

**Council on Education for Public Health
Adopted on December 16, 2019**

REVIEW FOR ACCREDITATION
OF THE
SCHOOL OF PUBLIC HEALTH
AT
OREGON STATE UNIVERSITY

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:
May 15-17, 2019

SITE VISIT TEAM:
Kim Marie Thorburn, MD, MPH – Chair
Darcell Scharff, PhD
Benjamin Amick III, PhD

SITE VISIT COORDINATOR:
Alexandra DiOrio, MPH

CRITERIA:
Accreditation Criteria for Schools of Public Health & Public
Health Programs, amended October 2016

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INTRODUCTION

Oregon State University (OSU) was founded in 1868. It is the state's only land-grant university and one of two universities in the country with sea-, space-, and sun-grant designations. OSU's main campus is in Corvallis, OR, and the university has a presence across the state with 15 agricultural stations, 35 extension offices, the Hatfield Marine Sciences Center in Newport, four buildings in Portland, and the OSU-Cascades campus in Bend. OSU has a student body of nearly 32,000 and offers more than 200 undergraduate and 100 graduate degree programs, including 20 PhD programs. The university employs 4,017 full-time and 699 part-time faculty as well as 1,467 full-time and 161 part-time staff. OSU is made up of 11 colleges: agricultural sciences; business; earth, ocean and atmospheric sciences; education; engineering; forestry; public health and human sciences; liberal arts; pharmacy; science; and veterinary medicine. OSU is accredited by the Northwest Commission on Colleges and Universities (NWCCU). The most recent accreditation review occurred April 15-17, 2019. OSU is also accredited by specialized accreditors including the Council for the Accreditation of Educator Preparation, Engineering Accreditation Commission of ABET, and the Accreditation Council for Education in Nutrition and Dietetics.

The university laid the groundwork for the college in 2007. Prior to the establishment of the college, the MPH program was accredited in collaboration with Portland State University and Oregon Health and Sciences University since 1996. The college is organized into two schools: the School of Biological and Population Health Sciences and the School of Social and Behavioral Health Sciences. Within these schools, seven public health concentrations reside. The college has 39 primary instructional faculty in public health fields and enrolls 111 MPH students, 292 BS in public health students, and 66 PhD in public health students. In addition to the public health students, the college enrolls significant populations of students in undergraduate and graduate degrees in fields including athletic training, kinesiology, nutrition, and human development and family sciences and employs faculty affiliated solely with these degree programs.

The college was initially accredited in 2014 for five years with interim reports required in 2015 and 2016. The Council accepted the college's interim reports as evidence of compliance with issues related to learning objectives and competencies for epidemiology and post-graduation outcomes for the BS degree.

Instructional Matrix - Degrees and Concentrations						
Bachelor's Degrees			Categorized as public health	Campus based	Executive	Distance based
Human Development and Family Sciences	BS			BS		BS
Kinesiology	BS			BS		
Nutrition	BS			BS		
Public Health, Health Management and Policy	BS		X	BS		
Public Health, Health Promotion and Health Behavior	BS		X	BS		
Master's Degrees	Academic	Professional				
Biostatistics		MPH	X	MPH		
Environmental and Occupational Health		MPH	X	MPH		
Epidemiology		MPH	X	MPH		
Global Health		MPH	X	MPH		
Health Management and Policy		MPH	X	MPH		
Health Promotion and Health Behavior		MPH	X	MPH		
Public Health Practice		MPH	X			MPH
Adapted Physical Education		MAPE		MAPE		
Athletic Training		MATRN		MATRN		
Kinesiology	MS			MS		
Human Development and Family Studies	MS			MS		
Nutrition	MS			MS		
Doctoral Degrees	Academic	Professional				
Environmental and Occupational Health	PhD		X	PhD		
Epidemiology	PhD		X	PhD		
Global Health	PhD		X	PhD		
Health Management and Policy	PhD		X	PhD		
Health Promotion and Health Behavior	PhD		X	PhD		
Kinesiology	PhD			PhD		

Human Development and Family Studies		PhD			PhD		
Nutrition		PhD			PhD		
Joint Degrees (Dual, Combined, Concurrent, Accelerated Degrees)		Academic	Professional				
2nd Degree Area	Public Health Concentration						
Veterinary Medicine	Epidemiology		MPH-DVM	X	MPH		

A1. ORGANIZATION & ADMINISTRATIVE PROCESSES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Designates appropriate committees or individuals for decision making, implementation		The college governs itself through college-, school-, and program-level committees. College-level committees include the Dean's Advisory Committee (faculty and students serve and vote), College Promotion and Tenure (faculty elected by fellow faculty), College Curriculum Committee (faculty and students serve and vote), College Equity, Inclusion and Diversity Committee (faculty and students serve and vote), Undergraduate Student Council (students), Graduate Student Council (students), College Scholarship Committee (faculty), Fellowship Awards Committee (faculty), and College Awards Committee (faculty). School-level committees include the Personnel Committee (faculty and staff), Promotion and Tenure Committee (faculty elected by program), and the Academic Program Faculty and Program Directors Committee (faculty). The program-level committee is the Academic Program Faculty Committee.		Click here to enter text.
Faculty have opportunities for input in all of the following: <ul style="list-style-type: none"> • degree requirements • curriculum design • student assessment policies & processes • admissions policies & decisions • faculty recruitment & promotion • research & service activities 		The Dean's Cabinet and the Dean's Leadership Team oversee the college strategically and operationally.		
Ensures all faculty regularly interact with colleagues & are engaged in ways that benefit the instructional program		Degree requirements are a university-wide process managed by the University Curriculum Council (public health faculty serve on this committee) and the University Graduate Council. The Curriculum Committee manages the curriculum design at the college level. This committee reviews all proposals for curriculum change before sending them to the university for approval. The Graduate		

		<p>School, Registrar's Office, and faculty in the student's program monitor student assessment policies and procedures. The university's Admissions Office, the college's director of graduate student recruitment and admissions, and program faculty manage admissions policies and procedures. University policies guide faculty recruitment and promotion. Each school oversees faculty recruitment, and college committees oversee promotion and tenure in accordance with university guidelines. The Office of the Associate Dean for Research and school and program directors support research and service activities in accordance with university policies and procedures.</p> <p>Part-time and full-time faculty engage during faculty meetings held twice a year, program meetings, annual peer teaching evaluations, and through research collaborations. During the site visit, faculty and program directors described numerous opportunities for part-time and full-time faculty to engage using streaming video, WebEx, and through informal events that build social relationships.</p> <p>A significant initiative of the dean has been to improve collegiality. The two school directors discussed multiple efforts to better engage faculty in active development of collegial relations. Faculty similarly reported being more actively engaged and reflected on their involvement in the strategic planning process as one example.</p> <p>Faculty are active on multiple university committees including the Faculty Senate, standing committees of the Faculty Senate, the President's Commission on the Status of Women, and the President and Provost Leadership Council for Equity, Inclusion and Social Justice.</p>		
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A2. MULTI-PARTNER SCHOOLS & PROGRAMS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

A3. STUDENT ENGAGEMENT

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students have formal methods to participate in policy making & decision making		Students are engaged through participation on multiple committees including both an undergraduate and graduate student council. These two councils meet three times a year and also raise issues and present recommendations to college administrators. Students are active participants on search committees, tenure and promotion committees, the Curriculum Committee, the Equity, Inclusion, and Diversity Enhancement Team, and the Strategic Planning Committee. Students are also members of the Dean's Advisory Committee.	Click here to enter text.	Click here to enter text.
Students engaged as members on decision-making bodies, where appropriate		During the site visit, students told reviewers that participating on the Curriculum Committee is rewarding, that faculty take their feedback seriously, and that their feedback has impacted changes that the college has made.		

A4. AUTONOMY FOR SCHOOLS OF PUBLIC HEALTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Operates at highest level of organizational status & independence		The college operates independently with the dean directly reporting to the provost and representing the college on all deans' committees at the university. The dean is also a member of the President's Cabinet.	Click here to enter text.	Click here to enter text.

A5. DEGREE OFFERINGS IN SCHOOLS OF PUBLIC HEALTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Offers professional public health master's degree in at least three distinct concentrations		The college offers the MPH in seven concentrations and the PhD in five of these seven concentrations, as shown in the instructional matrix in the introduction of this report.	Click here to enter text.	Click here to enter text.
Offers public health doctoral degree programs in at least two distinct concentrations		In addition to these minimum degree requirements, the college also offers BS, MS, MAPE, MATRN, and PhD degrees as well as a joint degree with veterinary medicine. The instructional matrix shows classification of these offerings as either public health or non-public health.		

B1. GUIDING STATEMENTS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines a vision, mission statement, goals, statement of values		The self-study defines a vision and mission and outlines goals and objectives to accomplish these guiding statements.	Click here to enter text.	Click here to enter text.
Taken as a whole, guiding statements address instruction, scholarship, service		The vision of the college is "Lifelong health and well-being for every person, every family, every community in Oregon and beyond" and the mission is "Through integrated education, research and outreach, we advance scientific discovery and implementation of ideas to improve population health and prepare the next generation of globally-minded public health and human sciences professionals. As part of a land-grant university, we connect our science to the policies and practices in communities to increase people's quality of life and capacity to thrive."		
Taken as a whole, guiding statements define plans to 1) advance the field of public health & 2) promote student success				
Guiding statements reflect aspirations & respond to needs of intended service area(s)				
Guiding statements sufficiently specific to rationally allocate resources & guide evaluation of outcomes		<p>The college has one overarching goal, which is to "Champion the discovery and implementation of ideas that advance the lifelong wellness of people and communities as part of OSU's integrated health sciences initiative."</p> <p>The college also defines three strategic goals that address instruction, scholarship, and service:</p> <ol style="list-style-type: none"> 1) Lead integrated health sciences research to improve the health of individuals, families and communities; 		

		<p>2) Graduate public health and human science professionals prepared to meet the complex health challenges of the 21st century; and</p> <p>3) Enhance programs and partnerships that foster community engagement and positively impact communities.</p> <p>Finally, the college has one enabling goal to “Create a supportive work climate, and a culture of health that promotes equity, inclusion, and social justice.”</p> <p>The college aligns with the university values and defines five additional values that guide its work: equity; care and compassion; innovation; continuous improvement; and collaboration. As a whole, the guiding statements address instruction, scholarship, and service and define plans to both advance public health and promote student success. These statements adequately reflect aspirations.</p> <p>During the site visit, college leaders described the intentional processes used to develop and revise the vision and values, recognizing the importance of these statements in guiding the college’s work. The college created the statements to align with the university’s vision and mission, to address the university’s LifeCourse framework, and to capture the diversity and equity themes of the university. Faculty, students, and stakeholders had an opportunity to provide feedback about the guiding statements. Based on this feedback, the college added the principle of equity to the values statement and placed greater emphasis on collegiality.</p> <p>Faculty leaders told site visitors that the faculty rely on the college’s values to guide their work. They recognized that</p>		
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		they may need to make changes to resources to ensure alignment with strategic goals when needed. For example, to increase staff support, the college added the MPH coordinator position to free faculty to do more research. Faculty members have also learned to work smarter, such as by sharing staff resources across the two schools. Faculty told site visitors that creating consistencies and efficiencies has enhanced their ability to achieve their goals.		
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B2. GRADUATION RATES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Collects, analyzes & accurately presents graduation rate data for each public health degree offered		Graduation rates for the BS in public health are as follows: <ul style="list-style-type: none"> • 76% for the 2011-12 cohort • 81% for the 2012-13 cohort • 75% for the 2013-14 cohort • 78% for the 2014-15 cohort • 69% for the 2015-16 cohort Graduation rates for the MPH are as follows: <ul style="list-style-type: none"> • 88% for the 2012-13 cohort • 100% for the 2013-14 cohort • 96% for the 2014-15 cohort • 78% for the 2015-16 cohort The college has met the defined threshold of at least 70% within the college's maximum time to graduation of six years for the BS and seven years for the MPH. The cohorts that have not yet met the threshold have not reached the	Click here to enter text.	Click here to enter text.
Achieves graduation rates of at least 70% for bachelor's & master's degrees, 60% for doctoral degrees				

		<p>maximum time to graduation; current attrition rates are low enough that each cohort still has the ability to meet or exceed the threshold.</p> <p>Graduation rates for the PhD are as follows:</p> <ul style="list-style-type: none"> • 100% for the 2010-11 cohort • 93% for the 2011-12 cohort • 50% for the 2012-13 cohort • 38% for the 2013-14 cohort <p>The school has met the defined threshold of at least 60% within the school's maximum time to graduation of eight years. Self-study data on doctoral progression indicate that students are making reasonable progress through their programs of study across all five concentrations. The college enrolled between nine and 20 students per concentration in 2018-19, and between one and four students advanced to candidacy status during 2017-18.</p>		
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B3. POST-GRADUATION OUTCOMES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
Collects, analyzes & presents data on graduates' employment or enrollment in further education post-graduation for each public health degree offered		The college collects post-graduation outcomes data through an alumni survey administered to all students in the late spring of their final year. The college sent the survey to all graduates from the 2016-17 academic year (n=353), and 43 (12%) responded. Based on updated data	Data collection, analysis and reporting methods for alumni data were not completely trackable or replicable prior to the onboarding of the new Director of Assessment and	The Council reviewed the college's response. The data does not appear to capture outcomes for the majority of students at each degree level (e.g., the college only collected

<p>Chooses methods explicitly designed to minimize number of students with unknown outcomes</p>		<p>provided during the site visit, positive post-graduation outcome rates for the BS were 62% for 2015-16, 56% for 2016-17, and 100% for 2017-18. Rates for the MPH were 98% for 2015-16, 68% for 2016-17, and 100% for 2017-18; rates for the PhD were 100% for each of the three reporting years.</p>	<p>Accreditation (DAA). The DAA has redesigned the survey administration process to help ensure that respondent representation and response rates are greatly increased. Some of the steps that proved to be successful in the recent administration of the alumni survey include:</p>	<p>data for 20 of the 60 MPH alumni that reached one year post-graduation in the 2018-19 cohort). The Council looks forward to reviewing future evidence of data collection efforts that reduce the number of alumni with unknown outcomes.</p>
<p>Achieves rates of at least 80% employment or enrollment in further education for each public health degree</p>		<p>Through on-site discussions with staff, reviewers determined that these data were still incorrect for 2017-18; only students who responded to the survey were counted in the table. Staff also told reviewers that they were unsure of the methodology used to track and calculate the rates for 2015-16 and 2016-17. The number of students with unknown outcomes was not factored in. The site visit team calculated the rates for 2017-18 using updated data provided by the college. The team found that post-graduation outcomes were unknown for 94% of BS graduates, 96% of MPH graduates, and 86% of PhD graduates. Through on-site discussion, the college understands how to accurately report data going forward.</p> <p>The first concern relates to post-graduation outcome rates not consistently meeting the required threshold of 80% for the BS and MPH degrees.</p> <p>The second concern relates to the high number of graduates with unknown outcomes. The college must supplement current data collection methods to minimize the number of unknown outcomes.</p>	<ul style="list-style-type: none"> • Reviewed previous survey to ensure that it was not longer than absolutely necessary. Program Directors, MPH Administrative Director, MPH Internship Coordinator, Associate Dean for Student Success, and the Assistant Director of Career Development reviewed sections relevant to their programs and services. Subsequently, the DAA made changes to both the wording and length of the alumni survey to ensure that the questions were more targeted and relevant to the student direct experience. • Made multiple efforts to ensure accuracy of sample list. The DAA worked with Oregon State University Alumni Association for more up-to-date personal email. The DAA also combed 	

			<p>individual accounts on LinkedIn for updated contact information.</p> <ul style="list-style-type: none"> • The DAA established contact in meaningful ways and offered incentives for participation. The DAA had 3 points of contact with alumni. Each point of contact was a newly reworded message appealing to alumni to participate. The DAA worked with the Director of Marketing and Communications to offer a variety of OSU CPHHS swag that alumni could choose from as incentive to complete the survey. • Fulfilled pledges of confidentiality given to respondents. • The DAA will share survey results with CPHHS faculty and staff later fall 2019. <p>Students who graduated AY 2017-18 were contacted to complete a Qualtrics survey. Students were contacted three times between June-August 2019 to encourage participation in the survey. All public health alumni were asked about competencies in two forms. First they were asked How prepared do you feel in the following</p>	
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			<p>competencies? This question was then followed by To what degree do you feel capable applying the following competencies? Both questions used the following 4-point response scale: not at all, slightly, moderately, very. As a result of all these efforts, the DAA was able to raise response rates. As a result of all these efforts, the DAA was able to raise response rates (see B3. Post-Graduation Outcomes.docx). Moreover, CPHHS achieved target rates of at least 80% employment or enrollment in further education for each public health degree. All alumni are accounted for, so there are no unknowns.</p>	
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B4. ALUMNI PERCEPTIONS OF CURRICULAR EFFECTIVENESS

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines qualitative &/or quantitative methods designed to provide meaningful, useful information on alumni perceptions		The college collects alumni perceptions annually via the alumni survey. The college sent the survey in 2018 to the 353 public health students who graduated in 2016-17. Ninety students (25%) responded; however, this version of the survey unintentionally excluded questions related to application of competencies. The college sent the	Students who graduated AY 2017-18 were contacted to complete a Qualtrics survey. Students were contacted three times between June-August 2019 to encourage participation in the survey. All public health alumni were asked about	The Council reviewed the college’s response to the site visit team’s report. Based on the survey data provided, the Council was able to validate compliance with this criterion, since the college has collected information on alumni
Documents & regularly examines its methodology & outcomes to ensure useful data				

Data address alumni perceptions of success in achieving competencies		<p>questions in a new survey, and 43 students responded (26 BS, 12 MPH, and five PhD).</p>	<p>competencies in two forms. First they were asked How prepared do you feel in the following competencies? This question was then followed by To what degree do you feel capable applying the following competencies? Both questions used the following 4-point response scale: not at all, slightly, moderately, very. As a result of all these efforts, the DAA was able to raise response rates.</p>	<p>perceptions of success in achieving competencies. Therefore, the Council changed the team's finding of partially met to a finding of met.</p>
Data address alumni perceptions of usefulness of defined competencies in post-graduation placements		<p>The survey asks alumni at all degree levels to rate their ability to apply competencies on a four-point scale from 'very developed' to 'very undeveloped.' BS alumni rate eight statements that link to bachelor's competencies. The highest-rated competency, with a mean of 3.35, related to methods to identify potential causes of population health status and potential target interventions. MPH alumni rate seven competency statements, and the highest-rated competency related to cultural competence and diversity in research and practice with a mean of 3.27. PhD alumni rate four competency statements with a mean of three for all four questions. Only five PhD students answered these questions.</p> <p>The concern relates to the lack of data about alumni perceptions of success in achieving competencies while enrolled in the program of study.</p> <p>The director of assessment and accreditation is responsible for examining the methodology and outcomes to ensure that the data are useful. She works in conjunction with department and school leaders to make changes to the survey as needed. When asked about the usefulness of the data given the low response rates, college administrators said that they supplement these data with other data they collect through their evaluation plan to make informed decisions about the curriculum. They also said that they feel confident that within the next two years they will have more data from this survey that will support meaningful decision making.</p>	<p>All public health alumni were asked about competencies in two forms. First they were asked "How prepared do you feel in the following competencies?" This question was then followed by "To what degree do you feel capable applying the following competencies?" Both questions used the following 4-point response scale: not at all, slightly, moderately, very. (See B4. Alumni Perceptions of Curricular Effectiveness).</p>	<p>The Council urges the college to continue examining and refining its data collection methods to ensure that the data are actionable and collect data that can inform the college's ongoing curricular evaluation.</p>

B5. DEFINING EVALUATION PRACTICES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Commentary			
<p>Defines sufficiently specific & appropriate evaluation measures. Measures & data allow reviewers to track progress in achieving goals & to assess progress in advancing the field of public health & promoting student success</p>		<p>The self-study documents an evaluation plan with goals, measures, data for each measure, and individuals or groups responsible for the collection and review of data.</p> <p>The evaluation plan, however, is tentative and in draft form. College leaders told site visitors that they are developing time frames for reaching the objectives and still identifying metrics for some areas.</p>	<p>Click here to enter text.</p>	<p>Click here to enter text.</p>
<p>Defines plan that is ongoing, systematic & well-documented. Plan defines sufficiently specific & appropriate methods, from data collection through review. Processes have clearly defined responsible parties & cycles for review</p>		<p>The self-study defines three to five measures associated with each of the three strategic goals and the one enabling goal. For the goal related to research, the self-study lists five measures that relate to increasing interdisciplinary research, tracking the amount of research, and assessing the impact of research. The associate dean for research and the director of assessment and accreditation take the lead in monitoring these indicators.</p> <p>For the goal related to student outcomes, the self-study lists three measures that address improving the quality of and diversity in the public health workforce. The director of assessment and accreditation is responsible for monitoring these indicators.</p> <p>For the goal related to community service, the college tracks community-led research, opportunities for experiential learning, and faculty involvement in community-related activities. The director of assessment</p>		

		<p>and accreditation and the associate dean for outreach and engagement monitor the data related to these measures.</p> <p>Site visitors found the evaluation measures, overall, appropriate to promote student success, advance the field of public health, and track progress in achieving the college's goals. The college's plan describes reasonable processes for reviewing data related to scholarship, student success, instruction, and service. The college has been tracking these data over time, and trend data are available in some cases.</p> <p>The college included an annual report in the electronic resource file (ERF) as evidence of its research and service activities. Given that the current evaluation plan is still evolving around new strategic objectives, this annual report aligns with previous goals. During the site visit, reviewers heard about thoughtful plans to collect and use appropriate data. The college is implementing additional data sources (e.g., alumni survey, employer survey) that will provide information in support of the student success goal.</p> <p>During the site visit, college leaders explained how the newly developed evaluation plan and related goals serve as the framework for the college's strategic plan. They explained that teams, each with a champion chair and co-chair, were created to work on each of the four goals. Each team had to identify related objectives and metrics. The college intentionally aligned existing measures with the new objectives so that the evaluation plan clearly aligned with the strategic plan. It was clear to the site visit team that the dean, associate deans, school heads, and program directors are committed to evaluating the college and</p>		
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		<p>using the information to enhance teaching, research, and service. On-site discussions indicated that these college administrators recognize that their strategic and evaluation plans are iterative, and they are committed to appropriately reviewing and revising them as necessary.</p> <p>The commentary relates to the draft status of the college's evaluation plan. At the time of the site visit, the college had not yet finalized the evaluation plan or officially presented it to college stakeholders. The site visit team saw evidence that the college regularly collects data as outlined in the draft plan and learned that these data will serve as the baseline for future evaluation efforts and systematic reviews. During the site visit, college leaders described their continued commitment to develop processes for regular data collection, review, and dissemination of evaluation results.</p>		
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B6. USE OF EVALUATION DATA

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Engages in regular, substantive review of all evaluation findings, including strategic discussions.		The self-study provides several examples of how the college uses evaluation findings in program improvement. For example, undergraduate preceptors noted that students were weak in writing skills. The college revised its curriculum to ensure that students are prepared to write and research the literature by the time they get to programmatic courses. In the MPH program, a survey found that students wanted more support in identifying resources and professional development. The college responded by instituting one-on-one meetings with	Click here to enter text.	Click here to enter text.
Translates evaluation findings into programmatic plans & changes. Provides specific examples of changes based on evaluation findings (including those in B2-B5, E3-E5, F1, G1, H1-H2, etc.)				

		<p>students regarding resources and quarterly professional development opportunities. Finally, the self-study describes how the college listened to informal feedback from faculty and students regarding the length of time that the research project and manuscript took to complete. The school required that the project and manuscript be completed prior to the preliminary oral examination in the PhD program. As a result, the faculty changed the requirement to a written examination instead of the research project and manuscript.</p> <p>During the site visit, college leaders described several ways they use data to make decisions. For example, the college monitors and rewards research productivity. The college provides building use credits based on productivity that can be used to renovate space to enhance research efforts. Data collected from students by the Student Success Center identified the need for more advising, especially for MPH students. As a result, the college created the MPH coordinator position that supports students in advising and professional development. School directors also described how they use course evaluation results to make changes to courses and/or instructors and to improve the quality of teaching. One leader told site visitors that the college has greatly expanded the ways in which it uses data to guide strategic priorities.</p>		
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C1. FISCAL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			

Financial resources currently adequate to fulfill stated mission & goals & sustain degree offerings		Financial resources fully support the college's stated mission and goals as well as its degree offerings. The college has five sources of revenue:	Click here to enter text.	Click here to enter text.
Financial support appears sufficiently stable at time of site visit		<ul style="list-style-type: none"> • An allocation of the university's education and general fund, which is derived from the state general fund and tuition • An allocation of the education and general fund derived from alternative delivery, such as summer school and distance courses, as well as indirect cost recovery • Grant and contract funds • Statewide public services funds for extension programs within the college • Gift funds <p>The Oregon Higher Education Commission establishes state university budget recommendations for the governor. In 2018, the commission adopted a responsibility-centered management approach to allocate education and general funding among the state's higher education institutions. This system relates budget allocation to academic program delivery, including such measures as credit hours, degrees granted, and research activity.</p> <p>During the site visit, college leaders elaborated on the allocation of education and general funds. Trustees of each institution establish an allocation formula as well as set tuition. The university will increase tuition in the 2019-20 academic year and has adopted a performance-based method with features similar to the commission's responsibility-centered management model. With student success as a part of the formula and tuition included in education and general funding, enrollment numbers</p>		

		<p>remain important to the college's budget allotment. For this reason, college administrators continue to monitor trends, especially among undergraduate enrollees.</p> <p>While tuition is set by the Board of Trustees, professional masters' programs may justify an increase above the set tuition. The university granted the college the ability to adjust a differential tuition rate.</p> <p>The college funds faculty salaries as nine-month academic positions through the education and general fund. Faculty may use research funding for summer salary and to offset academic year salary. The college funds new positions by generating additional revenue or by requesting funds from the provost. Under the new budget formula, most new revenue will come from enrollment.</p> <p>Operating costs are also derived from education and general funding. The college provides new faculty with start-up funds for development and travel awards as they are available. Gift funds support student scholarships and travel.</p> <p>The university negotiates various rates of recovery for indirect costs from grants and other awards. These range from 26-47%. The college receives 26% of the amount recovered. The college uses the funds to support current and future research expenses.</p>		
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C2. FACULTY RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
School employs at least 21 PIF; or program employs at least 3 PIF		The college has a total of 39 PIF and 13 non-PIF, with no double counting of named PIF. The college has sufficient faculty resources for all concentrations and degree levels.	Click here to enter text.	Click here to enter text.
3 faculty members per concentration area for all concentrations; at least 2 are PIF; double-counting of PIF is appropriate, if applicable		The college assigns FTE in four areas: 1) teaching, advising, and other assignments; 2) research and scholarship; 3) outreach and engagement; and 4) service. All PIFs are full-time, 1.0 FTE for a nine-month academic year. The college calculates non-PIF FTE by the number of credits taught. The university considers a standard three-credit course as .083 FTE.		
Additional PIF for each additional degree level in concentration; double-counting of PIF is appropriate, if applicable				
Ratios for general advising & career counseling are appropriate for degree level & type		Advising ratios appear appropriate for each of the degree levels. Advisors have an average of 53 BS students, three MPH students, and three PhD students for general advising and career counseling. Advisors for the cumulative/experiential activity at the bachelor's level have 48 students; MPH ILE advisors have an average of three students; and PhD dissertation advisors have an average of three students. During the site visit, students expressed mostly positive perspectives about university- and college-level advising.		
Ratios for MPH ILE are appropriate for degree level & nature of assignment				
Ratios for bachelor's cumulative or experiential activity are appropriate, if applicable				
Ratios for mentoring on doctoral students' integrative project are appropriate, if applicable		The college collects quantitative data regarding class size and faculty availability through the Student Evaluation of Teaching (SET) and qualitative data regarding class size and faculty availability through the annual graduation		

Students' perceptions of class size & its relation to quality of learning are positive (note: evidence may be collected intentionally or received as a byproduct of other activities)		survey. Among undergraduates, data from 2017-18 show an average satisfaction rating of 5.15 (out of 6) for faculty availability and 5.18 for class size. Among graduate students, data show an average satisfaction rating of 5.25 for faculty availability and 5.22 for class size.		
Students are satisfied with faculty availability (note: evidence may be collected intentionally or received as a byproduct of other activities)		The annual graduation survey has qualitative questions related to both class size and faculty availability. Responses to both questions were largely positive with students saying that the small class sizes allowed for "more interaction with the professors," "more lively and involved discussions," and that the smaller class sizes allowed for "high levels of input and collaboration." For faculty availability, comments included "faculty go the extra mile" and are "always available during office hours." The number of positive comments far outweighed the negative comments with 130 out of 150 comments being positive for class size and 122 out of 139 comments being positive for faculty availability.		

C3. STAFF AND OTHER PERSONNEL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Staff & other personnel are currently adequate to fulfill the stated mission & goals		The college has three categories of staff: 1) administrative (called professional faculty) who provide administrative services; 2) classified who provide support services, and 3) other who are graduate teaching assistants. Administrative and classified staff are assigned to the Dean's Office, the two schools within the college, and to extension programs. Graduate teaching assistants are also assigned to the two schools.	Click here to enter text.	Click here to enter text.
Staff & other personnel resources appear sufficiently stable				

		<p>At the time of the site visit, the college had 40.4 staff in the administrative/classified categories. Approximately 14 positions perform support services. Administrative staff functions include undergraduate academic advising, communications and marketing, assessment, and technology.</p> <p>According to the self-study and college administrators, staff resources are adequate to ensure administrative support. The self-study also notes that the college has built staff strategically over the past five years. As previously mentioned, the dean asked school directors to realign staff resources along functions instead of adding staff, which is working well. In other instances, the college added staff members when it identifies a need to respond to guiding principles. For example, the college added the MPH coordinator position based on an identified need.</p>		
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C4. PHYSICAL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Physical resources adequate to fulfill mission & goals & support degree programs		The college's administrative and staff offices, faculty offices, classrooms and conference space are spread across seven buildings on the main university campus. The dean and other college administrators are located together in a single building while faculty members from the two schools within the college are distributed across the buildings.	Click here to enter text.	Click here to enter text.
Physical resources appear sufficiently stable		The college has sufficient laboratory space and equipment for faculty and graduate students to conduct research		

		<p>activities. The university's Office of the Registrar manages classroom space across the campus. The college has access to the university's learning innovation center building, which provides innovative classrooms and student-directed informal learning space. Several buildings that house college functions have shared student spaces. During the site visit, faculty was enthusiastic about the learning innovation center building and its contributions to new instructional opportunities.</p> <p>The self-study emphasizes that current space is adequate to carry out the college's mission but lacks room for additional faculty or laboratory activities. College leaders explained to site visitors that they intend to increase MPH enrollment in some on-campus options as well as the online offerings and have resources to gain more space. One such example is the use of indirect funding to remodel and revise space to support specific research needs including offices.</p>		
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C5. INFORMATION AND TECHNOLOGY RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Adequate library resources , including personnel, for students & faculty		Faculty, staff, and students have access to on-campus and remote library resources. In addition to the books, journals, microfilm, and DVDs housed in the library, there is reciprocal borrowing with 37 other institutions through the Orbis Cascade Alliance. The university library houses several unique collections. It has been a depository library since 1907 and collects 80% of US government materials	Click here to enter text.	Click here to enter text.
Adequate IT resources, including tech assistance for students & faculty				

<p>Library & IT resources appear sufficiently stable</p>		<p>available through the Federal Depository Library program as well as all state documents through the State of Oregon depository library.</p> <p>Professional librarians provide one-on-one and classroom guidance and instruction in the use of library resources. They provide research workshops for graduate students and faculty.</p> <p>Library space and support include study spaces, scanners, copiers, a student research and writing studio, a student multimedia studio, 3D printers, and drop-off child care.</p> <p>Computer services and laboratories are centralized. There is a high-speed wired network and extensive wireless coverage. There are email and web hosting for all university constituents and off-campus access through VPN. Students, staff, and faculty have access to free or discounted licensed academic software. Faculty and staff can use server and network storage. Site visitors heard that technology and technological support are excellent.</p> <p>Collaboration with all Oregon university system institutions, state agencies, and increasing numbers of community colleges, county governments, health care networks, and nonprofits is possible through the use of audio, video, and web conferencing.</p> <p>The university uses the Canvas learning management system and the Qualtrics survey system. Physical IT resources include smart classrooms and conference room presentation systems, general-use computer laboratories, and a student media service.</p>		
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		The university provides technical support to faculty, staff, and students through the community network helpdesk as well as a variety of services such as security, backup, and storage.		
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D1. MPH & DRPH FOUNDATIONAL PUBLIC HEALTH KNOWLEDGE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Ensures grounding in foundational public health knowledge through appropriate methods (see worksheet for detail)		<p>MPH students obtain the foundational public health knowledge in the H 513: Integrated Approach to Public Health course in their first semester (12 quarter credits). The class is 50% online and 50% on campus. Students have an online component each week and meet on campus for class twice per week. Online students take the integrated course over two semesters in the fall and spring (six quarter credits each). All MPH students must take this foundational course in one of the two formats; there are no exceptions.</p> <p>Site visitors reviewed syllabi and had discussions with program directors and faculty who teach these courses. Through this process, they were able to validate didactic coverage of all learning objectives, as shown in the D1 worksheet.</p>	Click here to enter text.	Click here to enter text.

D1 Worksheet

Foundational Knowledge	Yes/CNV
1. Explain public health history, philosophy & values	Yes
2. Identify the core functions of public health & the 10 Essential Services	Yes
3. Explain the role of quantitative & qualitative methods & sciences in describing & assessing a population's health	Yes
4. List major causes & trends of morbidity & mortality in the US or other community relevant to the school or program	Yes
5. Discuss the science of primary, secondary & tertiary prevention in population health, including health promotion, screening, etc.	Yes
6. Explain the critical importance of evidence in advancing public health knowledge	Yes
7. Explain effects of environmental factors on a population's health	Yes
8. Explain biological & genetic factors that affect a population's health	Yes
9. Explain behavioral & psychological factors that affect a population's health	Yes
10. Explain the social, political & economic determinants of health & how they contribute to population health & health inequities	Yes
11. Explain how globalization affects global burdens of disease	Yes
12. Explain an ecological perspective on the connections among human health, animal health & ecosystem health (eg, One Health)	Yes

D2. MPH FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
Assesses all MPH students, at least once, on their abilities to demonstrate each foundational competency (see worksheet for detail)		<p>The college ensures coverage and assessment of the 22 foundational competencies through the course H 513: Integrated Approach to Public Health course in their first semester (12 quarter credits). Online students take two six-quarter-credit courses covering the same content. All MPH students including the MPH/DVM dual degree students take the required course(s). Reviewers were able to validate didactic coverage and assessment for most of the foundational competencies.</p> <p>The concern relates to the inability of the site visit team to validate that all MPH students are assessed on each of the foundational competencies. The site visit team was unable to validate appropriate assessment opportunities for four competencies through review of course syllabi, additional documentation, and verbal explanations provided during the site visit. Reviewers could not validate competencies 8, 9, 20, and 21 due to the lack of an appropriate assessment opportunity. For example, reviewers could not validate that the assessment mapped to foundational competency 9 requires students to design a population-based policy, program, project, or intervention. The D2 worksheet provides a summary of these findings.</p> <p>During the site visit, reviewers asked faculty to explain how the identified assessments addressed specific competencies. Based on the information provided, reviewers were still unable to validate appropriate assessment opportunities.</p>	<p>D2. Changes to MPH Foundational Competencies and accompanying documents</p> <p>All changes to assessments and the revised Table D2.2. Assessment of Foundational Competencies are provided in the folder D2. MPH Foundational Competencies. We inadvertently put the assessments tied to the foundational competencies in the wrong folder. The name of H 513 is Integrated Approach to Public Health (12 quarter-credits). The names of the 2 online courses that are equivalent to H 513 are named as follows: HHS 513, Integrated Approach to Public Health I (6 quarter-credits) and HHS 514, Integrated Approach to Public Health II (6 quarter-credits). The same assessments used in H 513 are also used in the HHS 513 and HHS 514 sequence.</p> <p>Validated assessments for competencies 8, 9, 20 for H 513 are addressed in H 513 Final Paper</p>	<p>The Council reviewed the college’s response to the site visit team’s report that demonstrates updated information on assessment. The Council found that the college provided information that allowed student assessment on foundational competency 9 but did not address appropriate assessments for foundational competencies 8, 20, and 21.</p> <p>For competencies 8 and 20, the updated assignments do not explicitly require students to consider cultural values and cultural competence. For competency 21, the updated assignment shows that a preceptor is assessing students rather than a faculty member. Additionally, the Council discourages use of the internship as an assessment for competency 21 for two reasons. First, the Council intends for the APE to be an opportunity for students to apply and practice skills that they have already practiced or demonstrated in a classroom setting. Second, it is</p>

		<p>When asked about the curriculum, students told reviewers that while the integrated core has been beneficial in some ways, it has had impacts on course offerings for students who had already completed the core courses prior to implementation of the integrated core. Faculty said that they have received feedback from students about the usefulness of the integrated core in introducing them to core public health knowledge and competencies while demonstrating the roles of different public health disciplines when addressing a health issue.</p>	<p>assignment.pdf and H 513 Zika case study reflection assignment.pdf.</p> <p>Validated assessment for competency 21 is provided, as well as additional narrative in Table D2.2. (See also Foundational Competencies_Rubric).</p>	<p>difficult to demonstrate that all students will perform substantive work as part of an interprofessional team during an internship. Many students will interact with other professionals during a typical internship but will not perform the type of teamwork that allows for demonstration of this competency.</p>
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D2 Worksheet

MPH Foundational Competencies	Yes/CNV
1. Apply epidemiological methods to the breadth of settings & situations in public health practice	Yes
2. Select quantitative & qualitative data collection methods appropriate for a given public health context	Yes
3. Analyze quantitative & qualitative data using biostatistics, informatics, computer-based programming & software, as appropriate	Yes
4. Interpret results of data analysis for public health research, policy or practice	Yes
5. Compare the organization, structure & function of health care, public health & regulatory systems across national & international settings	Yes
6. Discuss the means by which structural bias, social inequities & racism undermine health & create challenges to achieving health equity at organizational, community & societal levels	Yes
7. Assess population needs, assets & capacities that affect communities' health	Yes
8. Apply awareness of cultural values & practices to the design or implementation of public health policies or programs	CNV
9. Design a population-based policy, program, project or intervention	Yes
10. Explain basic principles & tools of budget & resource management	Yes
11. Select methods to evaluate public health programs	Yes
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics & evidence	Yes
13. Propose strategies to identify stakeholders & build coalitions & partnerships for influencing public health outcomes	Yes
14. Advocate for political, social or economic policies & programs that will improve health in diverse populations	Yes
15. Evaluate policies for their impact on public health & health equity	Yes
16. Apply principles of leadership, governance & management, which include creating a vision, empowering others, fostering collaboration & guiding decision making	Yes
17. Apply negotiation & mediation skills to address organizational or community challenges	Yes
18. Select communication strategies for different audiences & sectors	Yes
19. Communicate audience-appropriate public health content, both in writing & through oral presentation	Yes
20. Describe the importance of cultural competence in communicating public health content	CNV
21. Perform effectively on interprofessional teams	CNV
22. Apply systems thinking tools to a public health issue	Yes

D3. DRPH FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D4. MPH & DRPH CONCENTRATION COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
Defines at least five distinct competencies for each concentration or generalist degree in MPH & DrPH. Competencies articulate an appropriate depth or enhancement beyond foundational competencies		The college offers seven MPH concentrations, as shown in the instructional matrix. Each concentration has between five and nine competencies. The competencies range from “identify and assess the major environmental and occupational health and safety hazards that impact workers and the general population” to “analyze the roles, relationships, and resources of the entities influencing global health” to “identify and apply economic, financial, legal, organizational, political, and ethical theories and frameworks.” Students take between 21 and 42 quarter credits of required concentration courses. All but the public health practice concentration require between 21-26 quarter credits because the students also take concentration electives, while the public health practice students take 42 quarter credits because they do not take electives. These courses are mapped to the concentration competencies created by the college. Most of the competencies are written at a level that is appropriate for the degree level and type.	D4. Changes to MPH Concentration Competencies and Assessment All changes to concentration (option) tables and assessments are located in the folder D4. MPH & DrPH Concentration Competencies. MPH Biostatistics: The draft report from the CEPH site visit team indicated that competencies #1 and #8 of the MPH Biostatistics option (i.e., concentration) were not acceptable as written; they did note, however, that the option has more than five distinct and appropriate competencies. Based on this feedback, the Biostatistics faculty plan to review and revise their	The Council reviewed the college's response to the site visit team's report that demonstrates updated information on assessment. The Council found that the college's updated materials address a number of concerns raised by the site visit team. Based on the updated materials, the Council found that the college has defined at least five appropriately-assessed competencies for each MPH concentration, except the concentration in public health practice. The Council notes the following remaining issues, including those that do not formally affect compliance but would benefit from
Assesses all students at least once on their ability to demonstrate each concentration competency				
If applicable, covers & assesses defined competencies for a specific credential (eg, CHES, MCHES)	N/A			

		<p>The concern relates to the site visit team’s inability to validate that all students are assessed on each concentration competency. Specifically, reviewers could not validate 15 competencies across five of the concentrations. For example, reviewers could not validate that the assignments listed for concentration competency 6 for the environmental concentration assessed adherence to health and safety practices and ethical standards.</p> <p>Site visitors determined that concentration competency 2 for epidemiology is similar to foundational competency 1. When asked to explain the expectations of the competency, faculty said that the term ‘basic’ refers to basic skills for epidemiology majors rather than all MPH students. After further review of the assessment, the team was able to validate that the assessment was more complex and that the wording of the competency caused some initial confusion for site visitors when trying to validate that the competency was distinct and that the assessment was appropriate. Competency #8 for biostatistics appeared to be too similar to foundational competency four, however upon reviewing the assessment further, reviewers were able to see that the skills students learn using the CONSORT method to interpret results of clinical trials is more advanced than skills students learn for the foundational competency. Competency #1 for biostatistics was written at too low a level for an MPH but the concentration has more than five distinct and appropriate competencies.</p> <p>Reviewers could not validate appropriate assessment opportunities for the following concentration competencies:</p>	<p>competencies during fall term 2019. The Biostatistics program director expects that (1) the number of option-specific competencies will be reduced, potentially to as few as five; (2) competency #1 will be omitted for future cohorts; and (3) competency #8 will be omitted for future cohorts.</p> <p>MPH Environmental and Occupational Health (EOH):</p> <ul style="list-style-type: none"> Validated appropriate assessments for competency 4: H 512: EOH case-studies and written assignments describing the recognition, evaluation and control of specific hazards. H 513: EOH integrated topics in readings, written assignments and final project. H 583: Literature review and written assignments focused on assessment, strategy formulation, organizational structure and financing arrangements. Validated appropriate assessments for competency 6: H 510: EOH 	<p>attention: for EPI concentration competencies 5 and 6, the college mapped the assessment to the ILE. The ILE should provide an opportunity for students to synthesize skills that they have already practiced, rather than serving as a primary assessment. For HMP concentration competency 3, the assessment did not mention coverage of quantitative and qualitative data analysis, and the assessment for concentration competency 6 does not appear to require students to lead. The assessments for PHP concentration competencies 3 and 4 do not appear to fully capture all aspects of the competency statements as defined.</p>
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		<ul style="list-style-type: none"> • four and six for environmental and occupational health • three, five, and six for epidemiology • two and five for global health • four for health promotion and health behavior, however the concentration has six distinct competencies that reviews could validate assessments for. • three, six, and eight for health management and policy, however the concentration has five distinct competencies that reviewers could validate assessments for. • three, four, and five for public health practice <p>During the site visit, reviewers asked faculty to explain how the assessments mapped in Template D4 covered all competencies that reviewers could not validate. Based on the information provided on site, reviewers were still unable to validate that the assessments mapped to the above competencies were appropriate.</p>	<p>internship experience and project, written technical report and final oral exam. H 514: Seminar series includes practitioners and researchers in EOH providing real-world examples, students provide weekly reflections of learning objectives set for each lecture.</p> <ul style="list-style-type: none"> • Changed assessment for competency 5 to technical report. Committee evaluates technical report with specific rubric and is described fully as part of the ILE. • In addition, H 548 and H 546 courses were deleted from competency 1. <p>All assessments are included in RFD4.1.2. MPH Environ_Occupational Health. The updated Table is located in D4. MPH & DrPH Concentration Competencies.</p> <p>MPH Epidemiology (EPI): Changed wording of competency 2 as previous wording was too similar to foundational competency 1. New</p>	
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			<p>wording includes “2. Explain, calculate and apply epidemiologic terms, measures, and methods.”</p> <ul style="list-style-type: none"> • Validated appropriate assessment for Competency 3: Assessments Exam (Final) - Question 34. Explicitly addresses ethical considerations in data use, application of findings. This assessment was revised to align more clearly to the competency. • Validated appropriate assessment for Competency 5: ILE: Specific requirement to put findings in practice and policy context. • Validated appropriate assessment for Competency 6: ILE: Entire ILE is formulated as a report designed to be presented to county officials and other stakeholders. <p>All assessments are included in RFD4.1.3. MPH Epidemiology. The updated Table is located in D4. MPH & DrPH Concentration Competencies.</p>	
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			<p>MPH Global Health:</p> <ul style="list-style-type: none"> Validated assessments for competency 2. In doing so, also rewrote the description of the assessment opportunity for H 511 Community, Culture, and Global Health. This course is also aligned to competency 4. Validated assessments for competency 5. Added the course H 511 to assess this competency. Changed the description of the assessment opportunity for H 516 Research Methods in Global Health. <p>All assessments included in RFD4.1.4. MPH Global Health. The updated Table is located in D4. MPH & DrPH Concentration Competencies.</p> <p>MPH Health Management & Policy (HMP):</p> <ul style="list-style-type: none"> Validated assessments for competency 3: H 557 Syllabus_with Final Paper Assignment and H 532 	
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			<p>Syllabus_with Essay on Case Study Assignment.</p> <ul style="list-style-type: none"> Validated assessments for competency for 6: H 536 Mastery Assignment #1; H 536 Mastery Assignment #3. Validated assessments for competency for 8: H 556 - Case Study Assignment; H 556 - Group Paper Guidelines; H 556 Assignments and Final Project. <p>All assessments are included in RFD4.1.5. MPH Health Management and Policy. The updated Table is located in D4. MPH & DrPH Concentration Competencies.</p> <p>Effective fall 2019, the Health Management & Policy (HMP) option of the MPH will be renamed Health Systems and Policy (HSP) with some revisions to the required curriculum. These changes did not fall under the self-study. We will be submitting a Substantive Change in the near future describing these changes, including updates to the competencies.</p>	
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			<p>MPH Health Promotion & Health Behavior (HPHB):</p> <p>Validated assessment for competency 4 with H 549 assessment.</p> <p>All assessments are included in RFD4.1.6. MPH Health Promotion & Health Behavior. The updated Table is located in D4. MPH & DrPH Concentration Competencies.</p> <p>MPH Public Health Practice:</p> <p>Validated assessments for competency for 3: HHS 579: Identify potential grant sources relevant to your stakeholder's needs. This assessment is currently under development. H 575: Determine the methods sources and potential budget for an evaluation plan. H 536: The Mastery Assignment # 1 is designed to help students learn root cause and SWOT analysis techniques that they will be able to use in applying solutions that manage resources and jump start health improvement projects that have an impact on Public Health initiatives.</p>	
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			<p>Validated assessments for competency for 4: H 530: Final Paper public health policy brief assignment requires students to develop and advocate for a legal policy-based solution to a public health problem. This competency is assessed now solely through H 530 and not H 590.</p> <p>Validated assessments for competency for 5: H 536: The Mastery Assignment # 3 in H 536 is designed to help students learn how to use real industry scenarios and evidence-based data to apply innovative and strategic problem solving skills. HHS537 Rapid Evidence Assessment (REA) Project is designed to familiarize students with the Rapid Evidence Assessment (REA) Tool that is used in the United Kingdom and taught to health professionals around the world. H 510: Internship Summary Report - Students prepare a minimum 10 page, professionally written Internship Summary Report that documents the details of the experience, indicates the utility of the experience for the student, and offers personal reflections.</p>	
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			<p>Internship Evaluation Report - Students are also required to complete the Internship Evaluation Report. Both the student's Internship Summary Report and Internship Evaluation Report are submitted to the Internship Coordinator in partial satisfaction of H 510 requirements.</p> <p>All assessments are included in RFD4.1.7. MPH Public Health Practice. The updated Table is located in D4. MPH & DrPH Concentration Competencies.</p>	
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D4 Worksheet

MPH Biostatistics Concentration Competencies * Note: only 5 appropriately defined and mapped competencies are required.	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Describe the roles biostatistics serves in public health.	No	Yes
2. Describe basic concepts of probability, random variables and commonly used statistical probability distributions.	Yes	Yes
3. Describe preferred methodological alternatives to commonly used statistical methods when assumptions are not met.	Yes	Yes
4. Distinguish among the different measurement scales and the implications for selection of statistical methods to be used based on these distinctions.	Yes	Yes
5. Apply statistical and graphical techniques commonly used to summarize public health data.	Yes	Yes
6. Apply common statistical methods for inference.	Yes	Yes
7. Apply descriptive and basic inferential methodologies according to the type of study design for answering a particular research question.	Yes	Yes
8. Interpret results of statistical analyses found in public health studies.	No	Yes
9. Develop written and oral presentations based on statistical analyses for both public health professionals and educated lay audiences.	Yes	Yes

MPH Environmental and Occupational Health Concentration Competencies * Note: only 5 appropriately defined and mapped competencies are required.	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Identify and assess the major environmental and occupational health & safety hazards that impact workers and the general population.	Yes	Yes
2. Communicate appropriate strategies for preventing and controlling environmental and occupational health & safety hazards.	Yes	Yes
3. Conduct environmental and occupational health & safety applied research.	Yes	Yes
4. Analyze the relationships between business, policy, regulatory and social factors that influence environmental and occupational health practices.	Yes	Yes
5. Apply environmental and occupational health & safety knowledge and skills in practical settings.	Yes	Yes
6. Adhere to established environmental and occupational health & safety professional practices and ethical standards.	Yes	CNV

MPH Epidemiology Concentration Competencies * Note: only 5 appropriately defined and mapped competencies are required.	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Recognize public health problems pertinent to the population and identify key related sources of data.	Yes	Yes
2. Explain, calculate, and apply epidemiologic terms, measures, and methods.	Yes	Yes
3. Apply principles of good ethical/legal practice and cultural competency as they relate to study design and data collection.	Yes	Yes
4. Draw appropriate inferences from epidemiological data including identifying strengths and limitations of reports.	Yes	Yes
5. Apply epidemiologic skills in the formulation or application of public health programs or policies.	Yes	CNV
6. Assist in communicating findings and developing recommended evidence-based interventions and control measures in response to epidemiologic findings.	Yes	CNV

MPH Global Health Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Design health development programs that are responsive to social, political, cultural, economic, and environmental factors to promote global health equity.	Yes	Yes
2. Apply innovative strategies and skills to build multi-stakeholder coalitions and partnerships for advancing participatory and sustainable global health solutions.	Yes	Yes
3. Use methods that promote sustainable development and local accountability.	Yes	Yes
4. Analyze the roles, relationships, and resources of the entities influencing global health.	Yes	Yes
5. Cultivate partnerships and collaborative strategies to work in and adapt to wide-ranging global contexts for health development in accordance to universally and locally acceptable ethical standards.	Yes	Yes

MPH Health Management and Policy Concentration Competencies * Note: only 5 appropriately defined and mapped competencies are required.	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Conceptualize, analyze and resolve problems related to health services delivery and finance.	Yes	Yes
2. Identify and apply economic, financial, legal, organizational, political, and ethical theories and frameworks.	Yes	Yes
3. Employ appropriate qualitative and quantitative techniques to manage workforce, fiscal, technological, data, physical, and other resources.	Yes	CNV
4. Establish and manage systems and processes to assess organizational performance for continuous quality improvement of quality, safety, effectiveness, and efficiency.	Yes	Yes
5. Act ethically and professionally, and be responsive to community variations in cultures and socio-demographics.	Yes	Yes
6. Lead in all levels of public and private health service organizations.	Yes	CNV
7. Effectively communicate, solve problems and make decisions related to health policy and management in the public and private sectors.	Yes	Yes
8. Integrate theory and practice to plan, implement, and evaluate strategies and policies in health services programs, systems and organizations.	Yes	Yes

MPH Health Behavior Health Promotion Concentration Competencies * Note: only 5 appropriately defined and mapped competencies are required.	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Apply theory in the development, implementation and evaluation of health promotion interventions, programs, and/or policies.	Yes	Yes
2. Create an implementation plan for new programs or adapted evidence-based programs.	Yes	Yes
3. Solicit and integrate input from stakeholders, community, and organizations.	Yes	Yes
4. Design and deliver health communication messages.	Yes	Yes
5. Evaluate and interpret results from program evaluations and other research.	Yes	Yes
6. Define public health problems, select research procedures and outline methods of analyses.	Yes	Yes
7. Incorporate cultural values in the planning, adaptation, implementation, and/or evaluation processes for use in diverse settings.	Yes	Yes

MPH Public Health Practice Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Synthesize information from a wide range of sources to inform public health action.	Yes	Yes
2. Collaborate with stakeholders to prioritize needs and engage in problem solving to advance public health goals.	Yes	Yes
3. Effectively and efficiently manage resources to achieve maximum impacts for public health initiatives.	Yes	CNV
4. Leverage knowledge of public and private systems and processes to influence health at local, state, national, and international levels.	Yes	CNV
5. Apply innovative strategies and skills to build multi-stakeholder coalitions and partnerships for advancing participatory, sustainable, and evidence-based public health solutions.	Yes	Yes

D5. MPH APPLIED PRACTICE EXPERIENCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
All MPH students produce at least 2 work products that are meaningful to an organization in appropriate applied practice settings		<p>The college revamped the MPH applied practical experience to include new requirements for competency assessment and a portfolio approach to start during the 2018-19 academic year. All MPH students must complete a six-quarter credit internship course of a minimum of 200 contact hours. Students can complete the course in one or two quarters.</p>	Click here to enter text.	Click here to enter text.
Qualified individuals assess each work product & determine whether it demonstrates attainment of competencies				
All students demonstrate at least 5 competencies, at least 3 of which are foundational		<p>The students are responsible to identify the internship site. Sites can be governmental, nonprofit, industrial, for-profit, or appropriate university settings. There is an internship coordinator who can assist with site identification and selection. Sites must provide a preceptor with public health or related credentials and work space.</p> <p>The program maintains a list of possible sites. Examples given during the site visit include Oregon SAFE, Health Ministry in Saudi Arabia, local health departments, and Kaiser Permanente. When site visitors met with community stakeholders, there was discussion about a need to engage more with industry (e.g., health plans, hospital systems) for internship preparation and experiences.</p> <p>The internship coordinator said that there is a preceptor handbook. Preceptors who met with the site visitors expressed that orientation was informal. They explained</p>		

		<p>that students were very knowledgeable about the process and preceptor expectations. They also noted that the coordinator was accessible.</p> <p>Students begin preparation with a seminar or web orientation about the internship three terms before enrolling in the course. They then work with their advisors and the internship coordinator to identify at least five competencies to attain and have faculty assess them on during the experience. Three must be foundational, including foundational competency 21. The other two competencies that students can choose can be concentration or foundational competencies.</p> <p>Students must submit an application and learning contract that contains student-developed learning objectives in the term prior to the internship. The student, preceptor, advisor, and internship coordinator must sign these products. During the internship, students use the Canvas learning management system to provide bi-weekly updates, midway and final preceptor evaluations, the portfolio, a weekly time log signed by the preceptor, and a summary report, including an evaluation of the internship.</p> <p>The portfolio must contain an updated resume (including internship accomplishments), a professional summary, and two products developed during the internship for the site. Products must connect to the learning objectives. The internship coordinator grades the work products for competency attainment.</p>		
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D6. DRPH APPLIED PRACTICE EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D7. MPH INTEGRATIVE LEARNING EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
Students complete project explicitly designed to demonstrate synthesis of foundational & concentration competencies		Beginning in 2019-20, the college will require students to complete the ILE in the last semester of study.	There was some inconsistency in our self-study and discussions during the site visit as to whether ILEs included foundational competencies and whether synthesis of foundational and option competencies would be assessed. The faculty have revised the ILE requirements and descriptions to clearly require that all MPH students must complete an ILE that demonstrates synthesis of MPH foundational and MPH option competencies. In addition to revising the MPH ILE descriptions (RFD7.3. MPH ILE Descriptions.docx), we created the ILE Assessment Form (ILE Assessment Form.docx) which the faculty committee will use to record	The Council reviewed documentation in the college's response to the site visit team's report. Based on the information provided, the Council found that the college has adequately addressed the second concern identified by the team, which relates to assessment of competency attainment and synthesis by faculty members.
Project occurs at or near end of program of study		The college offers seven MPH concentrations, and each develops and manages its own ILE. Although there are some similarities across concentration, each ILE is unique to the option. However, all require a high-quality written product and some require an oral presentation as well.		
Students produce a high-quality written product				
Faculty reviews student project & validates demonstration & synthesis of specific competencies		The college provided a description of each of the ILEs in the self-study. Each ILE description describes the project, and some provide outlines of specific components required in the written product. The descriptions explain the process for assessment, i.e., the faculty committee, grading, and potential outcomes of the ILE. All use a committee of two to three faculty to hear an oral presentation or read a document. For all MPH options, the student's faculty mentor/advisor is on the committee. Grading is pass or fail, with one additional attempt if students are unsuccessful. If the students receive a no pass		

		<p>on the second attempt, they are terminated from the program. The college is developing assessment rubrics for each of the options that are a matrix of the option competencies by quality indicators.</p> <p>The types of high-quality written products that students will produce are: technical reports, summary of internship projects, take home exercise, policy brief, research brief, program brief, country/population profile report, opinion editorial, evaluation report, fact sheet, networking reflection, professional blog entry, health system paper/fact sheet, business plan, case analysis, healthcare legal brief, program plan, grant proposal. These products vary by concentration.</p> <p>Since the ILE will be implemented next academic year, there are no examples to review. Therefore, the team is unable to assess the quality of the written products. On its face, the descriptions of the ILE and the written products for the most part appear to be appropriate for the various options. Some products, however, are not explicitly useful to external stakeholders.</p> <p>During the site visits, some of the faculty leaders described the process and plans for the ILEs. They confirmed the descriptions in the self-study and that the assessment would be based on the concentration competencies only. They also indicated that the faculty will be able to assess synthesis of competencies because of the way the ILEs are planned, i.e., students will demonstrate attainment of option competencies through completion of the product. However, there is no assessment of synthesis of MPH and option competencies on the rubric. Because the ILE has</p>	<p>the evaluation of the ILE, including synthesis, and the pass/fail determination. We also wish to note that for two MPH options (Epidemiology and HMP), ILE assessment rubrics were not available at the time of the site visit; those rubrics have now been added to RFD7.3. MPH ILE Descriptions.docx. All files are located in D7. MPH Integrative Learning Experience.</p>	
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		<p>not been implemented, the site visit team was not able to gain student perspectives.</p> <p>The first concern relates to the site visit team's inability to assess the quality of the written product because the process has not been fully developed.</p> <p>The second concern relates to the site visit team's inability to validate faculty assessment of student synthesis competencies in the work product. Current descriptions and on site discussions of the ILE do not clearly describe how faculty will assess synthesis of foundational and concentration competencies.</p>		
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D8. DRPH INTEGRATIVE LEARNING EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D9. PUBLIC HEALTH BACHELOR'S DEGREE GENERAL CURRICULUM

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students introduced to all domains:			Click here to enter text.	Click here to enter text.
1. Foundations of scientific knowledge, including biological & life sciences & concepts of health & disease		The college offers the BS in public health with two options: health management and policy (HMP) and health promotion and health behavior (HPHB). Association of University Programs in Health Administration (AUPHA) certifies the HMP concentration.		

2. Foundations of social & behavioral sciences				
3. Basic statistics				
4. Humanities / fine arts		<p>Students must complete 180 credit hours for degree completion, 57 of which are university required courses. OSU requires students to take 15 credits of skills courses (e.g., math, communication), 24 credits of perspective courses (e.g., science, culture), three hours of discrimination/power courses, six credits of synthesis courses (e.g., science, global issues), and three credits of upper division writing intensive courses. In addition, the public health core requires 26-27 quarter credits; the HMP option requires an additional 32 quarter credits, while the HPHB option requires an additional 21 quarter credits. Finally, each concentration has requirements for supporting courses from other disciplines (e.g., HMP requires 43 quarter credits according to AUPHA requirements and HPHB requires 21 quarter credits in biology or sociology.)</p> <p>The college ensures that it introduces public health bachelor's degree students to the four major domains by requiring courses in each of the four areas. To satisfy scientific knowledge public health students take 12-14 credits in the physical or biological sciences. Within this credit requirement HMP students must take a microbiology course, and HPHB students must take general biology and human nutrition courses. In addition, both concentrations are required to take a human disease course. HMP public health students take economics (3 credits) and HPHB students take general psychology and sociology (6 credits) that are examples of social and behavioral sciences. In addition, all public health students must take a discrimination and power course as well as a social determinants course. To satisfy the basic statistics requirement, public health students take a math course,</p>		

		health data analysis or introduction to statistics, and epidemiology (nine credits). Finally, to satisfy the humanities requirement, public health student take three credits of literature or fine arts, and three of western culture.		
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D10. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL DOMAINS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Curriculum ensures that all elements of all domains are covered at least once (see worksheet for detail)		The college uses eight three-credit courses to ensure that bachelor's students are exposed to the public health domains. Courses include introduction to public health, introduction to US health care system, introduction to health policy, introduction to human disease, social and individual health determinants, foundation of environmental health, foundation of epidemiology, and the internship.	Click here to enter text.	Click here to enter text.
If curriculum intends to prepare students for a specific credential (eg, CHES), curriculum addresses the areas of instruction required for credential eligibility	N/A	The team's review of the syllabi and assignments validated that all domains were covered at least once by the courses taken by all public health students. For example, core public health concepts were covered in H225 and data usage was introduced in H100 and covered in H320. During the site visit, faculty who teach and/or lead the undergraduate public health programs were able to provide specific examples of where public health students are exposed to the domains to supplement information provided in the self-study.		

D10 Worksheet

Public Health Domains	Yes/CNV
1. History & philosophy of public health as well as its core values, concepts & functions across the globe & in society	Yes
2. Basic concepts, methods & tools of public health data collection, use & analysis & why evidence-based approaches are an essential part of public health practice	Yes
3. Concepts of population health, & the basic processes, approaches & interventions that identify & address the major health-related needs & concerns of populations	Yes
4. Underlying science of human health & disease, including opportunities for promoting & protecting health across the life course	Yes
5. Socioeconomic, behavioral, biological, environmental & other factors that impact human health & contribute to health disparities	Yes
6. Fundamental concepts & features of project implementation, including planning, assessment & evaluation	Yes
7. Fundamental characteristics & organizational structures of the US health system as well as the differences between systems in other countries	Yes
8. Basic concepts of legal, ethical, economic & regulatory dimensions of health care & public health policy & the roles, influences & responsibilities of the different agencies & branches of government	Yes
9. Basic concepts of public health-specific communication, including technical & professional writing & the use of mass media & electronic technology	Yes

D11. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students demonstrate & are assessed on each competency & all its elements:			Click here to enter text.	Click here to enter text.
1. ability to communicate public health information, in both oral & written forms, through a variety of media & to diverse audiences		The self-study describes how students demonstrate communication and informational literacy skills in both options (HMP and HPHB) in the bachelor's degree. For the HMP option, students are assigned a variety of oral and written projects in H434, H250, H436, and H210. For example, in H436: Advanced Topics in Healthcare Leadership, students do an oral presentation of their group project. In H434: Healthcare Law and regulations, students write a policy brief as their final project. Students communicate with three audiences: other students, faculty, and a healthcare professional, although for the latter, the communication is in the form of an interview. Finally, there are a number of literacy assessment opportunities in the four courses indicated above. For example, in H436, students use and evaluate information gathered from academic resources and interviews to complete several assignments. In H210: Introduction to the U.S. Healthcare System, students view a documentary and conduct a written analysis based on a set of questions provided by the faculty.		
2. ability to locate, use, evaluate & synthesize public health information		For the HPHB option, students are taught to communicate health information in H310: Health Field Experiences and literature and data identification in H225: Social and Individual Health Determinants. In addition, written communication skills are appropriately assessed in H310, H320, H476, H210. For example, students develop a scholarly poster in H320: Introduction to Human Disease		

		<p>and a program and an evaluation plan in H476 Planning and Evaluating Health Promotion Programs. The college requires students to create a variety of health materials (digital posters, brochures, scholarly posters) for diverse audiences in H310, H225, H320, and H476. Students are assessed on information literacy in H310, H225, H320 and H476. To assess information location, students search for prevalence data from a variety of sources in H225. Students demonstrate information use in H225 by supporting a topical issue, critiquing a mass media article for bias in H476, and synthesizing information from scholarly sources and professional organizations for the final project in H320, in which they develop a flier, PowerPoint, video, audio, poster, or paper.</p> <p>During the site visit, faculty explained that all undergraduate students are required to take one writing intensive course. Faculty who teach writing intensive courses receive training from the Center on Teaching and Learning to be adequately prepared to meet the university requirements for the courses.</p>		
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D11 Worksheet

Competency Elements	Yes/CNV
Public Health Communication	
Oral communication	Yes
Written communication	Yes
Communicate with diverse audiences	Yes
Communicate through variety of media	Yes
Information Literacy	
Locate information	Yes
Use information	Yes
Evaluate information	Yes
Synthesize information	Yes

D12. PUBLIC HEALTH BACHELOR'S DEGREE CUMULATIVE AND EXPERIENTIAL ACTIVITIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students complete cumulative & experiential activities		All bachelor's students complete a 12-credit internship experience requiring 360 contact hours during one or two terms. The college provides a list of possible sites, many of which are regional and state institutions with affiliate agreements. These include hospitals, clinics, and nonprofit organizations.	Click here to enter text.	Click here to enter text.
Activities require students to integrate, synthesize & apply knowledge & program encourages exposure to local-level professionals & agencies		<p>There is an undergraduate internship coordinator who provides a two-credit pre-internship course and is available to students throughout the selection of a site and during the internship. The coordinator determines the final grade.</p> <p>Students must assure that they will complete projects that demonstrate integration of competencies during the internship. At its completion, they submit a portfolio that comprises an updated resume, an analysis/reflection that describes the experience including two examples of application of coursework, and a detailed description of at least two projects. Portfolio examples provided to the site visit team showed evidence of cumulative experiences.</p> <p>Each bachelor's degree option has an additional cumulative and experiential activity. HMP requires a policy brief in the health law course. HPHB has an additional 45-contact-hour practicum that is assessed by a reflective paper where students must connect public health</p>		

		concepts to their experiences and analyze how they relate to their practicum site. .		
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D13. PUBLIC HEALTH BACHELOR'S DEGREE CROSS-CUTTING CONCEPTS AND EXPERIENCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Program ensures opportunities available in all cross-cutting areas (see worksheet for detail)		<p>Students are exposed to the cross-cutting concepts and experiences primarily through a required internship for both concentrations and courses in each option. For example, H 407 is a course that prepares students for the internships. Guest speakers are regularly invited to present and then meet with students. Additionally, students are exposed to some of these concepts in the option courses. For example, in HMP course H 436 students study cultural contexts in which public health professionals work.</p> <p>During the site visit, the faculty provided specific examples of course learning and experiences, beyond the internship, in which students are exposed to each of the cross-cutting concepts and experiences. For example, students are exposed to systems thinking in H 100: Introduction to Public Health through readings, discussion posts, and an assignment. In another example, students are exposed to research methods in H 225: Social and Individual Health Determinants through readings during the second week of the course and attending the Undergrad Research and Writing Studio and OPHA Expo in the third week of the course.</p>	Click here to enter text.	Click here to enter text.

D13 Worksheet

Cross-cutting Concepts & Experiences	Yes/CNV
advocacy for protection & promotion of the public's health at all levels of society	Yes
community dynamics	Yes
critical thinking & creativity	Yes
cultural contexts in which public health professionals work	Yes
ethical decision making as related to self & society	Yes
independent work & a personal work ethic	Yes
Networking	Yes
organizational dynamics	Yes
Professionalism	Yes
research methods	Yes
systems thinking	Yes
teamwork & leadership	Yes

D14. MPH PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
MPH requires at least 42 semester credits or equivalent		<p>The college requires all MPH students to complete a curriculum of more than 56-quarter credit hours. The number of credits range from 59-62. The credit requirement per concentration are as follows: 59 for biostatistics, 62 for environmental and occupational health, 60 for epidemiology, 60 for global health, 61 for health management and policy, 59 for health promotion and health behavior, and 60 for public health practice.</p> <p>The school measures a credit by the total time commitment required of a typical student in a particular course. One-quarter credit generally equals three hours per week of work in and out of class over a 10-week period.</p>	Click here to enter text.	Click here to enter text.

D15. DRPH PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D16. BACHELOR'S DEGREE PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Required credit hours commensurate with other similar degrees in institution		<p>The bachelor's degree requires a total of 180 quarter credit hours for completion, which is consistent with all undergraduate degrees at the university. The university is on the quarter system, each of which is 10 weeks plus an exam week. One quarter credit hour is equivalent three hours per week of work in and out of the classroom.</p> <p>The university will accept up to 124 lower division quarter credits for transfer from any Oregon 4-year university or regionally accredited community college. The university has course articulation agreements with community colleges.</p>	Click here to enter text.	Click here to enter text.
Clear, public policies on coursework taken elsewhere, including at community colleges				

D17. ACADEMIC PUBLIC HEALTH MASTER'S DEGREES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D18. ACADEMIC PUBLIC HEALTH DOCTORAL DEGREES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines specific assessment activity for each of the foundational public health learning objectives (see worksheet for detail)		<p>The school offers a PhD in five concentrations: environmental and occupational health, epidemiology, global health, health policy, and health promotion and health behavior. The school ensures that students receive coverage and are assessed on the foundational learning objectives through a required course, H 523: Foundations of Public Health. Students have the option to take the MPH integrated core course (H 513) instead of H 523 because the courses are equivalent and cover all of the learning objectives. The depth of instruction is more than equivalent to a three-credit course. Students are assessed on each of the learning objectives, with exceptions noted below. Reviewers could validate didactic preparation and assessment for most of the learning objectives.</p> <p>The first concern relates to the site visit team's inability to validate appropriate assessment of all of the learning objectives for students taking H 523. For example, reviewers could not validate coverage of qualitative data in the assessment for learning objective three.</p> <p>Each concentration has between four and nine concentration competencies with concentration courses mapped to these competencies. Concentration competencies range from "design and conduct collaborative research to examine the effectiveness of</p>	<p>All changes to concentration (option) tables and assessments are located in the folder D18. Academic Public Health Degrees. All D18.2 tables occur in D18.3 of the CEPH report.</p> <p>D18.2. Introductory Public Health Learning Objectives</p> <p>Validated coverage of qualitative data in the assessment of learning objective 3. In H 523 added assessment: CDC EPI outbreak assignment. In Weeks 6-8: Epidemiology study design calculation of Relative Risk and Odds Ratios, and written assignment identifying qualitative and quantitative measures to describe and evaluate population health and health promotion programs/policies</p>	<p>The Council reviewed the college's response to the site visit team's report that demonstrates updated information on assessment. The Council found that the college addressed the concerns raised in the site visit team's report. Therefore, the Council acted to change the finding from partially met to met.</p>
Depth of instruction in 12 learning objectives is equivalent to 3-semester-credit course				
Defines competencies for each concentration. Competencies articulate an appropriate depth of knowledge & skill for degree level				
Assesses all students at least once on their ability to demonstrate each concentration competency				
Curriculum addresses scientific & analytic approaches to discovery & translation of public health knowledge in the context of a population health framework				
Instruction in scientific & analytic approaches is at least equivalent to a 3-semester-credit course				
Students produce an appropriately advanced research project at or near end of program				

<p>Students have opportunities to engage in research at appropriate level</p>		<p>interventions and systems in global health and translate findings into global health practice and systems capacity strengthening” to “critically evaluate, select, and apply social and behavioral science research methods to conduct basic, intervention, and dissemination and implementation science research.” The competency sets as a whole appear to have sufficient depth for a doctoral degree. One competency in health management and policy was written at a lower level than what is typically expected for a PhD. When asked on site, faculty were able to explain the depth and complexity of the assignment. The school may consider changing the wording to better reflect the skills the students are learning. The school has mapped multiple courses to each of the concentration competencies.</p>	<p>specific to their selected HP2020 topic objective.</p>	
<p>Curriculum includes doctoral-level, advanced coursework that distinguishes program from master’s-level study</p>		<p>The second concern relates to the site visit team’s inability to validate didactic coverage and appropriate assessment for all concentration competencies. Specifically, reviewers could not validate 11 competencies. For example, reviewers could not validate that the assessment for concentration competency two for health promotion health behavior covers conducting research. Details provided during on site discussions did not allow reviewers to validate coverage of the competencies that could not be validated through syllabi review.</p> <p>The following concentration competencies could not be validated:</p> <ul style="list-style-type: none"> • Environmental concentration competencies one and three • Epidemiology concentration competency four • Global health concentration competencies two, three, and four 	<p>All assessments are included in RFD18.1. Content Coverage for academic doctoral degree in a public health field. Changes to Table D18.1 are located in the folder D18. Academic Public Health Degrees.</p> <p>D18.2.1. Environmental and Occupational Health (EOH) Concentration:</p> <ul style="list-style-type: none"> • Validated didactic preparation of competency 2 • Validated assessments for competencies 1 and 3 <p>For competency #1 to accompany the syllabus with H 682, uploaded 2 of the assignments that have the students use theories, conceptual models.</p> <p>For competency #2 uploaded the detailed syllabus of H 611 – and replaced H 603 with H 611, but the specific assessment opportunity description remains the same.</p> <p>For competency #3 replaced H 681 with H 611, but the description</p>	

		<ul style="list-style-type: none"> • Health management and policy concentration competency three • Health promotion health behavior concentration competencies one, two, three, and five <p>In addition to the concentration competencies, all students are required to meet four overarching competencies regardless of the concentration that they are in.</p> <p>All students receive instruction in scientific and analytic approaches through methods courses. The range of required quarter credits is 18 to 24 with the exact number depending on the concentration. The credit range is beyond that of a typical three credit course. The courses chosen by the student must be substantially different from one another and must represent expanded statistical/methodological techniques.</p> <p>All students must complete an advanced research project in the form of a dissertation at the end of the program in order to graduate. Students first submit a written dissertation proposal to their committee followed by an oral presentation about the proposal. If their proposal is approved, students move on to writing their dissertation. Once the students have finished their dissertation and their committee determined that they are ready to defend it, the students take their final oral exam and finish with a dissertation defense. The school provided examples from all concentrations with the exception of global health because it is relatively new and no students have completed a dissertation in this concentration yet. Reviewers determined that the products provided were appropriate to the degree level. Examples of dissertations</p>	<p>remains. Added a policy brief assignment given in H 682 that fits this competency.</p> <p>All assessments are included in RFD18.2.1. PhD Environ _Occupational Health. Changes to Table D18.2.1 are located in the folder D18. Academic Public Health Degrees.</p> <p>D18.2.2. Epidemiology (EPI) Concentration:</p> <p>Validated didactic preparation and assessment of competency 4. Added H 699 Special Studies: Doctoral Grant Writing to address this competency.</p> <p>All assessments are included in RFD18.2.2. PhD Epidemiology. Changes to Table D18.2.2 are located in the folder D18. Academic Public Health Degrees.</p> <p>D18.2.3. Global Health Concentration:</p> <p>Validated assessment for competency 1 and 2</p>	
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		<p>include “In Utero Exposure to Arsenic and Mercury: Epigenome-Wide Associations and Newborn Health Outcomes,” “Current Drug Policies in the United States: Using Research to Inform Policy,” and “Examining Evidence-based Intervention Sustainability and De-adoption in the Context of HIV Prevention.”</p> <p>PhD students are required to take a one credit doctoral seminar three times in addition to doctoral level research methods courses. Each concentration has a mixture of doctoral and master level courses that students can take. While students can take masters level courses, reviewers felt that the curriculum was distinct from the MPH due to the required doctoral level courses and dissertation. In addition, faculty advisors review student courses to ensure that they are not taking too many master level courses, particularly in their concentration area.</p>	<ul style="list-style-type: none"> • Changed assessment and assessment description of course H 622 to align with the competency. “Assignment: In the Institutional Case Study assignment, students describe the work of an international non-governmental organization (INGO) (mission, vision, financial structure) and apply the human rights framework to evaluate the organization’s health-related work. This assignment assesses students’ knowledge about health equity and social justice as defined by human rights theories and asks them to apply this knowledge to a specific INGO case. Following the human rights framework, students are assessed on including community participation (e.g., community systems strengthening) and on the inclusion of stakeholders from multiple disciplines (e.g., anthropologists, epidemiologists, program evaluators) in their recommendations for the programmatic work conducted at the case study INGOs.” These changes also show up for competency 2. 	
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			<ul style="list-style-type: none"> • In addition, changed assessment and assessment description of H 626 to align with competency 1. The new wording in the description of this competency includes this line: “from a multidisciplinary ethical perspective”. These changes also show up for competency 2. <p>Validated assessments for competency 3</p> <ul style="list-style-type: none"> • Changed assessment and assessment description of course H 516 to align with the competency: “Assignment: The H 516 Research Brief will assess students’ abilities to write appropriate research questions for mixed methods design, their abilities to practice/use interview techniques, and to consult community stakeholders in research design to ensure that it is appropriate to local community standards and capacity. Students will be assessed on their ability conduct research (in-depth interview with stakeholder and focus group) to incorporate stakeholder feedback in their proposed research design. By 	
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			<p>formally consulting community stakeholders, interviewing them, and including their input in the design and conduct of research, students will be taught and assessed on their ability to cultivate partnerships, collaborate strategically, and adapt to a wide range of context. Students are assessed on their ability to conduct collaborative team-based data analysis.” These changes also show up for competency 4.</p> <p>Validated didactic preparation and assessment for competency 4</p> <ul style="list-style-type: none"> • Changed assessment and assessment description of course H 599 to align with the competency: “Instruction and Assessment: This course instructs students to: 1. Have deep awareness of their personalized strengths, which make them stand out from others and apply this knowledge to add value to a team, workgroup or an organization, 2. Apply principles and practice of organizational leadership, governance and management, 3. Understand how to create a 	
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			<p>valuable future by fostering sustainable culture, managing change and delivering results, and 4. Illustrate specific communication strategies for various audiences and sectors for enhancing sustainable resources. In the beginning of the term, students' leadership skills are assessed using the Clifton Strengths Quest test. This test is then used to instruct students on how to build teams based on complementary skillsets. Their effective collaboration is assessed and evaluated during their culminating leadership presentation, which synthesizes and applies knowledge about: 1) organizational dynamics and collaboration, 2) individual attributes and fit, 3) vision & mission dynamics 4) organizational development, funding, and grant-seeking to reach goals, 5) identify outcomes and expected return on investment."</p> <p>All assessments are included in RFD18.2.3. PhD Global Health. Changes to Table D18.2.3 are</p>	
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			<p>located in the folder D18. Academic Public Health Degrees.</p> <p>D18.2.4. Health Policy Concentration.</p> <p>Validated didactic preparation of competency 1. Competency 1 was reworded to “Demonstrate in-depth knowledge of theoretical frameworks and research literature regarding the development and implementation of health policy”.</p> <p>Validated assessments for competency 3 related to courses H 630, H 659, H 632, H 524, H 580, H 581, H 582, H 613, H 614, and H 699.</p> <p>All assessments are included in RFD18.2.4. PhD Health Policy. Changes to Table D18.2.4 are located in the folder D18. Academic Public Health Degrees.</p> <p>D18.2.5. Health Promotion and Health Behavior Concentration:</p> <p>Changed wording of competencies.</p> <p>The HPHB faculty have revised the wording of three of their competencies (#2, 3, and 5) to better reflect what all PhD students in this concentration are expected to</p>	
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			<p>achieve in the program. The revised wording is as follows:</p> <p>#2. Design and conduct theoretically driven research that reflects an understanding of the determinants of health and health-related behaviors and provides the foundation to (a) develop effective social, behavioral, and/or structural interventions or (b) disseminate and implement effective programs.</p> <p>#3. Critically evaluate, select, and apply social and behavioral science research methods to conduct basic, intervention, and/or dissemination and implementation science research.</p> <p>#5. Demonstrate the capability to design and execute rigorous social and behavioral research to address contemporary public health issues and to reduce health disparities.</p> <p>Validated assessments for competencies 1, 2, 3, 5 and additionally, the HPHB faculty have added to Table D18.2.5 the following specific assessment opportunities:</p>	
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			<ul style="list-style-type: none"> • Competency #1: Research Practicum and Written Comprehensive Exam have been added. • Competency #2, #3, and #5: Written Comprehensive Exam has been added. <p>The following documents are provided for further information about how these competencies are assessed in these specific opportunities:</p> <ul style="list-style-type: none"> • New description of the research practicum and written comprehensive exam • Syllabus for the Fall 2019 course (H 699) taught by Catania (the 2018 syllabus was included in the self-study); this is the first course in research practicum series/sequence • Syllabus for the Spring 2019 course (H699) taught by Irvin; this course is the third course in the research practicum series/sequence • A sample student produce from the Fall 2018 research practicum course 	
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			<ul style="list-style-type: none">• Sample questions for the HPHB written comprehensive exam, which will be given for the first time this fall. <p>All assessments are included in RFD18.2.5. PhD Health Promotion and Health Behavior. Changes to Table D18.2.5. are located in the folder D18. Academic Public Health Degrees.</p>	
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D18-1 Worksheet

Foundational Knowledge	Yes/CNV
1. Explain public health history, philosophy & values	Yes
2. Identify the core functions of public health & the 10 Essential Services	Yes
3. Explain the role of quantitative & qualitative methods & sciences in describing & assessing a population's health	Yes
4. List major causes & trends of morbidity & mortality in the US or other community relevant to the school or program	Yes
5. Discuss the science of primary, secondary & tertiary prevention in population health, including health promotion, screening, etc.	Yes
6. Explain the critical importance of evidence in advancing public health knowledge	Yes
7. Explain effects of environmental factors on a population's health	Yes
8. Explain biological & genetic factors that affect a population's health	Yes
9. Explain behavioral & psychological factors that affect a population's health	Yes
10. Explain the social, political & economic determinants of health & how they contribute to population health & health inequities	Yes
11. Explain how globalization affects global burdens of disease	Yes
12. Explain an ecological perspective on the connections among human health, animal health & ecosystem health (eg, One Health)	Yes

D18-2 Worksheet

PhD Environmental and Occupational Health Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Demonstrate understanding of and ability to apply theories and conceptual models in the field of environmental and occupational safety and health.	Yes	Yes
2. Design and conduct research to better understand the effects of environmental and occupational health and safety hazards on human health and the environment, requiring design of a study, data collection, appropriate use of statistical methods, interpretation of results, and publication of findings.	Yes	Yes
3. Conceptualize environmental and occupational health and safety hazards in terms of their multi-disciplinary nature and ethical and ideological underpinnings, to include cultural, social, economic, environmental, behavioral, and legal factors.	Yes	Yes
4. Apply professional skills which uphold standards of professional integrity and that allow for effective synthesis and communication of research questions and results, including working with and reviewing the work of others in a respectful and collegial manner.	Yes	Yes

PhD Epidemiology Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Demonstrate comprehensive knowledge of basic and advanced concepts of epidemiology.	Yes	Yes
2. Exhibit proficiency in advanced data analysis techniques.	Yes	Yes
3. Demonstrate ability to critically evaluate results of epidemiologic studies.	Yes	Yes
4. Show competence in scientific and grant writing.	Yes	Yes

PhD Global Health Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Demonstrate understanding of and ability to apply critical theories and conceptual models of health equity and social justice in the field of global health.	Yes	Yes
2. Conceptualize global health challenges in terms of their multi-disciplinary nature and ethical and ideological underpinnings, to include cultural, social, economic, environmental, behavioral, and political systems.	Yes	Yes
3. Design and conduct collaborative research to examine the effectiveness of interventions and systems in global health and translate findings into global health practice and systems capacity strengthening.	Yes	Yes
4. Demonstrate the skills necessary to contribute to a community of scholars and stakeholders who are collegial and respectful and uphold ethical standards in collaborations and partnerships with each other and the community at large.	Yes	Yes

PhD Health Policy Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Demonstrate in-depth knowledge of theoretical frameworks and research literature regarding the development and implementation of health policy.	Yes	Yes
2. Demonstrate knowledge of the issues, research literature, conceptual frameworks, and research tools in a specific area of public health policy.	Yes	Yes
3. Design and conduct research from the initial conception of an idea to study design, data collection, application of appropriate analytic methods, interpretation of results, publication of findings, and translation into program and policies.	Yes	Yes
4. Communicate scientific findings through written and oral methods to technical and lay audiences.	Yes	Yes
5. Demonstrate the skills necessary to contribute to the establishment and maintenance of a community of scholars who are collegial and respectful and who uphold standards of professional integrity in interactions with each other the community at large.	Yes	Yes

PhD Health Promotion and Health Behavior Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Conceptualize and critically evaluate public health problems at multiple levels and within diverse cultural, social, behavioral, economic, environmental, policy, and other contexts.	Yes	Yes
2. Design and conduct theoretically driven research that reflects an understanding of the determinants of health and health-related behaviors and provides the foundation to (a) develop effective social, behavioral, and/or structural interventions or (b) disseminate and implement effective programs.	Yes	Yes
3. Critically evaluate, select, and apply social and behavioral science research methods to conduct basic, intervention, and/or dissemination and implementation science research.	Yes	Yes
4. Apply dissemination and implementation science principles to communicate and promote the translation of public health findings to practice.	Yes	Yes
5. Demonstrate the capability to design and execute rigorous social and behavioral research to address contemporary public health issues and to reduce health disparities.	Yes	Yes
6. Demonstrate the skills necessary to contribute to the establishment and maintenance of a community of scholars who are collegial, respectful, and uphold the standards of professional integrity.	Yes	Yes

D19. ALL REMAINING DEGREES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines specific assessment activity for each of the foundational public health learning objectives (see worksheet for detail)		All non-public health undergraduate students in the college must take the four-credit course H 100. Graduate students who are non-public health students must take the four-credit course H 523. Both courses serve as an introduction to public health with the purpose of exposing students to the 12 learning objectives.	<p>D19. All Remaining Degrees Competencies and Assessments</p> <p>Validated qualitative aspects and the assessment of competency 3. Added an assessment opportunity for H 523: CDC EPI outbreak assignment. In Weeks 6-8: Epidemiology study design calculation of Relative Risk and Odds Ratios, and written assignment identifying qualitative and quantitative measures to describe and evaluate population health and health promotion programs/policies specific to their selected HP2020 topic objective. CDC EPI outbreak assignment. Epidemiology study design calculation of Relative Risk and Odds Ratios, and written assignment identifying qualitative and quantitative measures to describe and evaluate population health and health promotion programs/policies specific to their selected HP2020 topic objective.</p>	The Council reviewed the college's response to the site visit team's report that demonstrates updated information on assessment. The Council found that the college addressed learning objective 3. Therefore, the Council changed the finding from partially met to met.
Depth of instruction in 12 learning objectives is equivalent to 3-semester-credit course		<p>The concern relates to the site visit team's inability to validate didactic coverage and appropriate assessment for all learning objectives. Specifically, reviewers could not validate didactic coverage and assessment of the qualitative data aspect of learning objective three for the graduate level course.</p> <p>OSU's formula for a three-semester credit course translates into a 4.5-quarter credit course. The college courses for foundational knowledge (H 100 & H 523) are both 4 quarter credits roughly equivalent to the instruction and assessment in a three-credit semester course.</p>		

			All assessments are included in RFD19.1.2. Content Coverage non-PH grad. Changes to Table D19.1.2 are located in D19. All Remaining Degrees.	
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D19 Worksheet

Foundational Knowledge	Yes/CNV Grad	Yes/CNV UG
1. Explain public health history, philosophy & values	Yes	Yes
2. Identify the core functions of public health & the 10 Essential Services	Yes	Yes
3. Explain the role of quantitative & qualitative methods & sciences in describing & assessing a population's health	Yes	Yes
4. List major causes & trends of morbidity & mortality in the US or other community relevant to the school or program	Yes	Yes
5. Discuss the science of primary, secondary & tertiary prevention in population health, including health promotion, screening, etc.	Yes	Yes
6. Explain the critical importance of evidence in advancing public health knowledge	Yes	Yes
7. Explain effects of environmental factors on a population's health	Yes	Yes
8. Explain biological & genetic factors that affect a population's health	Yes	Yes
9. Explain behavioral & psychological factors that affect a population's health	Yes	Yes
10. Explain the social, political & economic determinants of health & how they contribute to population health & health inequities	Yes	Yes
11. Explain how globalization affects global burdens of disease	Yes	Yes
12. Explain an ecological perspective on the connections among human health, animal health & ecosystem health (eg, One Health)	Yes	Yes

D20. DISTANCE EDUCATION

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Instructional methods support regular & substantive interaction between & among students & the instructor		The distance learning MPH is for public health practice. The college launched the concentration this year and has 11 students in the first cohort. The expectation is to grow to cohorts of 25 students per year.	Click here to enter text.	Click here to enter text.
Curriculum is guided by clearly articulated learning outcomes that are rigorously evaluated		The rationale for the program was the need to reach out to the many residents of Oregon not close to major cities who have an interest in getting an advanced public health degree.		
Curriculum is subject to the same quality control processes as other degree programs in the university				
Curriculum includes planned & evaluated learning experiences that are responsive to the needs of online learners		The college built the curriculum in collaboration with OSU's online program development group and it is structured similar to the in-person degrees. Classes and assignments are offered weekly. Students are engaged by instructors by discussion boards and also engage each other through a student lounge created in Canvas. The program director reported students in some parts of the state meet on the weekend for a study group.		
Provides necessary administrative, information technology & student/faculty support services				
Ongoing effort to evaluate academic effectiveness & make program improvements		The OSU online group provides IT support to all faculty teaching in the course. The MPH coordinator provides administrative and student support.		
Processes in place to confirm student identity & to notify students of privacy rights and of any projected charges associated with identity verification		At the end of each semester all faculty who taught that semester assess for each competency targeted in their course whether the student 'exceeded', 'met' or were 'below'.		

		<p>There is a formal evaluation of the online program planned after the first year by the online program staff and the program director. However, since this is the first year there are no findings. The program director is speaking weekly with all 11 students to obtain feedback and provide support since many of the students are non-traditional students.</p> <p>Evaluation of the rigor of the delivery of the program is the same as in in-person classes. There are both faculty peer review of courses as well as student reviews. These contribute to faculty performance evaluation.</p>		
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E1. FACULTY ALIGNMENT WITH DEGREES OFFERED

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Faculty teach & supervise students in areas of knowledge with which they are thoroughly familiar & qualified by the totality of their education & experience		All but three PIF and 2 non-PIF hold doctorates. In almost all cases, these degrees are directly related to the areas of teaching focus. For example, in the epidemiology concentration, all four PIF have PhDs in epidemiology and the non-PIF has a PhD and a DSc in epidemiology. All five faculty members have epidemiological research and teaching experience and one has worked as an epidemiologist for the CDC.		Click here to enter text.
Faculty education & experience is appropriate for the degree level (eg, bachelor's, master's) & nature of program (eg, research, practice)		Faculty scholarship and practice experience further align with areas of teaching and provide additional evidence of expertise for faculty teaching in areas that vary slightly from the disciplinary area in which they earned a graduate degree. For example, an instructor with an MBA has 20		

		<p>years of experience as a health care management consultant and 16 years of experience as a long-term care administrator to supplement their degree and provide instruction in the health management and policy concentration.</p> <p>Of the 39 PIF faculty, 29 have graduate degrees from CEPH-accredited schools and programs, including MPH, PhD, DrPH, and MHS. The additional faculty members have non-public health degrees from accredited universities in the U.S. and internationally.</p>		
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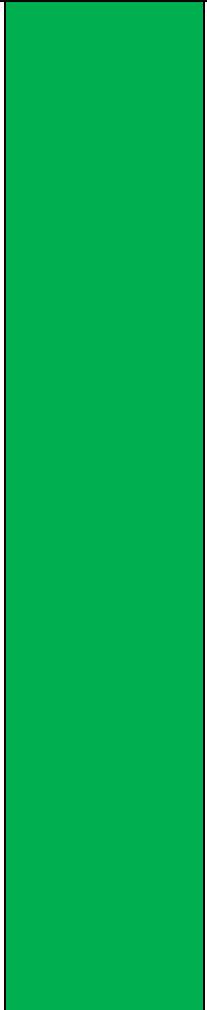
E2. INTEGRATION OF FACULTY WITH PRACTICE EXPERIENCE

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Employs faculty who have professional experience in settings outside of academia & have demonstrated competence in public health practice		<p>The college has faculty members with a wide variety of practice experience. Examples include an epidemiologist who worked at the CDC, an employee benefits program manager, and a tribal toxicologist. In addition, the college is strengthening its relationship with the state’s local health departments, including offering courtesy faculty appointments to health officers. About half of the state’s local health officers have accepted appointments.</p> <p>The college has formed academic health department relationships with several local health departments. These provide opportunities for faculty engagement with practitioners. For example, site visitors learned that the relationships were initiated after the local county health department sought public health mapping expertise from</p>	Click here to enter text.	Click here to enter text.
Encourages faculty to maintain ongoing practice links with public health agencies, especially at state & local levels				
Regularly involves practitioners in instruction through variety of methods & types of affiliation				

		<p>a faculty member, which led to a community-based service opportunity for faculty and students.</p> <p>Instruction involves guest lectures by practitioners, including regular features such as panel discussions in the foundational course and presentation of practitioner experience and expertise on practice-oriented issues such as surveillance and program evaluation. There is also a weekly public health seminar series that often features guest lecturers on practice subjects. Several stakeholders who met with site visitors provided guest lectures, some quite regularly.</p>		
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E3. FACULTY INSTRUCTIONAL EFFECTIVENESS

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Systems in place to document that all faculty are current in areas of instructional responsibility		<p>The college evaluates faculty for their instructional effectiveness during performance reviews. The emphasis placed on evaluating instructional effectiveness is contingent on the amount of teaching a faculty does. Faculty receive additional pay for active participation in evaluating instructional effectiveness. The evaluation process is clear and transparent at the university and the faculty senate approves it. Student feedback is integrated into the performance review based on feedback from courses they took from the faculty.</p> <p>Faculty also undergo a peer review of their teaching that includes faculty peer reviewers and a report from a</p>	<p>Click here to enter text.</p>	<p>Click here to enter text.</p>
Systems in place to document that all faculty are current in pedagogical methods				
Establishes & consistently applies procedures for evaluating faculty competence & performance in instruction				
Tracks indicators that provide meaningful information related to instructional quality				

<p>Supports professional development & advancement in instructional effectiveness for all faculty</p>		<p>student committee. The results are compiled in a confidential letter. The program directors that manage the concentrations within each school use the confidential letter to monitor teaching effectiveness. Instructional effectiveness is also part of the promotion and tenure process.</p> <p>There are a wide range of university and college resources to support improving instructional effectiveness. New faculty receive start-up and travel funds to support their teaching and research. There is also mentoring of faculty. The college is launching a new mentoring program to support instructional effectiveness. Faculty identified as requiring support meet with their program director and with a peer mentor to identify and practice strategies to improve teaching.</p> <p>On site, doctoral students who teach provided feedback that they would like more training related to classroom management. Based on follow up discussions with faculty and administrators, they noted resources are available to support these students.</p> <p>The college measures instructional quality through faculty currency based on a self-evaluation developed by The Center for Teaching and Learning that includes new questions about teaching goals and pedagogy, annual or biannual assessment by peers of teaching effectiveness, and evaluation of the school wide integration of public health course.</p>		
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E4. FACULTY SCHOLARSHIP

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Policies & practices in place to support faculty involvement in scholarly activities		<p>The stated scholarship expectations are clear:</p> <ul style="list-style-type: none"> • Consistently publish journal articles reflecting rigorous research activity • Have a significant authorship role on a minimum of 2 peer-reviewed articles per year • Publish in journals that have a measurable and moderate or high impact • Publish with graduate students • Seek, obtain and manage research grants <p>Faculty expectations are negotiated with the program directors depending on teaching research and service responsibilities.</p> <p>On site, faculty reported expectations were reasonable and appropriate. They stated that while the standard is 45% teaching, 45% research and 10% service, almost no person fit the standard. College leaders explained to reviewers that they tailor all percentages to the individual.</p> <p>These expectations align with both the university and college missions to be a top tier research, teaching, and outreach public health institution.</p> <p>There is support from the university for research activities including research ethics review. The university provides incentives for faculty including bridge funds, small grants, and large program/project grant submission support.</p>	Click here to enter text.	Click here to enter text.
Faculty are involved in research & scholarly activity, whether funded or unfunded				
Type & extent of faculty research aligns with mission & types of degrees offered				
Faculty integrate their own experiences with scholarly activities into instructional activities				
Students have opportunities for involvement in faculty research & scholarly activities				
Tracks measures that are meaningful and demonstrate success in research and scholarly activities				

		<p>There are library and IT infrastructures to support research.</p> <p>The college is implementing a new mentoring program to better support enhancing the research culture. There are four major research centers in the college that support research activities and a strong environment for supporting faculty scholarship.</p> <p>Reviewers could clearly see that faculty integrate their research into teaching and involve students in research. For example, one faculty member has established the Botswana Global Health Internship program building on his community-based research exploring the intersection of cultures and health. Students spend time in Botswana learning, participating in community-based activities, and conducting research. Another faculty member integrates his research on foodborne disease outbreaks into a new course shared between OSU, and two other universities. The students complete an outbreak assessment.</p> <p>On site, the students agreed that the opportunity to engage in research is there. The undergraduate honors college public health major stated that opportunities may be more limited for undergraduates not in the honors college, but she was not certain.</p> <p>Additional examples of student participation in research include an environmental and occupational health student who worked on a NIEHS funded project studying arsenic exposure and immune function in children. This student has traveled to Bangladesh to visit the field site and observe all the research activities. He is currently working in the PI's lab to learn how to do trace metal</p>		
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		<p>analysis. Another student in the health promotion health behavior concentration is working on a CDC/FDA funded research project exploring tobacco in youth and has contributed to multiple manuscripts and presented at multiple meetings.</p> <p>The college uses the following three metrics to track scholarship:</p> <ul style="list-style-type: none"> • Percent of tenure and tenure-track faculty involved in research (100% target) • Total research funding (5% growth per year) • Number of grant submissions (5% growth per year) <p>The college met the first and third target annually from 2015-16 to 2017-18. The college has not met the second target; the funding amount has stayed relatively flat. The college administration described a new faculty mentoring program to reach the grant submissions goal.</p>		
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E5. FACULTY EXTRAMURAL SERVICE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines expectations for faculty extramural service		The college views faculty service as an extension of the university's land-grant mission. The college's standard expectation is that faculty devote 0.1 FTE to service, including both extramural (professional) and institutional. Extramural service includes both work in the community and in professional organizations. Faculty service is considered for promotion and tenure. College administrators write service expectations into annual	Click here to enter text.	Click here to enter text.
Faculty are actively engaged with the community through communication, consultation, provision of technical assistance & other means				

		<p>work plans and it can comprise up to 20% of faculty workload.</p> <p>One example of faculty service is membership on the Public Health Advisory Board of the Oregon Health Authority where the faculty member provides expertise in accountability metrics for coordinated care organizations and hospitals. The faculty member uses these experiences to develop case studies for instruction.</p> <p>Another example is a faculty member who is a governor-appointed member of the state's Environmental Quality Commission that oversees the Department of Environmental Quality. This experience provides instructional examples for the use of data in policy development.</p> <p>Student examples of service experience derived from faculty involvement include participation in conference planning and implementation with a faculty member who serves on the Oregon Public Health Association board of directors and as conference planning chair. This conference is held annually on the university campus. Another conference organized by a faculty member, the Third Tribal Environmental Health Summit, included students in planning and implementation. Students presented posters with the goal of establishing sustaining partnerships.</p> <p>Two of the indicators chosen to monitor extramural service reflect the mission-driven expectation of faculty participation in external service and its consideration in promotion and tenure. School heads who met with the site visit team were very clear that both professional and</p>		
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		<p>community-based service were expected for consideration of promotion and tenure. The college met these measures at 100% during the three years preceding the site visit.</p> <p>The final measure involves a recently developed faculty category: professors of practice. These faculty members are primarily engaged in community education and outreach. In the college, these appointments involve the extension programs. The indicator tracks the number of professional practice faculty appointments. Site visitors were informed that, while extension-funded positions are prohibited from teaching, the college has used education and general funding to support a portion of campus-based extension faculty member salaries to include instruction among their responsibilities. For 2015-16 the college had two faculty appointed on a professional track, 12 in 2016-17, and four in 2017-18.</p> <p>The site visit team also learned that the college continues to explore opportunities to engage professors of practice, particularly those based in the community, in its non-service mission-driven activities. Student practice experiences are one such opportunity that has been available.</p>		
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F1. COMMUNITY INVOLVEMENT IN SCHOOL/PROGRAM EVALUATION & ASSESSMENT

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Commentary			
Engages with community stakeholders, alumni, employers & other relevant community partners. Does not exclusively use data from supervisors of student practice experiences		The college's formal structures for constituent input include the Community Advisory Council (CAC), formalized relationships with county public health departments, through Extension Citizen Advisory Networks (ECAN), employer surveys, and alumni surveys. The CAC provides feedback on strategic planning, guiding statements, the curriculum, and the self-study document. Changing practice and research needs are determined through partnerships with the county public health departments. The departments have also provided input regarding the curriculum and internships to best prepare students for the workforce. ECAN has also provided curricular feedback to the school. Employers provide feedback about graduates as well as changing research and practice needs.	Click here to enter text.	Click here to enter text.
Ensures that constituents provide regular feedback on all of these: <ul style="list-style-type: none"> • student outcomes • curriculum • overall planning processes • self-study process 				
Defines methods designed to provide useful information & regularly examines methods				
Regularly reviews findings from constituent feedback				

		<p>also engages community stakeholders through their strategic planning process.</p> <p>The college collected employer information through a survey in 2018. The college sent the survey out to 22 employers and five responded (22%). Employers were asked to assess graduates' performance of competencies in their employment setting and asked to describe the college's greatest strengths and weaknesses. The college plans to send the survey out every two years with the next survey occurring in 2020. The college supplements these data with alumni survey results where students rate their ability to apply competencies.</p> <p>The commentary relates to the college identifying that it has not regularly or formally solicited external input about the curriculum. The college would benefit from improving this process to ensure regular and useful feedback from stakeholders.</p> <p>Members of the CAC confirmed that the college solicited their feedback related to the self-study, guiding statements, strategic planning, and the curriculum. They also said that faculty were very open to their feedback.</p>		
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F2. STUDENT INVOLVEMENT IN COMMUNITY & PROFESSIONAL SERVICE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Makes community & professional service opportunities available to all students		The college introduces undergraduate and graduate students to service, community engagement, and professional development opportunities through	Click here to enter text.	Click here to enter text.

<p>Opportunities expose students to contexts in which public health work is performed outside of an academic setting &/or the importance of learning & contributing to professional advancement of the field</p>		<p>discussions with their advisors, required coursework, through working with faculty members, and elective opportunities outside of the classroom such as student clubs. In addition, the Office of Student Success hired a director for student engagement who is responsible for student-oriented programs within the college.</p> <p>Examples of recent student service opportunities include conducting a marketing analysis and developing a marketing plan for a community partner for H556: Strategic Management of Healthcare Organizations, developing an evaluation plan for a community partner for H575: Community Organization for Health Promotion and Education, global opportunities in Botswana and Ethiopia addressing food insecurity, and volunteering for leadership experience for 8th to 12th graders through the organization Youth Voices in Action. Other examples mentioned during on site discussions include professional membership to an organization focused on health management and policy and volunteering with a local women’s shelter and the Boys and Girls Club.</p> <p>The school has multiple clubs that students can join. Students learn about clubs through new student orientation and at the college level through the Office of Student Success. Each club has a focus such as health policy and management, women of color in graduate programs, nutrition, etc. Clubs provide service activities for students and notify them via email. Students also have access to service opportunities through faculty, advisors, and the university’s Office of Civic Engagement. The office sends emails and newsletters with opportunities available to students. Students expressed moderate satisfaction with opportunities available but told reviewers during on-</p>		
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		site meetings that they would prefer more opportunities and acknowledged that participation in service is student driven.		
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F3. ASSESSMENT OF THE COMMUNITY’S PROFESSIONAL DEVELOPMENT NEEDS

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines a professional community or communities of interest & the rationale for this choice		The school defines its professional community of interest as the state of Oregon. The rationale is based on the university’s designation as the state’s land grant university and related mission to provide extension services in every county in the state.	Click here to enter text.	Click here to enter text.
Periodically assesses the professional development needs of individuals in priority community or communities		The college determines professional development needs of the community by reviewing documents from national and state perspectives. At a national level, the college uses data from The Public Health Workforce Summit – Modernizing the Workforce for the Public’s Health: Shifting the Balance (2013); The National Public Health Workforce Strategic Roadmap (2013); and The Public Health Workforce Interests and Needs Survey (2014). At the state level, the Northwest Center for Public Health Practice (NWCPHP) conducts a workforce development needs assessment every three years of the 6-state region (Alaska, Idaho, Montana, Oregon, Washington, and Wyoming.) The organization shares Oregon-specific data from the report. Following the NWCPHP’s 2013 report, the college participated in the Oregon Public Health Workforce Development Work Group to discuss training needs. From this meeting, the top needs were for analytic		

		<p>assessment, cultural competency, leadership, communication, and systems thinking. For those in managerial roles, financial planning and management was determined as a training need. From the 2016 NWCPHP's 2016 report, the top two training areas were leadership and systems thinking, and program planning and the top cross-cutting skill-building needs were grant writing, conflict management, negotiation skills, and stress management. Additional at the state level, for the university's Community Health Worker (CHW) Training Program, the college collaborated with Eastern Oregon Coordinated Care Organization (EOCCO) to conduct the first of two planning online surveys of CHW employers to determine training needs. The top training needs from this survey were chronic disease management, poverty and health disparities, leadership, and mental/behavioral health.</p> <p>Members of the CAC confirmed that the program solicits feedback about professional development needs. None of the stakeholders that reviewers met with had attended any professional development trainings but were aware that the school provided them and expressed comfort with reaching out to faculty about training needs as applicable.</p>		
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F4. DELIVERY OF PROFESSIONAL DEVELOPMENT OPPORTUNITIES FOR THE WORKFORCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Commentary			
Provides activities that address professional development needs & are based on assessment results described in Criterion F3		<p>The school is in the process of developing a more formalized process in which all data collected will be brought back to the college and discussed among faculty and administration. Decisions about professional development activities will occur during this meeting. The college will finalize the plan at the end of June and implement it six months later. In addition, the school plans to utilize program liaisons that maintain close relationships with community stakeholders to gather current training needs and project future needs. The school also hired a manager of workforce development whose duties include maintaining a portfolio of the community's professional development needs, and building relationships with external partners around addressing those needs.</p> <p>Examples of training activities offered by the school that addressed stakeholder needs include trainings that occur as part of the Community Health Worker (CHW) Training Program. The college offers three types of training: the CHW entry-level course which covers cultural competency, communication, conflict management, and stress management and the CHW continuing education courses which covers chronic health management, poverty and social determinants, and mental and behavioral health. The college is in the process of developing a CHW Leadership Certificate Program which will address leadership training needs. The college</p>	Click here to enter text.	Click here to enter text.

		<p>anticipates starting the program in fall 2019. Other trainings offered through collaboration between the college and state public health partners include “Interpreting and Using Data for Decision- Making” and “Communicating with the Public and with Decision-Makers”. Both trainings were held at a two-day conference in Portland on June 27-18, 2018 with satellite sites in Corvallis and Medford.</p> <p>The commentary relates to the school not having a formal process for reviewing data collected and identifying which workforce development activities to pursue. In addition, the college was not able to report the number of external participants in the certificate program.</p>		
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G1. DIVERSITY & CULTURAL COMPETENCE

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Commentary			
Defines appropriate priority population(s)		The college has had a diversity plan since before 2012. The college defines its priority under-represented populations as faculty, students and staff who identify with the following characteristics: 1) race and ethnicity (Hispanic/Latino, Black/African American, Native Hawaiian/Pacific Islander, and American Indian/Alaskan Native; 2) low-income; 3) first generation undergraduate or graduate students; 4) sexual orientation and gender identity; 5) nationality; and 6) ability. The college affirms the intersectionality of these social categories and recognize they are limited in their ability to understand the intersectionality because of the limits of university data.	Click here to enter text.	Click here to enter text.
Identifies goals to advance diversity & cultural competence, as well as strategies to achieve goals				
Learning environment prepares students with broad competencies regarding diversity & cultural competence				
Identifies strategies and actions that create and maintain a culturally competent environment				

Practices support recruitment, retention, promotion of faculty (and staff, if applicable), with attention to priority population(s)		The rationale for choosing these groups is threefold: 1) each is underrepresented at OSU, 2) each suffers disproportionate burden of disease in Oregon and the nation, and 3) the contributions of these groups are essential to the mission of the college. Finally, in including all of these groups, the college believes it is being as inclusive as possible.		
Practices support recruitment, retention, graduation of diverse students, with attention to priority population(s)				
Regularly collects & reviews quantitative & qualitative data & uses data to inform & adjust strategies		During the site visit, the director of equity, inclusion, and diversity (EID) confirmed their priority areas, as well as the rationale for choosing them. In addition, the president indicated the university's commitment to addressing the needs of the rural population in Oregon.		
Perceptions of climate regarding diversity & cultural competence are positive		<p>The college identified three goals and several strategies that include students, faculty, and staff and, for the most part, are appropriately in alignment. The first diversity goal is for students, faculty, and staff to represent the ethnic and racial make-up of the state. They chose this goal because the director of EID believes that it is attainable and makes sense given the demographic makeup of the state. The college plans to achieve this goal through strategic hiring of diverse faculty based on guidance developed by the Equity, Inclusion, and Diversity (EID) Committee. The college increased its engagement with OSU's pre-college and pipeline programs to increase interest in public health among high school students. Finally, the college began implementing the OSU's Search Advocate program, based on a national model, that trains faculty and staff with skills to increase equity throughout the hiring process.</p> <p>During the site visit, the director of EID indicated that while Oregon is primarily made up of white residents, the college will continue to improve the number of racial and ethnic</p>		

		<p>make-up of students, faculty, and staff. For example, the college hired four new faculty in 2014, two Latinx and one first generation college graduate. The director of admissions described several outreach activities to increase applications from racial and ethnic minorities.</p> <p>The next diversity goal is to improve retention and graduation among priority student populations. The college will achieve this goal by training faculty to create equitable and inclusive learning environments and expand best practice approaches for retention and graduation that include global educational opportunities, faculty-led student research, cultural exchanges, among others. During the site visit, the director of EID described several workshops in which faculty and students participated (e.g., Navigating Bias and Implicit Bias) that were geared toward recognizing racial and ethnic implicit bias and increasing cultural humility. About 70 faculty have participated in these workshops. Faculty indicated that one of the workshops was “transforming” in their viewpoints. Students also discussed this workshop, however, their perception was that some of the uncomfortable issues that came up regarding bias were unresolved at the end of the workshop. Students wondered what opportunities were going to be available regarding the continuation of this work, and the director of EID informed the team that at least some of these workshops would be repeated. In addition, the university provides several opportunities for anti-bias and cultural competency training.</p> <p>During the site visit, the team learned from students that they believe the college does much more on diversity than other schools or colleges in the university. They believe there should be mandatory training for addressing</p>		
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		<p>sensitive issues that arise in the classroom. Students talked about the periodic coffee talks with the dean, during which time they are able to offer concerns and suggestions. In one session, a student indicated they discussed an issue of sexual harassment they experienced in the college. There was, however, varying understandings of how to report issues related to discrimination and/or sexual harassment and how the college and university follows up on the report.</p> <p>The last goal is to exceed OSU's faculty and staff retention and advancement rates. The college will accomplish this by requiring faculty to commit to equity, inclusion, and diversity annually in writing. During the onsite visit, the associate dean and the senior vice provost for faculty affairs confirmed that this annual affirming has increased the faculty's commitment to demonstrating their contributions to diversity and inclusivity. The college will also provide support resources for faculty development that include use of OSU's membership in the National Center for Faculty Development and Diversity, encourage participation in faculty mentoring committees, and encourage staff professional development. Finally, the college has made diversity part of its strategic plan with a goal to "create a supportive work environment and a culture of health that promotes equity, inclusion, and social justice." Faculty indicated that this commitment has helped create an environment of inclusiveness and collegiality, which has attracted new faculty. In fact, the president indicated he believes that the college is a model for demonstrating how to create an environment that is welcoming and inclusive. He believes that the college, its faculty, staff, and students understand the vital importance of diversity and inclusion. He recognizes the</p>		
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		<p>critical importance of inclusiveness as a way to retain students and provide students the best experiences. To better prepare deans and other leaders, his cabinet is participating in diversity related trainings.</p> <p>The self-study describes three categories of actions and strategies that create and maintain a culturally competent environment: 1) curricular approaches, 2) student exposure to diverse agencies and individuals, and 3) faculty and student scholarship. Examples of curricular approaches are the creation of program specific competencies related to cultural competence for some of the MPH options (epidemiology, health promotion health behavior, and global health). The director of EID indicated during the site visit that she is working with the other options to increase course related content and experiences in cultural diversity, competency, and humility. The undergraduate students are required to complete three credits of course work designated as difference, power, and discrimination. In the student culture survey, graduate students expressed the need for a similar course in their curriculum. During the site visit, students also indicated they believed cultural competency is covered in most classes, even if it was only part of a discussion. Examples of student exposure to diverse agencies occur during internships, global exchange programs, experiential and service-learning activities, and college research seminars. Finally, examples of scholarship include faculty research in health disparities, poverty, inequality, and diverse populations. During the site visit, the associate dean for research confirmed that the majority of research addresses these issues. For example, she described research that focuses on HIV in MSM and the Hispanic population.</p>		
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		<p>The college collects quantitative data that track some of its diversity goals. The college monitors student representation, faculty and staff representation, student retention and advancement, and student, faculty, and staff perceptions of the college climate. In 2016, the college implemented a student perception of the college climate survey and achieved a 25% response rate among undergraduate and graduate students. Respondents were primarily undergraduates (81%), heterosexual (88%), able-bodied (84%), and female (77%). The majority of respondents reported the climate to be inclusive (65%) or somewhat inclusive (27%). Fewer students, however, in some of the priority populations reported the climate to be inclusive. For example, 57% of minority students reported the college to be inclusive. Among graduate students 10% report the college to be somewhat exclusionary and 5% reported it to be exclusionary. When asked about agreement with the following item “When I graduate from the college I will feel prepared to work with individuals from different backgrounds, cultures, and beliefs from my own,” findings aligned with the above results, minorities reported lower levels of agreement. During the onsite visit, underrepresented minority students confirmed these perceptions. International students reported they do not always feel empowered to speak up about issues.</p> <p>A faculty and staff climate survey was administered by the university in 2018 and a 50% response was achieved. The self-study describes results from the survey, including items that assess perceptions about the connection to the university’s purpose, the extent of belongingness to the university, and experiences of bullying. On items specifically related to diversity, faculty and staff report that leadership supports diversity efforts (mean scores of 3.74-</p>		
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		<p>3.91 on a 5-point scale). In addition, fewer than half (43%) of the respondents indicate they are involved in diversity issues in the university. The university climate survey appears to have only two items related to the diversity. It may behoove the college to expand its assessment of diversity related issues either through questionnaires or more qualitative approaches that may provide a better understanding of the perception of the culture.</p> <p>The college reports success in diversifying its student body, in particular among under-represented minorities and first-generation college students. For example, the college has seen increases in numbers of Hispanic and multi-racial students enrolled. Among the faculty in the college, 12% self-report being a U.S. minority and 1% report as international. Since 2012, the college hired two faculty among the priority populations who identify as Hispanic. First year retention rates, including Pell-eligible and underrepresented minority students, and 6-year graduation rates have increased. However, 6-year graduation rates among Pell-eligible and underrepresented minority students are lower than the overall student body percentage. The director of EID acknowledged this challenge during the site visit and expressed that plans were being developed to improve this gap. At the MPH level, the college awards one in four degrees to Hispanic students. In addition, 74% of MPH graduates are first generation graduate students. During the site visit, the director of EID confirmed that committees regularly review these data and use them to make improvements.</p> <p>The commentary relates to the following. First, the MPH program has developed cultural competencies for some of</p>		
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		<p>the options but not all. The director of EID continues to work with the other options to incorporate more content on cultural competency throughout the MPH curriculum. Second, although data are collected to monitor diversity goal, the college is limited in the amount, quality, and systematic review of the data that are collected. It would behoove the college to improve quantitative and qualitative understanding of faculty, student, and staff perceptions of the diversity climate in the college. Finally, student responses among minority and underrepresented groups and graduate students report the college to be less inclusive compared to majority groups. The college could improve this by doing some additional data collection and analysis to better understand these perceptions and then act upon those findings.</p>		
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H1. ACADEMIC ADVISING

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students have ready access to advisors from the time of enrollment		<p>Bachelor's students have access to nine professional advisors and nine student advisors. The college assigns students to these advisors. Students must schedule an appointment with their advisor once a year in the first two years. After year two students in good standing can schedule an appointment with their advisor or submit a program of study for advisor approval. Students who are not in good standing must meet with their advisor every semester. The college encourages students and faculty to regularly communicate.</p>	<p>Click here to enter text.</p>	<p>Click here to enter text.</p>
Advisors are actively engaged & knowledgeable about the curricula & about specific courses & programs of study				
Qualified individuals monitor student progress & identify and support those who may experience difficulty				

<p>Orientation, including written guidance, is provided to all entering students</p>		<p>The college chooses advisors based on their background in the field. They receive training on advising and counselling and participate in advising skills development talks. Advisors are trained in the program of study.</p> <p>Site visitors did not identify a formal process for changing advisors. Students informed the site visit team about how they were able to change advisors and reported being happy with the outcome.</p> <p>At the master's level, students are paired with a faculty advisor in their concentration. This pairing is based on interest (e.g., in Health Management and Policy students interested in health policy are paired with faculty with expertise in policy while students interested in management are paired with faculty paired with interest in management). At the doctoral level students are paired with an advisor who has their content expertise.</p> <p>Graduate students have an academic advisor who also serves as thesis or dissertation chair in their program. MPH students and PhD students can also consult handbooks. Throughout the MPH or doctoral journey students have other faculty who work with them to ensure successful graduation.</p> <p>Faculty in each program dedicate up to 10% of their time to advising and mentoring. Experienced faculty advise four to seven students annually, while less experienced faculty advise one to two MPH and one to two PhD students.</p> <p>The college-provided graduate student orientation occurs two days before classes start. Program directors meet</p>		
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		<p>with all students in a two-hour meeting and then students break off into individual program meetings and one-on-one meetings with advisors. In addition, the university provides an optional week-long graduate student orientation and an optional resource orientation that covers library and other resource information.</p> <p>The university conducts a 1.5- day undergraduate student orientation. Within that period the college orients the students for five to six hours. The goals of the college orientation are to assure the student: you belong here, this is right place for you, and you have a person who is a resource. The students meet with both a peer and academic advisor. At the end of the session students are given a homework assignment to look at classes and come back the next day to have one-on-one meetings with their academic advisor. Transfer students receive a shorter version of the same orientation. On site, faculty spoke of activities, including the belonging activity (developed by Stanford) where students write a letter to future students as a way to increase a sense of belonging on campus. There is also a Canvas site for new students. If a student's family comes along there is a separate orientation for the family.</p> <p>Student satisfaction with academic advising was high. Over 83% of undergraduates, 92% of master's students, and 100% of PhD students were satisfied or very satisfied with their advisor. This pattern was consistent across three years. The college used an annual graduation survey to collect data and had high response rates (ranging from 71-100%). During the site visit students strongly endorsed satisfaction with advising.</p>		
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H2. CAREER ADVISING

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students have access to qualified advisors who are actively engaged & knowledgeable about the workforce & can provide career placement advice		Since 2016, the college has had a designated staff member, the assistant director of career development, who dedicates 20 hours per week of advising and other career services to bachelor's, master's, and doctoral students as well as alumni for up to a year after graduation. The position is located in the Office of Student Success. For MPH students, academic advisors are also involved with career advising. Career development training and assistance is integrated into the MPH pre-internship course. The MPH internship coordinator attends meetings of the university's Employer Engagement and Career Development Councils. Faculty involvement in professional organizations provides access to career-related resources.	Click here to enter text.	Click here to enter text.
Variety of resources & services are available to current students				
Variety of resources & services are available to alumni		<p>Students and alumni can access a variety of career services. These include one-on-one sessions with the assistant director of career development and academic advisors, career fairs, and a job-listing database maintained by the university's Career Development Center. The college integrates career development information and skills into courses and workshops. Trained student peer advisors in the Office of Student Success provide front-line career advising to fellow students.</p> <p>Specific examples of career advising include one-on-one appointments for resume development and review, interviewing skills, and strengths and interests</p>		

		<p>assessments administered by the assistant director of career development. The self-study gave an example of a bachelor's degree alumnus who met with a career advisor four times during the year after graduation to discuss career decisions and pursuit of a graduate degree. The university's Career Development Center regularly sponsors career fairs and tracks public health student attendance.</p> <p>Stakeholders suggested to the site visit team that assisting students achieve realistic and real-world career expectations, especially at entry level, might be a career advising need. They expressed that their input on such events as career panels might be beneficial.</p> <p>The college asks a question of all degree-level students about satisfaction with career advising on the graduation survey administered online during the spring of each student's year of graduation. A persistently significant fraction (about one quarter overall and an increasingly large proportion of doctoral students) express dissatisfaction. To date, reasons for dissatisfaction have not been elicited in the survey but the self-study noted that an open-ended question would be included on future surveys. At the site visit, the assistant director of career services expressed that some dissatisfaction may have arisen from the earlier passive approach in which students needed to seek out assistance. In turn, she is now reaching out through class presentations, clubs, and other more direct student interactions.</p>		
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H3. STUDENT COMPLAINT PROCEDURES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defined set of policies & procedures govern formal student complaints & grievances		<p>There is a well-defined formal student grievance mechanism. College policy encourages students to take initial steps to informally resolve grievances with the directly responsible party and then the party's direct supervisor. If informal processes do not result in satisfactory conclusion, students begin the formal grievance process by completing a student dispute resolution form. Students may seek assistance from the Office of Student Advocacy.</p> <p>The written grievance is assigned to the appropriate college administrator who investigates and provides a written email response. If the student is not satisfied with the college response, the grievance can be pursued through university channels, which for graduate students involve steps to the graduate dean and then the provost.</p> <p>The college website describes the dispute resolution process and where students can locate the form. The MPH and PhD handbooks also contain this information. There is no system to routinely communicate the process to bachelor's degree students. The college provides this information on a case-by-case basis. The self-study identified this communication issue and noted plans to routinely explain the procedure during college orientation.</p>	Click here to enter text.	Click here to enter text.
Procedures are clearly articulated & communicated to students				
Depending on the nature & level of each complaint, students are encouraged to voice concerns to unit officials or other appropriate personnel				
Designated administrators are charged with reviewing & resolving formal complaints				
All complaints are processed & documented				

		<p>Students who met with the site visit team, including bachelor's degree students, seemed familiar and well-versed in the grievance procedures. Students expressed some concern about using the formal process because of a perceived threat of negative professional repercussions. However, no student indicated that grievances went unresolved.</p> <p>A representative from the student advocacy office who met with site visitors said that the situations in which he worked with students from the college were easily resolved at the faculty level. He also noted that the college's Office of Student Success has referred student to him multiple times.</p> <p>Two formal complaints were submitted during the three years preceding the site visit. Both complaints addressed the same concerns about an undergraduate instructor demonstrating poor and inequitable class management. The issue was resolved and the supervisor continues to monitor student feedback on the course.</p>		
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H4. STUDENT RECRUITMENT & ADMISSIONS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Implements recruitment policies designed to locate qualified individuals capable of taking advantage of program of study & developing competence for public health careers		Undergraduate recruitment and admissions is handled at the university level by the Office of Admissions. College staff from the Office of Student Success support university admissions staff recruitment efforts by participating in events and campus tours for prospective students. The Office of Admissions provides written communication to	Click here to enter text.	Click here to enter text.

<p>Implements admissions policies designed to select & enroll qualified individuals capable of taking advantage of program of study & developing competence for public health careers</p>		<p>students who show interest and high-achieving prospects. The college is exploring pipeline ideas, such as collaboration with community colleges and work with 4-H youth programs.</p>		
<p>Tracks at least one measure that is meaningful and demonstrates success in enrolling a qualified student body</p>		<p>The university admits undergraduates based on broad criteria in addition to academic achievement. The GPA preference is 3.0 or above and the college requires the SAT or ACT. Once admitted, the university assigns students to their preferred majors.</p> <p>The college has a director of graduate student recruitment and admissions who oversees and carries out graduate student recruitment activities and facilitates evaluation of applications. The college considers its website to be an essential recruitment tool. The director of graduate student recruitment and admissions attends events and conferences. The college has also implemented a pathway for international students involved in English immersion courses, an accelerated program for high-achieving undergraduates in health management and policy that allows direct matriculation into the MPH in their fifth year, and promotes its graduate program to its undergraduates and health undergraduates at other universities.</p> <p>Admitted students receive communication from their selected programs and the dean. The college holds an Admitted Graduate Students Day for students who have not yet enrolled. It is collaborating with the university E-campus to promote its new online degree.</p> <p>Graduate students first apply through the Schools of Public Health Application Service and complete a supplemental application to the university graduate school. After the</p>		

		<p>college makes an admission determination, it is referred to the university graduate school for final review.</p> <p>The college measures enrollee GPAs to monitor recruitment and admissions. The target GPA is 3.0 for both undergraduate (target) and graduate students (for whom it is required for admission). The college met these objectives during the three years preceding the site visit. The college director of graduate student recruitment and admissions said that these measures demonstrate that they are enrolling students who should be capable of degree completion.</p>		
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H5. PUBLICATION OF EDUCATIONAL OFFERINGS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Catalogs & bulletins used to describe educational offerings are publicly available		All catalogs and bulletins are publicly available via the OSU and college websites. Each of the required documents (academic calendar, admissions policies, grading policies, academic integrity standards, degree completion requirements) is thorough and accurately described.	Click here to enter text.	Click here to enter text.
Catalogs & bulletins accurately describe the academic calendar, admissions policies, grading policies, academic integrity standards & degree completion requirements		The advertising and promotional recruitment material appear to be accurate, consistent, and thorough. The college provided a digital advertisement for the new online MPH in public health practice. The link provided in the advertisement, however, was broken, but redirection to the appropriate page was provided.		
Advertising, promotional & recruitment materials contain accurate information				

AGENDA

Council on Education for Public Health Site Visit Agenda College of Public Health and Human Sciences

Wednesday 5/15

- 8:30 am **Site Visit Team Request for Additional Documents**
- Vicki L. Wise, Director of Assessment and Accreditation
 - Sheryl Thorburn, Professor and Associate Dean for Academic and Faculty Affairs
- 8:45 am **Site Visit Team Executive Session**
- 9:00 am **Break**
- 9:15 am **Guiding Statements and Evaluation**

Participants	Topics on which participants are prepared to answer team questions
<ul style="list-style-type: none"> • F. Javier Nieto, MD, MPH, MHS, PhD - Dean • Sheryl Thorburn, PhD, MPH - Professor and Associate Dean for Academic and Faculty Affairs • S. Marie Harvey, DrPH, MPH - Associate Dean for Research 	<i>Guiding statements – process of development and review?</i>
<ul style="list-style-type: none"> • Vicki L. Wise, PhD - Director of Assessment and Accreditation 	<i>Evaluation processes – how does school collect and use input/data?</i>
<ul style="list-style-type: none"> • F. Javier Nieto, MD, MPH, MHS, PhD - Dean • Sheryl Thorburn, PhD, MPH - Professor and Associate Dean for Academic and Faculty Affairs • S. Marie Harvey, DrPH, MPH - Associate Dean for Research • David Goodrum, EdD - Director of Academic Technology 	<i>Resources (personnel, physical, IT) – who determines sufficiency? Acts when additional resources are needed?</i>

Participants	Topics on which participants are prepared to answer team questions
<ul style="list-style-type: none"> • F. Javier Nieto, MD, MPH, MHS, PhD - Dean • Tom Fenske - Health Sciences Business Center Manager • Sheryl Thorburn, PhD, MPH - Professor and Associate Dean for Academic and Faculty Affairs • Vicki Ebbeck, PhD - Associate Dean for Student Success • Roberta Riportella, PhD - Associate Dean for Outreach and Engagement/Extension Family & Community Health Program Leader • S. Marie Harvey, DrPH, MPH - Associate Dean for Research • Norm Hord, PhD, MPH, RD - Professor and Head of the School of Biological and Population Health Sciences • Richard A. Settersten, Jr., PhD - Professor and Head of the School of Social and Behavioral Health Sciences 	<p><i>Budget – who develops and makes decisions?</i></p>
Total participants: 10	

10:30 am **Break**

11:00 am **Curriculum 1**

Participants	Topics on which participants are prepared to answer team questions
<ul style="list-style-type: none"> • Susan Carozza, PhD - Associate Professor, Program Director Public Health Practice 	<p><i>MPH foundational knowledge</i></p> <p><i>MPH foundational competencies – didactic coverage and assessment</i></p>
<ul style="list-style-type: none"> • Viktor E. Bovbjerg, PhD - Professor, Program Director Epidemiology • Adam Branscum, PhD - Professor, Program Director Biostatistics • Susan Carozza, PhD - Associate Professor, Program Director Public Health Practice • Peggy Dolcini, PhD - Professor, Graduate Program Director Health Promotion and Health Behavior, Former Undergraduate Program Director Health Promotion and Health Behavior • Sunil Khanna, PhD - Professor, Global Health • Laurel Kincl, PhD - Associate Professor, Program Director Environmental and Occupational Health • Jeff Luck, PhD - Associate Professor, Program Director Health Management and Policy • Karen Volmar, JD, MPH - Associate Head, School of Social and Behavioral Health Sciences; Clinical Associate Professor, Former Program Director Health Management and Policy 	<p><i>MPH concentration competencies – development, didactic coverage, and assessment</i></p>

Participants	Topics on which participants are prepared to answer team questions
Total participants: 8	

12:15 pm **Break**

12:30 pm **Lunch with Students**

Participants	Topics on which participants are prepared to answer team questions
<ul style="list-style-type: none"> • Fatimah Al-Ghadban, PhD student, HPHB • Emily Baranski, UG student, HMP • Isabella Preble, MPH student, GH • Linh Bui, PhD student, HP • Diana Govier, PhD student, HP • Tanya Hansen, UG student, HPHB • Sydelle Harrison, PhD student, HPHB • Kennedy Hedges, UG student, HPHB • Lan Doan, PhD student, HPHB • Annie Hommel, PhD student, HP • Eleni Mora, MPH student, BIO • Rania Moustafa Khater, MPH student, GH • Hannah Tacke, MPH student, HMP 	<i>Student engagement in school operations</i>
	<i>Curriculum (competencies, APE, ILE, etc.)</i>
	<i>Resources (physical, faculty/staff, IT)</i>
	<i>Involvement in scholarship and service</i>
	<i>Academic and career advising</i>
	<i>Diversity and cultural competence</i>
	<i>Complaint procedures</i>
Total participants: 13	

1:45 pm **Break**

2:00 pm

Curriculum 2

Participants	Topics on which participants are prepared to answer team questions
<ul style="list-style-type: none"> • Peggy Dolcini, PhD - Professor, Graduate Program Director Health Promotion and Health Behavior, Former Undergraduate Program Director Health Promotion and Health Behavior • Larry Gilley, MBA - Instructor, Undergraduate Program Director Health Management and Policy • Kari-Lyn Sakuma, PhD, MPH - Assistant Professor, Undergraduate Program Director Health Promotion and Health Behavior • Karen Volmar, JD, MPH - Associate Head, School of Social and Behavioral Health Sciences; Clinical Associate Professor, Former Program Director Health Management and Policy 	<p><i>Public health bachelor's degrees</i></p>
<ul style="list-style-type: none"> • Viktor E. Bovbjerg, PhD, MPH - Professor, Program Director Epidemiology • Peggy Dolcini, PhD - Professor, Graduate Program Director Health Promotion and Health Behavior, Former Undergraduate Program Director Health Promotion and Health Behavior • Sunil Khanna, PhD - Professor, Global Health • Jangho Yoon, Ph.D. - Associate Professor, Health Management and Policy 	<p><i>Academic public health degrees</i></p>
<p>Total participants: 7</p>	

3:15 pm

Break

3:30 pm

Site Visit Team Executive Session

5:00 pm

Adjourn

Thursday 5/16

8:30 am

University Leaders

Participants	Topics on which participants are prepared to answer team questions
Edward J. Ray - OSU President	<i>School's position within larger institution</i>
Ed Feser - Provost/Executive Vice President	<i>Provision of school-level resources</i>

Susan Capalbo - Senior Vice Provost for Faculty Affairs	<i>Institutional priorities</i>
Total participants: 3	

9:00 am **Break**

9:15 am **Curriculum 3**

Participants	Topics on which participants are prepared to answer team questions
<ul style="list-style-type: none"> • Andy Chuinard, MPH - MPH Internship Coordinator 	<i>Applied practice experiences</i>
<ul style="list-style-type: none"> • Viktor E. Bovbjerg, PhD, MPH - Professor, Program Director Epidemiology • Susan Carozza, PhD - Associate Professor, Program Director Public Health Practice • Peggy Dolcini, PhD - Professor, Graduate Program Director Health Promotion and Health Behavior, Former Undergraduate Program Director Health Promotion and Health Behavior • Laurel Kincl, PhD - Associate Professor, Program Director Environmental and Occupational Health • Jeff Luck, PhD - Associate Professor, Program Director Health Management and Policy • Sheryl Thorburn, PhD, MPH - Professor and Associate Dean for Academic and Faculty Affairs • Karen Volmar, JD, MPH - Associate Head, School of Social and Behavioral Health Sciences; Clinical Associate Professor, Former Program Director Health Management and Policy 	<i>Integrative learning experiences</i>
<ul style="list-style-type: none"> • Cathleen Brown Crowell, PhD - Clinical Associate Professor, Undergraduate Program Director Kinesiology • Kim Hannigan Downs, PhD - Assistant Clinical Professor, Program Director Athletic Training • Neilann Horner, PhD, MPH - Clinical Associate Professor, Program Director Dietetics • Lori A. McGraw, PhD - Senior Instructor I, Undergraduate Program Director Human Development and Family Sciences • Marc Norcross, PhD - Associate Professor, Graduate Program Director Kinesiology • Heidi Wegis, PhD - Clinical Associate Professor, Program Director Master of Adapted Physical Education 	<i>Non-public health degrees</i>
<ul style="list-style-type: none"> • Susan Carozza, PhD - Associate Professor, Program Director Public Health Practice 	<i>Distance education</i>
Total participants: 14	

10:30 am **Break**

10:45 am

Instructional Effectiveness

Participants	Topics on which participants are prepared to answer team questions
<ul style="list-style-type: none"> • Viktor E. Bovbjerg, PhD, MPH - Professor, Program Director Epidemiology • Peggy Dolcini, PhD - Professor, Graduate Program Director Health Promotion and Health Behavior, Former Undergraduate Program Director Health Promotion and Health Behavior • Norm Hord, PhD, MPH, RD - Professor and Head of the School of Biological and Population Health Sciences • Richard A. Settersten, Jr., PhD - Professor and Head of the School of Social and Behavioral Health Sciences • Karen Volmar, JD, MPH - Associate Head, School of Social and Behavioral Health Sciences; Clinical Associate Professor, Former Program Director Health Management and Policy 	<p><i>Currency in areas of instruction & pedagogical methods (explain how the school ensures that faculty maintain currency in their areas of instruction and in pedagogical methods)</i></p>
<ul style="list-style-type: none"> • S. Marie Harvey, DrPH, MPH - Associate Dean for Research • Norm Hord, PhD, MPH, RD - Professor and Head of the School of Biological and Population Health Sciences • Richard A. Settersten, Jr., PhD - Professor and Head of the School of Social and Behavioral Health Sciences 	<p><i>Scholarship and integration in instruction</i></p>
<ul style="list-style-type: none"> • Karen Volmar, JD, MPH - Associate Head, School of Social and Behavioral Health Sciences; Clinical Associate Professor, Former Program Director Health Management and Policy 	<p><i>Extramural service and integration in instruction</i></p>
<ul style="list-style-type: none"> • Susan Carozza, PhD - Associate Professor, Program Director Public Health Practice • Karen Volmar, JD, MPH - Associate Head, School of Social and Behavioral Health Sciences; Clinical Associate Professor, Former Program Director Health Management and Policy 	<p><i>Integration of practice perspectives</i></p>
<ul style="list-style-type: none"> • Ann Custer, MPH, OTR/L, CHES, QMHP - Manager of Workforce Development and Corporate Relations for the Oregon State University Center for Health Innovation • Sunil Khanna, PhD - Professor, Global Health • Sheryl Thorburn, PhD, MPH - Professor and Associate Dean for Academic and Faculty Affairs 	<p><i>Professional development of community</i></p>
<p>Total participants: 9</p>	

12:00 pm

Stakeholder Feedback/Input

Participants	Topics on which participants are prepared to answer team questions
<ul style="list-style-type: none"> • Cheryl Lutz, Child/Family Advocate, Educational and organizational development, Oregon State University Foundation trustee emeritus, CAC member 	<p><i>Involvement in school evaluation & assessment</i></p>
	<p><i>Perceptions of current students & school graduates</i></p>
	<p><i>Applied practice experiences</i></p>

<ul style="list-style-type: none"> • Linda Modrell, Former Benton County Commissioner; Former developer of the Oregon Health Plan, CAC member • Ken Provencher, President and Chief Executive Officer of PacificSource Health Plans; Chair, Board of Oregon Medical Insurance Pool, CAC member • Kerryann Bouska, Marion County Health Department, preceptor • Mike Duncan, Physician Assistant with Samaritan, current CATLAYST program mentor • Abigail Galbraith, local Registered Dietician, current CATLAYST program mentor, alumni • Megan Konzelman, Coordinator of Student Services at Samaritan, current CATLAYST program mentor • Renee Mason, Teacher’s Assistant in the Philomath School District, current CATLAYST program mentor • John Ruyak, Benton County Health Department, preceptor and employer, alumni • Tera Stegner, Co-director at the Grace Center in Corvallis, current CATLAYST program mentor • Liberty Pertiwi, Clinic Manager II with Samaritan, current CATALYST program mentor, alumni 	<i>Integration of practice perspectives</i>
	<i>School delivery of professional development opportunities</i>
Total participants: 11	

1:30 pm **Break**

2:00 pm **Strategies & Operations Room: WB210**

Participants	Topics on which participants are prepared to answer team questions
<ul style="list-style-type: none"> • Katherine A. MacTavish, PhD - Associate Professor, Director of Equity, Inclusion, and Diversity Initiatives 	<i>Diversity and cultural competence – who develops the targets, who reviews the data and how are changes made based on the data?</i>
<ul style="list-style-type: none"> • Suzanna Chase, MS - Director of Graduate Student Recruitment and Admissions • Vicki Ebbeck, PhD - Associate Dean for Student Success • Sheryl Thorburn, PhD, MPH - Professor and Associate Dean for Academic and Faculty Affairs 	<i>Recruiting and admissions, including who chose the measures and why did they choose them</i>
<ul style="list-style-type: none"> • Amanda Armington, MPH - MPH Administrative Director • Vicki Ebbeck, PhD - Associate Dean for Student Success • Erin Heim, MS - Head Academic Advisor • Claire Wu, MPH - Assistant Director of Career Development 	<i>Advising and career counseling, including who collects and reviews the data</i>

<ul style="list-style-type: none"> • Vicki Ebbeck, PhD - Associate Dean for Student Success • S. Marie Harvey, DrPH, MPH - Associate Dean for Research • Norm Hord, PhD, MPH, RD - Professor and Head of the School of Biological and Population Health Sciences • Richard A. Settersten, Jr., PhD - Professor and Head of the School of Social and Behavioral Health Sciences • Sheryl Thorburn, PhD, MPH - Professor and Associate Dean for Academic and Faculty Affairs 	<i>Staff operations</i> (explain how staff contribute to the operation of the program and whether or not staffing is adequate)
<ul style="list-style-type: none"> • Daniel Dietz, JD - Office of Advocacy • Vicki Ebbeck, PhD - Associate Dean for Student Success 	<i>Complaint procedures</i>
Total participants: 11	

3:00 pm **Break**

3:15 pm **Site Visit Team Executive Session**

4:30 pm **Adjourn**

Friday, 5/17

8:15 am **Site Visit Team Executive Session**

12:00 pm **Site Visit Team Working Lunch**

1:00 pm **Exit Briefing**

2:00 pm **Team Departs**