1.Reporting Institution <u>Eastern Illinois University</u>	
2.Program ReviewedBS_ in Health Promotion	
3.Date	
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#### 5. Overview

The Department of Public Health (formerly Health Promotion) is an integral component of the new College of Health & Human Services. It houses two undergraduate programs: B.S. Health Administration, and B.S. Public Health (formerly Health Promotion). The latter is the focus of this report, and comprises two specialty areas: Community Health, and Emergency Management & Disaster Preparedness.

Similar programs exist at the other regional comprehensive universities in Illinois, as well as at the three campuses of the University of Illinois system. Our program is distinguished by: (1) a strong commitment to fostering undergraduate research, including faculty mentorship; (2) online degree completion programs for EMS/Fire Science/emergency management professionals; (3) inclusion of Prior Learning Assessment in the B.S. Public Health programs; (4) financial commitment to provide student professional development opportunities.

Student Learning Objectives for the program have historically been tied to the Entry Level Health Educator competencies [https://www.nchec.org/responsibilities-and-competencies] established by the National Council for Health Education Credentialing (NCHEC), culminating in almost 20 years of program approval by the SOPHE/AAHE Baccalaureate Program Approval Committee (SABPAC). SABPAC has been phased out, replaced by the Council on Education for Public Health (CEPH) accreditation. We are currently transitioning to the CEPH competencies, as well as investigating several health administration-related accrediting bodies' requirements.

The Department of Public Health's mission is to prepare highly competent public health professionals, scholars, and citizens with the numeracy, literacy, critical thinking, listening, and speaking skills to protect, promote and advance a diverse public's health and safety. Implementation of this mission centers around creating and fostering opportunities for student-faculty scholarship and applied learning experiences. These values are all central to the University Mission and the Undergraduate Learning Goals.

## 6.Major Findings and Recommendations

a.Description and assessment of any major changes in the program/disciplinary context 6.a(1) Changes to the overall discipline:

The most significant change has been a shift from stand-alone community health education as a measure of program approval to accreditation through CEPH. CEPH originated as the accrediting body for schools of Public Health. When the American Association for Health Education (AAHE) left the Society for Health, Physical Education, Recreation & Dance (AAHPERD) and joined the Society for Public Health Education (SOPHE), the decision was made to centralize program approval through the CEPH accreditation process, and CEPH devised accreditation requirements for programs not housed in schools of Public Health. Community Health and Health Promotion have moved from stand-alone disciplines to components of Public Health. In order to remain current with the profession, we have been reviewing our curriculum and begun realigning it to meet or exceed CEPH standards for accreditation.

#### 6.a(2) Changes in Student Demand

Enrollment has been the prominent driving force over the past review cycle.

Fall Counts	BS Health Comm		BS HPR	BS HA	Total (BS HST + BS HPR + BS HA + 1/2 BS HC)	Notes
2019	15	7	25	34	73.5	
2018	14	0	41	34	82	Creation of BS Health Admin, BS Health Comm
2017	0	0	100	0	100	Budget impasse ends August 31, 2017
2016		114			114	
2015		138			138	Budget impasse begins July 1, 2015
2014		151			151	
2013		166			166	Creation of Health Administration option
2012		120			120	
2011		99			99	
2010		72			72	

HST/HPR enrollment must be examined in the context of overall University enrollment:

EIU enrollment	HPR as % EIU	% excluding dual credit students	EIU change	HPR change
7806	0.9416%	1.1805%	3.72%	-10.37%
7526	1.0896%		7.06%	-18.00%
7030	1.4225%		-5.19%	-12.28%
7415	1.5374%		-12.97%	-17.39%
8520	1.6197%		-4.41%	-8.61%
8913	1.6942%		-8.82%	-9.04%
9775	1.6982%		-6.16%	38.33%
10417	1.1520%		-6.81%	21.21%
11178	0.8857%		-3.89%	37.50%
11630	0.6191%			

Note: HPR displays a 2 year lag in response to enrollment drops as compared to EIU total enrollment. If the pattern holds true, we should start seeing increased major counts in 2020-2021.

Student demand and enrollment have lead to many changes:

- a. Student demand for teacher licensure programs had been decreasing in the early 2010s, and dropped dramatically during the budget impasse years (2015-2017). Additionally, changes at the State level in school mandates centering around driver education reduced the number of school districts teaching driver education. Our Teacher Licensure in Health (secondary education) major and our Driver Education minor were decimated by the decrease in demand, and become financially unfeasible. Driver Education minor numbers dropped from 53 to below 10; School Health majors dropped below 5. Declining enrollment coincided with the loss of two tenure track positions, both in Driver Education. The School Health major was dropped from the curriculum effective with the Fall 2016 catalog, and the Driver & Safety Education minor was dropped effective with the Fall 2018 catalog.
- b. Health administration had always been a part of our baccalaureate program, but until 2013, it was buried as a concentration in an option in the major. In Fall 2013, we elevated it to an option, and saw immediate impact in the number of declared majors. Based on feedback from Admissions and our alumni advisors, we pursued transitioning our Health Administration program from an option under the

- B.S. Health Promotion to a stand alone degree program: B.S. Health Administration, effective Fall 2018.
- c. Changes to the credentialing standards in the field of EMS (paramedic services and ambulance services, in particular) which went into effect January 1, 2020, drove revisions to the EMDP program, and the establishment of the online EMDP program. Effective January 1, 2020, directors of EMS services must have a BS degree, and directors of EMS programs must have a master's degree. Most EMS professionals have applied associates degrees, and extensive hours of professional development that is not transcripted. They also are working full time, so a traditional brick and mortar program is not accessible. The Online degree completion program in EMDP meets those needs. We already have 10+ students enrolled in the program, and will be launching a marketing & publicity campaign this spring.
- d. Declining enrollment in traditional college-aged students drove us to examine other types of students with unmet educational needs, and drove the establishment of the online program option in community health, as well as the online availability of the minor in community health, which complements other online degree programs at the University.
- e. The establishment of the new College of Health & Human Services is attracting new students to all the programs in the College because students are drawn to the College first, and then we focus on placing them in the right program.
- f. Workplace wellness continues to be one of the fastest growing employment options for recent college graduates in the health-related areas, and the creation of the Workplace Wellness minor ensures that students have the foundational background in Public Health, Kinesiology, Sport & Recreation, and Nutrition & Dietetics necessary to enter that workforce.

#### 6.a(3): Changes in Societal Needs

As the nation's population continues to age, needs for health and health-related support services will continue to increase. According to the Population Reference Bureau's *Population Bulletin*, "Aging in the United States", the number of Americans aged 65+ is projected to almost double from 52 million 2018 to 95 million by 2060, rising from 16% of the total population to 23%. As people age 55+ account for over half of total health spending on an annual basis (https://meps.ahrq.gov/mepsweb/), there will be both an increase in demand for professions that serve their health care needs, but also an increase in demand for professions which can help them maintain or improve health, and thus moderate expenditures.

Each decade, the Healthy People initiative of the Office of Disease Prevention and Health Promotion establishes goals for improving the health of the nation. Healthy People 2020 (<a href="www.healthypeople.gov">www.healthypeople.gov</a>) introduced a number of new components, including the social determinants of health (SDOH), preparedness, health-related quality of life & well-being, and global health. SDOHs have become particularly relevant as public health professionals seek to address health disparities which interfere with individuals' abilities to prevent illness and disability, let alone live a healthy life. SDOHs affect all aspects of health and health care, and as health care related jobs remain the fastest growing job brackets, a more holistic understanding of health and wellness becomes a professional necessity as well as a fundamental life skill.

According to the Bureau of Labor Statistics, the job outlook for Public Health-related professions is robust:

Job Title	Growth Potential	Growth Rate
Health Educator/Community Health Worker	11%	Much faster
Substance Abuse, Behavioral Disorder, and Mental Health Counselors	22%	Much faster
EMT/Paramedics*	7%	Faster
Occupational Health & Safety Specialists	6%	Average

Epidemiologist	5%	Average
Medical Scientist	8%	Faster
Emergency Management Directors*	5%	Average
Medical & Health Services Managers	18%	Much faster
Police, Fire, & Ambulance Dispatchers	6%	Average
Social & Community Service Managers	13%	Much faster
Firefighters**	5%	average

# 6.a(4) Institutional Context for Offering the Degree

The Department of Public Health is a logical fit and integral component of the College of Health and Human Services. All of our academic programs, our scholarship, and our community outreach efforts adhere to the mission of the college by promoting the health and well-being of diverse populations across the lifespan. All of our students complete an extensive practicum/internship experience, providing valuable skills and person-hours to our community stakeholders.

We are inherently interdisciplinary in nature, and welcome the opportunity our new College brings for collaborative interprofessional education opportunities for our students and our faculty. We absorbed the net loss of two tenured/tenure-track positions during the last review cycle by terminating the school health major, the driver education minor, and all first aid/CPR courses. We will be actively exploring opportunities to grow both our student population and our faculty ranks in the next cycle.

### 6.a(5) Other Elements Appropriate to the Discipline in Question

We continue to develop a partnership with the EMS division at our community college partner Lake Land College. The EMS Director is an alumna of our program, and we continue to actively explore and develop collaborative curricular programming to facilitate her paramedic students directly matriculating into our BS Public Health: EMDP program. As LLC's Fire Science Management online program goes live in the coming year, we plan to develop a bridge program for those students.

### 6.b. Major Findings and Recommendations

#### Assessment Results:

The capstone courses in the major include HPR 3700: Health Behavior Theory, HPR 4250: Planning Health Programs, HPR 4770: Public Health Administration, and HPR 4275: Internship. Assessment data from those courses from 2018-2019 indicates that 75% of all HPR students met or exceeded expectations in 3700; 80% of students met or exceeded in 4250; and 78% met or exceeded in 4770. If the Health Administration students are included in these percentages, as until Fall 2018 they were part of the HPR degree program, the percentages increase to 85%, 85%, & 88 %, respectively. Our benchmark is 80%.

The culminating assignment in 3700, 4250, and 4770 are all required elements of the professional portfolio each student must have approved by the Department prior to internship placement. Students who fail to meet expectations on any assignment are required to revise and resubmit until the assignment meets standards prior to submitting their portfolios for approval. 100% of student portfolios during the review period met or exceeded standards. Over the review period, all students enrolled in HPR 4275: Internship completed their internships. Only 1 required remediation during the internship in order to successfully complete.

## Changes made in response to assessment results:

Curricular revisions are an ongoing process in response to assessment results.

### Course revisions:

- 2700: Health Literacy: revised name and content
- 3700: Health Behaviors: revised content
- 4250: Planning Health Programs: revised content
- 4700: Public Health Administration: revised content

## Curricular changes:

- Add 2900 Human Diseases to required course list for Community Health
- Revised First Responder curriculum to become EMDP, then revised again to better align with discipline.
- Revise EMDP to reflect profession's needs.
- Add online delivery options for Community Health and EMDP
- Add several new elective choices to Community Health elective list
- Develop Health Communication major
- Revise Health Comm 3910, and create Health Comm 2910
- Created Professional Preparation/pre internship course 4175

## Other changes:

- Department name change: Health Studies -> Health Promotion -> Public Health
- Creation of Department Honors Program
- Creation of interdisciplinary B.S. Health Communication, including traditional and online delivery formats.

## Opportunities for improvement:

- We are currently revising all of our internship protocols and processes.
- As EIU is revising the assessment process, we are taking the opportunity to re-envision and redesign our Departmental assessment benchmarks and procedures.
- Adding grant writing content/course to the curriculum. We are exploring collaborating with another department to offer this.
- CEPH accreditation: while we plan to align our curriculum to the CEPH standards, pursuing accreditation is cost prohibitive at this time. Our students are eligible to sit for the Certified Health Education Specialist exam already, and we are researching other applicable certifications for our students.
- The new College of Health and Human Services will provide many opportunities for interprofessional education development.

# 6.c. Description of actions taken since the last review, including instructional resources and practices, and curricular changes

Our program has changed significantly in the past 7 years, and we are in the midst of the final phase of that change process. In addition to the changes mentioned in previous sections, we have:

- Partnered with Kinesiology, Sport & Recreation, and Nutrition & Dietetics to create the Workplace Wellness Minor
- Collaboration with the Department of Human Services & Community Leadership to cross list HPR/HSL 2800: Research Methods I
- Created an accelerated MS option to allow high performing undergraduate students bridge to the MS program and double count up to 9 semester hours of courses.

• Created a new professional development/pre-internship course to better prepared students for their internship experience.

# d. Description of actions to be taken as a result of this review, including instructional resources and practices, and curricular changes.

As discussed in sections 6.b., we are exploring new opportunities created by the establishment of the College of Health & Human Services. We are in the process of further curricular change in the Community Health option. We anticipate significant demand for our online completion program in EMDP, and will have to make adjustments to accommodate demand for online delivery mode of courses and additional sections. As enrollment increases at EIU, demand for our courses also increases. We have already seen this in our lower division courses this academic year. As the increased student enrollment matriculates into the upper division courses over the next few years, and the demand for lower division courses continues to increase due to new first time full time freshmen, the Department will need to hire at least one more tenure track faculty person to support both the undergraduate and graduate curriculum. We currently have three adjunct faculty, two of whom are retired professors. I do not know how long they will continue to teach for us, and when they decide to no longer teach, we will have a significant coverage gap.

Over the course of the review period, we have lost two tenured/tenure track faculty lines. We absorbed this loss in part by terminating the School Health Major and the Driver & Safety Education minor. Our most recent retirement was replaced with a tenure track line, but as the retiree taught a maximum of overload every year, we have lost the equivalent of 1 FTE of coverage with her retirement. We are currently covering that gap with adjunct faculty, but that is a short term fix of the problem. We will actively pursue the addition of a tenure/tenure-track line to the Department as soon as one is available.

7.Responses to Institution-Assigned Issues N/A
8.Outcome
8.1 Decision:
X Program in Good Standing
Program flagged for Priority Review
Program Enrollment Suspended

### **Provost's Feedback**

The B.S. in Health Promotion (now Public Health) meets and exceeds the IBHE standards for productivity. With respect to the enrollment trajectory, the observed lag and year to year underperformance is not a concern particularly given the creation of the standalone Health Administration degree in 2018. Further, I am impressed by the faculty and department's commitment to online delivery, degree completion, and ensuring the department's degree programs—particularly as the core B.S. program reflects workforce need. As such, the program is in good standing. With respect to the program's assessment regime, the faculty use assessment data to advance curricular change and innovation. Hence, assessment is properly focused on continuous improvement. With respect to ensuring individual learner outcomes/competencies, the program's portfoliobased approach and personalized assessment prior to enrolling in the required internship is to be applauded as it ensures academic excellence.