

Department of Public Health College of Science & Health



Council on Education for Public Health Accreditation Self Study Standalone Baccalaureate Program

Spring 2016



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(Cover image: University Hall, new home to the academic programs in the health professions, including the Department of Public Health, as of January 2016).

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GLOSSARY of ACRONYMS

Acronym	Meaning
AFT	American Federation of Teachers (Faculty and Professional Staff Union)
ART	Assigned Release Time
ASW-G	Advanced Social Worker in Gerontology
Bb	Blackboard
CDE	Certified Diabetes Educator
CHES	Certified Health Education Specialist
COSH	College of Science and Health
СРН	Certified in Public Health
CSE	Certified Sexuality Educator
CTE	Center for Teaching Excellence
DAC	Departmental Assessment Committee
DPH	Department of Public Health
ERF	Electronic Resource File
FTE	Full Time Equivalent
НО	Health Officer
HSI	Hispanic Serving Institution
ISC	Internship Site Coordinator
ISS	Internship Site Supervisor
LCADC	Licensed Clinical Alcohol and Drug Counselor
LPC	Licensed Professional Counselor
LSW	Licensed Social Worker
MCHES	Master Certified Health Education Specialist
NCC	National Certified Counselor
NCHEC	National Commission for Health Education Credentialing
ODS	Office of Disability Services
PBHL	Public Health (alpha code for Public Health courses)
RD	Registered Dietician
RN	Registered Nurse
RTP	Retention, Tenure and Promotion Committee
SBP	Standalone Baccalaureate Program
SEC	Science Enrichment Center
SFR	Student/Faculty Ratio
SLO	Student Learning Outcome
SOL	Students of Life
SPH	School of Public Health
UCC	University Core Curriculum
UPinPC	United for Prevention in Passaic County
WAC	Writing Across the Curriculum
WPU	William Paterson University

Executive Summary

The program at William Paterson University (WPU) seeking Council on Education for Public Health (CEPH) accreditation is the Department of Public Health's (DPH) Standalone Baccalaureate Program (SBP), the Bachelor of Science in Public Health.

William Paterson University was founded in 1885, starting as a Normal School, and later becoming a senior college with the sole mission of preparing teachers for primary and secondary schools. In 1966, the Higher Education Act mandated that the state colleges become multipurpose in nature. William Paterson College's initial diversification involved liberal studies and nursing. As a result, the science departments were strengthened to support the nursing major. In the intervening years, those support departments have developed major curricula as well. At the present time, there are 44 undergraduate and 22 graduate degree programs available to students at William Paterson University.

In 1970, a Master Plan for Health Professions Education was drafted by the New Jersey Department of Higher Education. In order to ensure that only quality academic programs would be approved, the Master Plan mandated a review process for new programs, and a review committee – the Health Professions Education Advisory Council. The Community Health Education major at WPU began in 1973, and was approved by the Board of Higher Education in May, 1976.

Originally named the Department of Health Sciences, the DPH has experienced a number of changes and tremendous growth during its 40+ years of existence. In 1992, the department's focus shifted to professional preparation in health education as credentialing in the field first became available. As a result, the name of the department was changed to the Department of Community Health.

As program quality has always been foremost in the mind of DPH program faculty, the BS in Community Health Education was submitted for program approval and became the only undergraduate health education program in the state of New Jersey to receive program approval from the SOPHE/AAHE Baccalaureate Approval Committee (SABPAC) — a distinction that the DPH maintained until spring 2015.

William Paterson University's Department of Public Health has been training health educators for well over 40 years, and many professional health educators in the state of New Jersey are WPU graduates. Important aspects of the training in health education at WPU include:

- A required, 12-credit, 480-hour internship at an approved field placement site. The internship component has been a requirement since the program began in the early-1970's and is the oldest and longest running internship program at WPU;
- As a requirement for graduation, all health education majors must take the Certified Health Education Specialist (CHES) Exam in April of their senior year; and
- At any given time, at least half of the full-time program faculty are CHES or MCHES-certified, as are a significant number of the program's adjunct faculty. The courses in the health education sequence are taught by CHES/MCHES-certified faculty and whenever possible, internship site supervisors who are CHES/MCHES-certified are recruited to mentor and supervise the health education majors.

In 2007, the DPH recognized the substantial growth in opportunities for bachelors-prepared graduates to pursue public health careers in fields other than health education. Therefore, the faculty constructed a degree program (the current SBP) that addressed the changing landscape of undergraduate public health preparation. The department once again changed its name, assuming its current identity as the Department of Public Health and actively began recruiting and hiring faculty, both full-time and adjunct, with expertise in a wide range of public health disciplines to support the revised curricula.

WPU currently offers a 53-credit degree program leading to the Bachelor of Science in Public Health (or the SBP, as it is referred to in the remainder of this self-study). Students enrolled in the SBP may choose from one of two tracks – the General track or the Health Education track.

Today, the SBP is committed to preparing students to understand and critically analyze public health issues, to recognize the importance of health disparities, and to understand the local, national and global dimensions of public health issues. Both the DPH and WPU consider program accreditation to be an essential feature of a high-quality undergraduate program of study. It is for this reason that the DPH seeks SBP accreditation from CEPH for the BS in Public Health degree program.

1.0 Leadership, Management and Governance

1.1 The program maintains an organizational description and organizational chart(s) that define the program's administrative structure and relationships to other institutional components. The organizational chart presents the program's relationships with its department(s), school(s), college(s) and other relevant units within the institution.

Program response to 1.1:

The program seeking accreditation is the William Paterson University (WPU) Department of Public Health's (DPH) Bachelor of Science (BS) degree in Public Health. This is a 53-credit major which offers two individualized tracks – General Public Health and Public Health Education.

The DPH offers several academic programs in addition to the Standalone Baccalaureate Program (SBP) in Public Health. These other programs include a BS degree in Applied Health, two minors (in Public Health and Health Studies), and a concentration in School Health Education for Physical Education majors wishing to pursue NJ state endorsement for teaching health K-12. The BS degree in Applied Health program has been eliminated starting in September 2016, and will be replaced by a BS degree in Health Studies.

As this self-study focuses solely on the SBP, is important to note that all of the courses that are offered in the DPH's other programs are included as course offerings in the SBP. In other words, while there are several courses that are only available to students in the SBP, there are no courses that serve only the program in Health Studies or the two minors. Students in the SBP may take advantage of any course offered in the DPH. Therefore, all courses, faculty, and physical and financial resources that comprise the DPH directly serve the SBP.

The Department of Public Health

The DPH is staffed by eight full time faculty members (one of whom serves at the Department Chairperson), 25-30 adjunct faculty members (depending on the semester), a full-time Internship Site Coordinator (ISC), and a full-time program administrative assistant. The DPH currently houses three grantfunded employees (all of who are program alumni) who work under the supervision of a full-time faculty member on grant-funded community outreach work. The DPH/SBP's organizational structure is presented in Figure 1.

The DPH's organizational description is rooted in its mission statement, which reads:

"The Department of Public Health embraces the mission of William Paterson University: to strive for lifelong learning, excellence, diversity and community. The Department is committed to preparing students to understand and critically analyze public health issues, to recognize the importance of health disparities, and to understand the local, national and global dimensions of public health issues. The Department is committed to fostering intellectual curiosity and creativity in problem solving to effectively address public health challenges in communities and populations. The Department aims to provide a foundation of core health knowledge enhanced by interdisciplinary study to promote health at all levels for all people."

To achieve this mission, the DPH has articulated a set of operational objectives encompassing all of its academic offerings. These objectives include:

- 1. To provide undergraduate training in public health.
- 2. To provide undergraduate professional preparation in public health education.
- 3. To provide educational preparation for careers in a variety of health services-related industries and agencies.
- 4. To support research and scholarship by the faculty and students of the department.
- 5. To support student well-being through participation in the University Core Curriculum (UCC) program.
- 6. To provide professional preparation for certification in health for physical education majors.
- 7. To provide service courses for other disciplines.

The organizational description (in the form of the department mission statement and department objectives) is found in the following documents: the DPH By-laws (p. 1), the DPH Faculty Handbook (p. 5), the <u>DPH Student Handbook</u> (p. 4), and on the <u>DPH website</u>.

The Standalone Baccalaureate Program – the BS in Public Health

The Department of Public Health offers a 53-credit bachelor's degree leading to the Bachelor of Science (BS) in Public Health. The SBP's mission is "to prepare students with the knowledge of public health practice, principles and methods, and the skills necessary to utilize these to improve the health of the public. This is achieved through a foundation in general education, the biological, social and behavioral sciences, research, and the core content areas of public health enhanced by a semester long internship in a public health setting."

Students enrolled in the SBP may choose from one of two tracks – the General track or the Health Education track. Each track has a distinct program goal and set of student learning outcomes (or SLO's, which are presented in Template P).

"The goal of the General Track of the BS in Public Health is to prepare public health generalists with the skills and knowledge necessary to function effectively from a public health perspective."

"The goal of the Health Education Track of the BS in Public Health is to prepare public health educators with the skills and knowledge necessary to function effectively in a health education setting and to attain the certified health education specialist credential."

Department of Public Health Chairperson: Dr. William Kernan Administrative Assistant: Geraldine Suppa Internship Site Coordinator: Sylvia Jackman, MPH Grant Employees: Sherrine Schuldt CHES, CPS Vanesa Apaza, BS, CHES Leonard Perez, BS **Full Time Faculty** Adjunct Faculty **Department Committees** Dr. Corey Basch Assessment Committee Rebecca Abenante, Liz Amaya-Dr. Eli Green **Curriculum Committee** Fernandez, Dr. Jocelyn Apicello, Dr. Michele Grodner Departmental Assessment Vanessa Arias-Martinez, Dr. Dr. Alex Kecojevic Committee (DAC) Lama Chaddad, Miralda Charles, Dr. William Kernan Faculty Council Kiameesha Evans, Judith Dr. Jean Levitan ■ Faculty Search Committee Francis, Dr. Charlene Gungil, Recruitment & Alumni Dr. Marianne Sullivan Patricia Hardin, Jody Inglis, Dr. Naa-Solo Tettey Relations Committee Dana Jacko, Janice Loschavio, Retention, Tenure & Ryan McKee, Marilyn McSpiritt-Promotion (RTP) Committee Guzio, Dr. Jonathan Moss, Dr. Ad Hoc MPH Committee Sam Pirozzi, Jill Riera, Julio Rodriguez, Jamie Sclafane, Laurie Schlussel, Evelyn Shalom, Arlene Stoller, Maryann Walsh, Student Research Kathryn Werheim Assistants

Figure 1 - Organization Chart: Department of Public Health

As shown in Figure 1, the designated leader of the DPH and the SBP is the Department Chairperson. The Department Chairperson assumes primary administrative responsibility for the academic programs within the DPH, including the SBP. The Department Chairperson reports directly to the Dean of the College of Science and Health (COSH), one of five academic colleges at the University (see Figure 2).

Provost & Senior Vice President for Academic Affairs Warren Sandmann Dean Dean College of Business Dean Dean College of Arts College of Education College of Humanities College of Science & Health & Communication

Daryl Moore & Social Sciences Candace Burns Siamack Shoiai Kara Rabbitt Kenneth Wolf ducational Leadership & Accounting & Law Africana World Studies Philosophy Biology Mathematics Professional Studies Economics, Finance & Global Business Elementary & Early Childhood Political Science Communication Anthropology Chemistry Nursing Marketing & Management Sciences Communication Disorders & Sciences English Psychology Physics Special Education & Counseling Geography & Urban Studies Ben Shahn Galleries Professional Sales Computer Science Public Health Child Development Center Blobal Financial Service Women's & Gender Science Enrichme Center for Chinese Art History Russ Berrie Institute for Professional Sales University Performing Arts Office of Certification Languages & Cultures Kinesiology Small Business Office of Field rofessional Development Partnerships

Figure 2: William Paterson University Academic Colleges and Departments

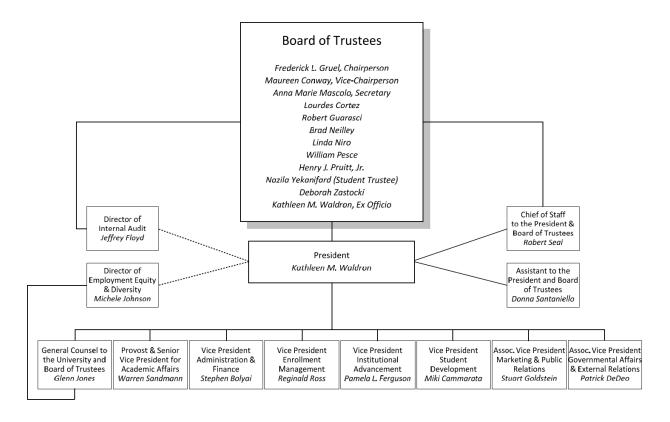
William Paterson University Fact Book, 2014-2015

Chapter 7, 9/4/2014

The Dean of each college reports directly to the Provost & Senior Vice President for Academic Affairs who, in turn, reports directly to the University President (see Figure 3).

Figure 3: Administrative Structure of William Paterson University

THE WILLIAM PATERSON UNIVERSITY OF NEW JERSEY



William Paterson University Fact Book, 2014-2015

Chapter 7, 9/9/2014

Finally, Figure 4 illustrates the lines of authority from the program's designated leader to the institution's chief executive officer.

Figure 4: Lines of Authority from the Program's Designated Leader to the Institution's Chief Executive Officer



The <u>University Governance Statement</u>, published in the <u>Faculty and Professional Staff Handbook</u> describes the roles and responsibilities of the various administrative units found within these organizational charts.

1.2 The program demonstrates administrative autonomy that is sufficient to affirm its ability to fulfill its mission and goals and to conform to the conditions for accreditation. Administrative autonomy refers to the program's ability, within the institutional context, to make decisions related to the following: • allocation of program resources • implementation of personnel policies and procedures • development and implementation of academic policies and procedures • development and implementation of curricula • admission to the major

Program response to 1.2:

Academic departments at WPU are able to exercise administrative autonomy at varying levels depending on the function and as described in the <u>University Governance Statement</u> published in the <u>Faculty and Professional Staff Handbook</u> as well as the contract set forth by the American Federation of Teachers (AFT) Union Agreement.

Allocation of Program Resources: Program resources are allocated on an annual basis centrally through the academic division of the University under the supervision and authority of the University Provost and the Dean of the College of Science and Health. The SBP, like all programs at WPU, is provided an annual operating budget (see Template F), the size of which is commensurate with the size of the department and its academic programs as determined by the Provost and Dean. Furthermore, the SBP is provided several opportunities for input into additional budgeting allocation processes. In April of each year, the SBP may make official requests for additional and/or replacement personnel (both faculty and staff), as well as requests for a supplemental budget allocation to fund expenses that may not be covered by the program's operating budget (such as large equipment purchases or instructional material). The designated leader of the SBP serves as fiscal officer for the department, prepares and monitors the departmental budget, and reports to the department on the status of the budget at least twice a year, minimally in September and May. Once resources are allocated to the SBP, the designated leader works closely with program faculty in the monthly Faculty Council meetings to ensure that the allocated resources are properly and equitably disbursed.

Implementation of Personnel Policies and Procedures: At the program level, the designated leader of the SBP holds primary responsibility for the implementation of policies and procedures related to personnel, including:

- Assisting faculty to improve professionally through study, research, creative activity, service and participation in professional activities,
- Coordinating all search and screening committee processes, including the selection of the search committee while working closely with the Office of Employment Equity and Diversity and the Office of Human Resources to ensure conformity to the WPU Employment Process Guidelines and Diversity Plan,
- Hiring and monitoring the evaluation of adjunct faculty per the Union (State/AFT) Agreement and University policy,
- Forwarding departmental recommendations to the Dean for hiring full-time, part-time and adjunct faculty,
- Assuring that the provisions of the Union (AFT/State) Agreement at the departmental level, including those relating to recommendations for retention, tenure, and promotion, be followed, and
- Supervising and evaluating civil service staff, student workers, and graduate assistants.

Development of Academic Policies and Procedures: Program faculty, in the form of the Faculty Council, develop recommendations for academic policies and procedures at the program level. The Faculty Council is the governing body of the DPH and SBP, comprised of all full-time faculty members and the Internship Site Coordinator. The Faculty Council meets once monthly and holds two day-long retreats each year to plan, develop, and assess various aspects of the SBP and the other department's offerings. Recommendations for academic policies or procedures that require additional levels of University approval (for example, academic standards policies) are sent from the Faculty Council through the defined approval channels for consideration. Implementation and monitoring of all approved academic policies and procedures is the responsibility of the program's designated leader.

Development and Implementation of Curricula: Curricular development occurs at the program level. The designated leader of the SBP leads the program in coordinating the development and enhancement of program curricula and initiatives for the improvement of instruction. Recommendations for curricular revisions, new curricula, revisions to courses, or proposals for new courses are developed by the program's Curriculum Committee. Once a proposal has satisfactorily been approved by the program's Curriculum Committee, it is forwarded to the department Faculty Council. The Faculty Council considers all curricular proposals and forwards successful proposals on to the college Curriculum Committee for consideration. Proposals that are favorably reviewed by the college Curriculum Committee are then sent on through the University's established curricular review process (approval by the Faculty Senate's Undergraduate Council, then approval by the Faculty Senate, then Approval by the Provost, and then, in cases of new programs, the University's Board of Trustees and the State of New Jersey). The designated leader of the SBP is responsible for the implementation of approved curricula and leads the department in coordinating the development of a yearly plan of course offerings, including the development of the annual course (teaching) schedule for each faculty member, based on the academic needs of students and in consultation with the program faculty.

Admission to the Major: The SBP has the authority to make decisions about admission to the major in the form of established program policy. The SBP has had program admission standards for over ten years. Decisions about the admission of transfer students, readmitted students, and students wishing to change from another major into the SBP are made solely by the SBP. Guided by the program's approved admissions standards policy, the designated leader of the SBP reviews the transcripts of all of the above students to determine if they meet admissions standards, and renders a decision based on this policy. The SBP admits all incoming first-year students into the major, however these students may not begin the major course sequence until they have satisfied the same admissions standards that were required of all other students.

Template A				
Function	Responsible Party or Parties	Brief Summary/Description of Process(es)	Relevant Program or Institutional Policies (cite supporting document(s) and page(s) including hyperlinks)	
a. determining the amount of resources (financial, personnel and other) that will be allocated to the program	Provost & COSH Dean	In April of each year, the Dean presents a budget for the COSH and forwards it to the Provost, who prepares the academic budget for the Division of Academic Affairs. Subsequently, the Provost and other Vice Presidents meet with the President to complete the University budget prepared by the Vice President for Administration and Finance, who forwards it to the Board of Trustees.	While there are no formal published policies that define the role of faculty in this budgeting process, faculty, through their Department Chairperson, are able to make requests for both personnel and nonpersonnel-related expenses through the supplementary budgeting procedure. An example of this, found in the ERF, is the Annual Staffing Request that is submitted each spring to the Dean of the College of Science and Health.	
b. distributing resources (financial, personnel and other)	Department Chairperson	The Department Chairperson serves as fiscal officer for the department, prepares and monitors the departmental budget, and reports to the department on the status of the budget at least twice a year, minimally in September and May. All fiscal decisions are made in close collaboration with program faculty at the Faculty Council meetings. Regarding faculty travel, the Chairperson reviews and forwards requests for permission to travel for professional purposes and for allocation of departmental travel funds per departmental By-laws and guidelines and University policy.	Roles and Responsibilities of Department Chairperson (Bullets 15, 20) DPH By-laws (p. 2)	
c. appointing/hiring faculty to teach program courses	Department Chairperson [full and adjunct] &	The Department Chairperson coordinates all search and screening committee processes, including the selection of the search committee and works closely with the Office of	Roles and Responsibilities of Department Chairperson (Bullets 13, 14, 18) DPH By-laws (pp. 2,3,5)	

	Department Faculty Search Committee [full-time] & COSH Dean & President & Board of Trustees	Employment Equity and Diversity and the Office of Human Resources to ensure conformity to the WPU Employment Process Guidelines and Diversity Plan and hires and monitors the evaluation of adjunct faculty per the union agreement and University policy and forwards departmental recommendations to the Dean for hiring full-time, part-time and adjunct faculty. The Search Committee is responsible for all activities associated with the process of hiring a new [full- time] faculty member. The COSH Dean is the hiring authority for faculty, but all hires must be approved by the President and the Board of Trustees. The Department Chairperson assigns faculty to the annual teaching schedule.	Faculty and Professional Staff Handbook [Full-time Faculty] AFT Union Agreement (pp. 19-20)
d. appointing/hiring personnel to advise program students	Department Chairperson	The Department Chairperson coordinates and supervises program advisement, registration, and other retention initiatives in collaboration with the faculty. This includes appointing and training faculty to advise program students. (At WPU, faculty are not required to serve as academic advisors, but if they volunteer they receive additional compensation.)	Roles and Responsibilities of Department Chairperson (Bullet 10) DPH By-laws (p. 2)
e. curriculum design, including program-specific requirements for the award of the degree	Department Chairperson & Department Curriculum Committee & Faculty Council	The Department Chairperson leads the department in coordinating the development and enhancement of departmental curricula. The Department Curriculum Committee both receives and requests suggestions from any individual or group of faculty members and considers any proposed action in the following matters pertaining to	Roles and Responsibilities of Department Chairperson (Bullet 3) DPH By-laws (p. 3)

f.	plans for student assessment	Department Chairperson & Assessment Committee & Recruitment and Alumni Relations Committee	curriculum, and then forwards any new curricular proposals, or revisions, to the department's Faculty Council, for consideration. Proposals approved at the departmental level are then forwarded through a series of additional approval bodies, including: College Curriculum Committee → Faculty Senate Undergraduate Council → Full Faculty Senate → Office of the Provost The Department Chairperson coordinates student assessment activities in close collaboration with program faculty and the Internship Site Coordinator. The Assessment Committee develops the departmental assessment calendar, collects assessment data at established points throughout the academic year, reviews assessment data annually, and presents findings to the program faculty and in written form as the Annual Assessment Report. The Recruitment and Alumni Relations Committee collects data annually from program alumni through a web-based questionnaire. Results from this questionnaire are sent to the Assessment Committee for review.	Roles and Responsibilities of Department Chairperson (Bullet 6) DPH By-laws (p. 5)
g.	evaluating the performance of individuals teaching program courses	Department Chairperson & Department Retention, Tenure, and Promotion (RTP) Committee	The chairperson of the department, along with the Department's RTP Committee, are responsible for the evaluation of instruction of tenured, non-tenured, part-time, temporary and adjunct faculty. Specifically the Retention, Tenure and Promotion (RTP) Committee is responsible for all activities required to make	DPH By-laws (p. 2, 4)

h. evaluating the performance of individuals advising program students	Department Chairperson	recommendations on probationary faculty in regard to retention and tenure, and tenured faculty in regard to promotion, including coordinating both the student evaluation of faculty process and the peer observation process. The Department Chairperson meets each semester with faculty advisors for training and monitoring. Individual faculty advisors are monitored through an established annual review of student advisement folders. The Department Chairperson also coordinates the annual	Roles and Responsibilities of Department Chairperson (Bullet 10)
		assessment of advisors, where students are asked to share their thoughts about the quality of program advisement. Results of this survey are reviewed by the Faculty Council at its May retreat.	
i. promoting and/or granting tenure, if applicable, to faculty teaching program courses	Department Chairperson & Department Retention, Tenure, and Promotion (RTP) Committee & University Promotion Committee (for promotion only) & Dean of the College (for retention and tenure only) &	The Department Chairperson assures that the provisions of the Union (AFT/State) Agreement at the departmental level, including those relating to recommendations for retention, tenure, and promotion, be followed. The Retention, Tenure and Promotion (RTP) Committee is responsible for all activities required to make recommendations on probationary faculty in regard to retention and tenure, and tenured faculty in regard to promotion. This includes close peer mentorship of junior faculty members. The members of the RTP recommend to the administration on the perquisites of faculty status, including tenure, the allocation	Roles and Responsibilities of Department Chairperson (Bullet 12) DPH By-laws (p. 4) University Governance Statement (paragraph 4) Faculty Retention Policy and Procedure Faculty Retention Policy and Procedure – Retention Files Faculty Retention Policy and Procedure – Tenure Recommendations Faculty Retention Policy and Procedure – Clarified Criteria
	University Provost	of faculty positions, appointment, retention, and	Faculty Promotions

	& University President &	promotion of colleagues in their department.	AFT Union Agreement (pp. 19-22)
	University Board of Trustees		
j. re-appointing or terminating program faculty hired by contract, if applicable	Department Chairperson & Department Retention, Tenure, and Promotion (RTP)	Full-time faculty are reappointed, or terminated, based on the criteria listed in the AFT Union Agreement, according to the roles and responsibilities of a full-time faculty member. The program may make recommendations for	Roles and Responsibilities of Department Chairperson (Bullet 12) DPH By-laws (p. 4) Faculty Retention Policy and Procedure
	Committee & Dean of the College & University Provost	reappointment or termination to the College Dean, who then makes a recommendation to the University Provost. The Provost reviews the department's and the Dean's recommendations, and forwards a final	Faculty Retention Policy and Procedure – Retention Files Faculty Retention Policy and Procedure – Clarified Criteria
	& University President & University Board of Trustees	recommendation to the University President, who is the individual who makes a final determination on the faculty member's status. A terminated faculty member has the right to appeal the decision of the University President. In the end, the President's decision is reviewed by the University's Board of Trustees for final approval.	AFT Union Agreement (pp. 19-20)
k. determining teaching assignments for program courses	Department Chairperson	The Department Chairperson leads the department in coordinating the development of a yearly plan of course offerings, including the development of the annual course (teaching) schedule for each faculty member, based on the academic needs of students and in consultation with the faculty. The Chairperson carefully reviews past enrollment trends to determine which courses need to be offered, as well as	Roles and Responsibilities of Department Chairperson (Bullet 2) DPH By-laws (p. 2)

I. developing the program's academic policies governing matters such as academic standing and award of degree	Department Chairperson & Faculty Council	their frequency and number. A full academic year is scheduled at one same time, generally in January of the previous academic year. The Department Chairperson, in consultation with each full-time faculty member, assigns full-time faculty member, assigns full-time faculty members to courses, and then completes the schedule by assigning adjunct faculty to teach the remaining sections. The Department Chairperson and the Faculty Council review academic policies and procedures at least twice annually to determine if revisions are necessary. If it is determined that revisions are necessary, the Faculty Council drafts the revisions (or a new policy) and then votes on it according to established voting procedure. Recommendations are then forwarded through the following levels for approval: College Curriculum Committee → Faculty Senate Undergraduate Council → Full Faculty Senate → Office of the Provost	Roles and Responsibilities of Department Chairperson (Bullets 9, 16) DPH By-laws (p. 2)
m. implementing the program's academic policies, including grading	Department Chairperson & Faculty Council	The Department Chairperson leads the department in implementing academic policies and monitoring student academic performance. The Department Chairperson conducts audits of student's academic standing each semester.	Roles and Responsibilities of Department Chairperson (Bullet 3) DPH By-laws (p. 2)
n. recruitment, advertising and admissions	Department Recruitment and Alumni Relations Committee & Department Chairperson	The Recruitment and Alumni Relations Committee is responsible for the coordination and/supervision of all activities related to student recruitment including maintaining the department website. The Department Chairperson is the	DPH By-laws (p. 5)

		individual at the program level that is charged with making admissions decisions for: 1. Enrolled students changing their major from undecided or another major to Public Health, 2. Transfer students, and 3. Readmitted students. No subsequent levels of approval for admissions decisions are needed, as this is determined solely at the departmental level. Admission decisions for first year students are made by the University Admissions office.	
o. defining the academic calendar	University Provost & University Registrar	The Academic Calendar is developed jointly by the University Registrar and Office of the Provost in five-year increments. Once developed, the academic calendar is sent to Human Resources and the AFT (Faculty Union) for review and comment. Individual departments do not have a role in defining the academic calendar.	There are no written policies or procedures that guide or define this function.
p. publication and currency of information in catalogs and other publications	Department Chairperson & Department Webmaster & University Registrar	The Department Chair and the Department Webmaster share responsibility for making sure that publications are current and accurate. The Department Chairperson reports to the Registrar when updates are needed in the University Undergraduate Catalog, generally once a year in February. The Department Webmaster (working with the Recruitment and Alumni Relations Committee) has full autonomy to make necessary updates to the department webpage.	There is no formal published policy or procedure for this function. DPH By-laws (p. 5)

1.3 The program has a single individual who serves as the designated leader. The designated leader is a full-time faculty member at the institution and has immediate responsibility for developing and monitoring the program's curriculum.

Program response to 1.3:

All academic departments at WPU are led by a full-time member of the faculty who has immediate responsibility for developing and monitoring the program's curriculum, the Department Chairperson. The Chairperson of the DPH at WPU is the SBP's designated leader.

The designated leader is elected from among the current tenured department faculty to serve a three-year term consistent with the election procedures published in DPH By-laws (Article VI, p. 6). The name of the elected faculty member is then forwarded to the University President as a recommendation. The University president appoints the designated leader based on the recommendation of the faculty.

The designated leader's responsibility regarding the development and monitoring of the program's curriculum is listed in the Roles and Responsibilities of Department Chairperson (Bullets 1-3) and the DPH By-laws (p. 2, Article IV).

These responsibilities include:

- Leading the department in developing and implementing immediate and long-range departmental goals and objectives (in concert with faculty input) to meet University and college goals and objectives;
- Leading the department in coordinating the development of a yearly plan of course offerings, including the development of the annual course (teaching) schedule for each faculty member, based on the academic needs of students and in consultation with the faculty; and
- Leading the department in coordinating the development and enhancement of departmental curricula and initiatives for the improvement of instruction;

The current designated leader of the DPH and the SBP is Dr. William Kernan, a full-time, tenured, Associate Professor of Public Health. His CV is found in the ERF.

1.4 Program administrators and faculty have clearly defined rights and responsibilities concerning program governance and academic policies. Program faculty have formal opportunities for input in decisions affecting curriculum design, including program-specific degree requirements, program evaluation, student assessment and student admission to the major. Faculty have input in resource allocation to the extent possible, within the context of the institution and existing program administration.

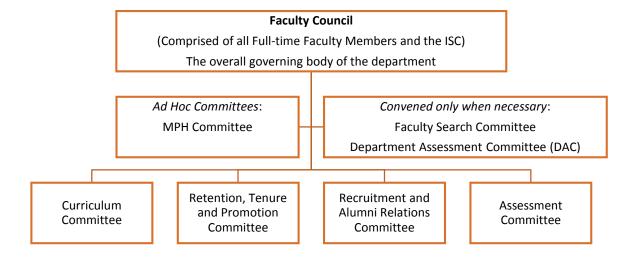
Program response to 1.4:

Faculty and program administrators participate in the governance of the SBP in accordance with the bylaws of the institution. This is clearly specified in the <u>University Governance Statement</u>, published in the <u>Faculty and Professional Staff Handbook</u>, "It is recognized that the participation of these constituent bodies in University governance is an integral part of the institution's decision-making process." Program policies and procedures are made by consensus, with attention to being consistent with University policies.

A review of the functions of each standing committee demonstrates that program administrators and faculty have an active role in the governance of the SBP. They participate in decision-making processes, in formulating and recommending policies, and in the evaluation and assessment of all aspects of the program. Faculty and program administrators are elected or appointed to committees as described in the DPH By-laws (found in the ERF). Programmatic changes include their input. In addition to participating in the governance of the SBP, faculty are also active participants in the governance of the COSH, University Faculty Senate and other University committees.

Program administrators and faculty have formal opportunities for input in curricular decisions and degree requirements, program evaluation, student assessment, and student admission to the major. Each of these functions is carried out at the program level by a department committee. The roles and responsibilities of each of these committees are articulated in the DPH By-laws (Article 5, pp. 3-5). The overall governance structure of the DPH and SBP is shown in Figure 5.

Figure 5: Department of Public Health Committee Structure



The committee at the program level that is charged with curriculum development is called the Curriculum Committee. This committee consists of at least two tenured faculty members and is chaired by a tenured faculty member. This committee receives and requests suggestions from any individual or group of faculty members and considers any proposed action in the following matters pertaining to curriculum, including: new courses and changes in existing courses; requirements for the major and minor programs, and concentrations; preparation and alterations of the sections of the university catalog pertaining to the department; other departmental policies related to the curriculum; informing faculty of course sequence; changes in course offerings that would affect advisement; preparation of materials for undergraduate program internal review; and any other curriculum matters. The committee approves all curricular changes and arranges for the approval of these changes at all other required levels of approval, including, in chronological order: full departmental approval by the DPH's Faculty Council, the COSH Curriculum Committee, the Dean of the COSH, the Undergraduate Council of the University Faculty Senate, the full University Faculty Senate, and then to the Provost for final approval.

The committee at the program level that is charged with both program evaluation and student assessment is the Assessment Committee (not to be confused with the Department Assessment Committee, or DAC, which is the department committee responsibility for the routine assessment of tenured faculty members, i.e. post-tenure review). The Assessment Committee consists of any voting member of the Faculty Council, at least two of whom are full-time faculty members. The Assessment Committee is responsible for developing the departmental assessment plan which covers a five-year period. The Assessment Committee oversees all assessment activities, collects, and analyzes assessment data from the faculty on an annual basis consistent with the DPH's published assessment plan. The Assessment Committee reviews data on program and student outcomes on a regular basis, minimally at least once a semester. The Assessment Committee presents student learning outcomes data to the Faculty Council, minimally at least once annually at the program retreat held in May. The Assessment Committee prepares an annual assessment report for the College Assessment Committee, and includes within it a set of recommendations for needed changes based on DPH faculty review of the assessment data collected that year.

The committee at the program level that is charged with developing program-level admissions standards is called the Faculty Council, which is composed of all full-time program faculty members and the ISC, and is chaired by the Department Chairperson. This committee approves all admission standards changes and arranges for approval of these changes at all other required levels of approval, including, in chronological order: the COSH Curriculum Committee, the Dean of the COSH, the Undergraduate Council of the Faculty Senate, the full University Faculty Senate, and then the Provost for final approval.

Admission decisions for first year students are made by the <u>University Admissions Office</u> using established <u>criteria for the admission of first-year students</u> to the University. These admissions criteria are standard and generally consistent across campus.

The Department Chairperson is the individual at the program level that is charged with making admission decisions for: 1. Enrolled students changing their major from undecided or another major to Public Health, 2. Readmitted students, and 3. Transfer students. No subsequent levels of approval for admission decisions are needed, as this is determined solely at the departmental level. These students must have a GPA of 2.0 or greater and grades of C- or better in three pre-requisite courses (PBHL 1100 HealthyU, BIO 1140 Applied Anatomy and Physiology, and MATH 1300 Elementary Statistics).

At WPU, academic departments do not have a formal role in determining how the University budget is allocated. The budgeting process, however, is transparent and follows an established <u>Budget</u> <u>Development Calendar</u>. During each spring semester, several "Town Hall" meetings on the budgeting process are held and faculty are encouraged to attend and provide informal input. Furthermore, information sessions on the supplementary budgeting process (described below) are held each spring for Department Chairpersons.

In April of each year, the Dean presents a budget for the COSH and forwards it to the Senior Vice President for Academic Affairs and Provost, who prepares the academic budget for the Division of Academic Affairs. This process is followed in the other colleges as well. Subsequently, the Provost and other Vice Presidents meet with the President to complete the University budget prepared by the Vice President for Administration and Finance, who forwards it to the Board of Trustees. The State of New Jersey's budget is publicized on July 1 of each year. Once appropriations have been made, the President and Vice Presidents make allocations to colleges and departments based on such factors as the relative size of the student population, the number of full-time faculty lines, facilities, and programmatic needs.

When the approved budget is returned to the program, usually in July, the Department Chairperson is fully responsible for the non-salary budget and approves all allocations and expenditures. Faculty members may request purchases of learning materials that support the DPH mission, goals and expected student outcomes. These requests are forwarded to the Department Chairperson for approval.

Together, the Department Chairperson and the Dean partially reimburse travel with increased support when faculty are presenting or actively involved in the meeting or conference. Additional funds are available on a competitive basis through the Provost's Research and Travel Incentive Fund and Career Development funds. Even with these funding streams available, conference travel funds have been limited and are highly competitive, particularly in light of the increasing demands for faculty to increase their scholarly output.

As the COSH Dean prepares the annual budget request for the College, the program faculty do have the opportunity to submit budget requests. As described above, the Department Chairperson, with input from the Faculty Council, is the individual at the program level who is charged with distributing the program budget based on the allocation provided by the Office of Provost/Senior Vice President for Academic Affairs. Under the leadership of the Department Chairperson, in the spring of each academic year, the program may prepare a request for supplemental funding, which is then forwarded to the Dean to include in the College's request for supplemental funding for materials, equipment, improvements to the physical environment, and the like. Furthermore, each spring the program submits an Annual Staffing Request, which may include a rationale and data supporting a request for additional program faculty and/or staff.

Most recently, based on a submitted Annual Staffing Request, the department was able to make a successful case for converting our part-time ISC position into a full-time, 10-month staff position. This has greatly enhanced the program's ability to meet the field placement needs for our internship program with a student population that has more than doubled in the past several years.

1.5 The program ensures that all faculty (including full-time and part-time faculty) regularly interact and are engaged in ways that benefit the instructional program (eg, instructional workshops, curriculum committee).

Program response to 1.5:

Program faculty regularly interact and engage in ways that benefit the instructional program. Examples of formal types of interaction in the SBP include:

Faculty Council: The Faculty Council is the overall governing body in the DPH, and all other committees send recommendations to the Faculty Council for consideration and final approval. All full-time faculty members and the ISC are voting members of the Faculty Council. Adjunct faculty are invited to these meetings and may participate in discussion, but have no voting privileges. The Faculty Council meets at least once monthly to discuss department business and make decisions about matters that impact the full department. The Faculty Council regularly discusses curricular issues, academic standards concerns, and general instructional topics. Twice annually the Faculty Council holds an extended "retreat" where opportunities exist to discuss issues related to addressing students of concern, enhancement of academic support services, and potential modification to the curriculum and/or student learning outcomes. It is at these retreats where data on program effectiveness and the assessment of student learning outcomes are reviewed. The Faculty Council is also responsible for determining the membership of three of the four Department's three standing committees (Curriculum, Assessment, and Retention/Alumni Relations) as well as any Ad Hoc or Search Committees. Faculty are asked to volunteer to serve on one or more of these standing committees, and membership on each standing committee is guided by the procedures articulated in the Department By-Laws. Membership on the fourth standing committee, the Retention, Tenure and Promotion Committee, is based on tenure status – all tenured faculty members are automatically members of this committee. Every effort is made to ensure full faculty participation in committee work as well as equitable distribution of workload among full-time faculty members.

To illustrate the level and diversity of participation in committee work within the SBP, see Table 1 for committee membership for the past three years.

Table 1: Department of Public Health Committee Membership, 2013-present

COMMITTEE NAME	2013-2014	2014-2015	2015-2016
Faculty Council	All Full-time Faculty Members and the Internship Site Coordinator		
Curriculum Committee	Joslin (chair), Kernan,	Grodner (chair), Kernan,	Grodner (chair) Levitan,
	Levitan, Sullivan	Sullivan, Tettey	Kecojevic, Sullivan, Tettey
Assessment Committee	Kernan (chair), Basch,	Kernan (chair), Basch,	Kernan (chair), Basch,
	Levitan, Jackman	Jackman	Jackman
Retention, Tenure and Promotion Committee	Hayden (chair) Blonna, Grodner, Joslin, Kernan, Levitan	Levitan (chair), Grodner, Kernan	Levitan (chair), Grodner, Kernan
Recruitment and Alumni	Basch (chair) Blonna,	Basch (chair), Jackman,	Basch (chair), Jackman,
Relations Committee	Jackman, Kernan, Sullivan	Kernan, Sullivan, Tettey	Kecojevic, Sullivan
Ad Hoc MPH Committee	Kernan (chair), Basch,	Sullivan (chair), Basch,	Sullivan (chair), Basch,
	Sullivan	Kernan	Kernan, Tettey

- Department Curriculum Committee: The Curriculum Committee provides opportunities for faculty input and discussion on issues such as course design, new course construction, and program modification. This committee receives curricular and course suggestions from faculty members and considers any proposed action in matters pertaining to curriculum. When the Curriculum Committee approves a curricular change, it is then forwarded to the Faculty Council for full consideration. The Curriculum Committee meets at least once each semester, and more when needed.
- New Faculty Orientation: New faculty engage in both a University-wide orientation program and a program-specific orientation. At the University orientation, new faculty are introduced to each other, the services and the University. Opportunities for new faculty to continue to engage with one another, build relationships, and research partnerships are introduced at this orientation. The program orientation is generally a one-on-one meeting between the new faculty member and the Department Chair, where opportunities exist to explore general expectations about instructional responsibilities, departmental expectations regarding service and scholarship, and an introduction to the varied facets of the curriculum, among other topics.
- New Course Orientation: When a faculty member is assigned a new course to teach, the
 Department Chairperson arranges for a "mentorship" opportunity between that faculty member
 and a faculty member with prior experience teaching the same course. Expected outcomes of this
 mentorship experience include collaborative discussion on pedagogy and student assessment, the
 sharing of ideas on specific instructional tools and assessment opportunities, and ongoing discussion
 about course development and improvement.
- Blackboard Training Sessions: All faculty are able and encouraged to attend the <u>Blackboard</u>
 <u>Institute</u> to learn about and/or improve upon their ability to use technology in the classroom. Many
 SBP faculty engage in this program. The Bb institute provides a hands-on immersion workshop
 designed to help faculty prepare a Bb course site to be used to teach an online course or
 supplement a traditional or hybrid course.
- Writing Across the Curriculum: Sponsored by a group of dedicated faculty members from various departments, the Writing Across the Curriculum (WAC) Program provides the opportunity for faculty to interact and learn from each other about novel ways to introduce writing-to-learn activities into their courses. The workshop is designed to help faculty use writing as part of the learning process in all academic disciplines, including the health sciences. Many faculty from the SBP have participated in the WAC program. Several have also joined one of the WAC Faculty Writing groups, which offer a supportive, collegial environment in which to develop, critique, and prepare writing for publication or presentation. The groups offer participants a chance to work on professional writing-in-progress (papers, articles, book proposals, essays, monographs, etc.) with a small multi-disciplinary group of colleagues. Several SBP faculty members have also served as judges of the WAC student writing contest.
- The Center for Teaching Excellence: The Center for Teaching Excellence (CTE) offers both individual instructional support for faculty and a range of programming on teaching and learning. These services are designed for faculty, at all levels of experience, who wish to practice effective teaching and advance student learning. Support for individual faculty includes mentoring, instructional development and refinement, individually-selected instructional resources, teaching online, teaching enhancement activities, classroom assessment, teaching portfolio development, video (or audio) recorded classroom observations, peer teaching observations, and assessment of student learning. Many members of the SBP faculty, particularly during the first few years on the faculty, engage in the programs offered through the CTE.

- **Student Success Forums:** The University has a University-wide Student Success Committee which sponsors periodic Student Success Forums where program faculty can engage with faculty from other departments and University administrators to discuss innovations and ideas for improving the instructional program. SBP faculty regularly attend these events.
- **Collaborative Research:** Several SBP faculty work collaboratively with each other, or with faculty from other departments, on collaborative research projects including the authorship of empirical articles about pedagogy and instructional methodologies.

There are also many examples of informal interactions that occur among and between program faculty. These include:

- Cross-section Course Collaboration: Many program faculty who teach the same course regularly connect with each other to discuss course progress, select textbooks, collaborate on the development of project instructions, and make collaborative curriculum implementation decisions. These sorts of interactions are common for many courses taught by multiple instructors, including HealthyU, Health Care in the US, Health Research Methods I and II, Human Sexuality, Nutrition, Disparities in Health, Reproductive Rights, Food and Community, Introduction to Public Health, and several others.
- Faculty Handbook: While not a requirement for any academic department at WPU, the program
 maintains a Faculty Handbook which serves as a first point of reference for faculty, particularly
 adjunct faculty, when there are questions about classroom management, instruction, or
 assessment. No policy or procedure in the DPH faculty handbook is meant to supersede or
 circumvent the Faculty and Professional Staff Handbook, which is the official record of policies and
 procedures regarding issues related to WPU Faculty.
- **Teaching and Pedagogy Emails:** The Department Chairperson regularly sends out notices about innovative ideas or advancements in teaching published by a variety of sources, including *The Chronicle of Higher Education*, the *New York Times*, and *Faculty Focus*.

1.6 Catalogs and bulletins used by the program, whether produced by the program or the institution, to describe its educational offerings accurately, describe its academic calendar, admission 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, contains accurate information.

Program response to 1.6:

In recent years, both the University and the DPH have taken steps to streamline the way that program information is displayed and distributed. Print materials about the SBP are now only available in the DPH (the Fact Sheets, referenced below). All other program information is available only online, and all live links that provide information to the community about the BS in Public Health lead to one of two maintained web locations – the Undergraduate Catalog or the program webpage. This reduces the likelihood that web browsers (current students, prospective students, parents, employers, internship sites, etc....) will be directed to incorrect or outdated information about the SBP.

Publically available program information about the program's educational offerings and degree completion requirements is found in the following places:

- 1. Online Undergraduate Catalog
 - o Full Course Listing
 - o Requirements for the BS in Public Health General Track
 - SBP General Track Finish in Four Curriculum Sheet
 - o Requirements for the BS in Public Health Health Education Track
 - SBP Health Education Track Finish in Four Curriculum Sheet
 - Material in the online Undergraduate Catalog is updated on an annual basis by the University Registrar with input from the Department Chairperson and Faculty Council. Any curricular changes made in a given academic year are not reflected in the Undergraduate Catalog until the following academic year when the changes are schedule to take effect.
- 2. The Department Webpage
 - o The Department of Public Health Student Handbook
 - o The BS in Public Health General Track
 - The BS in Public Health General Track Fact Sheet
 - The BS in Public Health Health Education Track
 - The BS in Public Health Health Education Track Fact Sheet
 - The content on the DPH's webpage is updated monthly, or more frequently as needed, by the Department Webmaster.

The <u>Academic Calendar</u> is published on the University webpage and is maintained jointly by the Office of the Provost and the University Registrar. University Admissions policies are maintained by the <u>Office of Undergraduate Admissions</u> for <u>First-year Students</u>, <u>Transfer Students</u>, and <u>International Students</u>. Specific admissions requirements for the SBP for transfer students or internal change of majors are located on the <u>DPH's website</u> and in the <u>Online Undergraduate Catalog</u>. University grading policies are located in the <u>Undergraduate Student Handbook</u>. University Academic Integrity Standards are located in the <u>Undergraduate Student Handbook</u> and in the <u>DPH's Student Handbook</u>.

2.0 Resources

2.1 The program has sufficient faculty resources to accomplish its mission, to teach the required curriculum, to oversee extracurricular experiences and to achieve expected student outcomes. Generally, the minimum number of faculty required would be 2.0 FTE faculty in addition to the designated leader's effort each semester, trimester, quarter, etc., though individual circumstances may vary. The FTE calculation follows the institution or unit's formula and includes all individuals providing instruction in a given semester, trimester, quarter, etc.

Program response to 2.1:

The program has full support at all levels of the University to pursue and maintain program accreditation. This institutional commitment is stated in the Institutional Commitment Letter located in the ERF.

In all academic departments at William Paterson University, faculty FTE is equivalent to 12 credits per semester (which may be a combination of teaching credits and credits awarded for <u>Assigned Release Time</u>) for the ten months between September 1 and June 30, known as the University's "academic year."

Designated Leader's Effort

As stated previously, the SBP's designated leader is the Department Chairperson of the DPH. The Department Chairperson is a faculty member with assigned responsibility to provide academic and administrative leadership to an academic department. S/he is elected and recommended by the department faculty to the President or his/her designee (Provost and Senior Vice President or College Dean) for appointment consideration. During an individual's tenure as chair, s/he retains all the rights and privileges of a faculty member as contained in the AFT Union Agreement. The Chairperson reports to the College Dean. S/he provides appropriate leadership for the advancement of academic excellence and the effective functioning of the SBP which includes the implementation of University, college and department policies.

The specific duties of the Department Chairperson as designated by the University are listed in the Roles and Responsibilities of Department Chairperson. The DPH By-laws (p. 2) contain additional information about the specific duties of the Department Chairperson in the DPH. The AFT Union Agreement (p. 28) includes additional information about the role of the Department Chairperson.

University FTE Calculation

The basic academic year teaching load for full-time faculty is twenty-four (24) teaching credit hours (12 per semester). All overload (credits beyond the 12 credit per semester load) for full-time faculty is voluntary and overload rates are paid for all voluntary teaching assignments beyond twenty-four (24) teaching credit hours [AFT Union Agreement, p. 16]. Faculty may also volunteer to teach courses, as overload, during the Winter and Summer terms. Thus 1 FTE = 12 teaching credits per semester.

The teaching assignment of a faculty member does not require more than three (3) different course preparations in any semester, except where it can be demonstrated that the course offerings and class sections in a department cannot reasonably be scheduled on this basis, or where a faculty member's schedule includes one or more two (2)-student-credit-hour courses. Under such circumstances one additional course preparation may be assigned [AFT Union Agreement, p. 16].

The basic academic year teaching load is assigned over thirty-two (32) weeks of instruction and occurs during the period of payment which commences September 1 and ends on June 30, and may not exceed such thirty-two (32) week period unless otherwise agreed to by the concerned faculty member [AFT Union Agreement, p. 16].

SBP FTE Calculation

As shown in Tables 2 and 3 (below) and in Template B in the followings section, the SBP exceeds the minimum number of faculty required by CEPH standards of 2.0 FTE plus the effort of the designated leader. With that said, student enrollment in the SBP has grown steadily in the past few years, necessitating additional sections of most major core courses and many major electives.

While the SBP is able to maintain a complement of full-time faculty members primarily teaching the major core courses, the SBP has had to rely increasingly on adjunct faculty to teach some of the major electives (Human Sexuality, Nutrition, Concepts and Issues of Aging, Global Health Issues, Reproductive Rights, Food and Community, etc.) The program is fortunate, however, to have a reliable adjunct faculty composed of well-trained educators and practitioners able to teach these courses.

In recent years, the DPH has hired several new full-time, tenure-track faculty members specifically to serve the SBP. Each new faculty position description has been carefully constructed to attract individuals who will complement the existing full-time faculty to ensure, whenever possible, that the students in the SBP will be exposed to full-time faculty in most of their required courses.

Tables 2 and 3 show the SBP's FTE calculations for the semesters between Spring 2014 and Fall 2015.

Table 2: SBP FTE Calculation, Full-time Faculty Effort Only		
Spring 2014 6.58 FTEs		
Fall 2014 6.58 FTEs		
Spring 2015 5.91 FTEs		
<i>Fall 2015</i> 6.75 FTEs		

Table 3: SBP FTE Calculation, Full-time		
Faculty Effort + Adjunct Faculty Effort		
Spring 2014 14.08 FTEs		
Fall 2014 14.91 FTEs		
Spring 2015 13.91 FTEs		
Fall 2015 15.33 FTEs		

2.2 The mix of full-time and part-time faculty is sufficient to accomplish the mission and to achieve expected student outcomes. The program relies primarily on faculty who are full-time institution employees.

Program response to 2.2:

The DPH is currently comprised of eight full-time faculty members and 25 adjunct faculty members (although from semester to semester that number varies and has been as high as 30). While the University does employ part-time faculty members, no part-time faculty members teach in the SBP.

This mix of full-time/adjunct faculty has served the SBP well, and allows the program to accomplish its mission and achieve its expected student learning outcomes. Students in the SBP benefit from full-time faculty members who are expert in their various public health disciplines, actively engage in scholarship, often involve students in their scholarship, and who maintain active connections to the larger public health community.

The major core courses are primarily taught by full-time faculty. Each of the core courses requires multiple sections in order to meet student demand. For that reason, along with scheduling needs, more than one full time faculty member teaches most of the required courses.

While the majority of the core public health courses taught in the SBP are taught by the full-time faculty members, students also benefit from instruction by a wide array of talented adjunct instructors who are able to bring their extensive field experience into the classroom, primarily in the elective public health courses.

The allocation of faculty time to the SBP does vary slightly from semester to semester based on each individual faculty member's specific teaching assignments or approved Assigned Release Time (ART).

As shown in Template B, all eight full-time faculty members primarily serve the SBP.

Template B: Program Faculty			
Name of Faculty Member	Status (full-time,	FTE Allocation	Course(s) Taught
(including degrees)	part-time, etc.)	to SBP	
Current Full-Time Faculty			
Corey Basch	SP14: Full-time	.75	3170, 3610, 4973
	FA14: Full-time	.75	3040 [2], 4610
Ed.D., MPH, MS, MA, CHES	SP15: Full-time	.75	3040 [2], 3610
	FA15: Full-time	.75	3040 [2], 3170
	SP14: Adjunct	.25	3900
Eli Green	FA14: Adjunct	.50	3900 [2]
PhD, MEd, MA, CSE	SP15: Full-time	1	3750 [2], 3900 [2]
	FA15: Full-time	1	2950[2], 3900 [2]
	SP14: Full-time	1	2210 [3], 3220
Michele Grodner	FA14: Full-time	1	2210 [2], 3020, 3210
Ed.D., MEd, CHES	SP15: Full-time	1.16	2210 [2], 3020, 3220, 4961, 4971
	FA15: Full-time	1	2210 [2], 3020, 3210
	SP14: -	-	-
Alex Kecojevic DrPH, MPH	FA14: -	-	-
	SP15: -	-	-
	FA15: Full-time	.75	2150, 3040 [2]
William Kernan	SP14: Full-time	1	3042 [4]

Ed.D., MPA, MS, MCHES	FA14: Full-time	.83	3110, 4301 [2], 4990
Ed.D., IVII A, IVIO, IVICITES	SP15: Full-time	.75	4950, 4972 [3], 4973
	FA15: Full-time	.75	4301 [2], 4610
	SP14: Full-time	.75	1300, 2100, 3020
Jean Levitan	FA14: Full-time	.75	2100, 3020 [2]
PHD, MA	SP15: Full-time	.5	3020, 3900
	FA15: Full-time	1	2100, 3020 [2], 3140
	SP14: Full-time	.75	3400 [3]
Marianne Sullivan	FA14: Full-time	.75	
		.75	4000 [3]
DrPH, MPH	SP15: Full-time		3400 [3]
	FA15: Full-time	.75	3000, 4000 [2]
Naa-Solo Tettey	SP14: Adjunct	.50	2950 [2]
Ed.D., MPH, MBA, MA,	FA14: Full-time	1	2950, 3040 [2], 4500
MCHES, CPH	SP15: Full-time	1	2950 [2], 3042 [2]
,	FA15: Full-time	.75	2950, 3010, 4500
Current Adjunct Faculty		1	_
	SP14: Adjunct	.25	2700
Rebecca Abenante	FA14: Adjunct	.25	2700
MSW, MA	SP15: Adjunct	.25	2700
	FA15: Adjunct	.25	2700
	SP14: -	-	-
Liz Amaya-Fernandez	FA14: -	-	-
MPH	SP15: -	-	-
	FA15: Adjunct	.50	1100, 4962 [3]
	SP14: Adjunct	.25	3150
Jocelyn Apicello	FA14: Adjunct	.50	3150 [2]
DrPH, MPH	SP15: Adjunct	.50	3150 [2]
	FA15: Adjunct	.50	3150 [2]
	SP14: -	-	-
Vanessa Arias-Martinez	FA14: Adjunct	.25	1100
МРН, МА	SP15: Adjunct	.25	1100
,	FA15: Adjunct	.25	1100
	SP14: -	-	-
Lama Chaddad	FA14: -	-	-
MD, MPH	SP15: -	-	_
	FA15: Adjunct	.25	3750
Miralda Charles MPH, CHES	SP14: Adjunct	-	-
	FA14: Adjunct	.25	1100
	SP15: Adjunct	.25	1100
	FA15: Adjunct	.50	1100 [2]
	SP14: -	-	
Kiameesha Evans	FA14: Adjunct	.25	1100
MPH, MCHES	SP15: Adjunct	.50	1100
IVII II, IVICIILO	FA15: Adjunct	.50	1100, 3000
	rais. Aujunct	.30	1100, 5000

	SP14: Adjunct	.50	1100[2]
Judith Francis MS	FA14: Adjunct	.50	1100[2]
	SP15: Adjunct	.50	1100[2]
	FA15: Adjunct	.50	1100[2]
	SP14: Adjunct	.25	3110
Charlene Gungil DHSc, MPH, MA	FA14: Adjunct	.50	3110 [2]
	SP15: Adjunct	.50	3110 [2]
2.1.2.5, 1.11. 1.1, 1.11. 1	FA15: Adjunct	.50	3110, 3400
	SP14: -	-	-
Patricia Hardin	FA14: -	_	_
MA	SP15: -	_	_
	FA15: Adjunct	.25	1100
	SP14: Adjunct	.25	1100
Jody Inglis	FA14: Adjunct	.25	1100
MA	SP15: Adjunct	.25	1100
1417.	FA15: Adjunct	.25	1100
	SP14: Adjunct	.50	1100 [2]
Sylvia Jackman	FA14: Adjunct	.33	4962 [3], 4963
MPH	SP15: -	-	-
WITT	FA15: Adjunct	.08	4963
	SP14: Adjunct	.25	2210
Dana Jacko	FA14: Adjunct	.25	2210
MA, RD	SP15: Adjunct	.25	2210
IVIA, KD	FA15: Adjunct	.25	2210
	SP14: -		-
Rose Jean-Baptiste	FA14: -	-	-
MPH, MCHES	SP15: Adjunct	.25	1300
WIFTI, WICHES	FA15: Adjunct	.25	1100
	SP14: Adjunct	.50	1100 [2]
Duan McKaa	FA14: Adjunct	.50	1100 [2]
Ryan McKee	SP15: Adjunct	.50	1100 [2]
MEd, MS	FA15: Adjunct		
		.50	1100, 3900
Marilyn McSpiritt- Guzio MS, RD, CDE	SP14: Adjunct	.25	2210
	FA14: Adjunct	.50	1100 [2]
	SP15: Adjunct	.50	1100 [2]
	FA15: Adjunct	.50	1100 [2]
Jonathan Moss Ed.D., MA	SP14: Adjunct	.50	1100 [2]
	FA14: Adjunct	.50	1100 [2]
	SP15: Adjunct	.50	1100 [2]
	FA15: Adjunct	.25	1100
	SP14: Adjunct	.50	2150 [2]
Sam Pirozzi	FA14: Adjunct	.50	2150 [2]
Ed.D., MA, LCADC, LPC	SP15: Adjunct	.50	2150 [2]
	FA15: Adjunct	.25	2150

	CD14. Adimat	.25	1100
Jill Riera MA, CHES	SP14: Adjunct FA14: Adjunct	.25	1100 1100
	SP15: Adjunct	.25	1100
	FA15: Adjunct	.25	1100
Julio Rodriguez	SP14: -	-	-
	FA14: Adjunct	.25	2200
MS	SP15: Adjunct	.25	2200
	FA15: Adjunct	.50	2200 [2]
	SP14: Adjunct	.25	2210
Laurie Schlussel	FA14: Adjunct	.25	2210
MA, RD	SP15: Adjunct	.25	2210
	FA15: Adjunct	.25	2210
	SP14: -	-	-
Jamie Sclafane	FA14: Adjunct	.25	1100
MS, MCHES	SP15: Adjunct	.50	1100, 2100
	FA15: Adjunct	.50	1100, 2100
	SP14: Adjunct	.25	3140
Evelyn Shalom	FA14: Adjunct	.25	3140
MA, CSE	SP15: Adjunct	.25	3140
	FA15: Adjunct	.25	3140
	SP14: Adjunct	.25	3000
Arlene Stoller	FA14: Adjunct	.25	3000
MPH, CHES	SP15: Adjunct	.25	3000
	FA15: Adjunct	.25	3000
	SP14: Adjunct	.50	1300 [2]
Maryann Walsh	FA14: Adjunct	.25	1300
MPH, MCHES	SP15: Adjunct	.25	1300
	FA15: Adjunct	.25	1300
	SP14: Adjunct	.25	1100
Kathryn Werheim	FA14: Adjunct	.25	1100
MA, MPA	SP15: Adjunct	.25	1100
,	FA15: Adjunct	.25	1100
Past Faculty (Retired or n			
•	SP14: Full-time	1	2200, 3000 [2], 3900
Richard Blonna Ed.D., MA RETIRED	FA14: Full-time	1	2200, 3000 [2], 3900
	SP15: Retired	-	-
	FA15: -	_	-
	SP14: Full-time	.75	3750 [3]
Joanna Hayden	FA14: Full-time	.50	3010, 3750
PHD, MA, CHES RETIRED	SP15: Retired	-	-
	FA15: -	_	-
	SP14: Full-time	.58	3130, 4972 [2]
Daphne Joslin	FA14: Retired	-	-
PhD, MPH	SP15: -	-	-
RETIRED	FA15: -	_	_
	1717.	<u> </u>	

			1
Maria DeBorba-Silva	SP14: -	-	-
DrPH, MCHES	FA14: Adjunct	.25	1100
NO LONGER ON FACULTY	SP15: Adjunct	.25	1100
NO LONGEN ON FACULTY	FA15: -	-	-
Daubaua Doeff	SP14: Adjunct	.50	1100 [2]
Barbara Duffy	FA14: -	-	-
MSN, RN <i>NO LONGER ON FACULTY</i>	SP15: -	-	-
NO LONGER ON PACOLIT	FA15: -	-	-
Daharah Lawisa	SP14: Adjunct	.25	3140
Deborah Levine	FA14: Adjunct	.25	3140
MSW, MAT	SP15: -	-	-
NO LONGER ON FACULTY	FA15: -	-	-
L	SP14: Adjunct	.25	2200
Lynne Orr	FA14: -	-	-
PhD, MA <i>NO LONGER ON FACULTY</i>	SP15: -	-	-
NO LONGER ON PACOLIT	FA15: -	-	-
Dool in Domone	SP14: Adjunct	.25	3900
Roslyn Rogers	FA14: Adjunct	.25	3900
MS <i>RETIRED</i>	SP15: Adjunct	.25	3900
NETINEU	FA15: -	-	-

2.3 The program tracks student enrollment to assist in gauging resource adequacy. Given the complexity of defining "enrollment" in an undergraduate major or baccalaureate degree program, the program uses consistent, appropriate quantitative measures to track student enrollment at specific, regular intervals.

Program response to 2.3:

For the purpose of this self-study, an "enrolled" student is "any student with a declared a major in Public Health." Official University program enrollment is maintained and reported each semester by the Office of Institutional Research and Assessment (IRT), which also uses the same definition for "enrollment." These data are published each year in the University Fact Book, and are provided to program leaders periodically.

In the case of the SBP, enrollment data from IRT is cross-referenced with the SBP Retention Database, an internal document maintained by the SBP's designated leader to track student movement in and out of the major, academic standing, and graduation rates. This database is kept in an Excel spreadsheet and is updated on a weekly basis. Further, the SBP maintains detailed records of student enrollment in hardcopy — each student is tracked using a color-coded and dated advisement file, which academic advisors use for advising, the ISC uses to track internship-related information, and the designated leader uses to track and verify enrollment.

Template C

Semester	Student headcount	Student FTE	Narrative explanation of the specific method and source of student enrollment data
Spring 2014	124	116	Method: Each semester, the Office Institutional Research and Assessment (IR&A) runs a report using student enrollment data
Fall 2014	154	145	from the Banner system at the same time each year (beginning of October) to establish the official headcount for each department at the University. Note: Regarding calculation of
Spring 2015	169	151	student FTE, at WPU, 2 part-time students equal 1 full-time student. 16 undergraduate student credit hours = 1 UG FTE
Fall 2015	153	143	Source: Data is obtained from the Grade R report (table 12 – the semester enrollment report).

While the program tracks student enrollment carefully, what Template C does not illustrate effectively is the exponential growth in enrollment in the past several years.

Figure 6: Growth in the Number of Students in the SBP, 2009-2013



2.4 The program's student-faculty ratios (SFR) are sufficient to ensure appropriate instruction, assessment and advising. The program's SFR are comparable to the SFR of other baccalaureate degree programs in the institution with similar degree objectives and methods of instruction.

Program response to 2.4:

The SBP's student-faculty ratios have increased over the past few semesters, due to the increase in enrollment in the SBP that was described earlier. The average class size in the SBP is somewhat above the University mean, which is generally in the range of 18-19.

Template D.1a - SBP Data

Semester	SBP SFR	Explanation of the data and method used	SBP Average Class Size	Explanation of the data and method used
Spring 2014	17.6	These figures were calculated by dividing the Student FTE found	23.0	Average undergraduate class size is from the semester enrollment and grade report
Fall 2014	22.0	in Template C by the Full-Time Faculty FTE found in Table 2.	23.8	produced by Institutional Research and Assessment (IR&A).
Spring 2015	25.5		21.1	(IRQA).
Fall 2015	21.2		Not yet available	

The BS in Nursing program was selected as the comparison program for a variety of reasons, including similar admissions requirements (with similar courses necessary for program admission), the presence of professional standards and professional examination opportunities, and the presence of a national accrediting body.

Both programs also have a significant required fieldwork experience for students, and manage these placements, including insurance and contracts, internally. Both the SFR and average class size in the SBP are comparatively higher than those in the Nursing program, which can almost be fully explained by the small class sizes of Nursing students enrolled in clinical lab courses and in clinical placements.

Template D.1b - BS in Nursing - General Program Data

Template Birb	DO III IVAI SIII B	General Frogram Bata		
Semester	Nursing SFR	Explanation of the data and method used	Nursing Average Class Size	Explanation of the data and method used
Spring 2014	7.8	These figures were calculated by dividing Student FTE by the	13.0	Average undergraduate class size is from the semester enrollment and grade report.
Fall 2014	7.2	Full-Time Faculty FTE. Source: Data is obtained from the	11.9	·
Spring 2015	7.3	Grade R report.	11.9	
Fall 2015	Not yet available		Not yet available	

Template D.2

Comparable Baccalaureate Program in the	Narrative explanation of the choice of the comparable program. Include degree objectives and methods of instruction as well as a rationale for the choice.
institution	
BS in Nursing – General Track	Rationale for choice: Like our SBP, the BS in Nursing is an undergraduate health professions program that aims to prepare students to enter the workforce. Other similarities include: similar major pre-requisite courses in Anatomy and Physiology and Statistics, a cohort model with the major core course sequence beginning in the Junior year, a national credentialing exam, and mandatory field placements as part of the overall credit requirement for the major. BS Degree objectives: 1. Synthesize knowledge from the humanities, the natural and behavioral sciences and Nursing to implement nursing practice decisions. 2. Engage in critical thinking in all aspects of nursing. 3. Deliver culturally sensitive care reflecting global issues at all levels of prevention. 4. Use and manage information technology in nursing practice. 5. Communicate effectively in professional relationships. 6. Collaborate with patients, families, and other health care providers to design, manage and coordinate health care. 7. Apply economic and management principles in leadership roles. 8. Evaluate research findings as they apply to nursing practice. 9. Practice nursing as prescribed by legal standards and in accordance with ethical principles. 10. Participate in activities consistent with self-development and professional growth. Methods of instruction: Both programs use a cohort model in which introductory courses that are largely concept-based and theory-driven are situated early in the program course sequence. These courses are taught using traditional teaching methodologies such as lecture, small group work, and active classroom learning. Courses sequenced later in the programs are taught using case study, experiential methodologies (such as research projects and community needs assessments), and class discussion. Reinforcement of key concepts and skills are woven throughout courses in both programs. Both programs have a significant field work component – the BS in Nursing uses clinical rotation instructional methods, while the SBP places

As shown in Templates E1 and E2, the SBP average advising load is substantially lower (although growing) when compared to the BS in Nursing program, which suggests that, at this time, the program's student-faculty ratios are sufficient to ensure appropriate advising. Of note, all students with fewer than 30 credits (with the exception of Nursing, Music and Art majors) are advised outside of the academic department by professional advisors. Therefore, any student enrolled in the SBP who has earned fewer than 30 credits is not reflected in Template E.1., while Nursing students with 30 or fewer credits are reflected in the numbers shown in Template E.1.

Template E.1

Semester	SBP Average Advising Load	Explanation of the data and method used	Comparable Program Average Advising Load
Spring 2014	28.5 students per advisor	The data in this table displays the average number of student advisees that were assigned	49.3 students per advisor
Fall 2014	33.5 students per advisor	semester. The average advising load was calculated by dividing the number of students advised by program faculty advisors during the given semester by the number of faculty advisors who were assigned as advisors during that same	49.3 students per advisor
Spring 2015	39.0 students per advisor		49.3 students per advisor
Fall 2015	39.5 students per advisor		42.7 students per advisor

Template E.2

Comparable Baccalaureate Program in the institution	Narrative explanation of the choice of the comparable program.
BS in Nursing – General Track	The BS in Nursing (General Track) was chosen as the comparable program as many aspects of advising are similar – in addition to the similarities described in Template D, both programs prepare students for the workforce with a baccalaureate degree, and thus require advisors to understand the dynamics of their respective workforce needs. This is critical for successful career advising. Further, both programs are sequenced and run as cohorts, which requires that advisors fully understand the program requirements, prerequisite courses, course rotation schedules, academic standards, and graduation requirements, all necessary qualities for successful academic advising.

2.5 The program has access to financial and physical resources that are adequate to fulfill its operating needs, accomplish the mission, teach the required curriculum and provide an environment that facilitates student learning, including faculty office space, classroom space and student gathering space.

Program response to 2.5:

The DPH receives its annual administrative budget from the Office of the Provost/Senior Vice President for Academic Affairs. This is the only source of operational funding for the department. These funds comprise the operating budget for the department and the SBP, and are displayed in Template F. The SBP does not have any other source of revenue. There are no recent or planned future changes in fiscal resources.

Of note, and as mentioned previously, all resources, courses, and faculty of the department are directly used to support the SBP – no portion of the funding shown in Template F is allocated exclusively to any other program or purpose. It is all allocated to costs that directly support the SBP.

The program's operating budget is used for a variety of purposes, including the purchase of office supplies, instructional supplies, printing services, and event reception costs. This operating budget also funds some travel, including travel for internship site visits and partially covers the cost of faculty travel to conferences and professional meetings. Some years, the operating budget is used to partially cover the cost of student travel to present their research findings at local and regional conferences.

The Dean of the COSH provides financial resources directly to program faculty to hire student research assistants and tutors (approximately 3-4 students per semester). The Dean also provides periodic financial assistance to faculty members who are presenting the results of their research at professional meetings and conferences. Additional travel money is also available to faculty through the Office of the Provost.

While technically not a part of the program budget (as these funds are paid directly from the budget of the respective office) the three remaining lines in Template F represent these special allocations of funding to which faculty may apply annually. These include the following:

- The Student Research Assistant Program The Office of the Dean of the COSH provides funding to faculty to hire students research assistants. At the start of each semester, faculty may request a student research assistant (or several) by submitting a short description of the research project and the role of the student research assistant. The program has increasingly used this funding in the past several years.
- Dean's Travel Support Budget The Office of the Dean of the COSH provides funding to faculty who
 are actively involved by presenting their research (or some other active involvement) at professional
 meetings and conferences.
- <u>Faculty Research & Travel Incentive (RTI) Program</u> The Office of the Provost provides funding to support full time faculty travel related to research, to support full time faculty who have an established research agenda or those who are developing a research agenda.

Template F: Sources of Funds by Major Category, 2011 to 2016						
Source of Funds	AY 2011-12	AY 2012-13	AY 2013-14	AY 2014-15	AY 2015-16	
Office of the Provost ¹ (Dept. Operating Budget)	\$13,500	\$13,500	\$13,500	\$13,500	\$15,080	
Student Research Assistant Program ^{2,3}	\$1,460	\$1,948	\$3,182	\$3,588	\$3,218	
Dean's Travel Support Budget ²	\$600	\$600	\$700	\$1000	Not yet known⁵	
Faculty Research & Travel Incentive (RTI) Program ⁴	\$0	\$0	\$0	\$1,500	Not yet known ⁵	
Total	\$15,560	\$16,048	\$17,382	\$19,588	\$18,298	

¹ Department Operating Budget = SBP Operating Budget

The physical space occupied by the DPH/SBP until December 2015 included 1470 square feet in a relatively dated academic building, Hunziker Wing. This space included eleven faculty/staff offices, one copy room, one student research office, and one break room. Program adjunct faculty shared an office with the faculty of approximately ten other departments in an adjacent building.

Construction of a new academic building (<u>University Hall</u>) to house the health professions departments, including the DPH, was recently completed and we moved into this new academic space prior to the start of the spring 2016 semester (January 2016). In this new space the Department occupies a 2,966 square foot modern suite comprised of a large reception area, eleven faculty/staff offices, one adjunct faculty office with two workstations, one copy room, one break room, and a student research office with five research workstations. This new building represents a significant investment by the University in the DPH and the SBP.

Nearly all of program's courses were taught in the dated classrooms located in Hunziker Wing. These classrooms, which were shared among all departments, held between 30-40 students and each had a podium with an AV system, projection capability, and internet access. Classrooms had wireless connectivity. There were no program-specific classrooms for the SBP.

Now Hunziker Wing is closed for a 2 year renovation period, and currently most the SBP courses are being taught in University Hall, which includes ten traditional classrooms, two active learning classrooms, and four seminar rooms – all learning spaces are fully equipped with AV and projection technology.

² Funded by the Office of the Dean of the COSH

³ Funding to hire student research assistants/tutors at approximately \$700/semester/student

⁴ Funded by the Office of the Provost

⁵ Faculty apply to these funds directly throughout the year on a competitive basis; total will be known at the end of the academic year

In University Hall, students have access to state-of-the-art teaching facilities, fifteen group study rooms/meeting spaces, a café, and common seating/study space throughout, including a garden roof terrace adjacent to the DPH.

Additional University resources that are specifically used by the program include: classroom space in other buildings (including Hunziker Hall and Raubinger Hall), access to several computer labs for teaching, library resources (including instructional resources and a departmental allocation for the purchase of additional instructional material), distance learning support through the Instructional Technology department, the Science Enrichment Center (which provides tutoring for science and health courses), and office space for student research assistants.

The DPH also provides space, when available, to house faculty research projects. Currently the DPH is home to a grant-funded community-based participatory research project in the form of a county-wide substance abuse prevention coalition. This coalition, <u>United for Prevention in Passaic County</u>, is staffed by three program staff members (all graduates of the program) who work under the supervision of the Principal Investigator (a public health faculty member) and the Associate Vice President for Student Development. This grant-funded project provides opportunities for paid student research assistantships, non-paid internship opportunities, and instruction in methods for community engagement and mobilization around priority public health issues.

2.6 The academic support services available to the program are sufficient to accomplish the mission and to achieve expected student outcomes. Academic support services include, at a minimum, the following: ● computing and technology services ● library services ● distance education support, if applicable ● advising services ● public health-related career counseling services ● other student support services (eg, writing center, disability support services), if they are particularly relevant to the public health program

Program response to 2.6:

Academic support services at William Paterson University are strong and varied, as shown in Template G. Program faculty interact regularly with many of the services. For example, the program appoints an official faculty liaison to the David and Lorraine Cheng Library. This faculty liaison regularly interacts with librarians and has the ability to assist the library build its collection of public health-related materials through a specific allocation of funds from the library budget designated for the program.

The Office of Disability Services regularly interacts with program faculty and the Department Chairperson to promote academic success among students with documented disabilities. The program offers course-specific tutoring on an as-needed basis — when a faculty member determines that there is sufficient need to offer department-based tutoring in a given semester, departmental funds are used to recruit and hire senior SBP majors to work under the direction of a faculty member to provide one-one-one and group tutoring.

Template G		
Academic	Responsible	Description
Support	Party	
Resource		
Computing and Technology Services	The Institution	Information Technology is committed to providing William Paterson University technology leadership to design, plan, implement, expand and support broadcast, network, and computing facilities and services. They strive to provide state-of-the-art technology solutions that meet the
		needs of the William Paterson University community, and are committed to providing the best user support possible. The <u>Instruction and Research Technology</u> program provides leadership in technology and excellence in production, design, instructional technology, and support to the faculty, students, and William Paterson University community
Library	The	The David and Lorraine Cheng Library is the academic knowledge center
Services	Institution	of William Paterson University. The Library advances the University's mission and core values: academic excellence, creation of knowledge, student success, diversity and citizenship. To further this mission, the Library provides access to scholarly materials and instruction in their use, expert service and state-of-the-art facilities.
Distance Education Support	The Institution	The <u>Center for Teaching and Learning with Technology</u> (CTLT) is focused on providing dynamic consultation in pedagogy and technology and offering instructional design and development services for faculty members at William Paterson University. <u>User Services</u> consists of the Help Desk, Field Services, Enterprise Desktop Support, and Technology Consultants. In coordination, they triage technology related requests, resolve technical problems, develop technology infrastructure, and maintain many of the University's computer labs. The <u>Instruction and</u>

		Research Technology program provides many faculty workshops and
		institutes specifically around issues related to distance learning.
Advising	The	The Gloria S. Williams Advisement Center provides undergraduate
Services	Institution	students with information, guidance and support to create and
	and the	implement an integrated educational plan. At William Paterson
	Program	University, advising is a shared responsibility between professional
		advisors (within the Center and Colleges), faculty advisors and students.
		Every student has an assigned professional advisor based on his or her
		major and students are assigned a faculty advisor after he or she is
		declared and has earned 30 credit hours. Every student is expected to
		take responsibility for their education and consider the advice given and
		ask questions. Professional Advisors assist students with transitional
		issues and help them develop a plan for their collegiate experiences.
		Faculty Advisors assist students with specific issues in their major/minor
		and help students understand industry expectations.
Public	The	The <u>Career Development Center</u> works in collaboration with the
Health-	Institution	University and community constituents to help students develop the
Related	and the	professional skills needed to achieve career success in a multi-cultural,
Career	Program	global society. The Center educates students by providing career
Counseling		counseling, career coaching, job, internship and graduate school
Services		preparation as well as employment and mentoring connections.
		Students are empowered to define and achieve their personal, academic
		and career goals. The Center maintains a Public Health specific webpage
		and Fact Sheet. Students can also meet with DPH faculty to discuss
		public health career goals or consult the DPH's <u>Career Resources</u>
		webpage.
Academic	The	The <u>Academic Success Center</u> works collaboratively with members of the
Success	Institution	University to tailor and cater to the needs of the student population. At
Center		their facility, students receive both one-on-one, and group-oriented
		tutoring assistance for a wide range of lower-level and upper-level
		courses; as well as for developmental skills for mathematics and reading
		courses. Students can make the Academic Success Center a home to
		hone their skills. Academic workshops are facilitated to help students
		develop effective study skills for lifelong learning. From the Center's lab,
		students may access network computer facilities. Study groups, and
		exam review sessions are also available upon request.
Office of	The	The Mission of the Office of Disability Services (ODS) is to assist students
Disability	Institution	with documented disabilities by providing reasonable accommodations
Services		and services that ensures equal access to all programs, activities, and
		related benefits of the University's educational and professional
		programs. The Office of Disability Services works in collaboration with
		students to determine appropriate reasonable accommodations based
		upon the individualized needs of the student. ODS acts as a resource
		and works in cooperation with faculty and other university
		departments.
Science	The College	The <u>Science Enrichment Center</u> (SEC) is a collaborative effort between
Enrichment	of Science	the faculty and staff of the COSH. They offer a wide range of face-to-
Center	and Health	face and online academic services and resources. The SEC is a "student-
	of Science	the faculty and staff of the COSH. They offer a wide range of face-to-

		centered environment" that empowers students with diverse needs to achieve high levels of intellectual and personal growth and enables professors to maintain high academic standards. Within this environment, SEC staff and faculty challenge students to develop a deeper appreciation and understanding of the sciences. Towards this endeavor, the SEC provides human and material resources, cooperative learning, coaching and mentoring to facilitate student learning.
Writing Center	The Institution	The William Paterson <u>University Writing Center</u> provides one-on-one tutoring for anyone in the university community working on any kind of writing in any stage of development. Tutorial sessions typically take thirty minutes to an hour. Tutors assist students with writing issues such as outlining, thesis clarification, organization, style, transitions, citing, and grammar, and help students learn how to edit and proofread their own writing.
Office of Veteran and Military Affairs	The Institution	The Office of Veteran and Military Affairs provides support to veterans, active duty service members and their families by administering services that assist with the transition from military service member to college student.
Students of Life	The Institution	Students of Life (SOL) is an intergenerational program that brings together older adults with undergraduate students at William Paterson University. The SOL program, sponsored by the University's Institute for Creative Aging, provides a mutually beneficial mentoring experience for both younger and older generations. SOL volunteers, with their lifetime of experience, offer perspective, encouragement, and support to students in a variety of ways as they navigate through college life.
Department Tutoring Services	The Program	The SBP provides opportunities for students to work with peer-tutors when necessary under the supervision of a faculty member.

3.0 Faculty Qualifications

3.1 The program meets the requirements of regional accreditors for faculty teaching baccalaureate degree students. Faculty with doctoral-level degrees are strongly preferred and, in most cases, expected. A faculty member trained at the master's level may be appropriate in certain circumstances, but the program must document exceptional professional experience and teaching ability.

Program response to 3.1:

The William Paterson University of New Jersey is accredited by the Middle States Commission on Higher Education. The last Middle States review in 2011 resulted in an accreditation term of 2011-2021.

All eight full-time program faculty hold doctoral degrees in Public Health, a Public Health discipline, or closely related field. All adjunct faculty hold Master's degrees in their area of expertise, and several hold doctoral degrees. All faculty who teach the health education content courses in the health education track are CHES or MCHES-certified.

Adjunct faculty who are trained at the Master's level must have previous teaching experience, preferably at the collegiate level, and must hold a Master's degree in a field directly related to the course that they are hired to teach. For example, Master's level faculty hired to teach our introductory health issues course must have a degree in a health-related discipline and in most cases, must have the CHES or MCHES credential, or be a NJ licensed school health teacher. For individuals teaching in specialized fields where external certifications/licensures exist (i.e. Nutrition, Human Sexuality, Health Counseling), we strongly prefer to hire individuals who hold those credentials. When hiring Master's trained adjunct faculty, we also look for significant practice experience in the field, especially for skill-based courses. All adjunct faculty are assessed regularly through a peer-review process to ensure teaching ability and mastery of content.

Template H	Template H						
Name of faculty	Graduate degrees earned	Institution where degrees were earned	Discipline in which degrees were earned	Relevant professional experience	Applicable registration, certification, licensure		
Full-Time Fac	culty						
Corey Basch	Ed.D. MPH MS MA	A. Columbia University B. University of Massachusetts, Amherst C. (same as A) D. (same as A) E. (same as A)	A. Health Education/ Humanities B. Public Health Practice C. Cognition and Learning D. Communication and Education E. Nutrition	Postdoctoral Research Scientist, Department of Epidemiology Columbia University; Health Education Specialist, Teachers College, Columbia University; Nutrition Educator, United States Department of Agriculture	CHES		
Eli Green	PhD MEd MA	A. Widener University B. Widener	A. Human Sexuality Studies B. Human Sexuality	Consultant and Trainer, Office of LGBTQ Policy and Practice NYC	CSE		

		University C. Claremont Graduate University	Education C. Applied Women's Studies	Administration of Children's Services; Trainer/Inclusion Assessment Consultant, David M Hall Associates & NCAA; Curriculum Design Consultant, Unitarian Universalist Association	
Michele Grodner	Ed.D. MEd	A. Columbia University B. (same as A)	A. Family and Community Education B. Community Nutrition: Nutrition and Mass Media	Consultant, Children's Television Workshop, New York; Consultant and Author, Super Hero Super Healthy Cookbook, DC Comics; Researcher, UNESCO.	CHES
Alex Kecojevic	DrPH MPH	A. Drexel University SPH B. Johns Hopkins Bloomberg SPH	A. Community Health and Prevention B. Public Health	Postdoctoral Research Fellow, SDSU Research Foundation, SDSU SPH; Principal Investigator, Drexel University SPH; Research Program Manager, Johns Hopkins University.	
William Kernan	Ed.D. MPA MS	A. Columbia University B. Marist College C. (same as A)	A. Health Education B. Public Health Administration C. Health Education	Principal Investigator, UPinPC; Director, Center for Student Wellness, Columbia University Medical Center; Director, Health Education, Vassar College; Nutrition Monitoring Specialist, UN World Food Program; Child Survival Officer, United States Peace Corps	MCHES
Jean Levitan	PhD MA	A. New York University B. (same as A)	A. Health Education, Human Sexuality, Marriage, and Family Life Education B. Health Education, Human Sexuality, Marriage, and Family Life Education	Grant Reviewer, N.J. Department of Health; Teacher Training for Sexuality Education, various sites; Trainer on Sexual Harassment/ Affirmative Action/ Women's Studies, various sites; Evaluator for Family Living/Sex	

				Education Program, New York City Board of	
				Education	
Marianne Sullivan	DrPH MPH	A. Columbia University, Mailman School of Public Health B. University of California, Berkeley	A. Sociomedical Sciences B. Behavioral Sciences	Epidemiologist II, Public Health-Seattle & King County; American Legacy Foundation Fellow, Center for Applied Public Health, Mailman School of Public Health, Columbia University; Consultant, Dept. of Pediatrics, University of Washington; Research Coordinator, Harborview Injury Prevention & Research Center; Research Scientist, Department of Rehabilitation Medicine, University of	
Naa-Solo Tettey	Ed.D. MPH MBA MA	A. Columbia University B. University of Connecticut C. State University of New York at Utica D. (same as A)	A. Health Education B. Public Health C. Health Care Administration D. Clinical Psychology	Washington. Researcher/Principal Investigator, New York Presbyterian Hospital- Weill Cornell Medical Center; Health Educator/ Wellness Consultant, Aetna; Outreach Coordinator, Health Integrated; Public Health Policy Associate, Connecticut Public Health Association; Program Assistant, CitySeed New Haven; Obesity Prevention Specialist, Yale University; Counselor, Columbia University.	MCHES CPH
Adjunct Facu	ulty				
Rebecca Abenante	MSW MA	A. Rutgers University B. Fairleigh Dickinson University	A. Social Work B. Counseling	Healthy Aging Coordinator, Morristown Medical Center Atlantic Health System; Assisted Living	LSW ASW-G

				Coordinator Brighton Gardens of West Orange Sunrise Senior Living; Social Service Coordinator United Methodist Homes of New Jersey	
Liz Amaya- Fernandez	МРН	A. Tulane School of Public Health and Tropical Medicine	A. International Health and Development	Senior Program Coord. Community Outreach, Education & Training, Center of Alcohol Studies Rutgers University; Director of Health Education National Latina Health Network; Program Associate, Public Education Network; HIV Prevention Program Manager Raritan Bay Medical Center	
Jocelyn Apicello	DrPH MPH	A. Mailman School of Public Health, Columbia University B. (same as A)	A. Socio-medical Sciences B. Health Promotion	Project Director Columbia University; Graduate Research Assistant Columbia Center for Homelessness Prevention Studies; Consulting Researcher Homelessness Resource Center	
Vanessa Arias- Martinez	MPH MA	A. New York University, Steinhardt School B. William Paterson University	A. Global Health Leadership Track B. Applied Clinical and Counseling Psychology	Program Coordinator Rutgers University Behavioral Health Care; Trainer, NYC Dept. of Health & Mental Hygiene; Quality & Compliance Coordinator /Clinician Nutley Family Service Bureau	LPC
Lama Chaddad	MD MPH	A. National Medical University, Moscow, Russia B. University of Medicine and	A. Medicine B. Preventive Medicine and Public Health	Public Health Epidemiologist/ Consultant, Medical Consultant Services; Public Health Consultant/Director,	

		Dentistry of New Jersey		New York Consulting; Public Health Planner, Sussex County Dept. of Environmental and Public Health Services; Regional Public Health Epidemiologist, Sussex County Department of Environmental and Public Health Services	
Miralda Charles	МРН	A. Capella University	A. Heath Management and Policy	Sickle Cell Program Coordinator, Newark Beth Israel Medical Center	CHES
Kiameesha Evans	МРН	A. University of Medicine and Dentistry of New Jersey, School of Public Health	A. Health Education and Behavioral Science	Founder and CEO, K2M Consulting, LLC; Program Director, Office of Community Outreach Rutgers Cancer Institute of New Jersey; Cultural and Regional Health Initiatives Director, American Heart Association; Director, New Jersey Women and AIDS Network	MCHES
Judith Francis	MS	A. New Jersey City University	A. Community Health Education	Master Facilitator, Chronic Disease Self- Management Program; Prevention Specialist 1 – Tobacco, St. Barnabas Behavioral Health Network; Visiting Nurse & Health Services, Holy Redeemer Home Care - NJ, North	
Charlene Gungil	DHSc MPH MA	A. Nova Southeastern University B. University of Medicine and Dentistry of New Jersey, School of Public Health C. Montclair State University	A. Health Sciences/ Global health B. Environmental and Occupational Health C. Health Education	Health Officer and Director, Passaic County Department of Health; Coordinator Community Health Services, Bergen County Department of Health Services; Public Health Epidemiologist/Assist	HO REHS

				ant Director Medical Reserve Corps, Passaic County Dept. of Health; Health Inspector/Educator/ Dept Head, Westwood Board of Health	
Patricia Hardin	МА	A. East Stroudsburg University	A. Health Education	Health Educator, Vernon Board of Education	
Jody Inglis	MA	A. Montclair State University	A. Health Education	Health Specialist, Montville Township High School	
Sylvia Jackman	МРН	A. Hunter College	A. Community Health Education	Internship Site Coordinator, WPU; Senior Health Educator, HealthEd; Director of Prevention Services, Horizon Health Center; Treatment Adherence Manager, Allion Healthcare, Inc; Mayoral Program Coordinator, Mayor's Office of AIDS Policy	
Dana Jacko	MA	A. Montclair State University	A. Exercise Science	Consultant Dietitian; Director of Wellness, Lakeland Health Care Services	RD
Rose Jean- Baptiste	МРН	A. Hunter College	A. Community Health Education	Program Manager, Rutgers University; Independent Health/ Quality Improvement Consultant, RSJB Consulting; Academic Advisor, Middlesex County College; Clinical Training Specialist, University of Medicine and Dentistry of New Jersey; Division Coordinator, UMDNJ	MCHES
Ryan McKee	MEd MS	A. Widener University B. Virginia Commonwealth University	A. Human Sexuality B. Sociology	Online Education Consultant – ANSWER, Rutgers University; Online Education Consultant - The	CSE

				Religious Institute;	
				Research Associate -	
				John Schoener and	
				Associates; Writer and	
				Researcher - Columbia	
				University Health	
				Services; Research	
				Assistant – Virginia	
				Commonwealth	
				University	
		A. College of St.	A. Nutrition	Director Diabetes and	
		Elizabeth		Nutrition Counseling	
				Center, Hospital	
				Montclair; Director of	
Marilyn				Food Service, Roxbury	
McSpiritt-	MS			Township Public	RD
Guzio				Schools; Director of	CDE
30210				Food Service, Berkeley	
				Heights Board of	
				Education; Clinical	
				Dietitian, St. Barnabas	
				Medical Center	
		A. Seton Hall	A. Educational	Assistant Director of	
		University	Leadership,	Student Activities,	
		B. Montclair	Management and	Hunterdon Central	
		State University	Policy	Regional High School;	
Jonathan	Ed.D.	-	B. Health Education	Sporting Events Site	
Moss	MA			Supervisor, Hunterdon	
				Central Regional High	
				School; Administrative	
				Internship, Seton Hall	
				University	
		A. Nova	A. Higher Education	Executive Director,	
		Southeastern	B. School &	Alfre Inc. (Mrs.	
		University	Community	Wilson's); Private	
		B. Seton Hall	Psychology	Practice Therapist,	
	Ed.D.	University	,01	Behavioral Health	LCADC
Sam Pirozzi	MA	33.5.6,		Counseling &	LPC
				Psychotherapy;	0
				Director of Clinical	
				Services, Turning Point	
				Inc.	
		A. Columbia	A. Health Education	Professional	
		University	7. Hearth Eddeation	Consultant, Pitney	
		Teachers		Bowes Inc; Manager,	
Jill Riera	MA	College		Wellness Programs,	CHES
		Concec		MetLife; Regional	
				Account Manager,	
		1		Account Manager,	

				MediFit Corporate Services	
Julio Rodriguez	MA	A. University of West Florida	A. Community Health Education	Patient Service Coordinator, VNA of Somerset Hills; Health Coach, Metropolitan Jewish Health System; Behavioral Health, Community Care.	
Laurie Schlussel	МА	A. New York University	A. Nutrition	Nutritionist, Private Practice; Nutrition Consultant, Valley Hospital; Research Nutritionist, University of Medicine and Dentistry, Newark, New Jersey	RD
Jamie Sclafane	MS	A. College of Mount Saint Vincent	A. Allied Health Science	Sexuality Educator, Trainer & Consultant; Wellness Officer, Anna C. Scott School, Home and School Association's Executive Board; Director of Program Development and Implementation, Albert Einstein College of Medicine	MCHES
Evelyn Shalom	MA	A. Montclair State University	A. Health Education	Parenting consultant, Montclair Community Pre-K; Parenting consultant, private practice; Co- coordinator, Freshmen FOCUS program, Ridgewood High School	CSE
Arlene Stoller	A. UMDNJ Robert Wood and Behavioral Morris County O Johnson Sciences Health Educator, Rutgers Health Educator, Randolph Towns Rockaway Borou Health Department Market Research Business and		Health Educator, Morris County Office of Health Management; Health Educator, Randolph Township/ Rockaway Borough Health Department; Market Researchers of Business and Residential Surveys,	CHES	

				The Angel Connection, Inc.	
Maryann Walsh	МРН	A. University of Tennessee	A. Community Health	Acting Manager, Community Health, Coordinator of Pediatric & Adolescent Health Education, Morristown Medical Center, Atlantic Health System; Program Manager, Physician World Thomson Healthcare; Community Health Educator, Valley Health System	MCHES
Kathryn Werheim	MA MPA	A. Rutgers the State University of New Jersey B. Montclair State University	A. Health Administration B. Physical Education	Director, Community Resources, Bergen's Promise; Manager, Health Promotion Products-Services, MediFit Corporate Services, Inc.; Coordinator, Aventis Wellness Program, Drew University	
Past Faculty	(Retired or	no longer working	at the University)	·	
Richard Blonna	Ed.D. MA	A. Temple University B. Seton Hall University	A. Health Education/Health Counseling B. Education/ Counseling	Public Health Education Consultant, New Jersey State Dept. of Health; Public Health Field Supervisor New Jersey State Dept. of Health	CHES NCC
Joanna Hayden	PhD MA	A. New York University B. Montclair State College	A. Community Health Education B. Health Education	Consultant, NJ City University, Rutgers Center for Continuing Education, City of Paterson Healthy Heart Program, Newark STD Training Center	CHES
Daphne Joslin	PhD MPH	A. New York University B. Columbia University	A. Sociology B. Public Health	Founder & Director, Grandparent Resources and Caregiver Initiative Alliance (GRACIA) Project; Co-Founder & Director, William Paterson University,	

				Institute for Creative Aging; Senior Long Term Care Specialist, New York City Department for the Aging; Senior Planning Associate, Hudson Valley Health Systems Agency.	
Maria DeBorba- Silva	DrPH MPH	A. Loma Linda University B. UCLA	A. Health Education and Promotion B. Community Health Sciences	Health Educator, San Bernardino County Department of Public Health	MCHES
Barbara Duffy	MSN	A. Seton Hall University	A. Clinical Specialist in Child and Adolescent Health	School Nurse/Health Educator, Franklin Lakes Board of Education; Advanced Practice Nurse, Center for Children	RN
Deborah Levine	MSW MAT	A. University of Pennsylvania B. Simmons College	A. Social Work B. Teaching	Director of Online Health Education, Planned Parenthood Federation of America	
Lynne Orr	PhD MA	A. Capella University B. Montclair State Univ.	A. Adult and Post- Secondary Education B. Higher Education	Certified Instructor, Career Development Facilitator, National Career Development Association	
Roslyn Rogers	MS	A. Jersey City State College	A. Health Administration	Human Resources Director, Planned Parenthood of NJ; Associate Director, Passaic County Planned Parenthood	

3.2 The designated leader of the program is a full-time faculty member with educational qualifications and professional experience in a public health discipline. If the designated program leader does not have educational qualifications and professional experience in a public health discipline, the program documents that it has sufficient public health educational qualifications, national professional certifications and professional experience in its primary faculty members. Preference is for the designated program leader to have formal doctoral-level training (eg, PhD, DrPH) in a public health discipline or a terminal professional degree (eg, MD, JD) and an MPH.

Program response to 3.2:

The designated program leader is the Chairperson of the DPH at WPU, William Kernan. Dr. Kernan holds an Ed.D. and an M.S. in Health Education from Columbia University Teachers College, an M.P.A. in Public Health Administration from Marist College, and a B.A. in Biological Sciences and English Literature from the State University of New York - Potsdam. Dr. Kernan, a Master Certified Health Education Specialist (MCHES), is a full-time, tenured Associate Professor at William Paterson University. Dr. Kernan is in his third year as Department Chairperson.

Dr. Kernan's professional experience as a health educator includes significant international public health education experience. For several years he worked as a Child Survival Officer in Malawi, East Africa while serving as a United States Peace Corps Volunteer. In this role, he developed micronutrient malnutrition prevention and training programs for a rural hospital and seven village-based health clinics. He also developed and published two training manuals through the Peace Corps. Later he worked as a Nutrition Monitoring Specialist for the United Nations' World Food Program. In this position he was responsible for monitoring a refugee food distribution program and the nutritional status of children at over 60 school cafeterias in Liberian refugee settlements in the forest region of Guinea, West Africa. Dr. Kernan has also worked on international public health education projects in Mexico City, Mexico and Bangkok, Thailand.

Dr. Kernan has over a decade of experience planning, implementing, and administering health and wellness programs, as well as related research and evaluation activities, at institutions of higher education in the United States, including Marist College, Vassar College, Columbia University Medical Center, and William Paterson University. He has published in this area, specifically about the connections between health and learning among graduate health science, nursing, dental, and medical students.

Dr. Kernan continues his public health practice work through several grant-funded community-based participatory research projects centered on the prevention of substance abuse in Passaic County, New Jersey. Dr. Kernan is currently the principal investigator on seven ongoing research studies related to this work. Dr. Kernan's full Curriculum Vitae can be found in the ERF.

3.3 Practitioners are involved in instruction through a variety of methods (eg, guest lectures, service learning, internships and/or research opportunities). Use of practitioners as instructors in the program, when appropriate, is encouraged, as is use of practitioners as occasional guest lecturers.

Program response to 3.3:

Practitioners are viewed by the faculty of Public Health as integral to the instruction that occurs both inside and outside of the classroom at WPU. Practitioners are found throughout our faculty (both full-time and adjunct faculty), as guest lecturers in many courses, and, perhaps most critically, as site supervisors for our required internship program.

Template I lists many of these practitioners and provides a broad and accurate portrayal of the many ways in which they are infused into the SBP, as well as the varied aspects of public health that they represent. Many of these public health professionals are alumni of the WPU program.

Template I				
Name	Credentials	Title	Employer	Course(s) Taught/ Instructional Activities Provided
Rebecca Abenante	MSW, MA	Healthy Aging Coordinator	Morristown Medical Center – Atlantic Health System	Provides instruction for the following course: PBHL 2700 Concepts and Issues in Aging
Liz Amaya- Fernandez	МРН	Senior Program Coordinator – Community Outreach, Education & Training	Center of Alcohol Studies, Rutgers University	Provides instruction for the following course: PBHL 1100 HealthyU and PBHL 4962 Intro. To Internship
Jocelyn Apicello	DrPH, MPH	Co-owner	Longhaul Farm, LLC	Provides instruction for the following course: PBHL 3150 Food and Community
Vanessa Arias- Martinez	МРН, МА	Program Coordinator	New Jersey Suicide Prevention Project, Rutgers University Behavioral Health Care	Provides instruction for the following course: PBHL 1100 HealthyU
Lama Chaddad	MD, MPH	1)Public Health Epidemiologist 2)Public Health Consultant/Director	1)Medical Consultant Services 2)New York Consulting	Provides instruction for the following course: PBHL 3750 Human Disease
Miralda Charles (WPU DPH Alumnus)	MPH, CHES	Sickle Cell Program Coordinator	Newark Beth Israel Medical Center	Provides instruction for the following course: PBHL 1100 HealthyU
Serena Collado	МВА	Director Community Health	Robert Wood Johnson	Provides supervision for PBHL 4972/4973 Internship in Public

			University Hospital	Health/Public Health Education as Internship Supervisor
Laura Decker	REHS	Registered Environmental Health Specialist/Asst. Supervisor	Denville Dept of Health	Provides supervision for PBHL 4972/4973 Internship in Public Health/Public Health Education as Internship Supervisor
Claudia Douglass	DNP	Administrative Director	Institute of Evidence-Based Nursing Practice, Hackensack University Medical Center	Provides supervision for PBHL 4972/4973 Internship in Public Health/Public Health Education as Internship Supervisor
Stephanie Gorman (WPU DPH Alumnus)	MPH	Registered Environmental Health Specialist	Pequannock Health Dept	Provides guest lectures for PBHL 3000 Introduction to Public Health
Charlene Gungil (WPU DPH Alumnus)	DHSc, MPH, MA	Health Officer & Director	Passaic County Dept of Health	Provides instruction for the following courses: PBHL 3110 Global Health; PBHL 3400 Environmental Health; PBHL 4000 Epidemiology. Provides guest lectures on functions of Health Officers in PBHL 3000 Introduction to Public Health
Rose-Jean Baptiste	MPH, MCHES	Program Manager	Robert Wood Johnson Medical School, Rutgers University	Provides instruction for the following course: PBHL 1100 HealthyU
Patricia Jones	MS	Director, Avenel Area Office	OSHA	Provides supervision for PBHL 4972/4973 Internship in Public Health/Public Health Education as Internship Supervisor
Chris Kirk	PhD	Director of Mission Development	Atlantic Health System	Provides guest lectures for PBHL 3000 Introduction to Public Health
Lisa Levy	MS	Director, Hasbrouck Heights Area Office	OSHA	Provides supervision for PBHL 4972/4973

				Internship in Public Health/Public Health Education as Internship Supervisor
Michael Litterer (WPU DPH Alumnus)	BPH, RN	Deputy Director	Prevention Links	Provides supervision for PBHL 4972/4973 Internship in Public Health/Public Health Education as Internship Supervisor
Ginny Maico	RN	Public Health Nurse	Randolph Dept. of Health	Provides guest lectures for PBHL 3000 Introduction to Public Health
Nisha Mehta	МРН	Director Community Outreach	Chilton Hospital	Provides supervision for PBHL 4972/4973 Internship in Public Health/Public Health Education as Internship Supervisor
Grettel Muscato	МРА	Director Community Services	Hackensack Mountainside Hospital	Provides supervision for PBHL 4972/4973 Internship in Public Health/Public Health Education as Internship Supervisor
Michelle Muscato	BS, MPA (2018)	Senior Program Coordinator	SNAP-ED, Rutgers University	Provides supervision for PBHL 4972/4973 Internship in Public Health/Public Health Education as Internship Supervisor
Carlos Perez, Jr (WPU DPH Alumnus)	МРА	Health Officer	Morris County Office of Health Management	Provides guest lectures for PBHL 3000 Introduction to Public Health
Sam Pirozzi	Ed.D., MA, LCADC, LPC	1)Executive Director 2)Private Practice Therapist	1) Alfre Inc. (Mrs. Wilson's/ substance abuse facility) 2) Behavioral Health Counseling & Psychotherapy	Provides instruction for the following course: PBHL 2150 Drugs and Health
Sheila Risley	MS	Epidemiologist	Warren County Health Dept.	Provides guest lectures for PBHL 3000

				Introduction to Public Health
Mitchel Rosen	PhD, MPH	Director, Office of Public Health Practice	Rutgers University School of Public Health	Provides guest lectures on Occupational Health and Safety in PBHL 3000 Introduction to Public Health
Parminder Savalia (WPU DPH Alumnus)	BS, CHES	Supervisor Community Health Education	Valley Hospital	Provides supervision for PBHL 4972/4973 Internship in Public Health/Public Health Education as Internship Supervisor
Laurie Schlussel	rrie Schlussel MA, RD Nutritionist Private Pra		Private Practice	Provides instruction for the following courses: PBHL 2210 Nutrition and PBHL 2240 Therapeutic Nutrition
Kathy Skrabola	hy Skrabola MA, BSN, Health Officer / RN Public Health Nurse		Lincoln Park Health Dept	Provides guest lectures for PBHL 3000 Introduction to Public Health
Arlene Stoller	MPH, CHES Health Educator/Risk Communicator		Morris County Office of Health Management	Provides instruction for the following course: PBHL 3000 Introduction to Public Health
Kevin Sumner	Kevin Sumner MPH Health		Middle Brook Regional Health Commission	Provides guest lectures for PBHL 3000 Introduction to Public Health and Provides supervision for PBHL 4972/4973 Internship in Public Health Education as Internship Supervisor
Francine Vince	Addiction Services of Passaic County Administrator Health Educa		Provides supervision for PBHL 4972/4973 Internship in Public Health/Public Health Education as Internship Supervisor	
Maryann Walsh	Maryann Walsh MPH, Coordinator Atlantic Healthy Schools Program		Morristown Medical Center, Atlantic Health System	Provides instruction for the following courses: PBHL1100 HealthyU and PBHL1300 Healthy Living After 30. Provides guest lectures in PBHL 3000

				Introduction to Public Health
Joanne Wendolowski	RN, BC, MSN	Public Health Nurse Supervisor	Hackensack University Medical Center	Provides supervision for PBHL 4972/4973 Internship in Public Health/Public Health Education as Internship Supervisor
Kathryn Werheim	MA, MPA	Director Community Resources	Bergen's Promise	Provides instruction for the following course: PBHL1100 HealthyU

3.4 All faculty members are informed and current in their discipline or area of public health teaching. *Program response to 3.4*:

As illustrated in Table 4, all full-time faculty members and the vast majority of adjunct faculty members engage in a significant amount of professional development and/or continuing education in order to remain informed and current in their discipline.

During the course of this self-study, it became evident to the full-time faculty that some of the adjunct faculty needed assistance in identifying low-cost and/or no-cost opportunities for professional development. As a result, the full-time faculty developed a resource list of no-cost professional development opportunities, many of which also provide free CEUs. This list was inserted into the 2015-2016 Faculty Handbook, and will be updated on an annual basis. This list is found in the ERF.

Table 4: Faculty Professional Development: Activities and Methods

Faculty member	Activities and methods used to remain informed/current in discipline			
Full-Time Faculty				
Corey Basch	Peer reviewer for 23 public health journals. Editorial board member of the <i>Annals of Public Health and Research, Journal of Mass Communication & Journalism,</i> and <i>World Journal of Gastrointestinal Endoscopy</i> , and reviewed abstract submissions for the American Public Health Association's 2014 and 2015 Annual Conferences. Volunteered as a health educator and member of the research team for the Healthy Colon Project, a randomized intervention trial at Columbia University funded by the American Cancer Society. Food service volunteer for an organization serving nutritious meals for those living with AIDS and other illness in New York City. Regularly attends workshops/trainings, webinars to earn CHES credits. Recently attended national annual professional meetings and made presentations at: Society of Behavioral Medicine, American Public Health Association, and Digestive Disease Week.			
Eli Green	Regularly attends annual meetings of the American Association of Sexuality Educators, Counselors & Therapists (AASECT), Society for the Scientific Study of Sexuality (SSSS), National Sexuality Education Conference. Current member of the AASECT, SSSS, Advanced Sexuality Educators & Trainers (ASET), Society for the Psychological Study of Social Issues (SPSSI), American Psychological Association (APA), Division 44 (LGBT). Serves as reviewer for American Journal of Sexuality Education, Sex Education, Reproductive Health Matters. Also regularly reads Journal of Social Issues, Journal of Sexual Orientation & Gender Diversity and several relevant professional list-serves.			
Michele Grodner	Attends the following conferences biennially: American Public Health Association (APHA) and Academy of Nutrition and Dietetics (AND) meetings. Regularly attends regional workshops/trainings and webinars to earn CHES credits. Regular reader of the following journals: American Journal of Public Health (AJPH), Journal of the Academies of Nutrition and Dietetics; and several nutrition and medical professional online publications. Maintain active membership in the following professional organizations: APHA, New jersey Public Health Association, Academy of Nutrition and Dietetics (AND).			
Alex Kecojevic	Attends the following conferences annually: APHA and College on Problems of Drug Dependence (CPDD). Abstract reviewer for APHA annual meeting and peer-reviewer for several journals in substance abuse field. Regular reader of the following journals: AJPH, AIDS and Behavior, and several substance abuse publications. Maintain active			

	membership in the following professional organizations: APHA, and LGBT caucus of
	APHA. Applying for membership in CPDD.
William Kernan	Attends the following conferences annually: NJ Public Health Symposium, New Jersey Society for Public Health Education (NJSOPHE) Annual and Mid-Year meetings. Regularly attends regional and national workshops/trainings to earn MCHES credits. Regular reader of the following journals: All SOPHE journals, AJPH, and several substance abuse publications. Maintains active membership in the following professional organizations: NJSOPHE, Society for Public Health Education (SOPHE), NJPHA, APHA. Current president of NJSOPHE (2016).
Jean Levitan	Regularly attends annual meetings of the SSSS, the Sex and Aging Consortium, the Advanced Sexuality Educators and Trainers retreat, and occasional meetings of NJPHA. Active reader on professional list serves, reviewer for book award for outstanding scholarship in the sexuality field.
Marianne Sullivan	Member of APHA Environment and Occupational Health Sections. Regularly attends and presents/moderates at APHA meetings. Member of the Policy Committee of the Occupational Health Section of APHA. Member of the Collaborative on Health and the Environment (CHE). Regularly participate in CHE partnership calls on environmental health science and practice topics. Abstract reviewer for APHA annual meeting and peer-reviewer for several journals and one University press. Regularly read the AJPH and Environmental Health Perspectives, among other journals.
Naa-Solo Tettey	Attends the following conferences annually: Columbia University Annual Health Disparities Conference, APHA Annual Meeting, National Wellness Conference. Regularly attends regional and national workshops/trainings to earn MCHES, CPH, and ACSM-CWC credits. Regular reader of the following journals: All SOPHE journals, <i>Journal of Community Health, AJPH, and The Journal of Religion and Health</i> . Maintain active membership in the following professional organizations: NYSOPHE, SOPHE, New York Public Health Association (NYPHA), APHA, and National Wellness Institute (NWI).
Adjunct Fac	
Rebecca Abenante	Attends annual Alzheimer's Association NJ conference and NJ National Association of Social Workers (NASW) conference, along with various area conferences/seminars related to gerontology/geriatrics. Regularly attends continuing education courses related to gerontology to maintain NJ social work license (LSW) and Advanced Social Worker in Gerontology (ASW-G) certification from the National Association of Social Workers (NASW). Completes 30 credits biannually to maintain licensure. Maintains active membership in the National Association of Social Workers (NASW) and American Society on Aging (ASA).
Liz Amaya- Fernandez	Regularly attends trainings and conferences, such as ACHA, the Summer School of Addiction Studies, and Rutgers Health Services conference. Frequent reader of the AJPH, Chronicle of Higher Education, Journal of American College Health, American Journal of Sexuality Education and the Journal of Studies on Alcohol and Drugs. Member of Eta Sigma Gamma, the NJ Higher Education Consortium & NJSOPHE.
Jocelyn Apicello	Reads journal articles through online databases, follows current events and attends food and farming conferences.
Vanessa Arias- Martinez	Attends annual conferences for organizations, such as the American Association of Suicidality and the Congressional Hispanic Caucus Institute (Public Policy Conference). Attend statewide training opportunities offered by Rutgers University Behavioral Health Care on topics, such as mental illness, stigma, substance abuse, suicide prevention, etc.

	to earn LPC CEU's. Regular reader of the following journals: AJPH and The Lancet Global Health
Lama Chaddad	Attends professional development conferences and workshops; reads news articles and public health publications.
Miralda Charles	Uses the following sources to maintain CHES certification: Courses sponsored by Health Education Partners, attends Annual New Jersey Public Health Symposium, and uses the New Jersey Learning Management Network.
Kiameesha Evans	Attends the following conferences annually: NJ Public Health Symposium, NJSOPHE Annual and Mid-Year meetings. Regularly attends regional and national workshops/trainings (in-person and virtual) to earn MCHES credits. Ongoing development and publication of manuscripts and abstracts for dissemination in health education journals and at conferences. Maintain active membership in the following professional organizations: NJSOPHE and SOPHE. CHES since 1998; MCHES since 2011. Member of NJSOPHE Board (Job Bank Chair) since 2001.
Judith Francis	Attends several continuing education workshops, conferences, and webinars that focus on Health Education, Wellness, and Prevention. Reads the Journal of Health Education Teaching Techniques and Harvard Health Publications - Healthbeat.
Charlene Gungil	Regularly attends meetings of: APHA, New Jersey Association of County and City Health Officials (NJACCHO), New Jersey Environmental Health Association (NJEHA), NJPHA, New Jersey Association of Public Health Epidemiologists, Association for Professionals in Infection Control and Epidemiology, Community Emergency Response Team (CERT), Medical Reserve Corps – Passaic County (MRC).
Patricia Hardin	Member of Society of Health and Physical Educators (SHAPE) and NJ Association for Health, Physical Education, Recreation, and Dance (NJAAPHERD).
Jody Inglis	Member of New Jersey Education Association (NJEA), NJAAHPERD, SOPHE and American Speech-Language-Hearing Association (ASHA). Regularly attends conferences and trainings such as: Center for Sex Education's Sex Ed. Conference, ANSWER online trainings and NJEA Convention. Regular reader of SOPHE journals and recent sexuality publications.
Sylvia Jackman	Participates in webinars that focus on topics such as: career development, digital identity, networking, internship program policies. Attend Public Health Association meetings to network with new agencies. Part of an internship/career development listserv and participate in discussions that impact credit-bearing and non-credit bearing placements.
Dana Jacko	Member of American Dietetic Association for over 20 years, Member of American Counsel of Exercise. Regularly attends regional and national workshops/trainings to earn continuing credits to maintain RD status and maintain certifications in fitness industry.
Rose Jean- Baptiste	Planning committee member of NJSOPHE Annual and Mid-Year conferences and also attends both meetings annually. Participate in local, regional and national workshops to maintain MCHES certification. Monthly reader of all SOPHE publications. Professional organization memberships: NJPHA, NJSOPHE (Past -President, 2011) still active, SOPHE (member of Advocacy Committee)
Ryan McKee	Attends the following conferences regularly: AASECT, SSSS, The Center for Sex Education's National Sex Ed Conference. Regular reader of the following journals: American Journal of Sexuality Education, Sex Education, American Journal of Men's Health. Maintain active membership in the following professional organizations:

	AASECT, SSSS, American Men's Studies Association (AMSA). Chair of the AASECT Online Education Committee.
Marilyn McSpiritt- Guzio	Regularly attends regional workshops/trainings to earn Diabetes Educator and RD credits. Regular reader of the following journals: Journal of the Academy of Nutrition and Dietetics, American Association of Diabetes Educators, Journal of Nutrition Education. Maintains active membership in the following professional organizations: Academy of Nutrition and Dietetics, national and local
Jonathan Moss	Attends and has presented at NJAHPERD and SHAPE America. Regular reader of the following journals: <i>AMJPH</i> and <i>the Journal of Human Sexuality</i> . Maintain active membership in the following professional organizations: NJAHPERD and SHAPE America.
Sam Pirozzi	Maintains professional counseling certification through regular attendance at local and regional workshops.
Jill Riera	Reads research papers and study results, reads recently published books, and participates in online continuing education.
Julio Rodriguez	Currently pursuing an Ed.D. in Health Education at Teacher's College, Columbia University and expects to graduate in May of 2016. Regular reader of journals pertaining to college students and college student stress.
Laurie Schlussel	Attends the following conferences every other year- Academy of Nutrition and Dietetics. Regularly attends regional and national workshops/trainings to earn 75 credits for each five year period. Regular reader of the following journals: Academy of Nutrition and Dietetics, Gastroenterology, Nutrition Today, Diabetes Care and others.
Jamie Sclafane	Attends the following conferences annually: Health Disparities Conference, Teachers College Columbia University. Regularly attends regional and national workshops/ trainings to earn MCHES credits. Regular reader of the <i>American Journal of Sexuality</i> Education. Follower of many sexual health, women's health and reproductive health & rights agencies.
Evelyn Shalom	Member of AASECT and Advanced Sexuality Educators and Trainers (ASET). Certified Sexuality Educator by AASECT, and takes CE courses to keep certification up to date.
Arlene Stoller	Attends the following conferences annually: NJSOPHE Annual and Mid-Year meetings, NJACCHO Preparedness Summit, and occasionally the Health Communication Summit. Regularly attends state, regional and national workshops/trainings to earn CHES credits. Regular reader of the following journals: All SOPHE journals, MMWR. Maintains active membership in the following professional organizations: NJSOPHE, NJACCHO, and National Public Health Information Coalition.
Maryann Walsh	Attends local (Bergen County Medical Reserve Corp - member), state (NJSOPHE) and national (SOPHE and ASHA) meetings to maintain both MCHES certification and Health Officer License. Is a current member of NJSOPHE and ASHA.
Kathryn Werheim	Regularly attends and contributes as member of ShapingNJ and the NJ Council on Physical Fitness and Sports meetings. Active member of Bergen county councils and committees for community health and wellbeing initiatives for youth and families. Attends NJ conferences related to substances, integrated health care, wellness, chronic disease prevention, etc.).

3.5 Course instructors who are currently enrolled graduate students, if serving as primary instructors, have at least a master's degree in the teaching discipline or are pursuing a doctoral degree with at least 18 semester credits of doctoral coursework in the concentration in which they are teaching.

Program response to 3.5:

The Department of Public Health only employs instructors with earned graduate degrees, and therefore does not use currently enrolled graduate students for program instruction.

4.0 Curriculum

4.1 The overall undergraduate curriculum (eg, general education, liberal learning, essential knowledge and skills, etc.) introduces students to the following domains. The curriculum addresses these domains through any combination of learning experiences throughout the undergraduate curriculum, including general education courses defined by the institution as well as concentration and major requirements or electives. • the foundations of scientific knowledge, including the biological and life sciences and the concepts of health and disease • the foundations of social and behavioral sciences • basic statistics • the humanities/fine arts

Program response to 4.1:

A baccalaureate degree at WPU is awarded by the Board of Trustees as official recognition of the completion of a prescribed course of study following matriculation (see <u>Degree Requirements</u> as published in the <u>University Undergraduate Catalog</u>). Baccalaureate degrees are awarded after completion of a 120 credit academic program.

Students must complete a minimum of 120 credits to complete the Bachelor of Science in Public Health. These credits are allocated as follows:

- 40 credits of "General Education" courses
- 53 credits of required major courses and required major co-requisite courses
- 6 credits of a foreign language (must be two semesters of the same foreign language, or two semesters of American Sign Language, or demonstrated proficiency through exam)
- 21 credits of elective coursework

Additionally, students must satisfy the following graduation requirements, which may fall under any of the above areas:

- 12 credits of coursework that has been designed as "Writing Intensive," and
- 6 credits if coursework that has been designated as "Technology Intensive."

The <u>University Core Curriculum</u> (UCC) is WPU's general education program designed to provide students the flexibility to customize their undergraduate academic experience by selecting from a broad range of courses. The UCC is designed to allow students to explore a variety of fields and disciplines, connect these courses with their major, with the aim of becoming a well-educated citizen. The UCC is a 40-credit program encompassing courses in six areas of study, as shown in Table 5.

Table 5:	Table 5: General Education = the University Core Curriculum (40 credits)			
Area 1	Personal Well-Being	3 cr.	One 3-credit course (PBHL 1100 HealthyU*)	
Area 2	Expression	9 cr.	One 3-credit course in each of the following areas: writing, literature and arts/communication.	
Area 3	Ways of Knowing	19 cr.	One 3-credit course in each of the following areas: philosophy, history, and mathematics (MATH 1300 Elementary Statistics*). One 4-credit laboratory science course (BIO 1140 Applied Anatomy and Physiology*). Two 3-credit courses in the social or behavioral sciences	
Area 4	Diversity and Justice	3 cr.	One 3-credit course in each of these three upper-level	
Area 5	Community & Civic Engagement	3 cr.	subject areas (Areas 4-6) addressing principles consistent with the mission of the University. These courses may be	
Area 6	Global Awareness	3 cr.	taken within the major. There are elective options for each of these areas within the SBP.	
Additio	nal Graduation Require	ments		
	Writing Intensive Courses	12 cr.	Four 3-credit courses that have received the "Writing Intensive" designation. These courses may be taken within the major. There are both core course and elective options for this requirement within the SBP.	
	Technology Intensive Courses	6 cr.	Two 3-credit courses that have received the "Technology Intensive" designation. These courses may be taken within the major. There are both core course and elective options for this requirement within the SBP.	
	Foreign Language Proficiency	6 cr.	Two 3-credit semesters of the same foreign language, or American Sign Language.	

^{*} Serves as one of the three pre-requisite courses required for admission to the SBP

Template K provides an opportunity to expand upon the above description of the UCC, and describe how specific aspects of the UCC are interwoven with the SBP.

Template K	
DOMAINS	Courses and other learning experiences through which students are introduced to the domains specified
Science:	Scientific knowledge: Students are introduced to the foundations of scientific knowledge
Introduction	as part of the University Core Curriculum in UCC Area 3d. Scientific Perspectives. This
to the	aspect of the UCC is the requirement of taking one science course that includes a
foundations	laboratory experience. The Student Learning Outcomes (SLOs) for Area 3d are:
of scientific	1. Demonstrate competence in understanding the development, fundamental.
knowledge,	principles, and application of at least one area of science.
including the	2. Develop the skills used by science to investigate the objective universe.
biological and	3. Develop the skills necessary to collect, organize, and evaluate scientific information.
life sciences	4. Demonstrate the ability to use appropriate quantitative skill in solving scientific
and the	problems.
concepts of	As part of the SBP students must successfully complete BIO 1140 Applied Anatomy and
health and	Physiology. BIO 1140 satisfies the UCC 3d requirement for Public Health majors.
disease	
	Concepts of health and disease: Students are introduced to the foundations of health
	and disease through UCC Area 1 Personal Well-being. This area is satisfied by taking one
	3-credit course. The SLOs for Area 1 are:
	1. Describe how individuals achieve physical, emotional, ethical, social, and/or financial
	well-being.
	2. Identify barriers to physical, emotional, social, and/or financial well-being.
	3. Develop, implement, and evaluate a personal plan that will enable the individual to
	progress towards achieving physical, emotional, ethical, academic, and/or financial
	goals.
	4. Explain how an individual's well-being interacts with the physical, social, cultural,
	and/or economic environment.
	As part of the SBP students must successfully complete PBHL 1100 HealthyU or PBHL
Casial and	1300 Healthy Living after 30, both of which satisfy the Area 1 UCC requirement.
Social and	Social and behavioral sciences: All students are required to take two courses approved
Behavioral	for UCC Area 3 Ways of Knowing: 3c Social and Behavioral Sciences. The SLOs for this
Sciences:	area are:
Introduction to the	Demonstrate knowledge and understanding of major intellectual approaches and methodologies in the social and behavioral sciences.
foundations	methodologies in the social and behavioral sciences. 2. Identify ethical dimensions of various approaches in the social and behavioral
of social and	sciences.
behavioral	3. Ask meaningful questions regarding human behavior and social problems
sciences	4. Understand and employ social science theories, evidence and data to address
301011003	complex social problems.
	Student must choose two of the courses offered through the following departments:
	Anthropology (1300, 2520); Economics (2010, 2020); Geography (1500, 2300); Languages
	and Cultures (1120); Political Science (1100, 1200); Psychology (1100); Sociology (1010,
	1020, 2310); Women's and Gender Studies (1800).
Math/	Basic statistics: Students are introduced to concepts of basic statistics by satisfactorily
Quantitative	completing the required course for UCC Area 3 Ways of Knowing: 3e Quantitative
Reasoning:	Thinking. The SLOs for this area are:
Introduction	1. Interpret and evaluate quantitative or symbolic models such as graphs, tables, units
	of measurement, and distributions.

to basic statistics

- 2. Perform algebraic computations and obtain solutions using equations and formulas.
- 3. Acquire the ability to use multiple approaches numerical, graphical, symbolic, geometric and statistical to solve problems.
- 4. Develop mathematical thinking and communication skills, including knowledge of a broad range of explanations and examples, good logical and quantitative reasoning skills, and facility in separating and reconnecting the component parts of concepts and methods.

As part of the SBP students must successfully complete MATH 1300 Elementary Statistics. MATH 1300 satisfies the UCC 3e requirement for Public Health majors.

Humanities/ Fine Arts: Introduction to the humanities/ fine arts

Students are introduced to the Humanities/Arts in UCC Area 2 Expression and in the first two sections of UCC Area 3 Ways of Knowing.

Art/Communication: Students must complete one course to satisfy the UCC 2a Arts and Communication requirement. Students may choose from foundational courses offered through the Departments of Art, Music, or Communication. This area requirement involves students in various modes of expression including written, oral, visual and performative. Additionally, students will gain the necessary skills for effective communication. The SLOs for this area are:

- 1. Identify and evaluate historical and current forms of expression.
- 2. Explain how expression may vary across cultures and regions.
- 3. Effectively express themselves in written, oral, visual or performative modes.
- 4. Express their own creativity through collaborative exercises and projects.

Writing: Students must complete one course to satisfy the UCC 2b Writing requirement. All students take ENG 1100 College Writing. The SLOs for this area are:

- 1. Understand fundamental standards of college writing.
- 2. Develop expository essays exhibiting a coherent structure, and as appropriate, integrating research.
- 3. Discuss, revise, and edit multiple drafts of an essay.
- 4. Utilize feedback from instructors and classmates to develop their writing and their writing process.

Literature: Students must complete one course to satisfy the UCC 2c Literature requirement. The majority of students enroll in ENG 1500 Experiences in Literature. However, there are other courses offered that satisfy this area requirement. The SLOs for this area are:

- 1. Demonstrate knowledge of the relationship between literary form and meaning.
- 2. Make meaningful thematic connections between contemporary issues and literature from various historical, geographic or ethnic origins.
- 3. Identify specific literary elements and techniques in sample passages.
- 4. Identify a variety of processes of reading and interpretation.

Other disciplines that are part of Humanities (Philosophy and History) are addressed within UCC Area 3 Ways of Knowing requirement.

Philosophy: Students must complete one course to satisfy the UCC 3a Philosophical Perspectives requirement. The majority of options to satisfy this requirement are

foundational courses offered through the Philosophy Department. The SLOs for this area are:

- 1. Demonstrate knowledge of the histories of philosophy and their contributions to world cultures.
- 2. Identify the logical structures and ethical dimensions of various philosophical approaches.
- 3. Demonstrate knowledge of significant philosophical problems such as questions of existence, knowledge, and morality.
- 4. Critically analyze a variety of philosophical views, including their own, using different kinds of arguments.

History: Students must complete one course to satisfy the UCC 3b. Historical Perspectives requirement. The majority of options for this area are provided through the History Department. The SLOs for this area are:

- 1. Identify major issues and events in world history.
- 2. Ask meaningful questions about historical developments and events such as causation, significance, continuity versus change.
- 3. Understand and analyze primary sources and evaluate authorship, bias, context, and accuracy.

4.2 The requirements for the public health major or concentration provide instruction in the following domains. The curriculum addresses these domains through any combination of learning experiences throughout the requirements for the major or concentration coursework (ie, the program may identify multiple learning experiences that address a domain—the domains listed below do not each require a single designated course). • the history and philosophy of public health as well as its core values, concepts and functions across the globe and in society • the basic concepts, methods and tools of public health data collection, use and analysis and why evidence-based approaches are an essential part of public health practice • the concepts of population health, and the basic processes, approaches and interventions that identify and address the major health-related needs and concerns of populations • the underlying science of human health and disease including opportunities for promoting and protecting health across the life course • the socioeconomic, behavioral, biological, environmental and other factors that impact human health and contribute to health disparities • the fundamental concepts and features of project implementation, including planning, assessment and evaluation • the fundamental characteristics and organizational structures of the US health system as well as the differences in systems in other countries • basic concepts of legal, ethical, economic and regulatory dimensions of health care and public health policy and the roles, influences and responsibilities of the different agencies and branches of government • basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology If the program intends to prepare students for a specific credential, then the curriculum must also address the areas of instruction required for credential eligibility (eg, CHES).

Program response to 4.2:

The requirements for the Bachelor of Science in Public Health are presented below in three segments:

- 1. The required pre-requisite courses
- 2. The required major courses and major co-required course
- 3. The required internship the culminating activity

Pre-Requisite Courses Required for Admission to the Bachelor of Science (BS) in Public Health program:

First-year students are admitted directly into the SBP upon admission to the University— no pre-requisite courses are required. However, before a student admitted as a first-year student may begin the major course sequence (generally in the fall semester of their junior year), the student must have first completed the three pre-requisite courses and earned the minimum required grade. Until they earn the minimum grade in each pre-requisite course, they may not register for PBHL 3040 Health Research Methods I, which is the course that officially begins the major core course sequence.

In order for an enrolled WPU student to declare a change of major into the SBP from another major or for a transfer student to be admitted to the SBP, they must first complete the following pre-requisite courses as listed in Table 6.

Table 6: Pre-R	equisite Courses Required for Admis	sion to the SBP
BIO 1140	Applied Anatomy and Physiology	
MATH 1300	Elementary Statistics	Students must earn a C- or better in each course
PBHL 1100	HealthyU	

Table 7: Required Major Courses for the SBP

	Health – Core Courses: 24 credits				CR
PBHL 2950	Disparities in Health (new requirer	nent b	eginning in Fal	l 2016)	3
PBHL 3000	Introduction to Public Health				3
PBHL 3020	Health Care in the United States				3
PBHL 3040	Health Research Methods I				3
PBHL 3042	Health Research Methods II				3
PBHL 3400	Environmental Health				3
PBHL 3750	Human Disease				3
PBHL 4000	Epidemiology				3
General Trac	k Courses: 10 credits	CR	Health Educa	ation Track Courses: 22 credits	CR
PBHL 4301	Public Health Practice	3	PBHL 3010	Health Education Theory & Practice	3
PBHL 4962	Introduction to Internship in PH	1	PBHL 3610	Methods in Health Education	3
PBHL 4972	Internship in Public Health	6	PBHL 4610	Program Planning	3
			PBHL 4971	Introduction to Internship in PHE	1
			PBHL 4972	Internship in PHE	12
Major Electiv	ves: 15 credits (choose five of the follo	wing)	Major Electiv	ves: 3 credits (choose one of the following)
PBHL 2100	Women's Health				3
PBHL 2150	Drugs and Health				3
PBHL 2200	Stress Management				3
PBHL 2210	Nutrition				3
PBHL 2700	Concepts and Issues of Aging				3
PBHL 2900	Human Sexuality (new course num	ber be	ginning in Fall	2016; previously PBHL 3900)	3
PBHL 3110	Global Health Issues				3
PBHL 3120	Ethics in Public Health (new major	electiv	ve beginning in	Fall 2016)	3
PBHL 3130	Violence as a Public Health Issue				3
PBHL 3140	Reproductive Rights				3
PBHL 3150	Food & Community				3
PBHL 3170	Popular Literature in Public Health	1			3
PBHL 3180	Tobacco as a Public Health Issue				3
PBHL 3210	Lifespan Nutrition				3
PBHL 3220	Food and Social Issues				3
PBHL 4300	Counseling Skills for Health Profes	sionals	3		3
PBHL 4500	Health Administration				3
PBHL 4950	Cultural Dimensions of Health				3
Lab Science	Co-Requirement: 4 credits (choose of	one of	the following)		CR
BIO 1300	Field Biology				4
BIO 1700	Basic Microbiology				4
CHEM 1310	College Chemistry				4
ENV 1100	Environmental Sustainability				4
PHYS 1100	Introduction to Physics				4

Official course descriptions for all Public Health courses are found in the <u>Undergraduate Academic Catalog</u>.

The BS in Public Health – General Track is a 53-credit program consisting of a 24-credit core, a 25-credit track (including 15 credits of elective courses and a 7-credit internship program), and a 4-credit laboratory science co-requirement. The required components of the BS in Public Health – General Track are found in the University's Undergraduate Catalog.

The BS in Public Health – Health Education Track is a 53-credit program consisting of a 24-credit core, a 25-credit track (including 3 credits of elective courses and a 13-credit internship program), and a 4-credit laboratory science co-requirement. The required components of the BS in Public Health – Health Education Track are found in the <u>University's Undergraduate Catalog</u>.

Required courses for the culminating activity for the Bachelor of Science in Public Health:

The internship program for students in the SBP is a supervised experience designed to provide the opportunity for students to apply their academic preparation in a professional work setting. The internship experience is a requirement for all Bachelor of Science (B.S.) degree candidates in the SBP. The internship is the culmination of the major course of study and is completed during the spring semester of the senior year.

Student interns work for a predetermined number of hours under the supervision of a trained health professional, the Internship Site Supervisor. The objectives of the internship program and the sites at which students complete their internship are consistent with the roles and responsibilities of entry-level health professionals.

In the fall semester of the senior year, students take a 1-credit, graded course called *Introduction to Internship*. This course is taught by the Internship Site Coordinator (ISC) or a faculty member and covers content that encourages students to begin thinking about the transition from college to graduate school and/or a professional setting.

The *Internship* course is taken during the spring semester immediately following the *Introduction to Internship* course. This is a graded course that is taught by a full-time faculty member. In addition to completing a pre-determined number of hours at the internship site, each intern is also responsible for the completion of a major project, called the capstone project.

Table 8: Culmina	ting Activity for the BS in Public Health – the General Track Interns	hip
Internship Course	es	7 CR
PBHL 4962	Introduction to Internship in Public Health	1
PBHL 4972	Internship in Public Health	6
This internship pr	ogram is comprised of a 240-hour supervised experience and a cap	stone project.

Table 9: Culminat	ing Activity for the BS in Public Health – the Health Education Trac	ck Internship
Internship Course	es	13 CR
PBHL 4963	Introduction to Internship in Public Health Education	1
PBHL 4973	Internship in Public Health Education	12
This internship pr	ogram is comprised of a 480-hour supervised experience and a cap	stone project.

The SBP addresses all of the domains required for CEPH accreditation, as each concept within all seven domains is fully covered in at least one of the major core courses. This is illustrated in Template L.

For the purpose of this self-study the following definitions of "Introduced" and "Covered" were developed by the SBP full-time faculty:

A concept is introduced in a course if:

- It is a topic on the *Topical Outline of Course Content* on the official Course Outline, but is not a major subject heading, and/or
- It is a concept that is assessed on exams, quizzes, or other forms of assessment, but not is a substantive manner, and/or
- It is a concept that is introduced during a class session meeting/s, but is not covered in a substantive manner.

A concept is *covered* in a course if:

- It is a major subject heading in the *Topical Outline of Course Content* on the official Course Outline, and/or
- It is, or is closely related to, a *Student Learning Outcome* as listed on the official Course Outline, and/or
- It is a concept that is the subject of a single class or multiple class sessions, and/or
- It is a concept that is a feature of a major project, paper, or other form of assessment in the course, and/or
- It is a concept that is assessed in a substantive manner on exams, quizzes, or other forms of assessment.

Due to the large number of course offerings in the SBP, Template L has been divided into the following matrices:

- Template L1: Includes all of the core courses for the SBP General Track
- Template L2: Includes all of the core courses for the SBP Health Education Track
- Template L3: Includes major elective courses (PBHL 2200-3170) that are options in the SBP
- Template L4: Includes major elective courses (PBHL 3180-4950) that are options in the SBP
- Template L5: Includes the major pre-requisite and co-requisite courses for the SBP

The Electronic Resource File (ERF) includes an additional matrix that illustrates how the SBP – Health Education Track meets each of the entry-level sub-competencies in each of the NCHEC Areas of Responsibility for the training of entry-level health educators.

em	plate L1: CEPH Domain Matrix for the Core Cou	ırse in th	e BS in P	ublic Hea	ılth – Ge	neral Tra	ack			(I=I	ntroduce	ed, C= Co	vered)
. Ov	rerview of Public Health: Address the history ar	nd philos	ophy of p	oublic hea	alth as w	ell as its	core valu	es, conc	epts, and	d function	ns across	the glob	e and
ı so	ciety	•							•			_	
		2950	3000		3020	3040	3042	3400		3750	4000	4301	497
a	Public Health History		С			С		ı		С	ı		
b	Public Health Philosophy	ı	С			ı							
С	Core PH Values		С										
d	Core PH Concepts		С			ı		С			С	С	С
e	Global Functions of Public Health	ı	ı			i		Č				С	С
f	Societal Functions of Public Health		С									С	С
	le and Importance of Data in Public Health: Ac	1			411-		la a£la	1:- +		II a ati a a			
	-				nethous	, and too	is or pub	iic neaiti	i data co	mection,	use, and	anaiysis	anu
viiy	evidence-based approaches are an essential pa			practice	2020	3040	3042	2400		2750	4000	4201	407
_	Baria Carranta of Bata Callestina	2950	3000		3020			3400		3750	4000	4301	497
a	Basic Concepts of Data Collection					<u> </u>	С					С	
b	Basic Methods of Data Collection					ı	С					С	
С	Basic Tools of Data Collection					ı	С					С	С
d	Data Usage					ı	С				С	С	С
е	Data Analysis						С				С	С	С
f	Evidence-based Approaches		- 1				С	С			- 1	С	С
. Id	entifying and Addressing Population Health Ch	allenges	: Addres	s the con	cepts of	populati	on health	n, and th	e basic p	rocesses	approac	hes, and	
nter	ventions that identify and address the major he	ealth-rela	ted need	ls and cor	ncerns of	populat	ions						
		2950	3000		3020	3040	3042	3400		3750	4000	4301	497
а	Population Health Concepts	ı	ı			ı					С	С	
	Introduction to Processes and Approaches												
b	to Identify Needs and Concerns of	ı				ı					С	С	С
	Populations										_	_	
	Introduction to Approaches and												
С	Interventions to Address Needs and	1										С	С
C	Concerns of Populations	'											Č
	man Health: Address the underlying science o	fhuman	hoolth o	ad disaas	المماييط:	22222	tunitios	for nrom	otina on	d protost	ina haalt	h acraca	tha lif
	, ,	ıııuıııaıı	ileaitii a	iu uiseas	e iliciuui	ilg oppoi	tuilities	ioi proiii	Othing and	u protect	ing near	.II aci USS	the iii
cours		2050	2000		2020	2040	2042	2400		2750	4000	4201	407
	Colored City and Colored	2950	3000		3020	3040	3042	3400		3750	4000	4301	497
3	Science of Human Health and Disease							I		С			
)	Health Promotion							_		С			
:	Health Protection							С		С			
	terminants of Health: Address the socio-econo	omic, bel	navioral,	biologica	l, enviro	nmental,	and oth	er factors	that im	pact hun	nan healt	h and	
conti	ibute to health disparities												
		2950	3000		3020	3040	3042	3400		3750	4000	4301	4972
2	Socio-economic Impacts on Human Health	С	С		1					С	С		
а	and Health Disparities	C	C		'					C	C		
b	Behavioral Factors Impacts	С	С		- 1					С	- 1		
С	Biological Factors Impacts	I	ı		ı					С			
d	Environmental Factors Impacts	С	1		1			С		С			
5. Pr	oject Implementation: Address the fundament	tal conce	nts and f	eatures o	f project	implem	entation	includin	g nlannii	ng. asses	sment, a	nd evalua	ation
	, and the same of	2950	3000		3020	3040	3042	3400	8 p.a	3750	4000	4301	497
	Introduction to Planning Concepts and	2330	3000		3020	3040	3042	3400		3/30	4000	4301	43/1
a						ı						С	
	Features												-
b	Introduction to Assessment Concepts and					ı					С	С	
	Features												-
С	Introduction to Evaluation Concepts and											С	
	Features	<u> </u>								<u> </u>			
	verview of the Health System: Address the fun	damenta	I charact	eristics a	nd organ	izational	structur	es of the	U.S. hea	Ith syste	m as wel	l as to th	e
liffe	rences in systems in other countries												
		2950	3000		3020	3040	3042	3400		3750	4000	4301	497
_	Characteristics and Structures of the U.S.												
а	Health System				С								
b	Comparative Health Systems				С								
	ealth Policy, Law, Ethics, and Economics: Addre	ess the h	asic conc	epts of le		cal. econ	omic. an	d regulat	orv dime	ensions o	f health	are and	public
	h policy, and the roles, influences and responsi										···carcii		P 00110
·cart		2950	3000	and age	3020	3040	3042	3400		3750	4000	4301	497
	Legal dimensions of health care and public	2330	3000		3020	5040	5042	5400		3/30	+000	430I	437
a	health policy				С								
		1	1				1						
	nearth policy												

Ethical dimensions of health care and

c d e	Ethical dimensions of health care and		ı		С	С	С						
d	public health policy Economical dimensions of health care and												
	public health policy				С								
e	Regulatory dimensions of health care and public health policy				С			С					
	Governmental Agency Roles in health care and public health policy		С		С			С					
9. He	alth Communications: Address the basic conc	epts of pu	ublic hea	lth-speci	fic comm	unicatio	n, includi	ng techn	ical and _l	orofessio	nal writi	ng and th	ne use
of ma	ass media and electronic technology												
		2950	3000		3020	3040	3042	3400		3750	4000	4301	4972
a	Technical writing					С	С				-		
b c	Professional writing Use of Mass Media					l I	С				С	С	С
d	Use of Electronic Technology					С	С				С	С	С
		ı											_
Tem	plate L2: CEPH Domain Matrix for the Co	re Cours	e in the	BS in P	ublic He	ealth – F	lealth E	ducatio	n Track	(1=	Introduc	ed. C= Co	overed)
	verview of Public Health: Address the his												
	ss the globe and in society	•	•	. , .					,	•	•		
	·	2950	3000	3010	3020	3040	3042	3400	3610	3750	4000	4610	4973
а	Public Health History		С	I		С		I		С	I		
b	Public Health Philosophy	I	С			- I							
С	Core PH Values		С										
d	Core PH Concepts		С			I		С			С	С	С
е	Global Functions of Public Health	I	I			I						С	
f	Societal Functions of Public Health	I	С	I		I					I	С	
2. Rc	ole and Importance of Data in Public Hea	lth: Add	ress the	basic co	oncepts	, metho	ds, and	tools of	public h	ealth d	ata colle	ction, u	se,
and a	analysis and why evidence-based approac	hes are	an esse	ntial par	t of pub	olic heal	th pract	ice					
		2950	3000	3010	3020	3040	3042	3400	3610	3750	4000	4610	4973
a	Basic Concepts of Data Collection			I		- 1	С		I			С	
b	Basic Methods of Data Collection			I		- 1	С					С	
С	Basic Tools of Data Collection					- 1	С					С	С
d	Data Usage					I	С				С	С	С
е	Data Analysis						С				С	С	С
f	Evidence-based Approaches		I				С	С			I	С	С
	entifying and Addressing Population Hea oaches, and interventions that identify ar		_			•					•	cesses,	
app.		2950	3000	3010	3020	3040	3042	3400	3610	3750	4000	4610	4973
а	Population Health Concepts	ı	ı			1					С	С	
	Introduction to Processes and	-											
b	Approaches to Identify Needs and	ı		ı		ı			С		С	С	С
	Concerns of Populations												
	Introduction to Approaches and												
	lotaniantiana ta Addusaa Nasada and			ı								С	С
С	Interventions to Address Needs and												1
С	Concerns of Populations	l		-									
		ence of h	numan h	ealth ar	nd disea	se inclu	ding op	portunit	ies for p	oromoti	ng and բ	orotecti	ng
4. Hı	Concerns of Populations	ence of h	numan h	ealth ar	nd disea	se inclu	ding op	portunit	ies for p	oromoti	ng and p	orotecti	ng
4. Hı	Concerns of Populations uman Health: Address the underlying science.	ence of h	numan h 3000	ealth ar	nd disea	se inclu 3040	ding op	portunit 3400	ies for p	3750	ng and p 4000	orotecti 4610	ng 4973
4. Hu	Concerns of Populations uman Health: Address the underlying science.				•	1							
4. Hւ healt	Concerns of Populations Juman Health: Address the underlying scie th across the life course Science of Human Health and Disease Health Promotion				•	1		3400		3750			
4. Hu healt a b c	Concerns of Populations uman Health: Address the underlying scie th across the life course Science of Human Health and Disease Health Promotion Health Protection	2950	3000	3010 I	3020	3040	3042	3400 I C	3610	3750 C C C	4000	4610 C C	4973
4. Hu healt	Concerns of Populations uman Health: Address the underlying scie th across the life course Science of Human Health and Disease Health Promotion Health Protection eterminants of Health: Address the socio	2950	3000	3010 I	3020	3040	3042	3400 I C	3610	3750 C C C	4000	4610 C C	4973
4. Hu healt	Concerns of Populations uman Health: Address the underlying scie th across the life course Science of Human Health and Disease Health Promotion Health Protection	2950	3000	3010 I	3020	3040	3042	3400 I C	3610	3750 C C C	4000	4610 C C	4973
4. Hu healt	Concerns of Populations uman Health: Address the underlying scie th across the life course Science of Human Health and Disease Health Promotion Health Protection eterminants of Health: Address the socio	2950 -econon	3000 nic, beh	3010 I avioral,	3020 biologic	3040 al, envir	3042 ronmen	3400 I C tal, and	3610 other fa	3750 C C C ctors th	4000 at impa	4610 C C C ct huma	4973 an

Section Foreign Fore	С	Biological Factors Impacts	I	1		ı					С			
and evaluation 2950 3000 3010 3020 3040 3042 3400 3610 3750 4000 4610 450	d		С	- 1	- I	- I			С		С			
and evaluation 2950 3000 3010 3020 3040 3042 3400 3610 3750 4000 4610 450	6. Pı	roject Implementation: Address the fund	amental	concep	ts and f	eatures	of proje	ct imple	ementat	ion, inc	luding p	lanning	, assessi	nent,
a Introduction to Planning Concepts and Features b Introduction to Assessment Concepts and Features c Introduction to Evaluation Concepts and Features c Introduction to Assessment Concepts and Features c Introduction to Evaluation Concepts and Features c Introd				·			, ,	•		,	01	Ö		,
Features			2950	3000	3010	3020	3040	3042	3400	3610	3750	4000	4610	4973
Features		Introduction to Planning Concepts and								_			_	
b Introduction to Assessment Concepts and Features C Introduction to Evaluation Concepts and Features 7. Overview of the Health System: Address the fundamental characteristics and organizational structures of the U.S. health system as well as to the differences in systems in other countries 2950 3000 3010 3020 3040 3042 3400 3610 3750 4000 4610 45 a Characteristics and Structures of the U.S. Health Systems b Comparative Health Systems C C D D D D D D D D D D D D D D D D D	a						l I			С			С	С
and Features c Introduction to Evaluation Concepts and Features 7. Overview of the Health System: Address the fundamental characteristics and organizational structures of the U.S. health system swell as to the differences in systems in other countries 2950 3000 3010 3020 3040 3042 3400 3610 3750 4000 4610 45 a Characteristics and Structures of the U.S. Health System b Comparative Health Systems c Comparative Health Systems c Comparative Health Systems c Comparative Health Folicy, Law, Ethics, and Economics: Address the basic concepts of legal, ethical, economic, and regulatory dimensions of health care and public health policy, and the roles, influences and responsibilities of the different agencies and branches of governmental agencies and public health policy c Ethical dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy d Regulatory dimensions of health												_	_	
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well as to the differences in systems in other countries 2950 3000 3010 3020 3040 3042 3400 3610 3750 4000 4610 482	С				'								C	С
well as to the differences in systems in other countries 2950 3000 3010 3020 3040 3042 3400 3610 3750 4000 4610 482	7. 0	verview of the Health System: Address the	he funda	mental	charact	eristics	and org	anizatio	nal stru	ctures o	f the U.	S. healtl	n svsten	n as
Characteristics and Structures of the U.S. Health System B. Health Policy, Law, Ethics, and Economics: Address the basic concepts of legal, ethical, economic, and regulatory dimensions of nealth care and public health policy, and the roles, influences and responsibilities of the different agencies and branches of government public health policy B. Legal dimensions of health care and public health policy, and the roles, influences and responsibilities of the different agencies and branches of government apublic health policy C. C													,	
U.S. Health System C		,	1		3010	3020	3040	3042	3400	3610	3750	4000	4610	4973
U.S. Health System C		Characteristics and Structures of the												
B. Comparative Health Systems B. Health Policy, Law, Ethics, and Economics: Address the basic concepts of legal, ethical, economic, and regulatory dimensions of nealth care and public health policy, and the roles, influences and responsibilities of the different agencies and branches of government and public health policy B. Legal dimensions of health care and public health policy B. Ethical dimensions of health care and public health policy C. C	а					С								
B. Health Policy, Law, Ethics, and Economics: Address the basic concepts of legal, ethical, economic, and regulatory dimensions of health care and public health policy, and the roles, influences and responsibilities of the different agencies and branches of government agencies and	b	,				С								
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a Legal dimensions of health care and public health policy b Ethical dimensions of health care and public health policy c Economical dimensions of health care and public health policy d Regulatory dimensions of health care and public health policy e Governmental Agency Roles in health care and public health policy b Health Communications: Address the basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology a Technical writing b Professional writing c Use of Mass Media D C C C C C C C C C C C C C C C C C C														
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and public health policy e Governmental Agency Roles in health care and public health policy B. Health Communications: Address the basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology 2950 3000 3010 3020 3040 3042 3400 3610 3750 4000 4610 49 a Technical writing b Professional writing c Use of Mass Media	С	and public health policy				C								
and public health policy e Governmental Agency Roles in health care and public health policy 7. Health Communications: Address the basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology 2950 3000 3010 3020 3040 3042 3400 3610 3750 4000 4610 45 a Technical writing C C B Professional writing I C C C C C C C C C C C C C C		Regulatory dimensions of health care				_			_					
care and public health policy 3. Health Communications: Address the basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology 2950 3000 3010 3020 3040 3042 3400 3610 3750 4000 4610 49 a Technical writing b Professional writing c Use of Mass Media	а	and public health policy				C			C					
care and public health policy 9. Health Communications: Address the basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology 2950 3000 3010 3020 3040 3042 3400 3610 3750 4000 4610 49 a Technical writing C C b Professional writing I C C C C Use of Mass Media	_	Governmental Agency Roles in health		_		_			_					
A column Writing and the use of mass media and electronic technology	е	care and public health policy		٠		١ ٠			C					
2950 3000 3010 3020 3040 3042 3400 3610 3750 4000 4610 49 a Technical writing C <th< td=""><td>9. H</td><td>ealth Communications: Address the basic</td><td>concep</td><td>ts of pu</td><td>blic hea</td><td>lth-spec</td><td>ific com</td><td>ımunica</td><td>tion, inc</td><td>luding t</td><td>echnica</td><td>l and pr</td><td>ofessior</td><td>nal</td></th<>	9. H	ealth Communications: Address the basic	concep	ts of pu	blic hea	lth-spec	ific com	ımunica	tion, inc	luding t	echnica	l and pr	ofessior	nal
a Technical writing C C C b Professional writing I C C C c Use of Mass Media I C C C	writ	ing and the use of mass media and electro	nic tech	nology										
b Professional writing I C			2950	3000	3010	3020	3040	3042	3400	3610	3750	4000	4610	4973
c Use of Mass Media I C C	а	Technical writing					С	С						
	b	Professional writing					I	С		С		С		
d Use of Electronic Technology C C C C	С	Use of Mass Media					I			С			С	С
	d	Use of Electronic Technology					С	С		С		С	С	С
							l C	С				С		
	_													
Template L3: CEPH Domain Matrix for the Major Elective Courses in the BS in Public Health – 2100-3170 (I=Introduced, C= Covered			tory and	philoso	phy of p	oublic he	ealth as	well as	its core	values,	concept	s, and f	unctions	6
1. Overview of Public Health: Address the history and philosophy of public health as well as its core values, concepts, and functions	acro	ss the globe and in society	1				1		1				1	
1. Overview of Public Health: Address the history and philosophy of public health as well as its core values, concepts, and functions across the globe and in society			2100		2200	2210		2900	3110	3120	3130	3140		3170
1. Overview of Public Health: Address the history and philosophy of public health as well as its core values, concepts, and functions across the globe and in society 2100 2150 2200 2210 2700 2900 3110 3120 3130 3140 3150 31	а	Public Health History	ļ	С			I		I		I	I	I	
1. Overview of Public Health: Address the history and philosophy of public health as well as its core values, concepts, and functions across the globe and in society 2100 2150 2200 2210 2700 2900 3110 3120 3130 3140 3150 31	b	Public Health Philosophy							I		С	I		
1. Overview of Public Health: Address the history and philosophy of public health as well as its core values, concepts, and functions across the globe and in society 2100 2150 2200 2210 2700 2900 3110 3120 3130 3140 3150 31 a Public Health History C I I I I I I I	С	Core PH Values							I	I				
1. Overview of Public Health: Address the history and philosophy of public health as well as its core values, concepts, and functions across the globe and in society 2100 2150 2200 2210 2700 2900 3110 3120 3130 3140 3150 31 a Public Health History C I I I I I I I b Public Health Philosophy C I C I C I C I C I C I C I C I C C I C C I C C I C C I C C C I C	d	Core PH Concepts							- 1		С			
1. Overview of Public Health: Address the history and philosophy of public health as well as its core values, concepts, and functions across the globe and in society 2100 2150 2200 2210 2700 2900 3110 3120 3130 3140 3150 3140 3150 3150 3	е	Global Functions of Public Health		I					С					
1. Overview of Public Health: Address the history and philosophy of public health as well as its core values, concepts, and functions across the globe and in society 2100 2150 2200 2210 2700 2900 3110 3120 3130 3140 3150 31 a Public Health History C I I I I I I I I I	£	Conjetal Functions of Dublic Health							_					

and a	analysis and why evidence-based approac	hes are	an esser	ntial par	t of pub	lic healt	th practi	ice					
		2100	2150	2200	2210	2700	2900	3110	3120	3130	3140	3150	3170
а	Basic Concepts of Data Collection	I					- 1						
b	Basic Methods of Data Collection						- 1						
С	Basic Tools of Data Collection												
d	Data Usage									- I	I I		
е	Data Analysis	- I					- 1				- 1		

2. Role and Importance of Data in Public Health: Address the basic concepts, methods, and tools of public health data collection, use,

Societal Functions of Public Health

f	Evidence-based Approaches	ı								1	1		
	lentifying and Addressing Population Hea	lth Chal	lenges:	Addres	s the co	ncents c	of nonul	ation he	ealth ar	nd the h	asic nro	resses	
	roaches, and interventions that identify ar		_			•					•	<i>ccsscs,</i>	
~PP		2100	2150	2200	2210	2700	2900	3110	3120	3130	3140	3150	3170
а	Population Health Concepts	1 I	2130	2200	2210	2700	2300	C C	3120	J130	3140	C	3170
а	Introduction to Processes and	1						C		'		C	
L-													
b	Approaches to Identify Needs and		1				ı	I					
	Concerns of Populations												
	Introduction to Approaches and				_					_			
С	Interventions to Address Needs and	I	ı		С		ı	I		С			
	Concerns of Populations												
	uman Health: Address the underlying scient	ence of h	numan h	nealth ar	nd disea	se inclu	ding op	portunit	ies for p	oromoti	ng and p	protecti	ng
heal	th across the life course												
		2100	2150	2200	2210	2700	2900	3110	3120	3130	3140	3150	3170
а	Science of Human Health and Disease	С	- 1		I	I	С	I			С		
b	Health Promotion	С	С	С	I			I			С		
С	Health Protection	С	С	С	ı		С	ı			С		
5. D	eterminants of Health: Address the socio	-econon	nic. beh	avioral.	hiologic	al. envir	onmen	tal. and	other fa	ctors th	at impa	ct huma	an
	th and contribute to health disparities		,	,		,		,					
	and continues to nearth dispartites	2100	2150	2200	2210	2700	2900	3110	3120	3130	3140	3150	3170
	Socio-economic Impacts on Human	2100	2130			2,00	2300	3110	3120	3130	3140	3130	3170
а	Health and Health Disparities	С	С		ı	I	I	I	I		С		С
la		-	-								-		_
b	Behavioral Factors Impacts	С	С		- 1		1				С		С
С	Biological Factors Impacts	С	С		I		I	I			С		
d	Environmental Factors Impacts		С		С			I					
	roject Implementation: Address the fund	amental	concep	ts and f	eatures	of proje	ct imple	ementat	ion, inc	luding p	lanning	, assessi	ment,
and	evaluation												
		2100	2150	2200	2210	2700	2900	3110	3120	3130	3140	3150	3170
_	Introduction to Planning Concepts and												
а	Features												
	Introduction to Assessment Concepts												
b	and Features		l										
	Introduction to Evaluation Concepts												
	min daddidii to Evaladiidii Golicepio					l						1	
С	and Features		ı					I	l				
	and Features	ne funda		charact	oristics	and org	anizatio	nal stru	cturas o	f tha II	S haaltl	h systan	26
7. 0	verview of the Health System: Address the		mental	charact	eristics	and orga	anizatio	nal stru	ctures o	f the U.	S. healtl	h systen	n as
7. 0		ountrie	ımental S			_							
7. 0	verview of the Health System: Address the as to the differences in systems in other of		mental	charact 2200	eristics	and orga	anizatio 2900	nal stru	ctures o	f the U.:	S. health	h systen 3150	
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7. 0 well	verview of the Health System: Address the as to the differences in systems in other of the Characteristics and Structures of the U.S. Health System	ountrie	ımental S			_							
7. 0 well	verview of the Health System: Address the as to the differences in systems in other of the Characteristics and Structures of the U.S. Health System Comparative Health Systems	2100	mental s 2150	2200	2210	2700	2900	3110	3120	3130	3140	3150	3170
7. O well a b 8. H	characteristics and Structures of the U.S. Health System Comparative Health Systems Comparative Health Systems Ealth Policy, Law, Ethics, and Economics:	2100 Address	nmental s 2150 s the ba	2200 sic conc	2210 epts of l	2700 egal, et	2900 hical, ec	3110	3120 , and re	3130 gulatory	3140 / dimens	3150	3170
7. O well a b 8. H	verview of the Health System: Address the as to the differences in systems in other of the Characteristics and Structures of the U.S. Health System Comparative Health Systems	2100 Address	nmental s 2150 s the ba	2200 sic conc	2210 epts of l	2700 egal, et	2900 hical, ec	3110 conomic rent ag	3120 , and re encies a	3130 gulatory	3140 / dimension	3150 sions of governr	3170
7. O well a b 8. H	characteristics and Structures of the U.S. Health System Comparative Health Systems Comparative Health Systems Ealth Policy, Law, Ethics, and Economics:	2100 Address	nmental s 2150 s the ba	2200 sic conc	2210 epts of l	2700 egal, et	2900 hical, ec	3110	3120 , and re	3130 gulatory	3140 / dimens	3150	3170
a b 8. H	verview of the Health System: Address the ast of the differences in systems in other of the U.S. Health System Comparative Health Systems ealth Policy, Law, Ethics, and Economics: the care and public health policy, and the results.	Address oles, infl	2150 s the baluences	2200 sic conc and res	2210 epts of l	2700 egal, et ities of t	2900 hical, ec he diffe 2900	3110 conomic erent ag 3110	3120 , and re encies a	3130 gulatory nd bran	3140 / dimension ches of 3140	3150 sions of governr 3150	3170
7. O well a b 8. H	verview of the Health System: Address the as to the differences in systems in other of the U.S. Health System Comparative Health Systems ealth Policy, Law, Ethics, and Economics: the care and public health policy, and the rolling the care and the systems.	2100 Address	2150 s the bauences	2200 sic conc and res	2210 epts of l	2700 egal, et ities of t	2900 hical, ec	3110 conomic rent ag	3120 , and re encies a	3130 gulatory nd bran	3140 / dimension	3150 sions of governr	3170
a b 8. H heal	verview of the Health System: Address the as to the differences in systems in other of the U.S. Health System Comparative Health Systems ealth Policy, Law, Ethics, and Economics: the care and public health policy, and the roughlic health policy.	Address oles, infl	2150 s the baluences	2200 sic conc and res	2210 epts of l	2700 egal, et ities of t	2900 hical, ec he diffe 2900	3110 conomic erent ag 3110	, and reencies a	3130 gulatory nd bran	3140 / dimensches of 3140 C	3150 sions of governr 3150	3170 ment 3170
a b 8. H	characteristics and Structures of the U.S. Health System Comparative Health Systems ealth Policy, Law, Ethics, and Economics: th care and public health policy, and the rublic health policy Ethical dimensions of health care and	Address oles, infl	2150 s the baluences	2200 sic conc and res	2210 epts of l ponsibil	2700 egal, et ities of t	2900 hical, ec he diffe 2900	3110 conomic erent ag 3110	3120 , and re encies a	3130 gulatory nd bran	3140 / dimension ches of 3140	3150 sions of governr 3150	3170
a b 8. H heal	characteristics and Structures of the U.S. Health System Comparative Health Systems ealth Policy, Law, Ethics, and Economics: th care and public health policy, and the relationship below the public health policy Ethical dimensions of health care and public health policy	Address oles, infl	2150 s the baluences	2200 sic conc and res	2210 epts of l ponsibil	2700 egal, et ities of t	2900 hical, ec he diffe 2900	3110 conomic erent ag 3110	, and reencies a	3130 gulatory nd bran	3140 y dimension of the state	3150 sions of governr 3150	3170 ment 3170
a b 8. H heal	verview of the Health System: Address the as to the differences in systems in other of the U.S. Health System Comparative Health Systems ealth Policy, Law, Ethics, and Economics: the care and public health policy, and the result of the public health policy. Ethical dimensions of health care and public health policy Ethical dimensions of health care and public health policy Economical dimensions of health care	Address oles, infl	2150 s the baluences	2200 sic conc and res	2210 epts of l ponsibil	2700 egal, et ities of t	2900 hical, ec he diffe 2900	3110 conomic erent ag 3110	, and reencies a	3130 gulatory nd bran	3140 / dimensches of 3140 C	3150 sions of governr 3150	3170 ment 3170
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a b 8. H heal	characteristics and Structures of the U.S. Health System Comparative Health Systems Comparative Health Systems ealth Policy, Law, Ethics, and Economics: th care and public health policy, and the result of the public health policy Ethical dimensions of health care and public health policy Ethical dimensions of health care and public health policy Economical dimensions of health care and public health policy Regulatory dimensions of health care	Addressoles, infl 2100 I	2150 s the baluences	2200 sic conc and res	2210 epts of l ponsibil	2700 egal, et ities of t	2900 hical, ec he diffe 2900	3110 conomic crent ag 3110	, and reencies a	3130 gulatory nd bran	3140 y dimension of the state	3150 sions of governr 3150	3170 ment 3170
a b 8. H heal b c	characteristics and Structures of the U.S. Health System Comparative Health Systems Comparative Health Systems ealth Policy, Law, Ethics, and Economics: th care and public health policy, and the related dimensions of health care and public health policy Ethical dimensions of health care and public health policy Economical dimensions of health care and public health policy Economical dimensions of health care and public health policy Regulatory dimensions of health care and public health policy	Address oles, infl	s the baluences	2200 sic conc and res	2210 epts of l ponsibil	2700 egal, et ities of t	2900 hical, eche diffe 2900 I	3110 conomic crent ag 3110	, and reencies a	gulatory nd bran 3130	3140 / dimension ches of 3140 C C	sions of governr 3150	3170 ment 3170
a b 8. H heal b c d	characteristics and Structures of the U.S. Health System Comparative Health Systems Comparative Health Systems ealth Policy, Law, Ethics, and Economics: th care and public health policy, and the result of the public health policy Ethical dimensions of health care and public health policy Economical dimensions of health care and public health policy Economical dimensions of health care and public health policy Regulatory dimensions of health care and public health policy Governmental Agency Roles in health	Addressoles, infil	s the baluences	2200 sic conc and res	2210 epts of l ponsibil	2700 egal, et ities of t	2900 hical, eche diffe 2900 I	3110 conomic crent ag 3110	, and reencies a	gulatory nd bran 3130	3140 / dimension of single state of single st	sions of governr 3150	3170 ment 3170
a b 8. H heal b c d	characteristics and Structures of the U.S. Health System Comparative Health Systems Comparative Health Systems ealth Policy, Law, Ethics, and Economics: th care and public health policy, and the result of the public health policy Ethical dimensions of health care and public health policy Economical dimensions of health care and public health policy Economical dimensions of health care and public health policy Regulatory dimensions of health care and public health policy Governmental Agency Roles in health care and public health policy	Addressoles, infl 2100 I I I	s the baluences 2150	sic conc and res 2200	epts of loonsibil	egal, etities of t	2900 hical, eche diffe	3110 conomic rent ag 3110 l	, and reencies a 3120	gulatory nd bran 3130 C	3140 y dimension of the state	sions of governr 3150	3170 ment 3170
a b 8. H heal b c d e 9. H	characteristics and Structures of the U.S. Health System Comparative Health Systems Comparative Health Systems ealth Policy, Law, Ethics, and Economics: th care and public health policy, and the result of the public health policy. Ethical dimensions of health care and public health policy Ethical dimensions of health care and public health policy Economical dimensions of health care and public health policy Economical dimensions of health care and public health policy Governmental Agency Roles in health care and public health policy Governmental Agency Roles in health care and public health policy ealth Communications: Address the basic	Addressoles, infl 2100 I I I Concept	s the baluences 2150	sic conc and res 2200	epts of loonsibil	egal, etities of t	2900 hical, eche diffe	3110 conomic rent ag 3110 l	, and reencies a 3120	gulatory nd bran 3130 C	3140 y dimension of the state	sions of governr 3150	3170 ment 3170
a b 8. H heal b c d e 9. H	characteristics and Structures of the U.S. Health System Comparative Health Systems Comparative Health Systems ealth Policy, Law, Ethics, and Economics: th care and public health policy, and the result of the public health policy Ethical dimensions of health care and public health policy Economical dimensions of health care and public health policy Economical dimensions of health care and public health policy Regulatory dimensions of health care and public health policy Governmental Agency Roles in health care and public health policy	Addressoles, infl 2100 I I I Concept	s the baluences 2150	sic conc and res 2200	epts of loonsibil	egal, etities of t	2900 hical, eche diffe	3110 conomic rent ag 3110 l	, and reencies a 3120	gulatory nd bran 3130 C	3140 y dimension of the state	sions of governr 3150	3170 ment 3170
a b 8. H heal b c d e 9. H	characteristics and Structures of the U.S. Health System Comparative Health Systems Comparative Health Systems ealth Policy, Law, Ethics, and Economics: th care and public health policy, and the result of the public health policy. Ethical dimensions of health care and public health policy Ethical dimensions of health care and public health policy Economical dimensions of health care and public health policy Economical dimensions of health care and public health policy Governmental Agency Roles in health care and public health policy Governmental Agency Roles in health care and public health policy ealth Communications: Address the basic	Addressoles, infl 2100 I I I Concept	s the baluences 2150	sic conc and res 2200	epts of loonsibil	egal, etities of t	2900 hical, eche diffe	3110 conomic rent ag 3110 l	, and reencies a 3120	gulatory nd bran 3130 C	3140 y dimension of the state	sions of governr 3150	3170 ment 3170

b	Professional writing						
С	Use of Mass Media					I	
d	Use of Electronic Technology					I	

Tem	plate L4: CEPH Domain Matrix for the Maj	or Flect	ive Cou	rsas in t	ha RS ir	n Duhlic	Health	_ 3180.	.4950	(1-	Introduce	ad C= Co	warad)
	verview of Public Health: Address the history												
	ss the globe and in society	n y ana i	51111030 _F	only or p	ublic fic	aitii as i	wenasi	t3 corc	values,	сопсерс	.s, and n	unctions	,
ucio	33 the globe and in society	3180	3210	3220	4300	4500	4950						
а	Public Health History	J100	3210	3220	4300	4300	4330						
b	Public Health Philosophy	'											
	Core PH Values					ı	ı						
c d		С				1	'						
	Core PH Concepts Global Functions of Public Health	С		С		- 1							
e		C											
f	Societal Functions of Public Health	la . A al al a		С					a dali a li	4	- 4 11 -	-4:	
	ole and Importance of Data in Public Healt								public r	ieaith d	ata cone	ection, u	se,
and	analysis and why evidence-based approach	1	1	1		1		ce	1				T
	D : 0	3180	3210	3220	4300	4500	4950						
a	Basic Concepts of Data Collection												
b	Basic Methods of Data Collection												
C	Basic Tools of Data Collection												
d	Data Usage	I											
е	Data Analysis												
f	Evidence-based Approaches		I										
	entifying and Addressing Population Healt											cesses,	
appr	oaches, and interventions that identify and	laddres	s the m	ajor hea	lth-rela	ted nee	ds and	concerr	s of po	pulation	S		
		3180	3210	3220	4300	4500	4950						
a	Population Health Concepts			I									
	Introduction to Processes and												
b	Approaches to Identify Needs and			l l									
	Concerns of Populations												
	Introduction to Approaches and												
С	Interventions to Address Needs and	С	I	l l									
	Concerns of Populations												
4. H	uman Health: Address the underlying scier	nce of h	uman he	ealth an	d diseas	se includ	ding opp	ortunit	ies for p	oromoti	ng and p	orotecti	ng
heal	th across the life course												
		3180	3210	3220	4300	4500	4950						
а	Science of Human Health and Disease		С	I									
b	Health Promotion	С	С	- I	- I		С						
С	Health Protection	С	С	С	- I		С						
5. D	eterminants of Health: Address the socio-	econom	ic, beha	vioral, b	iologica	al, envir	onment	al, and	other fa	ctors th	at impa	ct huma	an
heal	th and contribute to health disparities												
		3180	3210	3220	4300	4500	4950						
_	Socio-economic Impacts on Human		_		ı	ı							
а	Health and Health Disparities		С	С	'	'							
b	Behavioral Factors Impacts		С	С	- I	I							
С	Biological Factors Impacts		С	С	- 1	I							
d	Environmental Factors Impacts		С	С	- I	I							
6. Pr	oject Implementation: Address the funda	mental o	concept	s and fe	atures o	of proje	ct imple	mentat	ion, inc	luding p	lanning	, assessi	ment,
	evaluation		•							01	O.		•
		3180	3210	3220	4300	4500	4950						
	Introduction to Planning Concepts and												
а	Features												
	Introduction to Assessment Concepts												
b	and Features												
	Introduction to Evaluation Concepts												
С	and Features												
		1	1	1			1	1					1

		3180	3210	3220	4300	4500	4950						
a	Characteristics and Structures of the U.S. Health System					I							
b	Comparative Health Systems					I							
3. H	ealth Policy, Law, Ethics, and Economics:	Address	the bas	ic conce	pts of le	egal, eth	nical, eco	onomic	and reg	gulatory	dimen	sions of	
	th care and public health policy, and the ro												
		3180	3210	3220	4300	4500	4950						
а	Legal dimensions of health care and public health policy	I				С							
b	Ethical dimensions of health care and public health policy					С							
С	Economical dimensions of health care and public health policy					С							
d	Regulatory dimensions of health care and public health policy	С				С							
e	Governmental Agency Roles in health care and public health policy	I	I			С							
	ealth Communications: Address the basic ng and the use of mass media and electror			lic healt	th-speci	fic com	municat	ion, inc	luding t	echnica	l and pr	ofession	nal
		3180	3210	3220	4300	4500	4950						
а	Technical writing						С						
b	Professional writing						С						
С	Use of Mass Media												
d	Use of Electronic Technology						С						
d Tem	Use of Electronic Technology plate L5: CEPH Domain Matrix for the Ma						e BS in F					ed, C= Co	
	verview of Public Health: Address the histors the globe and in society	ory and p	ohilosop	hy of p	ublic he	alth as v	well as it	ts core v	values, o	concept	s, and f	unctions	•
		BIO 1140	Math 1300	PBHL 1100	PBHL 1300		BIO 1300	BIO 1700	СНЕМ 1310	ENV 1100	PHYS 1100		
a	Public Health History												
	-												┿
a b	Public Health Philosophy												L

Tem	plate L5: CEPH Domain Matrix for the Maj	or Pre a	nd Co-F	Requisit	e Cours	es in the	e BS in I	Public H	ealth	(1=1	ntroduce	ed, C= Cov	/ered)
1. 0	verview of Public Health: Address the histo	ory and p	hilosop	hy of p	ublic he	alth as v	well as i	ts core v	/alues, d	concept	s, and fu	unctions	
acro	ss the globe and in society												
		BIO	Math	PBHL	PBHL		BIO	BIO	CHEM	ENV	PHYS		
	Dule Particulate 1 Parama	1140	1300	1100	1300		1300	1700	1310	1100	1100		
a	Public Health History												
b	Public Health Philosophy												
С	Core PH Values												
d	Core PH Concepts												
е	Global Functions of Public Health												
f	Societal Functions of Public Health												
2. Ro	ole and Importance of Data in Public Healt	h: Addre	ess the l	basic co	ncepts,	method	ls, and t	ools of	public h	ealth da	ata colle	ction, us	se,
and	analysis and why evidence-based approach	ies are a	n essen	tial part	of pub	lic healt	h practi	ce					
		BIO	Math	PBHL	PBHL		BIO	BIO	CHEM	ENV	PHYS		
	I =	1140	1300	1100	1300		1300	1700	1310	1100	1100		
а	Basic Concepts of Data Collection												
b	Basic Methods of Data Collection												
С	Basic Tools of Data Collection												
d	Data Usage		I										
е	Data Analysis		I										
f	Evidence-based Approaches												
3. Id	entifying and Addressing Population Heal	h Challe	nges:	Address	the cor	cepts o	f popula	ation he	alth, an	d the b	asic pro	cesses,	
	oaches, and interventions that identify and		_			•							
		BIO	Math	PBHL	PBHL		BIO	BIO	CHEM	ENV	PHYS		
		1140	1300	1100	1300		1300	1700	1310	1100	1100		
а	Population Health Concepts												
	Introduction to Processes and												
b	Approaches to Identify Needs and												
	Concerns of Populations												

	Introduction to Approaches and												
С	Interventions to Address Needs and												
1 H	Concerns of Populations uman Health: Address the underlying scier	nce of hi	ıman he	alth an	d disas	se includ	ling onr	ortunit	ias for n	romotii	na and i	rotecti) or
1	th across the life course	ice or m	alliali lic	aitii aii	u uisca:	se meruc	anig opp	ortunit	163 101 F	n Omoth	ing ariu j	Jiotectii	۱۶
		BIO	Math	PBHL	PBHL		BIO	BIO	CHEM	ENV	PHYS		
	6: (11 11 11 15:	1140	1300	1100	1300		1300	1700	1310	1100	1100		
a	Science of Human Health and Disease	I		ı	C			I					
b	Health Promotion Health Protection				C								
C E D	eterminants of Health: Address the socio-	oconom	ic hoha	uioral h		al onvir	onmont	al and	othor fo	ctors th	at impa	ct huma	n
1	th and contribute to health disparities	econoni	ic, bella	viorai, L	noiogica	ai, eliviii	omment	ai, aiiu	otilei ia	Ctors tri	at iiiipa	Ct Hullic	111
		BIO	Math	PBHL	PBHL		BIO	BIO	CHEM	ENV	PHYS		
		1140	1300	1100	1300		1300	1700	1310	1100	1100		
а	Socio-economic Impacts on Human			С	Ţ								
h	Health and Health Disparities				-								
b	Behavioral Factors Impacts	ı		С	C			1					
c d	Biological Factors Impacts Environmental Factors Impacts	1		ı	ı		<u>'</u>	ı	'	1			
	roject Implementation: Address the funda	mental (concent	s and fe	atures (of proje	ct imnle	mentat	ion incl	uding n	lanning	assessi	nent
1	evaluation	inciitai	опсерс	o una re	atai cs (or proje	et imple	memat	1011, 11101	ading p		, 0330331	iiciit,
		BIO	Math	PBHL	PBHL		BIO	BIO	CHEM	ENV	PHYS		
		1140	1300	1100	1300		1300	1700	1310	1100	1100		
а	Introduction to Planning Concepts and Features												
b	Introduction to Assessment Concepts and Features												
_	Introduction to Evaluation Concepts												
С	and Features												
1	verview of the Health System: Address the		nental c	haracte	ristics a	and orga	ınizatior	nal struc	ctures o	f the U.S	S. health	n system	ı as
well	as to the differences in systems in other co	1		DDIII	DDIII	1	DIO.	DIO.	1		DI IVC		
		BIO 1140	Math 1300	PBHL 1100	PBHL 1300		BIO 1300	BIO 1700	CHEM 1310	ENV 1100	PHYS 1100		
	Characteristics and Structures of the												
а	U.S. Health System												
b	Comparative Health Systems												
	ealth Policy, Law, Ethics, and Economics: A												
heal	th care and public health policy, and the ro	1				ties of t						governr	nent
		BIO 1140	Math 1300	PBHL 1100	PBHL 1300		BIO 1300	BIO 1700	CHEM 1310	ENV 1100	PHYS 1100		
а	Legal dimensions of health care and public health policy				I								
b	Ethical dimensions of health care and public health policy				I								
С	Economical dimensions of health care				I								
d	and public health policy Regulatory dimensions of health care				I								
u	and public health policy				'								
e Governmental Agency Roles in health care and public health policy													
9. H	ealth Communications: Address the basic	concept	s of pub	lic healt	th-speci	ific com	municat	ion, inc	luding t	echnica	I and pr	ofessior	ıal
1													
writ	ing and the use of mass media and electron	ic techn	ology				DIO.	D.C	CUESA	Etn.	DING	1	
writ				PBHL 1100	PBHL 1300		BIO 1300	BIO 1700	CHEM 1310	ENV 1100	PHYS 1100		
writ		ic techn	ology Math	PBHL	PBHL		1	l	1	1	1		
	ing and the use of mass media and electron	ic techn	ology Math	PBHL	PBHL		1	l	1	1	1		
a	ing and the use of mass media and electron Technical writing	ic techn	ology Math	PBHL	PBHL		1	l	1	1	1		

4.3 Students must demonstrate the following skills: • the ability to communicate public health information, in both oral and written forms and through a variety of media, to diverse audiences • the ability to locate, use, evaluate and synthesize public health information

Program response to 4.3:

As discussed earlier, as part of the UCC, all SBP students are required to fulfill the University's graduation requirements regarding Writing Intensive and Technology Intensive courses. Many of the skills listed in Template M are developed in the courses that students take to fulfill their UCC requirements in these areas. A review of the Writing Intensive Course requirements and Technology Intensive Course requirements is presented in Table 10, including the specific experiences that students have within the SBP to focus on writing and technology skills specifically related to public health.

Table 10: Wr	iting Into	ensive and Technology Intensive Requirements
4 Required Writing Intensive Courses	12 cr.	All students must complete four 3-credit courses that have received the "Writing Intensive" designation: these courses may be taken within the major. All students take College Writing and Introduction to Literature (or comparable courses) which satisfy the first two courses for the Writing Intensive requirement. All SBP students take PBHL 3040 – Health Research Methods I, which is a designated Writing Intensive course. There are also several elective options for this requirement within the Public Health program for students who wish to satisfy their fourth Writing Intensive course requirement with a Public Health course.
2 Required Technology Intensive Courses	6 cr.	All students must complete two 3-credit courses that have received the "Technology Intensive" designation: these courses may be taken within the major. All SBP students complete this requirement within the major. Students enrolled in the SBP are required to take PBHL 3042 – Health Research Methods II, which is a designated Technology Intensive course. All Public Health – General Track students are required to take PBHL 4301 – Public Health Practice, which is a designated Technology Intensive course. All Public Health – Health Education Track students are required to take PBHL 3610 – Methods in Public Health Education, which is a designated Technology Intensive course. As a result, all Public Health majors fulfill their Technology Intensive course requirement within the major.

Below are several examples of how writing about public health concepts is used in various courses within the SBP, including the process of communicating health information, as well as skills related to locating, interpreting, evaluating and synthesizing public health information and data. Within or directly after each narrative is a specific reference to an example or examples of student work found in the ERF.

- In PBHL 2950, students complete various writing activities to understand health disparities and the social determinants of health including weekly reflection papers utilizing a combination of scholarly texts and print media, film, or music. They are also assigned a final research paper which incorporates the analysis of a media text, season 4 of HBOs *The Wire*. (see PBHL 2950 Disparities in Health Final Paper- The Wire).
- In PBHL 3000, Introduction to Public Health there are four essay assignments throughout the semester, which are often different from year to year. In general, the assignments are expository and ask students to investigate a public health topic and to explain it in writing using appropriate public health terminology. The assignments focus on asking to students to

- articulate their comprehension of public health literature/topics, and to clearly express public health concepts (see PBHL 3000 Introduction to Public Health DOH Paper). There is also one paper that includes a personal reflection. Students watch *When the Bough Breaks* and reflect on their thoughts and feelings about racial disparities in infant outcomes and the meaning of such disparities for society (see PBHL 3000 Introduction to Public Health Assignment 1 Unnatural Causes).
- PBHL 3040, Research Methods in Health I, is an introductory writing-intensive course to basic health research methodologies. Students develop skills for critically reading professional public health literature and writing literature review. For critically reading professional literature, students locate and comprehend at least 3 research articles based on their chosen research topic. They identify and summarize each of research articles' purpose, the major issues and themes, research questions and/or hypotheses, the participants, research methods, findings, limitations, gaps, and future recommendations (see PBHL 3040 Health Research Methods I Research Article Annotation 1 and 2). The Literature Review (see PBHL 3040, Health Research Methods I, Literature Review, 1-4) represents the final paper of this course and is a synthesis of 3-4 scholarly articles related to students' chosen research topic. Students are tasked with developing a descriptive and creative title for their research project, the introduction section that provides a description of chosen topic and some basic background information from reputable sources. Within the main body of the literature review, students group their scholarly articles by exposures, or outcomes, and discuss them accordingly, providing a synthesis of these research studies, and identifying major areas of similarity or difference. Finally, in conclusions section, students provide a comprehensive summary of the literature review, the major points learned, and the need for future research about their topic. Students are required to use American Psychological Association (APA) style of writing and citation throughout the course, and in the literature review.
- PBHL 3042, Research Methods in Health II, introduces students to advanced concepts in population-based health research by building upon the content and skills introduced in PBHL 3040. As a technology-intensive course, students develop and use the skills needed to plan and conduct a health survey including analyzing and presenting the results in a final research report. Initially, students develop a research proposal, which consists of developing the research problem statement and research objectives, writing the Institutional Review Board (IRB) application and informed consent statement, and developing an appropriate data gathering instruments. Following this, students conduct a health related survey by collecting data from 25 WPUNJ students. Upon completion of survey, students are taught the use of technological methods, including Microsoft Excel and SPSS software. Specifically, students are taught how to enter, analyze, and present data in the form of histograms and scattergrams. Using Excel and PowerPoint to analyze data, students interpret research findings and disseminate research findings in the form of the final presentation. (See PBHL 3042 Health Research Methods II Final Research Poster 1-4, IRB Application 1-2, Research Study PPT 1-2, and the Full Final Research Report)
- In PBHL 3400, students use writing skills and technology to develop a poster on an
 environmental health topic. They are required to use either government or academic sources
 and to properly cite all of the data and information that they obtain from these sources.
 Another project this students will be completing this semester is a homework assignment in
 which students read government reports on climate change and health and then explain their
 understanding of key concepts. Additionally, short essays in which students must describe and
 reflect on what they learned accompany class field trips (see PBHL 3400 Environmental Health
 Sewage Plant Reflection).

- In PBHL 4000, Epidemiology, students conduct a community health assessment, which is a project that uses both writing and technology to analyze and explain descriptive epidemiologic data (see PBHL 4000 Epidemiology Community Health Assessment). The project is developed step-by-step in class, with two sessions in the computer lab to learn how to analyze on-line New Jersey State Health Assessment data, import it into Excel and then make appropriate graphs and charts. The next step is to learn to use appropriate epidemiologic terms to describe the data in writing. This type of scientific writing is new to the students and they are instructed on how to simply describe the data, without making causal inferences, since the data are descriptive. Students are required to hand in a draft of their paper and they are provided with extensive comments on both their graphs/charts and their writing. The final paper must incorporate the comments and show development/improvement from the draft.
- In PBHL 4500, students complete case studies to practice applying course content to real world health care administration scenarios. Students also engage in other written assignments including a public health leadership development plan, film analysis, and a business plan. Each student is required to deliver a ten minute presentation on a health care administration topic. (see PBHL 4500 Health Administration Sample Student Group Case Study).

Template M includes a summary of the diverse locations within the SBP curriculum where specific skills are developed and assessed beyond the above listed UCC requirements. Examples of many more writing samples from the courses below are found in the ERF.

Template M:			
Skills		Courses and other learning experiences through which students demonstrate the following skills.	Methods by which these skills are assessed.
Public Health	Oral	PBHL 2150	Celebrity Addiction Presentation
Communication:	communication	PBHL 2150	Treatment Program Presentation
Students should		PBHL 3170	Content presentations
be able to		PBHL 3210	Life Span Case Study
communicate		PBHL 3400	Envir. Health Issues Presentation
public health		PBHL 3610	Innovation Guide
information, in		PBHL 3750	Disease – Group Presentation
both oral and		PBHL 4301	Community Needs Assessment
written forms		PBHL 4500	Group Case Study Presentation
and through a		PBHL 4500	Business Plan Presentation
variety of media,		PBHL 4610	Theory Review Activity
to diverse		PBHL 4950	Culture-specific Presentation
audiences		PBHL 4972/4973	Capstone project
	Written	PBHL 1100	Self-Assessment
	communication	PBHL 1300	Written Paper
		PBHL 2100	Written Paper
		PBHL 2150	Written Paper
		PBHL 2200	Written Paper/journal
		PBHL 3020	Written Papers
		PBHL 3040	Literature Review
		PBHL 3042	Research project
		PBHL 3150	Community Engagement Project

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		PBHL 3610	Innovation Guide, Exams, Quizzes
		PBHL 4000	Descriptive Epi. Analysis Paper
		PBHL 4301	Community Needs Assessment
		PBHL 4610	Program Plan
		PBHL 4950	Culture-specific Assignment
		PBHL 4972/4973	Capstone project
	Communicate	PBHL 2700	Group Project
	with diverse	PBHL 2950	Ethnographic Essay
	audiences	PBHL 3150	Community Engagement Project
		PBHL 3610	Book Review, Exams, Quizzes
		PBHL 4610	Program Plan
		PBHL 4950	Culture-specific Assignment
		PBHL 4950	Cross-cultural Interview
		PBHL 4972/4973	Capstone project
	Communicate	PBHL 2950	Social Media Advocacy Project
	through variety	PBHL 3610	Innovation Guide, Exams, Quizzes
	of media	PBHL 4301	Module Assignment
		PBHL 4301	Community Needs Assessment
		PBHL 4610	Program plan
		PBHL 4610	Online trainings
		PBHL 4972/4973	Capstone project
Information	Locate	PBHL 1100	Written Paper
Literacy:	information	PBHL 2100	Written Paper
Students should	iiioiiiiatioii	PBHL 2150	Written Paper
be able to		PBHL 2200	Written Paper
locate, use,		PBHL 2700	Media Assignment
evaluate, and		PBHL 3000	Written Paper
synthesize		PBHL 3020	Written Paper
information		PBHL 3040	Literature Review
IIIIOIIIIatioii		PBHL 3042	Research project
		PBHL 3110	Case Study Analysis
		PBHL 3140	Topical Paper
		PBHL 3170	Presentation
		PBHL 3610	Disease Specific Guide
		PBHL 4000	Descriptive Epi. Analysis Paper
		PBHL 4610	Program plan
		PBHL 4950	Cross-cultural Interview
	11	PBHL 4972/4973	Capstone project
	Use	PBHL 1100	Self-Assessment
	information	PBHL 1300	Written Paper
		PBHL 2100	Written Paper
		PBHL 2150	Written Paper
		PBHL 2200	Written Paper
		PBHL 2240	Exam
		PBHL 2700	Media Assignment
		PBHL 3000	Written Paper
		PBHL 3020	Case Study Analysis
		PBHL 3040	Literature Review

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		PBHL 3042	Research project
		PBHL 3610	Disease Specific Guide
		PBHL 3110	Case Study Analysis
		PBHL 3140	Topical Paper
		PBHL 3170	Presentation
		PBHL 4610	Program Plan
		PBHL 4950	Cross-cultural Interview
		PBHL 4972/4973	Capstone project
	Evaluate	PBHL 2100	Course Work
	information	PBHL 2150	Written Paper
		PBHL 2700	Media Assignment
		PBHL 3010	Written Paper
		PBHL 3020	Written Paper
		PBHL 3040	Literature Review
		PBHL 3042	Research project
		PBHL 3110	Case Study Analysis
		PBHL 3140	Book Review
		PBHL 3170	Book Review
		PBHL 3170	Paper
		PBHL 3610	Disease Specific Guide
		PBHL 4610	Program Plan
		PBHL 4972/4973	Capstone project
	Synthesize	PBHL 2100	Written Paper
	information	PBHL 2150	Written Paper
		PBHL 2700	Media Assignment
		PBHL 3000	Written Paper
		PBHL 3040	Literature Review
		PBHL 3042	Research project
		PBHL 3110	Case Study Analysis
		PBHL 3610	Disease Specific Guide
		PBHL 3900	Experience Project
		PBHL 4000	Descriptive Epi. Analysis Paper
		PBHL 4610	Program Plan
		PBHL 4950	Cross-cultural Interview
		PBHL 4972/4973	Capstone project
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4.4 Students have opportunities to integrate, synthesize and apply knowledge through cumulative and experiential activities. All students complete a cumulative, integrative and scholarly or applied experience or inquiry project that serves as a capstone to the education experience. These experiences may include, but are not limited to, internships, service-learning projects, senior seminars, portfolio projects, and research papers or honors theses. Programs encourage exposure to local-level public health professionals and/or agencies that engage in public health practice.

Program response to 4.4:

The internship program for students majoring in the SBP is a required, supervised experience designed to provide the opportunity for students to apply their academic preparation in a professional work setting. The internship is the culmination of the major course of study and is completed after all other major courses and major co-required courses are taken and passed with the minimum required grade in each course.

Interns work for a predetermined number of hours under the supervision of a trained health professional, the Internship Site Supervisor (ISS). The objectives of the internship program and the sites at which students complete their internship are consistent with the roles and responsibilities of entry-level public health professionals.

In the semester prior to completing the internship, students are required to take a 1-credit, graded course called *Introduction to Internship*. This course is taught by a public health faculty member and covers content that stimulates thinking about the transition from college to graduate school and/or the professional working environment. In this course, students:

- Create a resume, a professional portfolio, and a LinkedIn account.
- Review professional standards and codes of conduct.
- Learn interviewing skills, discuss graduate school options, and review job search strategies.
- Develop awareness of the importance of professional conduct, professional communication, professional skill development, continuing education, and networking.

Concurrent with this course, students explore potential internship sites, interview, and select an internship site under the guidance of the ISC, who is a full-time professional staff member of the program. Specific information about the internship site selection process is presented in greater detail in the Department of Public Health Internship Manual.

The *Internship* course is taken immediately following the *Introduction to Internship* course. This is a graded course that is taught by a program faculty member. In addition to completing a pre-determined number of hours at the internship site, each intern is also responsible for the completion of a major project, called the capstone project. Instructions for the capstone project are found in the ERF.

In order for a student to register for the *Internship* course and begin the internship, all of the following criteria must have been met:

- Students must successfully complete the *Introduction to Internship* course, select an internship site, and file all required paperwork by the deadlines announced in class.
- Students must complete all major core courses with a grade of C or better.

The following table includes the number of course credits, the total internship hours that are required of interns in each of the SBP tracks, and the semester/s in which the internship course is offered.

Table 11: Summary of SBP Internships				
General track	Health Education track			
6 credits	12 credits			
240 total hours	480 total hours			
Spring Semester <u>Only</u>	Spring Semester <u>Only</u>			

In addition to completing a set number of supervised hours at the internship site, all students are required to attend mandatory class sessions during the semester. Attendance at these class sessions counts toward the total number of required internship hours, as follows:

Table 12: Total Hours Required for the SBP Internships				
General track	Health Education track			
4 two-hour class sessions	5 two-hour class sessions			
8 class session hours	10 class session hours			
+	+			
232 supervised hours at the	470 supervised hours at the			
internship site	internship site			
= 240 total hours	= 480 total hours			

The final class session is held in the University Ballroom at which time interns present a poster with a summary of their capstone project. This event also serves as the program's Annual Award ceremony and Alumni Recognition event. Immediately preceding this event program faculty and the ISC meet with the Internship Site Supervisors to assess the season's internship experience. This group of ISSs serve as the program's external advisory board.

Template N	
Cumulative and	Narrative describing how activity provides students the opportunity to
Experiential Activity (internships, research papers, service-learning projects, etc.)	integrate, synthesize and apply knowledge.
Introduction to Internship Course	This seminar is designed to assist students in the development of the professional skills necessary for successful completion of an internship in public health. Topics of study include professional conduct, professional communication, resume and portfolio development, interviewing skills, job search strategies, and continuing education/professional development. Concurrent with the course, students work closely with the ISC to review the various types of public health internship settings and select their internship placement for the followings semester.
Internship Course	The internship is a culminating experience comprised of a capstone project and a field placement. The capstone project provides students with the opportunity to demonstrate their understanding of public health concepts and practice and assesses their ability to conduct a community-based needs assessment or program plan from conception through implementation, analysis, and reporting. Interns work for a predetermined number of hours under the supervision of a trained health professional, the ISS. In addition to completing a pre-determined number of hours at the internship site, each intern is also responsible for the completion of a major project, called the capstone project. The SLOs of the Internship course are to enable the student to: 1. Identify a public health practice problem/issue which could benefit from the application of public health principles and science. 2. Conduct a needs assessment for a public health related issue. 3. Utilize valid sources of health information to assist in the assessment of community needs. 4. Summarize the results of the community needs assessment in poster format. 5. Explain the mission of the agency and its role in the US health care system . 6. Describe how content knowledge and skills acquired during academic coursework apply to public health practice. 7. Describe the relationship between assigned projects and public health values, concepts, and anticipated health outcomes. 8. Document progress toward the completion of assigned tasks, projects, activities, and professional responsibilities. 9. Identify areas for future personal and professional growth. 10. Demonstrate confidence in personal judgment and gain maturity, and self-confidence.

4.5 The overall undergraduate curriculum and public health major curriculum expose students to concepts and experiences necessary for success in the workplace, further education and life-long learning. Students are exposed to these concepts through any combination of learning experiences and co-curricular experiences. These concepts include the following: • advocacy for protection and promotion of the public's health at all levels of society • community dynamics • critical thinking and creativity • cultural contexts in which public health professionals work • ethical decision making as related to self and society • independent work and a personal work ethic • networking • organizational dynamics • professionalism • research methods • systems thinking • teamwork and leadership

Program response to 4.5:

The SBP introduces students to a variety of concepts and experiences necessary for success in the workplace, as illustrated in Template O.

Template O	
Concept	Manner in which the curriculum and co-curricular experiences expose students to the concepts
Advocacy for protection and promotion of the public's health at all levels of society	The concept of advocacy is addressed in multiple courses in our curriculum. One of the best examples is PBHL 3150 (Food + Community), which has students examine the globalization of the food system in the US and associated public health impacts. Students develop an understanding of various social movements that aim to make fresh, locally grown healthy food more available and the role of advocacy in achieving this. Additionally, they develop skills in using evidence-based advocacy to address food justice issues. In PBHL 3400 (Environmental Health) community advocacy for protecting people from environmental health threats is discussed and explored as a key way that environmental quality in the United States has improved over the course of the twentieth century. We examine historical (Clean Air Act, Love Canal/Superfund) and contemporary examples (Pompton Lakes, NJ) of this phenomenon. PBHL 2950 (Disparities in Health) discusses advocacy as a possible solution to addressing the social inequities that drive health disparities. The course requires students to complete a social media advocacy project. In PBHL 3140 Reproductive Rights, students examine policies and the federal and state levels, efforts to address threats to reproductive freedom, and engage with a project that promotes activism. Students examine substance use polices at the international, federal, and local level in PBHL 2150 Drugs and Health.
Community dynamics	Community dynamics are often best experienced, but it is also helpful if students go out into communities with an understanding of their historical, cultural and political context and how this context may influence community dynamics. Our curriculum addresses community dynamics both through classroom learning and experientially (e.g. field trips and the internship experience). For example PBHL 2950 (Disparities) provides an overview of key historical, social and political issues that have shaped dynamics both within and among communities defined by identity and geography. The course exams the experiences of historically marginalized groups in the United States and how power, racism, classism, segregation and historical trauma shapes dynamics within and among

communities. Examples of students witnessing community dynamics includes a guest panel presentation in PBHL 3400 (Environmental Health) which included community members from Pompton Lakes, NJ—a community dealing with a largescale vapor intrusion problem, as well as officials from the Environmental Protection Agency. Community members talked about the dynamics within their community with respect to the environmental health and cleanup challenges they are facing, as well as the dynamics of working with the federal government and the responsible party on cleanup. Also in Environmental Health, on a field trip to a local sewage treatment plant trip, students learn about the politics of operating a sewage treatment plant in a residential neighborhood and how community concerns influence the plant operators. Other courses such as PBHL 3610 (Methods in Public Health Education) and PBHL 4301 (Public Health Practice) address community engagement strategies and power relationships within and between various communities and the institutions with which communities interact. Many of our students are placed in internships where their work occurs in community settings. Through daily work in community settings during the internship they begin to develop an awareness of community dynamics.

Critical thinking and creativity

Ideally critical thinking is a central part of all coursework and class discussions. Public health as a discipline requires students and practitioners to think critically and to challenge conventional thinking about the ways we understand health and the causes of disease and injury in populations. Critical thinking about how health is distributed and the factors that influence health is present in PBHL 3000 (Introduction to Public Health), PBHL 4000 (Epidemiology), PBHL 2950 (Disparities in Health), among other courses. PBHL 3900 (Human Sexuality) encourages students to think critically about how they understand sexuality and the diversity of human sexual expression. PBHL 3170 (Popular Literature in Public Health) is a course that allows for creative expression through writing and discussion about public health topics in literature. Students are also exposed to creative work that illustrates public health issues. Final projects in several courses require making posters or writing papers or reports that require critical thinking, reflection and creativity in pulling together multiple sources of information and presenting it in an understandable and engaging format.

Cultural contexts in which public health professionals work Cultural context is explicitly considered in several courses. For example, PBHL 3000 (Introduction to Public Health) helps to lay a foundation for why consideration of cultural context is critical for public health researchers and practitioners. One of the key readings in the course is Tracy Kidder's *Mountains Beyond Mountains* about Paul Farmer's work in rural Haiti. One of the key reasons for reading this book in our introductory course is to immerse students in the cultural, economic and social context in which public health is practiced. The book details the cultural context of rural Haiti and also makes a good argument for why Farmer's community and culturally engaged approach is critical to improving health in this community and others suffering from poverty and unequal disease burdens. PBHL 2950 (Disparities in Health) addresses cultural factors and/or social marginalization based on culture as one possible reason that some groups may not access certain types of medical care or participate in certain aspects of the medical care system. Central to this conversation is a discussion of the importance of cultural competency among providers and public health practitioners. PBHL

	3610 (Methods in Health Education) examines cultural competency in relationship to the development of health communication strategies.
Ethical decision making as related to self and society	Ethical decision-making is addressed in the context of conducting research with human subjects in PBHL 3040 (Health Research Methods I) and (PBHL 4000) Epidemiology. Serious ethical lapses in the conduct of public health research, such as in the Tuskegee Syphilis Study are covered in several courses to provide students with historical perspective on research ethics.
Independent work and a personal work ethic	Independent work is required of all students in the public health major. Many courses have substantial projects as part of coursework that must be completed independently. Faculty in the public health program have clear expectations for student work ethic. While many of our students work and attend school, faculty have the expectation that they will manage their time wisely and complete assignments on time. Some faculty do not accept any late work while others deduct points for late work. We want to help our students learn the importance of honoring deadlines and planning their work carefully.
Networking	Networking is introduced as an important concept for professionals in PBHL 4962 (Introduction to Internship). Some faculty take students to annual professional conferences such as NJSOPHE so that they can engage in professional networking activities.
Organizational dynamics	PBHL 4962 (Introduction to Internship) provides a forum for students to discuss organizational dynamics that they may encounter in their internships. Additionally, periodic meetings with students during the internship semester provide an opportunity for students to describe challenging organizational cultures or dynamics and helps them to brainstorm appropriate responses. In PBHL 3610 (Methods in Public Health Education), students learn about strategies for running effective meetings and appropriate meeting behavior. In PBHL 4500 (Health Administration), students do case study analysis of organizational behavior and dynamics.
Professionalism	Faculty in the public health program try to model professionalism by having high standards for themselves (e.g. punctuality, dependability, civility, productivity, and ethical practice). We expect and try to reinforce with students these traits as well as the importance of clear and respectful communication, being on time for appointments with faculty and internship site supervisors, and turning in one's best possible work. Other specific professional skills are addressed in PBHL 4962 (Introduction to Internship), which helps to prepare students for their internships. Students are guided in developing or modifying their resumes and are coached in professional communication and interviewing skills. The course also helps students to understand the type of professional conduct internship sites will expect and the internship handbook provides further details on expectations for professional behavior. Faculty provide opportunities for students to attend regional conferences where opportunities to observe and practice professional behavior exist.
Research methods	Research methods play a key role in our curriculum and are addressed in multiple courses. We have a two-semester sequence in Research Methods, PBHL 3040 and 3042. PBHL 3040 introduces students to the major types of research methods used in public health research and acquaints students with reading and reviewing public health literature. PBHL 3042 requires students to conduct a mini-research

	project using survey methods and to analyze and present the data graphically and in writing. PBHL 3400 (Environmental Health) introduces students to some of the limitations of public health research methods for understanding environmental threats to human health. PBHL 4000 (Epidemiology) introduces students to concepts from descriptive and analytic epidemiology and to how causal inferences are made in epidemiologic studies. Students read and analyze epidemiologic reports and published studies and learn the basics of how to interpret epidemiologic findings.
Systems thinking	Systems thinking is evident in approaches to conceptualizing and developing possible solutions to public health problems in a number of courses. For example, PBHL 3150 (Food + Community) provides a systems perspective on our global food system and examines how the complexity of our food system contributes to myriad environmental and public health problems. For example, the complex relationships between food production and climate change and food production and antimicrobial resistance are explored. PBHL 3400 (Environmental Health) implicitly offers a systems thinking approach to conceptualizing environmental health issues. The course emphasizes ecological thinking and the interrelationships between human health and ecosystems, climate, man-made environments, human-caused environmental change, and government policies.
Teamwork and leadership	A number of courses require group projects and for students to work together and effectively collaborate. For example, homework assignments in PBHL 4000 (Epidemiology) are done in groups to allow students to help one another to grapple with material that is new and sometimes challenging. Students will have opportunities within the major for campus leadership through the Department's Public Health Club, which will have official club status through the Student Government Association. In this capacity, students will be able to develop their ideas for public health work either on or off campus.

5.0 Program Effectiveness

5.1 The program defines a mission statement that guides program activities and is congruent with the mission statement(s) of the parent institution(s).

Program response to 5.1:

As indicated earlier, the Department of Public Health's mission is:

"...to strive for lifelong learning, excellence, diversity and community. The Department is committed to preparing students to understand and critically analyze public health issues, to appreciate the importance of health disparities, and to understand the local, national and global dimensions of public health issues. The Department is committed to fostering intellectual curiosity and creativity in problem solving to effectively address public health challenges in communities and populations. The Department aims to provide a foundation of core health knowledge enhanced by interdisciplinary study to promote health at all levels for all people."

The Mission Statement of the SBP is:

"...to prepare students with knowledge of public health practice, principles and methods, and the skills necessary to utilize these to improve the health of the public. This is achieved through a foundation in general education, the biological, social and behavioral sciences, research, and the core content areas of public health enhanced by a semester-long internship in a public health setting."

Each track within the SBP has a specific program goal:

"The goal of the General Track of the BS in Public Health is to prepare public health generalists with the skills and knowledge necessary to function effectively from a public health perspective."

"The goal of the Health Education Track of the BS in Public Health is to prepare public health educators with the skills and knowledge necessary to function effectively in a health education setting and to attain the certified health education specialist credential."

The Mission Statement of the College of Science and Health is threefold:

"To provide undergraduate students with a sound foundation in mathematics, biological, physical, and health sciences, and to apply this knowledge that will equip them either to enter their chosen profession or pursue advanced studies; to provide graduate students with advanced knowledge and experience in their field of specialization that will allow them to move to the forefront of their profession; and to reach out to the community and provide services that fulfill the needs of the general population."

The University Mission Statement reads:

"William Paterson University of New Jersey is a public institution that offers an outstanding and affordable education to a diverse traditional and nontraditional student body through baccalaureate, graduate and continuing education programs. The University's distinguished teachers, scholars and professionals actively challenge students to high levels of intellectual and professional accomplishment and personal growth in preparation for careers, advanced studies and productive citizenship. Faculty and staff use innovative approaches to research, learning and student support to expand students' awareness of what they can accomplish. The University's graduates embody a profound sense of responsibility to their communities, commitment to a sustainable environment and active involvement in a multicultural world."

Five major themes emerge from the institutional mission statement as core values and provide guidance to program and course development. These values are academic excellence, creating knowledge, student success, diversity, and citizenship. Collectively they provide direction for all departmental initiatives in the DPH and SBP, and each of these values is clearly reflected in the DPH's mission statement, as well as the mission statement and goals of the SBP specifically.

5.2 The program defines expected student learning outcomes that align with the program's defined mission and the institution's regional accreditation standards and guide curriculum design and implementation as well as student assessment.

Program response to 5.2:

Student Learning Outcomes (SLOs) for the SBP were developed intentionally and through careful study of standards and suggestions provided by both the Council on Education for Public Health and the recommendations of the Associations of Schools and Programs in Public Health (as published in the Undergraduate Public Health Learning Outcomes Model).

As a result, the SBP Student Learning Outcomes include:

- Assessment of Knowledge (SLO's 1, 2, 3 and 6),
- Assessment of Skills (SLOs 4, 7, 8, & 10), and
- Assessment of Attitudes (SLOs 5 & 9).

Template P

SBP Student Learning Outcomes

- 1. Discuss the role of gender, race, ethnicity, and other evolving demographics in affecting population health. (CEPH Domain 5, ASPPH Domain 1)
- 2. Identify public health and related roles and responsibilities of government, non-governmental agencies, and private organizations. (CEPH Domain 1, ASPPH Domain 1)
- 3. Explain the organizational structure, financing, and delivery of personal health care and public health services impact population health. (CEPH Domain 7, ASPPH Domain 1)
- 4. Conduct a literature search on a health issue using a variety of academic and public resources. (CEPH Domain 9, ASPPH Domain 2)
- 5. Analyze ethical concerns and conflicts of interest that arise in the field of public health. (CEPH Domain 8, ASPPH Domain 3)
- 6. List the leading causes of mortality, morbidity, and health disparities among local, regional, and global populations. (CEPH Domain 4, ASPPH Domain 1)
- 7. Utilize scientific data, including tools of informatics, and other information for assessing the well-being of a community. (CEPH Domain 2, ASPPH Domain 2)
- 8. Apply the multiple determinants of health. (CEPH Domain 5, ASPPH Domain 2)
- 9. Discuss the importance of community engagement in promoting population health and social justice. (CEPH Domain 3, ASPPH Domain 3)
- 10. Engage in collaborative and interdisciplinary approaches to teamwork for improving population health. (CEPH Domain 6, ASPPH Domain 2)

In addition to the above Student Learning Outcomes, additional SLOs for students enrolled in the health education track include:

- 11. Assess the need for health education. (NCHEC Area of Responsibility 1)
- 12. Implement health education/promotion interventions. (NCHEC Area of Responsibility 2)
- 13. Plan health education/promotion programs/interventions. (NCHEC Area of Responsibility 3)
- 14. Evaluate health education/promotion programs/interventions. (NCHEC Area of Responsibility 4)
- 15. Administer health education programs and interventions. (NCHEC Area of Responsibility 5)
- 16. Serve as a resource person for health information. (NCHEC Area of Responsibility 6)
- 17. Communicate needs for health education/promotion services. (NCHEC Area of Responsibility 7)

5.3 Syllabi for required and elective courses for the major include objectives that are sufficient to demonstrate that they address the domain(s) identified in Criterion 4.

Program response to 5.3:

At WPU, each course is developed using a detailed template referred to as the <u>course outline</u>. The course outline contains standardized course information including the course number, course name, course prerequisites, course description, course objectives, student learning outcomes, the topical outline of course content, suggested teaching methods, suggested methods of student assessment, course materials, a course bibliography, and a record of the course outline approval history. The course outline is defined for purposes of the Middle States Accreditation Self-Study as the departmental document which is on file in the Departmental Office as the official record of a course and its content.

At WPU, the <u>syllabus</u> is defined for the purposes of the Middle States Accreditation Self-Study as the document distributed by the instructor of a course to students in a course at the beginning of a semester, outlining the work of the course (or section) for that semester.

While the course outline and the course syllabus share many similar elements, they are written for two different audiences – the course outline is an internal document for review by faculty, administrators and accreditors, while the syllabus is the manner in which course requirements (and required information found on the course outline) are communicated to students.

For the purpose of the present CEPH review, both course outline and course syllabi have been included in the ERF for all major courses, pre-requisite courses, and co-requisite courses.

As part of the CEPH self-study process, all Public Health courses were carefully reviewed and fully revised. Those course revisions were submitted for approval in September 2015 and have since received approval. Therefore, as per University protocol, these new course outlines will go into effect in September 2016, and all course syllabi will be updated to reflect the newly approved content starting in the fall semester of 2016.

In the ERF, the following have been included for CEPH review:

- Course outlines as approved through Spring 2016. These files are labeled as such: PBHL 2200 Stress Management Course Outline Current SP16.
- Course outlines as approved to take effect in Fall 2016. These files are labeled as such: PBHL 2200 Stress Management Course Outline New FA16.
- Current course syllabi. These syllabi reflect the course outlines as approved through Spring 2016.

5.4 The program defines and implements a student assessment plan that determines whether program graduates have achieved expected student outcomes and assesses the program's effectiveness. Assessment methodologies may vary based on the mission, organization and resources of the program, but whatever the approach, assessment processes are analytical, useful, costeffective, accurate and truthful, carefully planned and organized, systematic and sustained. At a minimum, the assessment plan includes regular surveys or other data collection (eg, focus groups, key informant interviews, data from national exams (eg, CHES) from enrolled students, alumni and relevant community stakeholders (eg, practitioners who teach in the program, service learning community partners, internship preceptors, employers of graduates, etc.).

Program response to 5.4:

The SBP is guided by a five-year program assessment plan which assesses many aspects of the overall program of study. The current departmental assessment plan covers the period between 2014 and 2019. Specific to the SBP, each of the ten program SLOs are intentionally measured with a specific course assignment or by exam at various points through the sequence of courses.

Furthermore, to assess the additional seven SLOs for the health education track, scores on the Certified Health Education Specialist exam are used to assess the program's effectiveness in helping students develop the competencies needed for entry-level practice as a health educator. Assessment results using the CHES exam are presented in the 2014-2015 Departmental Assessment Report.

Template Q			
Student Outcomes	Assessment Opportunities		
1. Discuss the role of gender, race, ethnicity, and other	PBHL 2950 Final Project "Applying		
evolving demographics in affecting population health.	the Socio-Ecological Model"		
2. Identify public health and related roles and responsibilities	PBHL 3020 Midterm Exam		
of government, non-governmental agencies, and private	Questions		
organizations.			
3. Explain the organizational structure, financing, and delivery	PBHL 3020 Final Exam Questions		
of personal health care and public health services impact			
population health.			
4. Conduct a literature search on a health issue using a variety	PBHL 3040 Literature Review		
of academic and public resources.	Assignment		
5. Analyze ethical concerns and conflicts of interest that arise	PBHL 3040 CITI Training for Ethics in		
in the field of public health.	Human Subjects Research		
6. List the leading causes of mortality, morbidity, and health	PBHL 3750 Public Health and		
disparities among local, regional, and global populations.	Disease Campaign Project		
7. Utilize scientific data, including tools of informatics, and	PBHL 4000 Descriptive		
other information for assessing the well-being of a community.	Epidemiological Analysis Report		
8. Apply the multiple determinants of health.	PBHL 4972/4973 Internship		
	Capstone Project		
9. Discuss the importance of community engagement in	PBHL 4972/4973 Internship		
promoting population health and social justice.	Capstone Project		
10. Engage in collaborative and interdisciplinary approaches to	PBHL 4972/4973 Final Site		
teamwork for improving population health.	Supervisor Assessment of Intern's		
	Performance		

Additional Student Outcomes for Health Education Students	Assessment Opportunities
11. Assess the need for health education.	National Commission for Health
12. Implement health education/promotion interventions.	Education Credentialing, Inc
13. Plan health education/promotion programs/interventions.	(NCHEC) Certified Health Education Specialist (CHES) Exam (taken in
14. Evaluate health education/promotion	April of the student's senior year, at the end of the student's internship
programs/interventions.	
15. Administer health education programs and interventions.	experience).
16. Serve as a resource person for health information.	
17. Communicate needs for health education/promotion	
services.	

As displayed in Template Q, individual Student Learning Outcomes are assessed using specific assignments or scores achieved on exams. This is one strategy used by the SBP to assess programmatic outcomes.

Template R presents evidence of implementation of these assignment and score-based assessment opportunities of the program's Student Learning Outcomes. Targets for each assessment opportunity, and their meaning, can be found in the "BS in Public Health Program Assessment Rubric" found in the ERF.

Template R	
Assessment Opportunity	Evidence of Implementation
SLO 1: PBHL 2950 Final Project "Applying	2014-2015 Departmental Assessment Report (in ERF);
the Socio-Ecological Model"	in 2014-15, 93% of students met expectations in this
	area (SBP Target Met)
SLO 2: PBHL 3020 Midterm Exam Questions	2014-2015 Departmental Assessment Report (in ERF);
	in 2014-15, 77% of students met expectations in this
	area (SBP Target Met)
SLO 3: PBHL 3020 Final Exam Questions	2014-2015 Departmental Assessment Report (in ERF);
	in 2014-15, 69% of students met expectations in this
	area (SBP Target NOT Met)
SLO 4: PBHL 3040 Literature Review	2014-2015 Departmental Assessment Report (in ERF);
Assignment	in 2014-15, 95% of students met expectations in this
	area (SBP Target Met)
SLO 5: PBHL 3040 CITI Training for Ethics in	2014-2015 Departmental Assessment Report (in ERF);
Human Subjects Research	in 2014-15, 88% of students met expectations in this
	area (SBP Target Met)
SLO 6: PBHL 3750 Public Health and Disease	2014-2015 Departmental Assessment Report (in ERF);
Campaign Project	in 2014-15, 100% of students met expectations in this
31 5 7 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	area (SBP Target Met)
SLO 7: PBHL 4000 Descriptive	2014-2015 Departmental Assessment Report (in ERF);
Epidemiological Analysis Report	in 2014-15, 100% of students met expectations in this
	area (SBP Target Met)
SLO 8: PBHL 4972/4973 Internship	2014-2015 Departmental Assessment Report (in ERF);
Capstone Project	in 2014-15, 98% of students met expectations in this
	area (SBP Target Met)

SLO 9: PBHL 4972/4973 Internship Capstone Project In 2014-2015 Departmental Assessment Report (in ERF); In 2014-2015 Departmental Assessment Report (in Ere in 2014-Exam results (SBP Target Met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Targ		1
area (SBP Target Met) SLO 10: PBHL 4972/4973 Final Site Supervisor Assessment of Intern's Performance Assessment Opportunity - Health Education Track SLO 11: Institution score on CHES Exam: Assess the need for health education. SLO 12: Institution score on CHES Exam: Implement health education/promotion interventions. SLO 13: Institution score on CHES Exam: Plan health education/promotion programs/interventions. SLO 14: Institution score on CHES Exam: SLO 15: Institution score on CHES Exam: Administer health education programs and interventions. SLO 15: Institution score on CHES Exam: Administer health education programs and interventions. SLO 16: Institution score on CHES Exam: Serve as a resource person for health information. SLO 17: Institution score on CHES Exam: Communicate needs for health SCORE Target Met) 2014-2015 Departmental Assessment Report (in ERF); in 2014-15, 100% of students met expectations in this area (SBP Target Met) 2014-15, 100% of students met expectations in this area (SBP Target Met) Score is higher that National Average Score) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target not met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target not met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target not met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target met)	SLO 9: PBHL 4972/4973 Internship	2014-2015 Departmental Assessment Report (in ERF);
SLO 10: PBHL 4972/4973 Final Site Supervisor Assessment of Intern's Performance Assessment Opportunity - Health Education Track SLO 11: Institution score on CHES Exam: Implement health education/promotion Interventions. SLO 13: Institution score on CHES Exam: Plan health education/promotion programs/interventions. SLO 14: Institution score on CHES Exam: NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target not met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target not met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target not met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target not met) NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target met)	Capstone Project	in 2014-15, 98% of students met expectations in this
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SLO 17: Institution score on CHES Exam: Communicate needs for health NCHEC CHES Exam Analysis by Major Report; 2014 Exam results (SBP Target met)	Serve as a resource person for health	Exam results (SBP Target met)
Communicate needs for health Exam results (SBP Target met)	information.	
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education/promotion services.	Communicate needs for health	Exam results (SBP Target met)
	education/promotion services.	

Beyond the Student Learning Outcome-specific assessment opportunities presented in Templates Q & R, the SBP engages in significant overall program assessment through a variety of additional assessment methodologies, presented in Table 13.

Table 13: Additiona	al SBP Program As	sessment Opportunities		
Assessment	Methodology	Population Assessed	Frequency	Who Assesses?
*Orientation Questionnaire	Questionnaire	Overall SBP	Annually	Junior students
*Holiday Party Focus Group	Focus Group	Overall SBP	Annually	All SBP students
NCHEC Competency Self- Assessment	Questionnaire	Health Education Students	Once in junior year and once in senior year	Health Education Students
Internship Site Interest Form	Questionnaire	Senior Students	Fall semester, senior year	Internship Site Coordinator
Internship Site Visit Rubric	Interview	Student Interns, Site Supervisor, Potential Employers	Spring semester, senior year	Internship Site Coordinator
Mid-Internship Evaluation Form	Questionnaire	Interns/Senior Students	Spring semester, senior year	Internship Site Supervisor
Final Internship Evaluation Form	Questionnaire	Interns/Senior Students	Spring semester, senior year	Internship Site Supervisor
Site Supervisor Assessment of NCHEC Areas of Responsibility	Questionnaire	Health Education Students	Spring semester, senior year	Internship Site Supervisor
Final Student Site Evaluation Form	Questionnaire	Internship Site and Internship Site Supervisor	Spring semester, senior year	Interns/Senior Students
Site Supervisor Breakfast	Focus Group	Interns/Senior Students	Spring semester, senior year	Internship Site Supervisor
*Alumni Survey	Online Survey	Overall SBP	Annually	Alumni

Note: * Asterisk denotes planned modifications of existing instruments or the development of new instruments based on engagement in the self-study process.

Health Education students are asked to engage in a self-assessment of the seven Areas of Responsibility and related competencies using the "Self-Assessment for Health Education Specialists: Perceived Competence" instrument (NCHEC, 2010) at two points during their course study – once in the junior year and again in the senior year. Results from this self-assessment provide valuable program assessment data to SBP faculty about student's perceptions of content that they have mastered and content with which they are struggling. These data are reviewed by SBP health education faculty and used to guide faculty in designing or modifying course content.

As displayed in the above table, a significant amount of student assessment and program assessment is done in the senior year during the internship placement using the following instruments:

• Internship Site Interest Form: This instrument is used by the Internship Site Coordinator as a tool to help match students to an appropriate internship site. Beyond that, the data derived from this form is used by SBP faculty to assess overall student interest in the various sub-fields of public health and their level of understanding of those sub-fields. The resultant data is discussed by the SBP faculty in terms of how to provide better exposure to the various areas of

- interest reported by students. Furthermore, these results assist the program faculty in identifying potential areas of interest that require greater coverage in course and extracurricular content. This form is found on page 26 of the Internship Manual, located in the ERF.
- Internship Site Visit Rubric: This instrument is used to assess the intern's performance and the suitability of the work being accomplished at the internship site. Beyond that, the site visit is used as an opportunity for the student intern to provide feedback about the SBP, particularly with questions such as "What courses are/were relevant to your internship experience and why?" and "What topics do you think are needed for internship preparation that you did not have?" Furthermore, Internship Site Supervisors are asked to assess the SBP through questions such as "What skills sets or content areas would you like to see more of in a student intern?" and "Do you have any suggested improvements to the overall internship program?" Data collected from the site visit is used by program faculty to improve the curricula and overall SBP experience. A copy of this instrument is located in the ERF.
- Mid-Internship and Final Internship Evaluation Forms: These forms are completed by the
 Internship Site Supervisor and are primarily used to assess the student's performance at the
 internship. However, data collected using these forms also provide important information on
 the performance of the SBP in terms of how well students are prepared to meet the
 expectations of both the program and those of the respective internship site. These forms are
 found on page 33 and page 35 of the Internship Manual, located in the ERF.
- Site Supervisor Assessment of NCHEC Areas of Responsibility: This instrument is a direct assessment of the strengths and weaknesses of our health education track. It is completed by the health education internship site supervisors. In addition to asking the ISSs to rank student's level of preparation in each of the NCHEC Areas of Responsibility, the instrument asks programmatic assessment questions such as "Based on your observations this semester, what are the strengths/weaknesses of our professional preparation program in Health Education? and "Any suggestions for improvement?" A copy of this instrument is located in the ERF.
- Final Student Site Evaluation Form: After completing the internship placement, students are asked to assess the site at which they were placed using this instrument, which collects data about their overall satisfaction with the site, as well as various ratings related to their experience. Furthermore, the SBP is assessed in questions such as "How did you site support you in your learning?" and "What were some of the challenges to learning that you faced while at your site?" Answers to these questions allow SBP faculty to assess student learning and the student's ability to think critically about what they have learned and how it is applied in a public health setting. This form is found on page 37 of the Internship Manual, located in the ERF.

At the conclusion of the internship program each spring, all Internship Site Supervisors are invited to campus for a breakfast and focus group. A copy of the **Internship Site Supervisor Focus Group Protocol** is found in the ERF. Each question asked in the focus group provides a direct assessment of some aspect of the SBP. Areas of strength and areas for improvement are identified each year, and results are used by faculty to improve the SBP.

Each May, the Department Recruitment and Alumni Relations Committee sends out an **Alumni Survey** to all graduates of the SBP from the year before to collect information about job and graduate school placement. Presently these are the only data collected in this online survey. As a result of this self-study, the program faculty plans to expand the questions on this instrument to include items that will assess the overall program, the curricula, faculty, and effectiveness in preparing individual to pursue a career in public health or graduate education.

Data are also collected informally from alumni in several ways. Many faculty maintain professional relationships with alumni, or professional research partnerships with former students. Other faculty participate in regional and national professional associations where they maintain professional relationships with alumni. The SBP maintains a strong presence on social media, including Facebook and LinkedIn, and connections are maintained with alumni in this manner as well.

The SBP also initiated in 2015 an Outstanding Alumni Award, and recipients of this distinction (three in the first year) have been used to gather feedback about the program. The SBP plans to continue to recognize alumni in this way and use this group as a de-facto external advisory board for the program.

While the above are qualitative in nature, and do not represent planned or regular forms of program assessment, program faculty feel strongly that feedback received through these channels is both valuable and meaningful.

Finally, this self-study process clearly identified an area of needed improvement in the SBP's overall assessment plan. While we do a great deal of program assessment in the final year of study, very little assessment in done during the junior year, which generally represents a student's first full year of study in Public Health. As a result, SBP faculty plan to develop two new opportunities for assessment in the early portion of the program.

First, a questionnaire will be distributed at the SBP orientation program of which attendance is required of every new student in each September cohort. This instrument will assess several features of the program, including: promotional materials, ease of navigating the declaration or change of major process, preliminary program advisement, experience in any SBP coursework completed to date, and perceived strengths and weaknesses of the program. Furthermore, this instrument will be used to gauge student's understanding of SBP requirements, including the internship experience, areas of interest, career aspirations, among others.

A second new instrument will be developed (a focus group protocol) to be used during the program's annual holiday party, at which program faculty will have the opportunity to question a wide range of students enrolled in the program about issues directly related to the quality of the program and curricula. The program faculty expect to initiate these two new forms of assessment in the 20162017 academic year.

5.5 The program collects quantitative data at least annually on 1) graduation rates within the maximum time to graduation allowed by the institution and 2) rates of job placement or continued education within one year of graduation. The program defines plans, including data sources and methodologies, for collecting these data, identifies limitations and continually works to address data limitations and improve data accuracy. The program's plan does not rely exclusively on institution or unit-collected data, unless those data are sufficiently detailed and descriptive.

Program response to 5.5:

Graduation Rates:

The University defines "expected to graduate" with the following definition of <u>Time Limit for Degree</u>: "A baccalaureate degree must be completed within a period of ten years from the time the student first matriculated."

While WPU has been training public health educators for several decades, the SBP in its current form (with two separate tracks) is a relatively new modification of this longstanding health education program. The first group of students to graduate from this new SBP graduated in Spring 2013. Prior to this class, all previous classes had graduated with a BS in Community Health Education (which still exists as our current Health Education track).

As stated previously, students in the SBP move through the program as a cohort which begins in the fall semester of their junior year when they enroll in PBHL 3040: Health Research Methods 1 – enrollment in this course signifies that the student has begun the "major core course sequence." The program is structured such that full-time students will complete all of their major course requirements, including the internship experience, by the end of the fourth semester, and thus graduate at the end of the spring semester of their second year enrolled in the major core course sequence. Because the internship is a spring-only experience, students are set to graduate from the Public Health degree program at the end of the spring semester.

Using the cohort model described above, the SBP collects and maintains data reflecting departmental graduation rates of students according to their cohort. At the point of entry into the annual "Junior Year" cohort, each student registered for PBHL 3040 is entered into an Excel retention database and degree progress is tracked by the Department Chairperson who records each successive semester that is successfully completed, or the reasons for non-completion. Graduation rate data using this methodology are found in Table 14 for the past three cohorts (academic years).

Table 14: Two-Year and Three-Year Cohort Graduation Rates

Degree Sought	2011-13 Cohort	2012-14 Cohort	2013-2015 Cohort
# at Entry (PBHL 3040)	37	36	67
# at Exit (Graduated in 2 years)	31	26	60
2 Year Graduation rate	84%	72%	90%
# 1-year delayed (Graduated in 3 years)	+4 = 35	+6 = 32	n/a
3 Year Graduation rate	95%	89%	n/a

A small number of our students (no more than 5 annually) are part-time status and, as such, are not expected to graduate in the typical two-year model along with those students in their initially designated cohort.

Job Placement/Continued Education Rates:

Job placement data are collected annually by the SBP's Recruitment and Alumni Relations Committee via online survey. Permanent email addresses are collected as part of each student's final evaluation of their internship experience. These email addresses are loaded into an Excel database and used to maintain contact with program alumni. Approximately 11 months after graduation, students are sent this online survey. Non-respondents are contacted three weeks after the online survey distribution via personal email by the Department Chairperson (this methodology yields the greatest number of responses each year). Response rates for the one-year post-graduation survey have been strong for the past several years (74-81% response rates), as shown in Template S.

Template S				
Destination of Graduates by Employment Type	Job Placement/Further Education Rate by Graduating Class			
	Class of 2012	Class of 2013	Class of 2014	
Employed	16 (62%)	15 (48%)	16 (62%)	
Continuing education/training (not employed)	5 (19%)	7 (23%)	3 (12%)	
Actively seeking employment	0 (0%)	1 (3%)	1 (4%)	
Not seeking employment (not employed and not continuing education/training, by choice)	0 (0%)	0 (0%)	1 (4%)	
Unknown	5 (19%)	8 (26%)	5 (19%)	
Total	26	31	26	
Response Rate	81%	74%	81%	
% of Respondents Employed or Continuing Education	100%	96%	90%	

5.6 The program collects qualitative data on the destination of graduates related to both employment and further education, such as type of graduate degree pursued and sector of employment, as defined by the program.

Program response to 5.6:

The SBP maintains contact with a large number of students who graduate via personal contact and social media (the SBP maintains active alumni pages on both Facebook and LinkedIn), and therefore there is a rich set of data about the destination of graduates from the program, as displayed in Template T. These data are used to follow the successes of our graduates as well as highlight their achievements on our website Alumni Profile Page so that current and prospective students may learn about potential career pathways and opportunities for furthering their education.

Template T	
Types of Employment Graduates Pursue	Types of Further Education Graduates Pursue
Non-profit: Public Health Solutions, Urban League, National Cancer Institute, Partners for Prevention, Americorps, Alzheimer's Association, American Cancer Society, Partnership for Maternal and Child Health Consortium, Health Barn	MPH (health education, environmental health, biostatistics, urban health, MCH, global health, epidemiology)
Business/For Profit: Chartwell Pharmaceutical, Bayer Health Services, Endo Pharmaceutical, TKL Research, Verizon Wireless, Maxim Healthcare, Sunovion Pharmaceutical	RN, BSN, NP
Hospital: Robert Wood Johnson University Hospital, Hackensack University Medical Center, Montefiore Medical Center, Atlantic Healthcare System, St. Claire's Hospital	MA/MS (social work, counseling psychology, health communication, clinical research)
Municipal Health Department: Englewood Health Department, City of Passaic Division of Health, Pequanock Health Department, Morris Township Health Department	MPA, MBA, MPHA (health administration, health services administration, management)
County Health Department: Bergen County Health Department, Burlington County Health Department, Passaic County Health Department	Medical School, Physical Therapy and Occupational Therapy School
State and Federal Government: OSHA, CDC, NIH	

5.7 The program demonstrates that at least 70% of students for whom data are available graduate within six years or the maximum time to graduation as defined by the institution, whichever is longer. The program demonstrates that at least 80% of graduates for whom data are available have secured employment or enrolled in further education within one year of graduation. Data collection methods for graduates' destinations are sufficient to ensure at least a 30% response rate. If the program cannot demonstrate that it meets these thresholds, the program must document 1) that its rates are comparable to similar baccalaureate programs in the home unit (typically a school or college) and 2) a detailed analysis of factors contributing to the reduced rate and a specific plan for future improvement that is based on this analysis.

Program response to 5.7:

As illustrated in Table 14, the two-year graduation rate for the last three cohorts of Public Health majors has ranged between 72% and 90%. The three year graduation rate has been between 89% and 95%. Each cohort graduation rate at the 2-year graduation point has been above the 70% threshold defined by CEPH.

As illustrated in Template S, response rates for the 1-year post graduation survey of alumni have been between 74% and 81%, far exceeding the minimum threshold of 30% as set by CEPH. Of those graduates for whom data are available from the past three cohorts, between 90% and 100% of alumni have secured employment or have enrolled in further education within one year of graduation.

5.8 The program establishes a schedule for reviewing data on student outcomes.

Program response to 5.8:

Performance data regarding student outcomes is regularly reviewed by program faculty according to the established timeline specified in the SBP By-laws (p. 7), which state:

- The Assessment Committee shall oversee all assessment activities, collect, and analyze assessment data from the faculty on an annual basis consistent with the Department's published Assessment plan.
- The Assessment Committee shall review data on student outcomes on a regular basis, minimally at least once a semester.
- The Assessment Committee shall present student learning outcomes data to the Faculty Council, minimally at least once annually at the Department Retreat held in May.
- The Assessment Committee shall prepare an annual assessment report for the College Assessment Committee.

The Assessment Committee, as described previously, is composed of a volunteer subset of program faculty, in accordance with departmental by-laws which state "...the committee shall consist of any voting member of the Faculty Council. The committee shall consist of at least two full-time faculty members." Departmental committee membership is voluntary, however the DPH has a strong history of collegiality, and filling positions on committees in a fair and equitable manner has never been an issue. Due to the large amount of assessment conducted during the internship, the Internship Site Coordinator is also a member of the Assessment Committee.

The Assessment Committee meets at least once each semester to review the program Assessment Plan, review assessment data collected up to that point, and plan for the collection of assessment data for the following semester. The Assessment Committee, beginning in April of each year, requests assessment data from program faculty regarding the assessment of program-level SLOs that are assessed through coursework. In May, the Assessment Committee receives data from the senior-year assessment done during the internship from the Internship Coordinator. Also in May, results for the CHES exam are sent to the SBP from NCHEC for review.

In May, all assessment data for the year are reviewed again by the Assessment Committee, and the Department Assessment Report, which includes the assessment of the SBP, is drafted by the committee. The committee finalizes the report, which is then shared with the Faculty Council at the May Faculty Retreat and with the College Dean.

At the May Faculty Council Retreat, assessment data are reviewed and discussed with the program faculty. Suggestions for enhancing program strengths and ideas for addressing areas needing improvement are discussed.

Evidence of the program's regular review of data on student outcomes is presented in the ERF in the form of Assessment Committee Minutes, Faculty Council Minutes, and past Department Annual Assessment Reports.

5.9 The program uses student and faculty assessment results to improve student learning and the program.

Program response to 5.9:

The SBP uses the results from assessment activities to improve student learning and the program. As the Annual Department Assessment Report is prepared at the end of each academic year, SBP program faculty are encouraged to critically analyze the ways in which assessment data may be used to improve the program.

As described in the previous section, program assessment data are first reviewed by the Assessment Committee and then by the Faculty Council. This is done at least once annually (at the May retreat), but is also frequently discussed when needed at the monthly meetings of the Faculty Council. In fact it is an expectation that the Assessment Committee provide updates in the form of an official report at each meeting of the Faculty Council, and at the January Retreat.

Assessment results are used by the program in an ongoing basis, and three recent examples of how the SBP has used assessment data to make improvements reflect this continuous quality improvement process:

- 1. Program and course-level assessment of content in the area of health disparities indicated a general deficiency within the SBP. In spring 2015, the faculty reviewed the ways in which program SLO 1 (Discuss the role of gender, race, ethnicity, and other evolving demographics in affecting population health) was addressed in the curriculum. While the SLO had been measured as part of PBHL 3000 Introduction to Internship, student assessment data indicated that this area was not sufficiently covered. Therefore, the faculty decided to closely review this content area. This was accomplished as part of the CEPH self-study process whereby the content areas under CEPH Domain 5 (Determinants of Health) were mapped. The faculty determined that this domain was not covered sufficiently in the current program and PBHL 2950 Health Disparities (previously an elective course), which reflects core content from CEPH Domain 5, was added to the list of required major core courses. This was approved by the Faculty Council in May 2015, and will take effect in September 2016.
- 2. Earlier in this document a description of the University's Writing Intensive and Technology Intensive course requirements was presented. These requirements were instituted at the start of the 2012 academic year when the University transitioned from the previous General Education program to the UCC. Initially, the Department of Public Health offered no courses that met either of these designations. However, through carefully tracking and student assessment, it became apparent to faculty academic advisors in the department that the lack of ability for students to complete Writing Intensive and Technology Intensive courses in the major was impeding student progress through the major. Specific issues that arose when reviewing the program assessment data and student advising files included:
 - a. Students needing to take additional "free elective" courses outside of the SBP to meet these requirements, often resulting in semesters where students were carrying 17+ credits in order to meet their program requirements,
 - b. Students needing to register for summer and/or winter courses to stay on track for timely graduation (and the related financial burden that this places on students), and
 - c. Students exceeding the minimum number of 120 credits required for graduation because of the lack of options for courses in these two areas within the SBP.

As a result, several exiting courses within the SBP were modified and submitted for approval for designation as either a Writing Intensive course (PBHL 3040, PBHL 3170, and PBHL 4950) or a

- Technology Intensive course (PBHL 3042, PBHL 3610, and PBHL 4301). As a result, each of these courses satisfies two program requirements for students enrolled in the SBP.
- 3. Course assessment data for PBHL 3750 Human Disease revealed, year after year, that students had difficulty mastering the content covered in this course. Faculty teaching this course implemented many strategies group review sessions, individual tutoring sessions, assignment redesign, changing the number and frequency of objective assessments (exams and quizzes) all to no avail. In 2014, the Department Chairperson interviewed students individually and in groups (both students who had struggled in the course and students who excelled in the course) and a small group of alumni about their experiences with this course. Several themes emerged around course content, instruction, and the individual assessments that were assigned in the course. These data were used as a basis to refocus this course from one that covered heavily the biological aspects of human health and disease, to one that provided a greater balance of biological concepts and public health disease perspectives. The course was first offered in this format in Spring 2015, and student assessment data indicated that the changes were successful as both the course Student Learning Outcomes, as well as the related program-level SLO had reached the highest measure of success for this course in many years.

5.10 The program regularly evaluates its mission and expected student outcomes to ensure their continuing relevance.

Program response to 5.10:

As stated in the SBP By-laws (p. 1), "the Department mission statement, department objectives, program mission statements, and program student learning outcomes are reviewed on a regular basis, minimally at least once annually at the Department Retreat held in May." This is done in conjunction with the annual review of program and course assessment data. Evidence of this regular review is presented in the ERF in the form of Faculty Council meeting minutes.

5.11 The program maintains clear, publicly available policies on student grievances or complaints and maintains records on the aggregate number of complaints received for the last three years.

Program response to 5.11:

Student grievances and complaints are addressed by following the University's Procedures for Investigating Complaints about Grades or Student Academic Performance. A copy of this grievance procedure is given to the student when further action is needed. Students have the right to contact the Department Chairperson to express their grievances. If the student decides to pursue the grievance beyond the level of the Department Chairperson, the student is asked to put their grievance in writing. The written grievance is then brought to a scheduled Faculty Council meeting where members read and discuss the grievance and recommendations are made.

Formal complaints are defined as students' grievances that are not resolved by the course faculty or Department Chairperson. In the past three years, no formal grievances have been submitted to the SBP Faculty Council.

6.0 Advising

6.1 Students are advised by program faculty (as defined in Criterion 2.1) or qualified program staff beginning no later than the semester (quarter, trimester, term, etc.) during which students begin coursework in the major and continuing through program completion

Program response to 6.1:

As presented earlier in this document, at WPU advising is a shared responsibility between professional advisors (both within the <u>Gloria S. William Advisement Center</u> and college-specific professional advisors), faculty advisors and students.

Every student with fewer than 30 earned academic credits hours is assigned a professional advisor based on his or her major. Professional advisors assist students with transitional issues and help them develop a plan for their collegiate experiences. The COSH professional advisor provides advisement to all first-year student enrolled in the SBP. The COSH professional advisor works closely with the Department Chairperson to make certain that first year students enroll in the correct coursework (particularly the three pre-requisite courses), understand the program's internship requirements, and are clear about the field and profession of public health.

Students are assigned a faculty advisor from among the full-time SBP faculty after he or she is declared and has earned 30 credit hours. Therefore, all SBP majors are advised by program faculty before or by the time they begin the major core course sequence in their junior year. Faculty advisors assist students with specific issues in their major and help students understand industry expectations.

The SBP has a well-established, student-centered academic advising system for:

- 1. Declared Public Health majors who have over 30 earned academic credit hours,
- 2. Transitional students defined as students who have expressed interest in declaring the Public Health major (or who have unsuccessfully applied for a change of major). Generally these students remain in this category until they have completed the pre-requisite courses for admission into the program, and
- Incoming transfer students from external institutions of higher education, including the five New Jersey Community Colleges with whom we have established program Articulation Agreements.

The Department Chairperson oversees all departmental advising and works closely with individual faculty advisors to ensure that students are working toward the timely completion of their degree. The Department Chairperson assumes all advising responsibilities during the months of July and August when faculty are not on contract.

All transitional students, defined above, and incoming transfer students are advised by the Department Chairperson until such time that they apply and are accepted into the SBP. The Department Chairperson maintains a database of these students and meets with them at least once per semester, and more frequently when needed.

Declared students are assigned to a SBP faculty advisor only after having an initial meeting with the Department Chairperson. The Department Chairperson meets with every new student at least once in order to:

- Ensure that the student has selected the correct major and track from among the SBP's offerings,
- Make certain that the student understands the program requirements, including the internship requirement and related expectations about travel, outside employment, and professionalism,
- Review courses taken to date, completed and outstanding academic requirements, University graduation requirements, and elective options for program completion,
- Develop a tentative, semester-by-semester academic plan for the remainder of the student's time at WPU,
- Establish the student's departmental file and identify the student's cohort (i.e. expected graduation semester),
- Review academic standing, past academic performance, and academic probation status,
- Explore the student's interest in public health and potential career pathways, and
- Answer any questions that the student may have about the degree, the internship, or the field
 of public health more generally.

Advisors are trained by the Department Chairperson using a procedural checklist developed by the SBP. New faculty advisors shadow the Department Chairperson during advisement sessions. Once the new faculty advisor begins meeting with his/her own students, the Department Chairperson observes advising sessions and answers questions when they arise. The Department Chairperson holds a meeting of faculty advisors at least once per semester to discuss emergent issues, share strategies for advisement, and review recent cases illustrating advisement challenges.

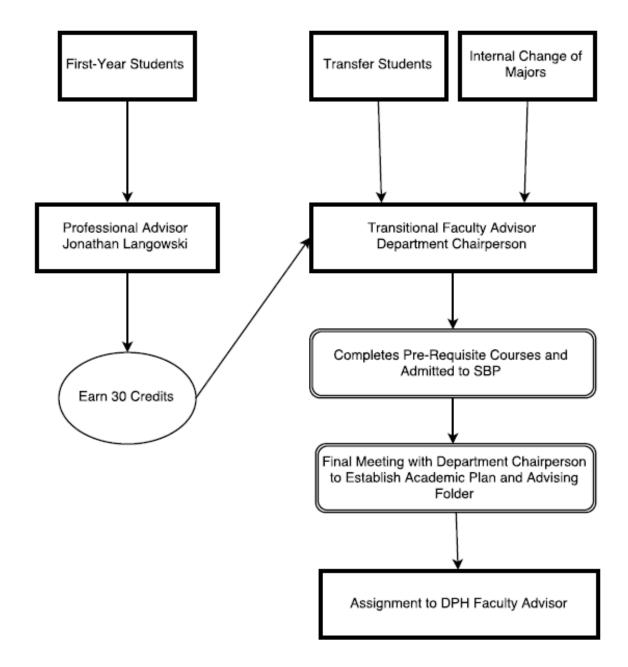
Faculty advisors are expected to meet, in person, with their advisees at least once per semester, and more often when indicated. These meetings take place in the faculty member's office. Each advisee requires a unique six-digit number in order to register for courses for the following semester. This number changes each semester and acts as an incentive for students to schedule a meeting with their advisor as the advisor is the only individual who may issue this number to the student. These registration numbers are not issued via phone or email in the SBP.

Faculty advisors are asked to update their advisee's departmental file during each advising session and enter a written summary of their advising session in the Advisement Notes software program, which acts as a record of every contact that the faculty advisor has had with the advisee. Advisement Notes is visible to the advisee so that he/she may review what transpired at the advising session.

Students may change advisors by contacting the Department Chairperson to request a change.

Figure 7 presents a visual representation of how students move through the advisement system at WPU and in the SBP.

Figure 7: SBP Advising Flowchart



The University does not have an established system for monitoring student satisfaction with faculty advising, nor does it require it. Based on this CEPH accreditation requirement, student satisfaction with advising in the SBP was first measured during the 2014-2015 academic year using a written questionnaire (found in the ERF) distributed to students in their Health Research Methods course, Public Health Practice course, or Program Planning course after registration advisement had ended for the year (because of the cohort model, distribution of the instrument in these courses ensures that we gather data from all declared students who are advised by PBHL faculty advisors; however, this methodology does not assess satisfaction with the first year students being advised by the professional advisor).

Data from the most recent year are available and indicate overall student satisfaction with faculty advising, as well as areas for future growth and improvement, which include the inclusion of more discussion about educational goals into the advising session, as well as continued, and perhaps greater, emphasis on career guidance. Advising satisfaction data will continue to be collected on an annual basis. These assessment data will be included in the SBP's year-end assessment report and recommendations for improvements and changes will be made based on the reported results.

Table 15: Student Satisfaction with SBP Faculty Advising, 2014-2015 Results

My Advisor	Score ¹
Provides me with accurate information.	3.23
Helps me understand UCC requirements.	3.31
Helps me understand requirements in my major.	3.32
Assists me with course selection.	3.24
Helps me plan multi-year course sequence.	3.26
Discusses my educational goals.	3.01
¹ Based on a four point scale, with 1 being 'Strongly Disagree' and 4 being 'Strongly Agree' N=147 students	

Table 16: Student Feedback about SBP Faculty Advising, 2014-2015 Results

What I want most from my faculty advisor is	%
Information on what courses to take	69%
Guidance toward a career after graduation 78%	
To make a connection with faculty	
Advice about my academic performance	56%
Just my ALT/PIN number	31%

7.0 Diversity

7.1 The program demonstrates a commitment to diversity and provides evidence of an ongoing practice of cultural competence in student learning. Aspects of diversity may include, but are not limited to, age, country of birth, disability, ethnicity, gender, gender identity and expression, language, national origin, race, 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 context, refers to skills for working with diverse individuals and communities in ways that are appropriate and responsive to relevant cultural factors. Requisite skills include self-awareness, open-minded inquiry and assessment and the ability to recognize and adapt to cultural differences. Reflecting on the public health context, recognizing that cultural differences affect all aspects of health and health systems, cultural competence refers to the skills for recognizing and adapting to cultural differences. Each program defines these terms in its own context. Programs can accomplish these aims through a variety of practices including the following: incorporation of diversity and cultural competency considerations in the curriculum; recruitment/retention of faculty, staff and students; and reflection in the types of research and/or community engagement conducted.

Program response to 7.1:

WPU has a long history in its general education curriculum of helping students address diversity and become more culturally competent/sensitive. As mentioned previously, the current <u>University Core Curriculum (UCC)</u> includes three themed areas that build on foundational principles and help students develop more in this area. Students elect one course for each area. Selections may also come from their major discipline and be counted toward the major and/or minor.

Each of these three areas addresses issues of diversity from different perspectives:

- UCC Area 4 Diversity and Justice focuses on "challenges of difference, equality and justice."
 - o All SBP students are required to take PBHL 2950: Disparities in Health. Therefore, this requirement is met by a required major core course.
- UCC Area 5 Community and Civic Engagement helps students explore "ideas and possibilities of community and participating effectively as responsible citizens."
 - While students may elect to fulfill this requirement by taking any University-approved Community and Civic Engagement course, the SBP offers several elective options, including: PBHL 3140 Reproductive Rights, PBHL 3150 Food and Community, and PBHL 3180 Tobacco as a Public Health Issue.
- UCC Area 6 Global Awareness encourages students to examine "local, regional and global connectivities, possibilities and limits."
 - While students may elect to fulfill this requirement by taking any University-approved Global Awareness course, the SBP offers PBHL 3110 Global Health Issues as an elective course option.

Once students are accepted to the SBP, they have the opportunity to continue developing cultural competence through interactions with classmates, faculty, course content, and related experiences.

The SBP is committed to helping majors examine diversity and culture throughout its required course offerings. All students take courses within the major core where data, discussion, and research topics are selected where appropriate to address diversity. These courses include, among others, PBHL 2950 Disparities in Health; PBHL 3020 Health Care in the US; PBHL 3610 Methods in Public Health Education; PBHL 4000 Epidemiology; PBHL 4301 Public Health Practice; and PBHL Program Planning. An examination of the topical course outlines for these courses demonstrates the ways in which issues of diversity are infused into these courses.

Furthermore, students have opportunities to select major electives where themes of diversity and a goal of expanding cultural competence/sensitivity are embedded into the course experience. These course include PBHL 2100 Women's Health; PBHL 3130 Violence as a Public Health Issue; PBHL 3140 Reproductive Rights; PBHL 3150 Food and Community; PBHL 3220 Food and Social Issues; and PBHL 2900 Human Sexuality.

The major elective PBHL 4950 Cultural Dimensions of Health is intentionally designed to examine the role of culture. "This course explores the relationship between culture and health behavior as a means of increasing cultural sensitivity and competence. The impact of cultural and religious beliefs and corresponding health practices on health promotion and disease prevention will be the focus."

The SBP faculty is comprised of eight full time faculty, and twenty-five adjunct faculty members. Collectively, this group represents many different types of diversity, including: representations of different racial, ethnic and socioeconomic backgrounds, members of the lesbian, gay, bisexual and transgender communities, different faith perspectives, ages, abilities, and countries of origin. Multiple faculty members are also bilingual and collectively represent many different cultural backgrounds. In addition to the faculty within the SBP, students also engage with diverse faculty across the campus as illustrated in the 2014-2015 WPU Fact Book (see tables 5.1, 5.2, 5.3 and 5.6, located in the ERF)

Students develop skills to recognize and adapt to cultural differences when conducting research and engaging with community members through the curriculum and in their field placement experiences during their required internships. The research course sequence (PBHL 3040 and 3042) uses multiple case studies to explore the historical issues related to violations of the protection of human subjects in research, and these often involved the inclusion of minority, underserved, and marginalized populations. Furthermore, in the research courses, students are challenged to think about the ways in which issues of diversity and multiculturalism could and do impact the research process.

Skills to engage with diverse communities and community members are developed through the student's course of study, often beginning with the required UCC Area 5 course in Community and Civic Engagement. This training continues in the practice-based courses within the SBP (Methods of Public Health Education, Program Planning, and Public Health Practice), where students must, in nearly every project they complete, discuss how they plan to address diversity issues and plan for inclusion of all community members.

According to the <u>State of New Jersey Department of Health</u>, "New Jersey is a very racially and ethnically diverse state," in fact it is "one of the top three most diverse states in the United States with respect to racial/ethnic and foreign born population." This is critically important information relative to our required internship program, as the large majority (>98%) of our students complete their semester-long internship at an agency within the state of New Jersey. At these internship sites, students are exposed to a wide variety of diverse populations, from the people they work with to those whom the agencies

serve. It is for this reason, among others, that the SBP faculty believe it is essential that students have early and consistent exposure to issues of diversity, multiculturalism, tolerance, cultural sensitivity, and civic engagement.

The latest publication of <u>The New Jersey Association of State Colleges and Universities</u> provides comparisons of the nine state universities and colleges along a variety of measures. It does not, however, provide an analysis based on diversity factors.

U.S. News and World Reports creates a "<u>Diversity Index</u>" which examines racial and ethnic diversity, intended to inform incoming students of campus diversity; scoring is from 0-1 with best scores approaching "1." The 2014 data gave WPU a score of ".66." Ratings for nearby sister institutions included: Ramapo College ".45," Montclair State University ".61", New Jersey City State University ".72", and Kean University ".68."

The profile of the students in the SBP (see table 2.11 located in the ERF) illustrates that majors in the SBP have traditionally been diverse from a racial perspective, but skewed toward more females than males. The majority of program students are residents of northern N.J., with a smaller proportion from counties in central and southern N.J. and occasionally other states, especially New York. (See tables 2.5, 2.6, and 2.7 located in the ERF.) Table 4.6 (located in the ERF) illustrates the diversity of graduates by major.

William Paterson University has a long tradition of educating first-generation college students, many of immigrant parents, to become active and engaged citizens of our state and nation. As of the fall 2015 semester, WPU Hispanic enrollment comprises 27.4% of the student body, and because of the large proportion of Hispanic students, the University was recently officially designated as a <u>Hispanic-Serving Institution (HSI)</u>. This signifies that the University is diverse and reflects the external community which over the past decades has become increasingly Hispanic.

8.0 Distance Education Programs

Not Applicable – the SBP at WPU is not a distance education program.

Electronic Resource File Directory

1.0 Leadership, Management and Governance		
1.1 Organizational Description		
Academic Affairs Organizational Chart		
Department of Public Health By-Laws		
List of Other Degree Programs in the Department of Public Health		
PBHL Faculty Handbook 2015-2016		
Student Handbook 2015-2016		
University Governance Statement		
University Organizational Chart		
1.2 Administrative Autonomy		
AFT FT-PT 2011-2015 Union Agreement		
Department of Public Health By-Laws		
Roles and Responsibilities of the Department Chairperson		
University Governance Statement		
1.3 Designated Leader		
Curriculum Vitae of William Kernan, Designated Leader		
Department of Public Health By-Laws		
Roles and Responsibilities of the Department Chairperson		
1.4 Program Governance and Academic Policies		
Department Assessment Plan 2014-2019		
Department Assessment Report 2014-2015		
Department of Public Health By-Laws		
Rationale for FY16 Faculty Search – Annual Staffing Request		
University Governance Statement		
1.5 Faculty Interactions		
PBHL Faculty Handbook 2015-2016		
1.6 Accuracy and Currency of Program Catalogs and Bulletins		
2015-2016 BS in Public Health Education Curriculum Control Sheet		
2015-2016 BS in Public Health General Curriculum Control Sheet		
BS in Public Health – General Fact Sheet		
BS in Public Health – Health Education Fact Sheet		
Student Handbook 2015-2016		
2.0 Resources		
2.1 Sufficient Faculty Resources		

AFT FT-PT 2011-2015 Union Agreement
Department of Public Health By-Laws
Institutional Commitment Letter
Roles and Responsibilities of the Department Chairperson
2.2 Composition of Faculty
Curriculum Vitae of all Faculty Members Listed in Template B
2.3 Student Enrollment
Enrollment and Average Class Size – 2014-2015 Fact Book
2.4 Student Faculty Ratios
Highlights 2014, Student/Faculty Ratios – 2014-2015 Fact Book
2.5 Financial and Physical Resources
Project Description – New Academic Building
2.6 Academic Support Services
List of Academic Support Services
3.0 Faculty Qualifications
Curriculum Vitae of all Faculty Members Listed in Template B
3.2 Training and Experience of Designated Leader
Curriculum Vitae of William Kernan, Designated Leader
Department of Public Health By-Laws
Roles and Responsibilities of the Department Chairperson
3.3 Use of Practitioners in Instruction
3.4 Professional Development
List of Free or Low-Cost Professional Development Resources
3.5 Graduate Instructors (not applicable)
4.0 Curriculum
4.1 General Education Requirements
2015-2016 BS in Public Health Education Curriculum Control Sheet
2015-2016 BS in Public Health General Curriculum Control Sheet
4.2 Major Requirements
Syllabi and Course Outlines for all Courses
Internship Manual 2015-2016
NCHEC Areas of Responsibility Mapping Grid
4.3 Communication and Research Skills
E Total Containing Examples of Stadelle Work
Guidelines for Writing-Intensive Courses
Guidelines for Technology-Intensive Courses

	4.4 Cumulative and/or Experiential Activities
	Internship Manual 2015-2016
	Internship Site Selection Process Flowchart
	New Internship Timesheet Spring 2015
	4.5 Workforce Preparation, Continuing Education, and Lifelong Learning
	Internship Manual 2015-2016
5.0 Pro	ogram Effectiveness
	5.1 Mission Statements
	Department of Public Health By-Laws
	University Mission Statement
	College of Science and Health Mission Statement
	5.2 Student Learning Outcomes
	University and Department Mission Statement 5.3 Course Syllabi
	Syllabi and Course Outlines for all Courses
	5.4 Student Assessment Plan
	Department Assessment Plan 2014-2019
	Department Assessment Report 2014-2015
	BS in Public Health Program Assessment Results 2014-2015
	BS in Public Health Program Assessment Rubric
	Internship Manual 2015-2016
	Internship Site Supervisor Focus Group Protocol
	Internship Site Visit Rubric
	Site Supervisor Assessment of NCHEC Areas of Responsibility
	Survey Monkey Post Graduate Survey
	5.5 Graduation and Job Placement Rates
	Survey Monkey Post Graduate Survey
	5.6 Destinations of Graduates
	Survey Monkey Post Graduate Survey 5.7 Graduation and Job Placement Rates – Minimum Requirements
	5.8 Review of Student Outcomes Data
	Meeting Minutes as Evidence of Review of Program Assessment Results
	Department of Public Health By-Laws
	Department Assessment Report 2014-2015
	5.9 Use of Assessment Results for Program Improvement

Dep.	artment Assessment Report 2014-2015
BS ir	n Public Health Program Assessment Results 2014-2015
5.10 Periodic Re	eview of Mission and Student Learning Outcomes
Mee	eting Minutes as Evidence of Review of Program Missions and SLOs
l Univ	versity and Department Missions Statement Crosswalk
•	artment of Public Health By-Laws
	rievances
Perf	redures for Investigating Complaints about Grades or Student Academic ormance
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	of Advisement System
Advi	sor Meeting Agenda March 6, 2014
Advi	sor Meeting Agenda October 7, 2015
Dep	artment of Public Health Advising Procedures
•	artment of Public Health Advisement survey Fall 2015
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	Commitment to Diversity
	4-2015 Fact Book Table 2.5: Enrolled Students by County
■ 2014	4-2015 Fact Book Table 2.6: Number of Non-Resident Students
	4-2015 Fact Book Table 2.11: Ethnicity, race, and Gender of ergraduates
	4-2015 Fact Book Table 4.6: Students Graduating in 2015 by First Major, nicity, Race and Gender
	4-2015 Fact Book Table 5.1: Ethnicity, Race and Gender of Full-Time loyees by Job Category
2014 Emp	4-2015 Fact Book Table 5.2: Ethnicity, Race and Gender of New Full-Time loyees by Job Category
201 ₄ Emp	4-2015 Fact Book Table 5.3: Ethnicity, Race and Gender of Part-Time loyees by Job Category
Full-	4-2015 Fact Book Table 5.6: Degree, Gender, Ethnicity, Race, and Age of Time Faculty by Department
	4-2015 Fact Book Table 7: Top Countries of Origin of Non-Resident lents
	Hispanic Outlook Quarterly 26(1)
8.0 Distance Education	Programs (not applicable)