Over the past few years, The Department of Public Health has gone through several changes, including: a name change (the second since 2017); a physical move to a new building; the addition of a departmental honors program and an accelerated master’s program; two retirements; the addition of 2 new faculty members; a new college alignment; three new Deans; and most recently, a complete overhaul of the University-level major assessment process.  This assessment period includes data collected under both the old and the new assessment processes, and includes our initial steps into a more authentic, program-focused assessment process.

The model of assessment we are moving to will assess students over three different points in the curriculum (when they declare the major; after taking a 3000-level course; and near graduation), using 3 methods each time: a self-assessment, a faculty disposition/aptitude assessment, and specified assignments/projects completed as part of their coursework.   They will complete a self-assessment when they begin one of the 2000-level courses, then again after taking PUBH 3700, and finally, in their last term prior to graduation.  The self-assessment currently has only been administered during internship and post internship.

The PUBH faculty has been discussing the faculty assessment component for a number of years.  Currently, faculty sign off on each student’s portfolio prior to placing the student for their internship, and have the opportunity to provide feedback/commentary.  In practice, very few faculty provide any commentary, and there has been a growing concern that any faculty assessment needs to come much sooner in the student’s academic career in order to be of use.  We will be beta testing the new process in Fall 2021; review and modify the process during our Summer 2022 faculty retreat; and fully implement the new process in Fall 2022.

This assessment report is based on data collected primarily from the old assessment approach, and focuses on overall student performance on a variety of assignments that comprise the skills necessary for work in the field of public health.  We will use this data to identify areas of sub-par performance so that we can discuss the source of the problem. Specifically, initial discussion will focus on whether the “sub-par” performance is an artifact of the previous assessment methodology, or truly a reflection of student preparation/performance. Once we identify the source and nature of the issue, we will discuss any necessary curriculum and/or assessment process modification.

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| SLO(s) | UGL | Measures/Instruments Please include a clear description of the instrument including when and where it is administered | How is the information Used? (include target score(s), results, and report if target(s) were met/not met/partially met for each instrument) |
| Responsibility 1: Students will demonstrate proficiency in the assessment of needs, assets and capacity for health education by seeking and gathering data, information, and knowledge from experience, texts, graphics, and media. | CT | A) PUBH 4250- Planning Health Programs – *Program Proposal*. Students are expected to develop a program plan that logically integrates a rationale, timeline, objectives, interventions, evaluation methods, budget, and marketing. Students are evaluated using a rubric that assesses: Program Rationale, Statement of Need, Program Purpose, Goal, Objectives, Program Design and Implementation, Evaluation Plan, and Budget  B) Exit survey questions:  I learned how to use or develop data-gathering instruments (questionnaires, surveys, etc.) to gather information about the needs of a specific target group.  I was required to write a justification or rationale to communicate the need for, or importance of  a health education program, lesson, or class.  The Public Health program provided me with the necessary skills to develop goals and write measurable objectives for designing health education programs, lessons, or classes.  I feel confident in selecting educational methods, strategies, activities, or interventions appropriate for designing a variety of health education programs, lessons, or classes.  I understand the importance of monitoring and evaluating the progress of learners or participants in programs or lessons in order to update and revise objectives to meet the needs of the audience.  I can use data gathered to identify gaps between health status/problems and availability of health services to address those problems.  I know how to access and use computerized databases in the library to gather health information. | For all class assignments meeting criteria is 70%, exceeding criteria is 90%. The target is that 90% meet or exceed expectations.  A)  4/15 met expectations  11/15 exceeded expectations  **Target was met**.  B)  12/12 agreed  11/12 agreed  11/12 agreed  10/12 agreed  10/12 agreed  12/12 agreed  11/12 agreed |

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| Responsibility 2. Students will demonstrate the ability to prepare, deliver, and critically evaluate health presentations. | S and L | A) PUBH 4250- Planning Health Programs – *Program Proposal Presentation.* Students develop an ignite presentation on their program proposal.  B) Exit survey questions:  I had the opportunity to use instructional equipment and other instructional media such as Smartboards, videos, etc.  Classes in the Public Health program exposed me to evaluation methods and techniques that are available and could be used to evaluate programs, lessons, or classes.  I am able to present evaluation findings and results in the form of graphs and charts so others can easily understand it.    I am able to organize and facilitate meetings to bring together health agencies and organizations for the purpose of promoting mutual health interests.  I can select and evaluate effective health education resource materials. | A)  15/15 exceeded expectations  **Target was met**.  B)  10/12 agreed  11/12 agreed  12/12 agreed  10/12 agreed  12/12 agreed |
| Responsibility 3. Students will demonstrate proficiency in implementing health education by engaging with diverse ideas, individuals, groups, and cultures (Responsible Citizens) |  | A) PUBH 2270 Community Health - *Global Community Health Project*. Students are expected to investigate a current leading cause of death in countries around the world and comparing those efforts to those in the U.S.  B) Exit Survey questions:  I can identify factors (knowledge, attitudes, values, beliefs) that influence health-related behaviors.  I feel confident in selecting educational methods, strategies, activities, or interventions appropriate for designing a variety of health education programs, lessons, or classes.  I can select methods and media best suited for specific learners such as children, the elderly, and special needs populations. | A)  1/25 did not meet  8/19 met  16/19 exceeded  **Target was met.**  12/12 agreed  10/12 agreed  12/12 agreed |
| Responsibility 4. Students will demonstrate proficiency in producing, analyzing, interpreting, and evaluating quantitative material when conducting evaluation and research related to health education | QR | A) PUBH 3765 Principles of Epidemiology - *Investigative Paper-* Students are expected to report their individual and literature based research in the form of descriptive epidemiology. They are evaluated on their writing, graphs, and tables.  B) PUBH 2800:Research Methods 1 **-***Lit Review and Research Proposal-* students are expected to write a literature review and research proposal on an approved health-related topic.  C) Exit Survey questions:  I am able to use information gathered from surveys or questionnaires for the purpose of developing a program, class, or lesson to address the health needs of a particular group.  I understand how to assess learners' knowledge, skills, and attitudes by pretesting.  I was exposed to basic statistical methods for the purpose of analyzing data collected.  I received specific experiences and practice in designing instruments (i.e. test) or methods (i.e. surveys) for the purpose of evaluating the effectiveness of health education programs, classes, or lessons.  I can use data gathered to identify gaps between health status/problems and availability of health services to address those problems. | A) 12/12 exceeded expectations.  B)  3/11 met expectations  8/11 exceeded expectations  **Target was met**.  C)  11/12 agreed  11/12 agreed  11/12 agreed  12/12 agreed  12/12 agreed |
| Responsibility 5. Students will demonstrate the ability to question, examine, evaluate, and respond to problems or arguments in administering and managing health education programs. | CT | A) PUBH 4770 –Health Services Administration – *Interviews-* the students are expected to create interview questions, effectively interview "candidate" and make hiring recommendations**.**  B) PUBH 4770: Problem Solving Activity. Students are given a list of administrative problems and are expected to work in teams to address each using designated steps.  C) Exit survey questions:  I have been exposed to information concerning communication issues that are likely to arise in situations dealing with health education.  I am able to organize and facilitate meetings to bring together health agencies and organizations for the purpose of promoting mutual health interests.  I was exposed to controversial issues in the health field and had opportunities in classes to give my opinions and views on the issues. | A)  5/15 met expectations  10/15 exceeded  B)  5/15 met expectations  10/15 exceeded  **Target was met.**  C)  12/12 agreed  9/12 agreed  11/12 agreed |
| Responsibility 6. Students will demonstrate proficiency in making informed decisions based on knowledge of the physical and natural world and human history and culture when serving as a health education resource person. | RS | A) PUBH 2700 -Marketing Concepts for Health Promotion Professionals – *Final Marketing Plan.* Students are expected to create an innovative way to deliver a message that will encourage the recipients to make a voluntary health habit change/improvement/or increase awareness that is related to the selected topic  B) PUB H 4770- Health Services Administration- *Policy Briefs*- the students prepare a quality policy brief for "targeted policy makers" or "stakeholders" on an approved health policy.  C) PUBH 3700- Health Behavior Theory- *Behavior Change Project-*students are expected to analyze and discuss what they learned from the experience of attempting a behavior change that includes: expectations, a literature review, operational definition, risk factors, protective factors, reflection, etc.  D) PUBH 4910-Applied Health Communication- *Social Media Messages-* Students are expected develop a series of social media messages related to a health topic of their choice that is appropriate for a chosen audience and follows the rubric and instructions for creating messages with originality and creativity as well as participation in discussions for peer evaluation within the assignment timeframe  E) Exit survey questions:  I can identify factors (knowledge, attitudes, values, beliefs) that influence health-related  behaviors.  I learned how to use or develop data-gathering  instruments (questionnaires, surveys,  etc.) to gather information about the needs of a specific target group. | A)  1/6 did not meet  4/6 met  1/6 exceeded  **Target was not met.**  B)  1/15 did not meet  7/15 met  7/15 exceeded  **Target was met.**  C) 18/20 met expectations  2/20 exceeded  **Target was met.**  D)  3 students did not meet expectations  5/12 students met expectations  4/12 exceeded expectations  **Target was not met.**  E)  12/12 agreed  12/12 agreed |
| Responsibility 7. Students will demonstrate proficiency in communicating, promoting and advocating for health education and the profession by creating documents appropriate for specific audiences, purposes, genres, disciplines, and professions. | WCR | A) PUBH 4910- Applied Health Communication- *Social Media Messages-* Students are expected to develop a series of social media messages related to a health topic of their choice that is appropriate for a chosen audience and follows the rubric and instructions for creating messages with originality and creativity as well as participation in discussions for peer evaluation within the assignment timeframe.  B) PUB H 4770- Health Services Administration- *Policy Briefs*- the students are expected to prepare a quality policy brief for "targeted policy makers" or "stakeholders" on an approved health policy  C)PUBH 2700- *Social Marketing Plan*-Students are expected to work in small groups to analyze an audience and health topic using social marketing principles. A written paper is submitted and summary of findings are orally presented to class.  D) Exit Survey questions:  I understand the concept of consulting (providing assistance to those requesting help) for health educators.  I can effectively respond to requests for health information and make appropriate referrals when necessary.  Course work taken in the Public Health program adequately covered the history, theories, and philosophy of the health education discipline. | A)  3/12 students did not meet expectations  5/12 students met expectations  4/12 exceeded expectations  **Target was not met**  B)  1/15 did not meet  7/15 met  7/15 exceeded  **Target was met.**  C)  1/4 did not meet expectations  3/4 exceeded expectations  **Target was not met.**  D)  12/12 agreed  10/12 agreed  12/12 agreed |
| Students will demonstrate confidence and proficiency in performing skills needed to practice health education, |  | A) Intern Evaluations completed by the Intern Preceptor at the completion of internship.  B) Exit Survey Questions:  I had practice using planning methods or timetables (PERT charts, timelines, curriculum plans) in developing health education programs, lessons, or classes  The Public Health program provided me with the necessary skills to develop goals and write measurable objectives for designing health education programs, lessons, or classes.  I had the opportunity to use instructional equipment and other instructional media such as Smartboards, videos, etc.  I know how to access and use computerized databases in the library to gather health information.  I can interpret information from health care providers and convey it in easily understood terms for consumers. | A) All final evaluations were completed and were positive.  10/12 agreed  11/12 agreed  10/12 agreed  11/12 agreed  11/12 agreed |

For all class assignments scoring a 70% or better is considered meeting expectations, and our targets are that 90% or more meet expectations. For some assignments when students do not meet expectations, there is typically another opportunity for the student to meet the expectation. 1) Many of our assignments build on each other (Intro, Chapter 4, etc.), so if they do not meet expectations in the mini section, they have the opportunity to get feedback and improve on the final project or paper. 2) If the student does not meet expectations for an assignment that is to be included in the portfolio, they have to review the instructor’s feedback, and make changes to the assignment until they meet expectations.

**Improvements and Changes Based on Assessment**

1. **Provide a short summary (1-2 paragraphs or bullets) of any curricular actions (revisions, additions, and so on) that were approved over the past two years as a result of reflecting on the student learning outcomes data.**

As indicated in our opening discussion, the Department has experienced a number of changes over the past 2 years, both internal and external. This has led to incremental changes to our curricular focus as we adapted to meet our students’ current educational and future professional needs.

* We have stopped teaching American Red Cross certification courses.
  + American Heart Association has become the professional standard for this training, and computerized mannikins with biofeedback units are now required. We have a regional AHA training unit based at our regional hospital system partner, and students are able to complete that training in a far more affordable way through them. This coupled with the retirement of our last certified instructor led to the decision to channel department resources in a different direction.
* The Department name has changed once again, from Health Promotion to Public Health, which aligns with the change in accrediting bodies in the discipline (CEPH). While we do not intend to seek CEPH accreditation because it is prohibitively expensive, we do plan to keep our curriculum in alignment with accreditation standards.
* The Research Methods courses have been completely revised.
  + Research Methods II has been moved to the elective list. It is an advanced course in which students conduct a small research study. Many of our students will not need to conduct research in their professions, so we have moved this course to the elective list. It is available for students, and encouraged by our academic advisor for students planning to continue into graduate school, but students who will not take that path can, instead, take another course to round out their discipline-specific content.
  + Research Methods I now includes more statistics and data analysis content, as well as the development of a research proposal. This course is also cross-listed with HSL, and we collaborate to offer 5+ sections of the course each year. Students in the new traditional BSN program take the course as part of their required curriculum, creating a truly interdisciplinary course experience.
* Our Honors program is fully operational, with an average of 13 students.
* We have developed an Accelerated MS bridge program to allow our undergraduate students early admission into our graduate program, with the result that 7 of our current MS HP students came from that program, and 6 of them were also members of the Departmental Honors program.
* In response to evolving content needs, we have adapted 3200: School Health for K-12 Teachers to meet the needs of both the Elementary and Middle Level Education students and the Public Health Teacher Licensure minor students who are required to take it. This allowed us to remove 3000: Health Concepts for Teachers from our course offerings, and also again created an interdisciplinary course environment for our students.
* The Community Health option was revised to incorporate the Research Methods course changes, and to revise the elective course listing.
* The Public Health Teacher Licensure minor was revised to bring it into alignment with changing state teacher licensure requirements and course availability on campus, which resulted in a more accessible minor.
* An Honors version of our senior seminar Body Image and Society was approved and offered.
* We created a 1 s.h. Experientially Learning seminar to complement our Internship requirement, and provide an interdisciplinary venue for students to analyze and discuss their internship experiences.
* Several new elective courses were created:
  + PUBH 2500 Motivational Interviewing
  + PUBH 3050 Health and Culture
  + PUBH 3060 Intro to Complementary Integrative Medicine
  + PUBH 4840 CIM for Health Professionals

**Are there any additional future changes, revisions, or interventions proposed or still pending?**

Effective January 4, 2022, the Nutrition & Dietetics Program will be housed in our Department, and the department name will change to the Department of Public Health & Nutrition. The Nutrition faculty are already in the midst of curricular review, and we anticipate 1-3 courses will become shared, either through cross listing, or through replacement of NTR courses with PUBH ones. We look forward to increasing the number of interdisciplinarily-focused, interprofessional courses which better prepare all our students for the realities of their future profession’s work environment.

University curricular regulations have recently changed to allow a departmental capstone course to count in place of the University Graduation requirement Senior Seminar, and a team of faculty from PUBH, NTR, and Human Services & Community leadership (HSL) are collaborating on an interdisciplinary leadership-related course to serve as a capstone. Originally, we had planned to develop a Health Policy course, but one has been developed in Political Science already.

The opening narrative details the changes we are making to the assessment plan. The highlights are that student learning will be assessed three times through three different measures each time for a more holistic view of student learning. We are investigating and developing holistic measures to assess the SLOs.

**2. Please provide a brief description or bulleted list of any improvements (or declines) observed/measured in student learning. Be sure to mention any interventions made that have not yet resulted in student improvement (if applicable).**

We have seen major improvement in Responsibility 1. We used to use a different measure, and now that measure is a part of a holistic look at our students’ ability to conduct a community assessment. We attribute this to earlier opportunities to practice community assessment with smaller populations/communities. We have seen minor improvements in Responsibility 2, and students seem to have confidence in their ability to deliver health education programming from their responses on exit surveys. We have seen major improvement in Responsibility 3. We use the Global Health Project to evaluate students’ abilities to implement health education by engaging with diverse ideas, individuals, groups, and cultures, all but one student met the expectation, a major improvement since last time, and all the students reported confidence in this responsibility. We saw a lot of improvement in Responsibility 4: producing, analyzing, interpreting, and evaluating quantitative material when conducting evaluation and research related to health education. We revamped our research methods sequence, and this seems to have really helped in students’ abilities to analyze and evaluate quantitative information. Improvements in responsibility 6 are no doubt because of our early focus on social determinants of health.

As we have expanded our SLOs for Health Administration to include several more measures, we would like to incorporate a similar approach our Public Health major. In the spring, when there are fewer curriculum proposals, the Department Curriculum Committee intends to review classes and assignments for alignment with the SLOs. They will spend some time mapping the programs, although we see this is a very long-term project.

Specific issues identified include:

Again, previous data was collected with old assessment standards in mind, but based on these findings, we have identified that there are gaps in the curriculum, so changes to the curriculum will be investigated this academic year that will likely include cross-listing courses with NTR.

**3. Using the form below, please document annual faculty and committee engagement with the assessment process (such as the review of outcomes data, revisions/updates to assessment plan, and reaffirmation of SLOs).**

History of Annual Review

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| Date of Annual Review | Individuals/Groups who Reviewed Plan | Results of the Review |
| 8/20/20 | Department as a whole | Agreed to keep similar assessment for one more round. |
| 9/8/21 | Curriculum Committee | Defined reporting process |
| 10/12/21 | Assessment Committee | Reviewed draft report |
|  |  |  |

Dean Review & Feedback