at its core, is based upon the value each human being brings to our society and each person's access and opportunities to contribute to our university's cultural proficiency."

The University's 2016-2020 Strategic Plan lists "cultural proficiency, diversity, and inclusion" as one of its six themes, with the following goal and objectives:

Goal: Reach and attract a more diverse student body, faculty, and staff to further ATSU as a culturally proficient and inclusive institution.

Objectives:

- Increase recruitment and retention of diverse, service-oriented students, faculty, and staff by developing new partnerships and scholarships.
- Increase events and educational opportunities for the ATSU community and additional stakeholders to promote cultural proficiency.
- Conduct cultural climate survey.
- Identify accessibility limitations and make appropriate improvements.

In 2017, 2018, and 2019, the University received the Higher Education Excellence in Diversity award from *INSIGHT into Diversity* magazine, the oldest and largest diversity-focused publication in higher education.

Like the University, the PH department recognizes many differences are key to a truly diverse department. The PH department's first goal is to "recruit and retain diverse, qualified students and prepare them for a career in public health" (See Criterion B1-1.). The PH department's self-defined under-represented populations match those of ATSU: Hispanic, American Indian or Alaska Native, Asian, black or African American, and Native Hawaiian or other Pacific Islander. The PH department thus keeps track of these under-represented minorities and those who identify as female. Traditionally, these populations have been marginalized in higher education and often carried the heaviest burdens in social determinants of health.

Because faculty members in the PH department are not required to live near the campuses in Kirksville, Missouri, or Mesa, Arizona, opportunities for greater racial diversity exist. Again, while the most qualified candidates for open positions are hired, ATSU Human Resources makes every effort to recruit a diverse candidate pool.

-
- 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.
-

As stated in Criterion B5, the PH department's first goal is:

Recruit and retain diverse, qualified students and prepare them for a career in public health.

In the department's goals and objectives, objectives for this goal include underrepresented minorities, specifically Hispanics, American Indians or Alaska Natives, Asians, blacks or African Americans, and Native Hawaiians or other Pacific Islanders, to reach at least 40% for students and 30% for faculty, and for people identifying as female, at least 50%, for both students and faculty. The PH department is close to meeting these objectives (55% underrepresented minority and 63% female students; 27.3% underrepresented minority and 67% female faculty).

-
- 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.
-

Students

The PH department recruits students through public health conferences, graduate fairs, and digital advertising including Google ads, LinkedIn, Facebook, etc. The department successfully recruits a diverse student body as numbers in Criterion G5 indicate. ATSU-CGHS employs assertive advising, where AAs are in relatively frequent communication with students, especially in their first two blocks (See Criterion H1.). This contact frequency ensures the student feels connected and helps alleviate the feeling of isolation, which may otherwise occur in online learning. The strategy intends to increase retention of a diverse student body.

When students complete their enrollment agreement as part of the application process, students may self-report their race and gender identity. ATSU specifically tracks Hispanic, American Indian or Alaska Native, Asian, black or African American, and Native Hawaiian or other Pacific Islander identities. Those identities are included in their student records when they are accepted. ATSU-

CGHS periodically queries those records to determine whether recruitment and retention goals are being met.

Faculty

As a faculty position becomes available, the PH department chair requests permission from the ATSU-CGHS dean to open a search for the position. A position description is prepared and forwarded to the Faculty Hiring Committee for review. The Faculty Hiring Committee ensures the position statement is consistent with other position statements and adheres to Equal Employment Opportunity Commission and Americans with Disabilities Act provisions. This committee also conducts a preliminary screening and review of all applicants and sends a short list to the PH department chair.

Once the position description is prepared, the position is posted on ATSU's website and with Higher Ed Jobs. Aggregate websites, such as Indeed, will pick up the ad from Higher Ed and propagate the ad. At the current time, ATSU does not target faculty position ads specifically at publications, websites, or audiences catering to minority public health audiences.

Once faculty are hired, they may self-report their race and gender identity on personnel records and within their faculty record in the IRMA database. ATSU specifically tracks Hispanic, American Indian or Alaska Native, Asian, black or African American, and Native Hawaiian or other Pacific Islander identities. ATSU-CGHS periodically queries those records to determine whether recruitment goals are being met.

-
- 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.
-

Culturally competent environment

Policies

The PH department adheres to University policies and procedures regarding diversity. ATSU maintains a University-wide diversity policy stating:

A.T. Still University does not discriminate on the basis of race, color, religion, ethnicity, national origin, sex (including pregnancy), gender, sexual orientation, gender identity, age, disability, or veteran status in admission or access to, or treatment or employment in its programs and activities. Dating violence, domestic violence, sexual assault (e.g., nonconsensual sexual contact/intercourse), stalking, harassment, and retaliation are forms of discrimination prohibited by ATSU. (atsu.edu/policies/nondiscrimination_policy.htm).

The assistant vice president of human resources is responsible for responding to and monitoring all complaints from employees of discrimination, harassment, or retaliation. The vice president of student affairs is responsible for responding to and monitoring all complaints from students, members of the public, or beneficiaries of discrimination, harassment, or retaliation. ATSU-CGHS

refers students to the vice president of student affairs and faculty members to the assistant vice president of human resources.

SafeZone for All

In 2011, ATSU began a SafeZone for All (SZ4A) program, which originated on the Mesa, Arizona, campus. The purpose of the SZ4A program is to create beacons, SZ4A allies, whose role is to be visible ambassadors to ensure the campus climate feels safe, receptive, and accepting to community members, regardless of any human condition, characteristic, or circumstance they may have.

A website has been established laying out the SZ4A program purpose, identifying allies on each campus, and referencing various resources. Students, staff, faculty, and members of the public may access the program's resources at atsu.edu/safe-zone-for-all-program.

PH department staff, particularly AAs, and the department chair are SZ4A allies. Allies identify themselves to online students by including the SZ4A logo in their email signatures. For the program to work as intended, becoming an ally must be entirely voluntary and heartfelt. As such, neither the PH department nor ATSU-CGHS promotes the SZ4A program or sets any goals for the number of allies trained. Promotion of the SZ4A program comes from the associate vice president of diversity and inclusion via all-campus emails and word of mouth.

Mental Health First Aid

Mental Health First Aid (MHFA) was founded in 2001 in Australia by Betty Kitchener, a nurse specializing in health education, and Anthony Jorm, a mental health literacy professor. MHFA is an eight-hour course teaching how to identify, understand, and respond to signs of mental illnesses and substance use disorders. The training provides skills necessary to reach out and provide initial help and support to someone who may be developing a mental health or substance use problem or experiencing a crisis (Mental Health First Aid | About, mentalhealthfirstaid.org/about/).

In 2008, the National Council for Behavioral Health, in partnership with the Missouri Department of Mental Health, brought MHFA to the U.S. In 2016, ATSU had its counselors trained as MHFA instructors and brought MHFA to the Kirksville, Missouri, and Mesa, Arizona, campuses.

MHFA at ATSU does not publicize who is certified. PH staff and associated personnel who have been MHFA certified, include the PH department AAs. Since PH faculty are not on campus, they are not likely to become certified by ATSU. This does not rule out certification from their local MHFA.

Curriculum

As each course comes up for revision, the course is assigned an SME from the full-time faculty, and occasionally from the adjunct faculty, and an instructional designer. The SME designs learning activities and assessments aligned with the learning objectives. The SME and instructional designer collaborate to design these activities and assessments to be delivered in a variety of formats to stimulate multiple learning preferences. Learning activities are up to date, often address current events in public health, and seek to address topics from viewpoints of a

variety of populations. Assessments are authentic in nature and may ask students to consider a particular issue or prevention from the viewpoint of a particular underserved population.

Diversity in staff, faculty, preceptors, and guest lecturers.

Staff

ATSU-CGHS staff members employed on the Kirksville, Missouri, campus are representative of the predominantly Caucasian makeup of Kirksville and the surrounding areas of rural Missouri.

Faculty

The PH department's full-time faculty is 33% underrepresented minority, and 67% identify as female (See data presented in Criterion G1-5.). One faculty member is half indigenous (registered member of the Ysleta Del Sur Pueblo tribe) and half Hispanic. Another faculty member is Asian. Both minority faculty members are female. The PH department's adjunct faculty is 29.6% underrepresented minority, and 71% identify as female. The PH faculty represents a diverse community.

Preceptors

As students are located all over the country – and even the world – students are responsible for finding and selecting a preceptor on their own. As such, the PH department does not track the race or gender identity of preceptors – only whether they are academically qualified (at least a master's degree).

Guest lecturers

As an online program, the PH department does not use lectures to convey information. The PH department does, however, run the ATSU-CGHS Research Webinar Series, as discussed more thoroughly in Criterion E4-2. So far, the series has had only two speakers external to ATSU, and one was an Asian female. Aiko Allen, New Mexico Department of Health Tribal Liaison, presented "A Stream is Always Giving Life: Perspectives for Health Practitioners Working with American Indian/Alaska Native Communities."

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- 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.
-

ATSU-CGHS historically has one of the most racially diverse student populations in ATSU. It also enrolls a higher percentage of female students than most schools at ATSU. The following table reflects PH department and ATSU-CGHS numbers compared with overall ATSU numbers for underrepresented and female student enrollment.

MPH program, ATSU-CGHS, & ATSU student diversity				
AY 2018-19	Female	Male	Unknown	UR minority
Public Health	190 (66.9%)	90	4	88 (31.0%)
ATSU-CGHS	700 (61.4%)	424	16	349 (30.6%)
ATSU	2135 (57.4%)	1582		792 (21.3%)
AY 2017-18	Female	Male	Unknown	UR minority
Public Health	164 (66.9%)	77	4	75 (30.6%)
ATSU-CGHS	655 (60.7%)	405	20	338 (31.3%)
ATSU	2168 (58.2%)	1555		629 (16.9%)
AY 2016-17	Female	Male	Unknown	UR minority
Public Health	142 (71.0%)	58	0	65 (32.5%)
ATSU-CGHS	597 (60.8%)	373	12	289 (29.4%)
ATSU	2031 (56.9%)	1505	33	632 (17.7%)

The table below illustrates the PH department's student demographics for major categories of underrepresented minorities and gender for all active students in the AY 2018-19.

Active (ATT & PROB) public health students by gender & race/ethnicity

Gender	Hispanic	Non-Hispanic	American Indian or Alaska Native	Asian	Black or African American	Native Hawaiian or other Pacific Islander	Race unknown	Two or more races	White
Female (63.0%)	16 (4.3%)	221 (58.8%)	4 (1.1%)	47 (12.5%)	33 (8.8%)	1 (0.3%)	15 (4.0%)	12 (3.2%)	109 (29.0%)
Male (36.2%)	15 (4.0%)	121 (32.2%)	0 (0%)	36 (9.6%)	14 (3.7%)	0 (0%)	4 (1.1%)	6 (1.6%)	61 (16.2%)
Undisc. (0.8%)	0 (0%)	3 (0.8%)	0 (0%)	1 (0.3%)	1 (0.3%)	0 (0%)	1 (0.3%)	0 (0%)	0 (0%)

The table below illustrates the PH department's demographics for full-time and adjunct faculty.

Public health faculty (full time & adjunct) by gender & race/ethnicity

Gender	Hispanic Only	American Indian or Alaska Native	Asian	Black or African American	Native Hawaiian or other Pacific Islander	Race unknown	Two or more races	White	UR minority
Female (66.67%)	1 (3.03%)	0 (0.00%)	3 (9.09%)	3 (9.09%)	0 (0.00%)	2 (6.06%)	3 (9.09%)	10 (30.30%)	7 (21.21%)
Male (33.33%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	2 (6.06%)	0 (0.00%)	2 (6.06%)	0 (0.00%)	7 (21.21%)	2 (6.06%)

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

ATSU Diversity and Inclusion has sought out minority student statements about their experiences at ATSU, and includes two excerpts from ATSU-CGHS students. The first is not a PH student, but speaks to ATSU-CGHS' climate:

Before I got to ATSU, I ended up being in several programs that were not very conducive for me to finish. One of the things that I found different about ATSU was that it was an environment where I didn't have to feel threatened as a person of color. The professors were nurturing, and the College (ATSU-CGHS) was supportive and not competitive. My doctorate has opened doors for me in ways I never expected. (atsu.edu/diversity-webinars)

The second excerpt is from an MPH alumna (Iraqi) who returned to ATSU-CGHS to complete her doctor of health education degree:

My experiences with ATSU during my two years as an MPH student were challenging and helped me realize my passion for public health. ... I chose ATSU for a second time because I found that the school fulfilled its mission statement and the health education curriculum aligned with my future aspirations. (atsu.edu/diversity#student-insights)

In 2016, ATSU conducted a climate survey. Results were for the University as a whole and did not seek to assess the climate for each school or college. The report lists a few complaints from online faculty and students indicating the survey was too campus-focused. Only 19 students in the general MPH and six students from the MPH-D programs responded to the survey. Faculty respondent demographics were not broken down by program or school/college.

Eighty-four percent of the respondents were satisfied or very satisfied with the climate at ATSU. Generally, minority respondents were less likely to be satisfied, and a number of examples of issues are provided in the report. One respondent summed it up (page 355): "I love ATSU and believe in its mission, but as with any organization, there is always room for improvement, and every company has blind spots."

Due to the small size of the PH department and the virtual environment, the department has no plans to complete a programmatic climate assessment. However, the department did request comments.

The PH faculty do express pride in and support for its diverse climate:

As a faculty member I am particularly proud of the cultural competence exhibited by my colleagues in our faculty meetings, discussions of pedagogy, class interactions, and efforts at student recruitment. We take pride in the diversity of students in our program. Every member of the faculty is committed to respectful, culturally aware and sensitive engagement with students and each other. In addition, we actively seek and support diversity in our hiring of full-time and adjunct faculty.

We have a great climate on diversity and cultural competence. Our program allows all of us to bring our authentic selves. We promote culture of inclusivity which improves our work in teaching, research and service.

The diversity of our students, racially, culturally, demographically, allows a greater variety of values, experiences, and perspectives to be expressed in the course discussions. This diversity educates everyone in the course, including myself. For instance, this block I had a member of the Diné tell us about her first-hand experiences growing up on the reservation and the perceptions that she and others of her tribe had about the uranium mines and the mess left behind.

The academic advisor (AA) who interacts with the students the most states:

I feel that the diversity in our student body only enhances our students' educational experience. Because public health is such a broad field, we attract students from many different backgrounds and cultures with many different goals. Through their interaction, especially in the discussion boards, they broaden each other's horizons with new perspectives and priorities. I feel our students leave the program with a strong understanding of public health on a much larger scale.

And a comment from one of our students:

My experience in ATSU's Master of Public Health program is that students are encouraged to be their authentic selves in discussion boards and through coursework which promotes diversity, and creates an inclusive culture that advances performance and growth.

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

Strengths

ATSU's mission is the biggest strength. Both faculty and students choose ATSU because they believe in its mission, which exudes an appreciation for diversity and compassion for all.

The PH department has succeeded in attracting a diverse student body and endeavors to match that diversity with similar diversity in its faculty.

Weaknesses

None

Plans for improvement

None

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.
-

ATSU-CGHS Academic Advisors (AAs) provide administrative support and student advising services for all programs. Two AAs in Kirksville, Missouri, provide services to MPH and MPH-D students, as well as dual-degree students from ATSU-ASDOH, ATSU-MOSDOH, and ATSU-SOMA, and dental public health residents. The operations manager in Kirksville, who oversees the AAs, also provides administrative support for the practicum. Qualifications for AAs are listed in Section H1.2.

AAs communicate with students using a tailored communication plan that allows for variance to meet the needs of all students. They send friendly reminder emails to students regarding attendance, course surveys, drop deadlines, etc. In addition to emails, AAs are also expected to call students to check in on academic welfare and ensure students are not experiencing issues with their courses. AAs call new students more frequently in their first few blocks and, if appropriate, reduce the frequency of the calls as the student progresses.

AAs monitor classroom participation and student academic progress. If the instructor attempts to contact a student and does not hear back, or if an instructor believes a student will benefit from additional support, the instructor may request the AA try to make contact. If the AA notices a student's grade has fallen below 75%, the AA will consistently contact the student and maintain contact until the grade improves.

AAs initiate contact with all at-risk students to inquire about welfare and reasons for academic struggles. The AA may provide encouragement to the student and may suggest working with the instructor or with additional resources (e.g., requesting formative feedback on assignments from the instructor or working with UWC). If temporary withdrawal is appropriate, the AA assures the student the program understands and encourages re-entry to the program as soon as appropriate, while adhering to the continuous enrollment policy requirements.

To remain in good standing, all MPH students must maintain a 3.0 cGPA. If a student's cGPA is below 3.0 at the end of the semester, the AA notifies the PH department chair, who places the student on academic probation. The PH department chair then sends a letter via certified mail to the student, explaining why the student is on academic probation and the necessary academic performance required to remove the probationary status. The AA is responsible for contacting students placed on probation on the same day the letter is sent to ensure the student understands the probation terms, to determine the reason(s) the student is struggling academically, and to encourage appropriate measures, including time management or use of UWC, to help a student raise his/her cGPA to the 3.0 minimum. During the probationary period, a student may only take

two courses per block, must earn a minimum 3.0 GPA during each term of his/her probation, and must achieve a cGPA of 3.0 by the end of the probation period. Withdrawal from a course during probation is an automatic failure to meet probation requirements. The student's AA generally will be in more frequent communication with the probationary student, but there is no set communication requirement, and the communication frequency will vary on a case-by-case basis.

In the event a student fails to meet his/her academic probation terms, s/he may petition the PH department chair for another probationary term to meet the requirements. Alternatively, if a student fails to meet probation requirements, s/he may be administratively withdrawn from the MPH program.

In addition to working with students who struggle academically, AAs provide informational advising services to all students, make adjustments to academic degree plans (ADPs) as requested, and refer students to other campus resources as appropriate. The PH AAs oversee approximately 270 students.

If students have professional or personal problems, AAs are available to navigate a student through correct procedures. For instance, if a student is having issues with an instructor, the AA will encourage a student to first contact the faculty member and determine if the student can get resolution. If not, the student may then contact the PH department chair to discuss the conflict. This applies to issues with full-time and adjunct faculty members. If the issue is personal in nature, the AA may lead the student to appropriate resources to resolve a situation or work with the student to take some time off and resume once personal issues are resolved.

Faculty will also reach out to students who are struggling in their class to provide feedback and guidance that will help students succeed. Faculty assist students throughout their practicum and offer guidance.

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

AA applicants are initially screened by the associate dean of online operations and the AA operations manager. Candidates must have strong technical, written, verbal, and problem-solving skills and be personable and customer service-oriented. The top three or four candidates are then interviewed by the ATSU-CGHS AA team along with the operations manager. Their decision is then forwarded to the associate dean of online operations and ATSU-CGHS' dean to complete the hire.

Newly hired AAs spend approximately two weeks familiarizing themselves with AA standard operating procedures, student handbook, FERPA and other applicable laws and policies, and CampusNexus, the student database used by ATSU. They also shadow one of the other ATSU-CGHS AAs. At the end of the orientation period, the new hire sends an email to students s/he will be working with to introduce him/herself. The new hire then proceeds with his/her job duties, while continuing to be mentored by one or more of the other AAs.

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- 3) Provide a sample of advising materials and resources, such as student handbooks and plans of study, that provide additional guidance to students.
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The ATSU Student Handbook is located at atsu.edu/pdf/atsu-student-handbook.pdf.

The University Student Catalog is located at catalog.atsu.edu/mime/media/10/241/ATSU+-+Catalog+-+2019-2020.pdf.

The student handbook and University Catalog may also be found in ERF H1-3_USH_2019_Q3.pdf and ERF H1-3_ATSU_Catalog_2019-2020.pdf. ADPs are located in ERF folder H1-3_MPH_Academic_Degree_Plans.

- 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.
-

Advisor satisfaction AY 2016-17 to 2018-19 graduates, (Graduate Exit Survey results)

Advisor satisfaction rating	AY 2018-19		AY 2017-18		AY 2016-17	
	Count	Percentage	Count	Percentage	Count	Percentage
Very dissatisfied	0	0%	0	0%	0	0%
Dissatisfied	1	2%	0	0%	3	6%
Neutral	3	6%	10	19%	5	9%
Satisfied	14	30%	13	24%	12	22%
Very satisfied	29	62%	31	57%	34	63%
<i>Grand totals</i>	<i>47</i>	<i>100%</i>	<i>54</i>	<i>100%</i>	<i>54</i>	<i>100%</i>

As demonstrated above, most students (92% in AY 2018-19) are either satisfied or very satisfied with their PH AA. Frequency of contact provides a sense of connection the online student may not otherwise feel, and appreciation for the connection is reflected in the survey data.

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

Students are enrolled in an orientation course located in Canvas LMS. While orientation is not required to start courses, students are encouraged to complete the course to increase their chances for success in the program. They maintain access to the course and its resources for two years. In the orientation course, they are introduced to CampusNexus Student, where they may access their enrollment, final grades, financial aid, and edit their contact information; ATSU services and how to access them, including their AA, career services, distance librarian, ITS, UWC, and Learning and Disability Resources; student handbook and University Catalog; ATSU-CGHS textbook list by course; Zoom, the videoconferencing tool used by ATSU; and Canvas LMS.

The orientation course is arranged into 10 modules, just like MPH courses; and in each module, students practice using various LMS tools, including quiz, paper submission, discussion, journal,

wiki, and blog. In one module, they learn about rubrics, where to check their grades, and how to find feedback, both within the rubric and within the assignment.

In another module, they are informed about ATSU-CGHS' academic honesty policy and introduced to TurnItIn, the plagiarism detection tool used by ATSU-CGHS. In each course, students have access to a dropbox called "Assignment Drafts." In the orientation course, they learn they may use this dropbox to test their papers, without the paper being added to the TurnItIn repository. They practice submitting a paper to Assignment Drafts, changing the wording and seeing how the TurnItIn report changes. They also submit a pre-written practice paper, interpret the TurnItIn report, and compare their interpretation to an instructor's interpretation. They are shown how to use the word count feature in Microsoft Word.

Students learn about learning objectives, competencies, and core professional attributes, where these targets originate, and how they should align with their course content and assessments.

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

Strengths

ATSU-CGHS AAs are compassionate, empathetic individuals who do a good job of engaging students. ATSU-CGHS AAs identify as SZ4A allies and have taken the MHFA training. ATSU-CGHS' orientation course familiarizes the student with ATSU services, student handbook and catalog, Canvas LMS, PH course structure, and how to use classroom tools and dropbox.

Weaknesses

None

Plans for improvement

None

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.
-

Career services are available to all current ATSU-CGHS students and alumni, including all PH program students and graduates. The College's career services coordinator provides career document preparation and review assistance – principally assisting with preparation and refinement of CVs, resumes, and cover letters. The College also provides free user memberships to CareerShift, a job aggregation and professional networking platform, to all students and alumni. CareerShift is a full-service career advancement platform allowing users to find and apply to area-specific positions and provides networking tools allowing users to make personal connection within their targeted industry. All platform support is provided by CareerShift, including free platform orientation and job search instruction webinars. Finally, in AY 2018-19, ATSU-CGHS began to roll out an alumni mentorship program. This program matches ATSU-CGHS alumni with current students by field of interest. Alumni mentors may share their on-the-job experiences with current students, assist in networking, and provide individual career advice and support. Alumni mentors are volunteers who are identified through the annually administered alumni survey. Finally, students seeking career advice are encouraged to speak with their professors. Faculty's extensive real-life experience is a great resource for our students.

- 2) Explain how individuals providing career advising are selected and oriented to their roles and responsibilities.
-

Career services are provided by the career services coordinator. The career services coordinator is selected based on experience in preparation and review of career application documents and knowledge of career assistance resources offered by the College (see above).

-
- 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.
-

Career services assisted an MPH-D alumnus, KB, with resume and cover letter revision in 2017. Documents went through three drafts of revisions – resulting in clear and concise documents. This alumnus went on to attain an academic instruction position in dental public health.

While career services does not follow up with students or alumni once services have been provided, occasionally, successful students provide feedback. One student, GS, worked with career services to improve her resume and cover letters while applying for work as a half-time student. Revisions assisted the student in obtaining a position with a health insurance company. At the conclusion of her degree, career services again helped revise application documents for a position switch to a local health department. Career services assisted three MPH students with document review in AY 2018-19, six students in AY 2017-18, and six students in AY 2016-17. Other MPH students use CareerShift or other resources listed on the career services website (sites.google.com/a/atsu.edu/cghs-career-services/).

-
- 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.
-

The plurality of public health degree graduates report being employed at the time of graduation (59.7% according to the annual alumni survey). As a result, about one-third of MPH graduates do not ever use career services. Among those who do use career services, a plurality report being “very satisfied” or “satisfied” with the service (36% and 15%, respectively in AY 2018-19). This pattern is similar to that noted for the previous two AYs, as well.

Advisor satisfaction rating	AY 2018-19		AY 2017-18		AY 2016-17	
	Count	Percentage	Count	Percentage	Count	Percentage
Very dissatisfied	0	0%	1	2%	3	6%
Dissatisfied	1	2%	4	7%	1	2%
Neutral	5	11%	8	15%	5	9%
Satisfied	7	15%	7	13%	11	20%
Very satisfied	17	36%	18	33%	22	41%
Did not utilize	17	36%	16	30%	12	22%
<i>Grand totals</i>	<i>47</i>	<i>100%</i>	<i>54</i>	<i>100%</i>	<i>54</i>	<i>100%</i>
All MPH graduates (count)	61		55		69	
Response rate	77%		98%		78%	

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

Strengths

Access to CareerShift and an approachable and capable career service coordinator provide proficient support for students as they seek employment.

Weaknesses

None

Plans for improvement

None

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 procedure is defined in the ATSU Student Handbook (pages 6-8), available online at atsu.edu/pdf/atsu-student-handbook.pdf.

Students should first discuss a complaint with the course instructor. If the student is not satisfied with the response, s/he may appeal in writing to the PH department chair. If the student remains dissatisfied, s/he may then submit a written appeal to the ATSU-CGHS dean.

Typically, the AA is the first contact for a student expressing a grievance. The AA then helps the student determine the appropriate course of action, directs him/her to the appropriate personnel, and acts as an advocate or intermediary on behalf of the student.

If a student has a complaint about the AA, s/he would take the complaint to the PH department chair. To date, no complaints about any of the AAs have been received.

- 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.
-

Students wishing to file a formal complaint should contact either the vice president of student affairs on the Kirksville, Missouri, campus, or the associate vice president for student affairs on the Mesa, Arizona, campus. Alternately, students may use an incident report form (atsu.edu/incident-report-form). Use of a drop-down menu to identify the type of complaint will ensure the correct department receives the report. Within 10 days of receipt of a written or verbal complaint, the University will conduct an investigation and provide a preliminary response. The designated responder will provide the student in a timely manner with a final written determination, which may include any proposed resolution and any applicable appeal procedures. The complaint procedure process is listed in the University Student Handbook, pages 6-9, and includes contact for specific types of complaints, including discrimination, harassment, and retaliation; student records/FERPA; disability access and accommodation; etc. Additional details for reporting violations of discrimination, harassment, and retaliation are listed in Appendix C (pages 41-47).

- 3) 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.
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To date, there have been no formal complaints submitted.

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

ATSU and ATSU-CGHS procedures for student complaints are clear and accessible. There have been no formal student complaints about the PH department or personnel.

Weaknesses

None

Plans for improvement

None

H4. Student Recruitment and Admissions

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

- 1) Describe the program's recruitment activities. If these differ by degree (e.g., bachelor's vs. graduate degrees), a description should be provided for each.
-

Recruitment activities for the MPH degree include a variety of avenues designed to attract potential students, including the program website, a video from the department chair, and a request for information form (RFI). Enrollment representatives attend professional conferences appropriate to the field, as well as graduate fairs, which display advertising banners and allow for personal one-on-one connections and distribution of pertinent information. Other avenues used include Google ads, LinkedIn, Facebook, Reddit, and other means of attracting prospective students through digital marketing.

- 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.
-

Prospective students apply to the program through a formal application form and pay an application fee. Once the application is received, supporting required documents are submitted by the applicant, including transcripts, essay, etc. The essay is scored by the associate dean of academics and assessment, and when all application materials have been received, the completed file is reviewed by the admissions team for an admission decision into the program.

- 3) Select at least one of the measures that is meaningful to the 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, the program may add measures that are significant to its own mission and context.
-

The cGPA of applicants is a meaningful measure demonstrating whether they have minimally acceptable academic skills to enable them to complete the MPH program successfully. The target cGPA for PH applicants is 2.5. Students with a 2.3 to 2.4 cGPA from their qualifying degree may be given the option to take two courses as a non-degree seeking student. If the student demonstrates a minimum of a 3.0 GPA on those two courses, the student is able to officially apply and be accepted into the program.

Template H4-1

Outcome Measures for Recruitment and Admissions				
Outcome Measure	Target	Year 1	Year 2	Year 3
Percentage of students accepted who meet or exceed the minimum GPA requirement	95%	98%	98%	96%

The application essay is another measure important to the department. If an applicant has poor writing skills, then s/he is unlikely to be successful in an online program where assessments are heavily dependent on the ability to write academically and persuasively. The minimally acceptable score for the essay is 80 out of 100.

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

Strengths

The admissions team monitors its processes and funnel statistics with a continuous quality improvement perspective. This perspective allows the admissions team to make adjustments to the recruitment funnel when necessary in a timely manner.

Weaknesses

None

Plans for improvement

None

H5. Publication of Educational Offerings

Catalogs and bulletins used by the 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.

- 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.
-

Calendar

atsu.edu/academic-calendar

Admissions policies

atsu.edu/master-of-public-health-degree#admissions

catalog.atstu.edu/mime/media/10/241/ATSU+-+Catalog+-+2019-2020.pdf#%5B%7B%22num%22%3A520%2C%22gen%22%3A0%7D%2C%7B%22name%22%3A%22XYZ%22%7D%2C70%2C542%2C0%5D (“Admissions” - pages 253-255)

Grading policies

catalog.atstu.edu/mime/media/10/241/ATSU+-+Catalog+-+2019-2020.pdf#%5B%7B%22num%22%3A528%2C%22gen%22%3A0%7D%2C%7B%22name%22%3A%22XYZ%22%7D%2C70%2C378%2C0%5D (“Grading” - pages 257-259)

Academic integrity standards

catalog.atstu.edu/mime/media/10/241/ATSU+-+Catalog+-+2019-2020.pdf#%5B%7B%22num%22%3A536%2C%22gen%22%3A0%7D%2C%7B%22name%22%3A%22XYZ%22%7D%2C70%2C720%2C0%5D (“Academic Standards, Guidelines, and Requirements” - pages 261-262)

guides.atstu.edu/CGHSStudentResources/Academic_Integrity

Degree completion requirements

catalog.atstu.edu/mime/media/10/241/ATSU+-+Catalog+-+2019-2020.pdf#%5B%7B%22num%22%3A534%2C%22gen%22%3A0%7D%2C%7B%22name%22%3A%22XYZ%22%7D%2C70%2C473%2C0%5D (“Graduation Requirements” | “Degree Completion” - page 260)

Advertising

ERF Folder H5-1_Advertising.

pages.akerolabs.com/k8exy/at-still-cghs/mpH - This is the landing page when someone clicks on a Google ad.