Idaho State University

Master of Public Health

CEPH Accreditation

Self-study document

March 3, 2023

Contents

Introduction 4

A1. Organization and Administrative Processes 11

A3. Student Engagement 18

A4. Autonomy for Schools of Public Health 19

A5. Degree Offerings in Schools of Public Health 20

B1. Guiding Statements 21

B2. Evaluation and Quality Improvement 23

B3. Graduation Rates 31

B4. Post-Graduation Outcomes 34

B5. Alumni Perceptions of Curricular Effectiveness 35

C1. Fiscal Resources 36

C3. Staff and Other Personnel Resources 44

C4. Physical Resources 45

C5. Information and Technology Resources 47

D1. MPH & DrPH Foundational Public Health Knowledge 50

D2. MPH Foundational Competencies 53

D3. DrPH Foundational Competencies 59

D4. MPH & DrPH Concentration Competencies 60

D5. MPH Applied Practice Experiences 61

D6. DrPH Applied Practice Experience 63

D7. MPH Integrative Learning Experience 64

D8. DrPH Integrative Learning Experience 67

D9. Public Health Bachelor's Degree Foundational Domains 68

D10. Public Health Bachelor's Degree Foundational Competencies 69

D11. Public Health Bachelor's Degree Cumulative and Experiential Activities 70

D12. Public Health Bachelor's Degree Cross-Cutting Concepts and Experiences 71

D13. MPH Program Length 72

D14. DrPH Program Length 73

D15. Bachelor's Degree Program Length 74

D16. Academic and Highly Specialized Public Health Master's Degrees 75

D17. Academic Public Health Doctoral Degrees 76

D18. All Remaining Degrees 77

D19. Distance Education 78
E1. Faculty Alignment with Degrees Offered 80
E2. Integration of Faculty with Practice Experience 82
E3. Faculty Instructional Effectiveness 84
E4. Faculty Scholarship 89
E5. Faculty Extramural Service 94
F1. Community Involvement in Program Evaluation and Assessment 97
F2. Student Involvement in Community and Professional Service 101
F3. Delivery of Professional Development Opportunities for the Workforce 105
G1. Diversity and Cultural Competence 107
H1. Academic Advising 110
H2. Career Advising 111
H3. Student Complaint Procedures 113
H4. Student Recruitment and Admissions 115
H5. Publication of Educational Offerings 118

Introduction

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

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

Formed in 1901, Idaho State University (ISU), a public higher education institution, has provided access and opportunity to students from Idaho, the nation, and the world who seek a quality higher education. ISU's campuses span the state's southern region, from Idaho Falls in the east to Meridian in the west. Its main campus in Pocatello is approximately three hours east of Boise, Idaho's capital, and two hours north of Salt Lake City, Utah.

b. number of schools and colleges at the institution and the number of degrees offered by the institution at each level (bachelor's, master's, doctoral and professional preparation degrees)

Students can choose from more than 200 programs (3 Associate, 12 Bachelor, 16 Masters, 7 Doctorate) to advance their education, from an Associate of Applied Science Degree in Diesel Technology to a Bachelor of Arts in Social Work, to a Doctor of Philosophy in Nuclear Science and Engineering. The university has 7 colleges (College of Arts and Letters, College of Business, College of Education, College of Health, College of Pharmacy, College of Science and Engineering, and College of Technology) and 3 Schools (Graduate School, School of Nursing, and School of Performing Arts).

c. number of university faculty, staff, and students

In 2022 ISU has:
592 full-time faculty
173 part-time faculty
1,066 full-time staff
93 part-time staff
12,319 students

d. brief statement of distinguishing university facts and characteristics

Like the diverse communities it serves, ISU provides one of the widest variety of program and degree offerings in the United States, from technical education certificates and associate degrees, through doctoral degrees and post-graduate fellowships. Additionally, ISU is the state's designated leader in providing health science programs. This unique position helps ISU fulfill the workforce needs in a rural state that has a shortage of healthcare professionals.

e. names of all accrediting bodies (other than CEPH) to which the institution responds. The list must include the institutional accreditor for the university as well as all specialized accreditors to which any school, college or other organizational unit at the university responds

ISU's primary accrediting organization is the Northwest Commission on Colleges and Universities. More information regarding ISU's regional accreditation standing is available

at https://www.isu.edu/accreditation/ (see ERF Introduction/1e - Accreditation _ Idaho State University).

ISU has over 80 programs with special accreditation. Information listing those programs and accreditors is available at https://www.isu.edu/accreditation/specialized-accrediting-entities-/ (see ERF Introduction/1e - Specialized Accrediting Entities _ Idaho State University).

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

The MPH Program at ISU admitted its first cohort in 1993 and received official Idaho State Board of Education approval in 1995. The MPH was first accredited by the CEPH in 2002 and reaccredited in 2009 and 2016.

Prior to July 2011, the MPH Program was part of the Department of Health and Nutrition Sciences that was led by a department chair from a different discipline. At that time three other academic programs were also part of the Department of Health and Nutrition Sciences (Health Education, Dietetics, and Healthcare Administration). Each of the four programs was headed by a program director.

In July 2011 the MPH Program became a freestanding program under the Kasiska School of Health Professions (now the Kasiska Division of Health Sciences). In July 2014 the MPH and Health Education Programs were merged again into one department, the Department of Community and Public Health. This merger occurred to conserve resources and eliminate curriculum overlap. Dr. Elizabeth Fore was named the Program Director for the MPH, the BS/BA of Health Education (HE), and the Master of Health Education (MHE).

In 2018, the Kasiska School of Health Professions became the College of Health Professions under the Kasiska Division of Health Sciences and the Department of Community and Public Health was placed in the College with Dietetics, Counseling, Radiographic Science, Medical Laboratory Science, Emergency Services, Dental Sciences, Dental Hygiene, and the Physician Assistant Program.

In 2018 the undergraduate Health Education degree with three Emphasis (Addiction Studies, Community/Worksite, and School Health) was renamed "Community and Public Health" and updated to have three Concentration areas (Addiction Studies, Community Health, and School Health). This was to shift curriculum and emphasis towards undergraduate public health programming. Also in late 2018, the Master of Science in Health Informatics (MSHI) was added to the Department of Community and Public Health with its own Program Director.

In June 2019, Dr. Ryan Lindsay was named Chair of the Department and the role of Department Chair and MPH Program Director was no longer held by the same person. At the time, 3 Program Directors began operating in the department: the Health Education Program director which oversees the BS/BA in Community and Public Health and MHE, an MPH Program Director, and a MSHI Program Director. At this same time the MPH Program Director switched from Dr. Elizabeth Fore to Dr. Lisa Salazar.

Two Graduate certificates (Public Health [2018] and Rural Health [2021]) and 2 undergraduate certificates (Community Health Worker [2020] and Addiction Studies [2021]) have been added to the academic offerings in the department.

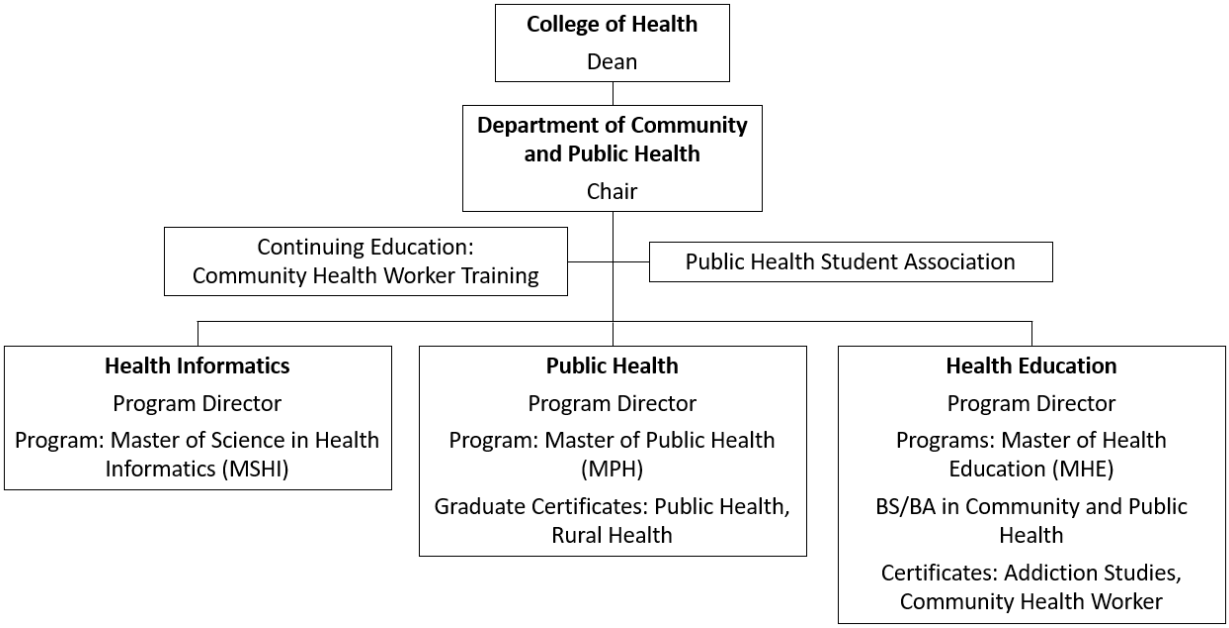
In 2020, the College of Health Professions was consolidated with the College of Rehabilitation and Communication Sciences and the College of Nursing to form the College of Health.

In August of 2022, the MPH Program Director switched from Dr. Lisa Salazar to Dr. Irene van Woerden.

Department Faculty are appointed and dedicate their time primarily to one of the three programs, MPH, CPH/MHE, or MSHI.

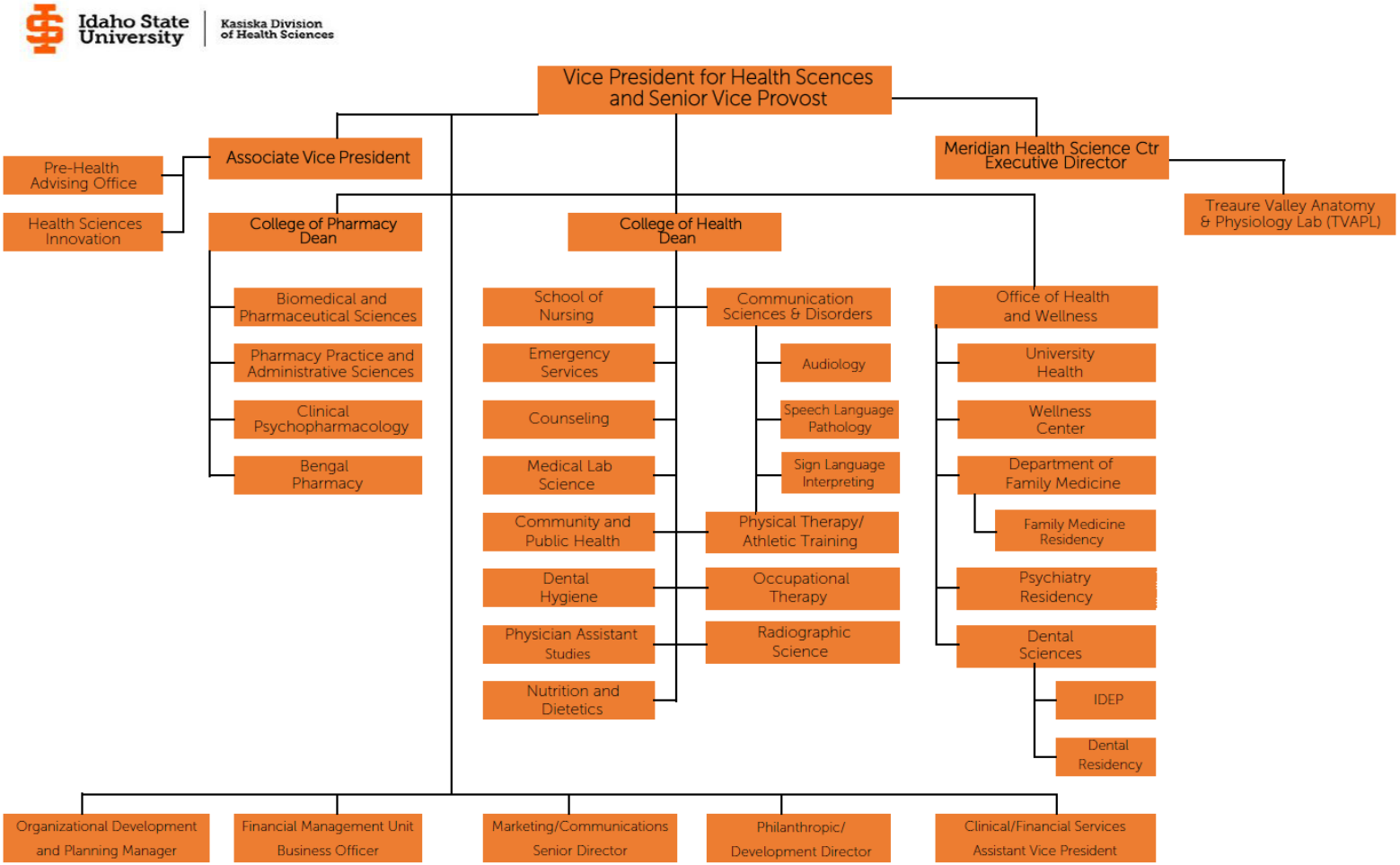
2) Organizational charts that clearly depict the following related to the program:

a. the program's internal organization, including the reporting lines to the dean/director



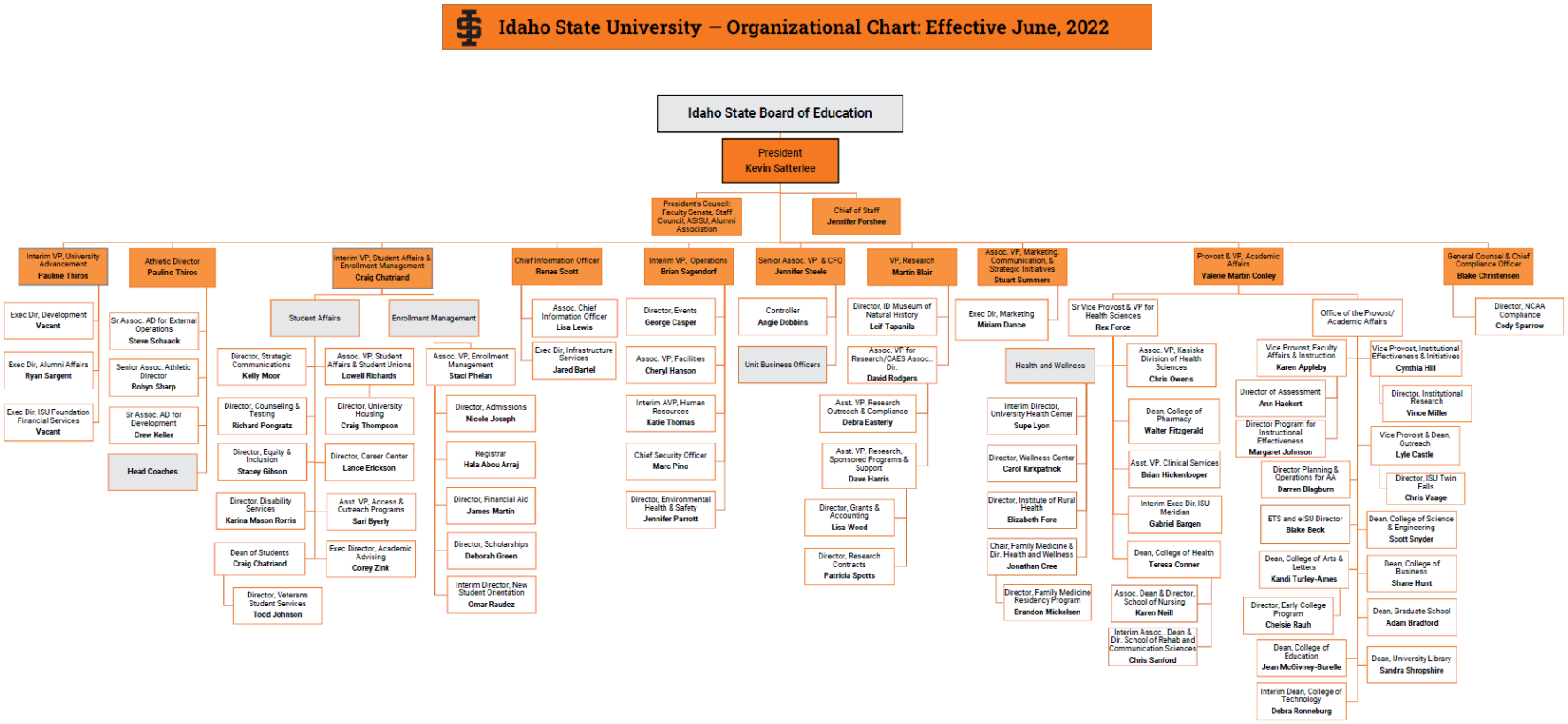
(See ERF Introduction/2a - program MPH org chart)

b. the relationship between program and other academic units within the institution. Ensure that the chart depicts all other academic offerings housed in the same organizational unit as the program. Organizational charts may include committee structure organization and reporting lines



URL: https://www.isu.edu/media/libraries/division-of-health-sciences/kasiska-news/KDHS-Organization-Chart-Approved-9-22.pdf
(see ERF Introduction/2b – org chart KDHS)

c. the lines of authority from the program's leader to the institution's chief executive officer (president, chancellor, etc.), including intermediate levels (e.g., reporting to the president through the provost)



URL: https://www.isu.edu/media/human-resources/documents/ISU-Organizational-Chart.pdf
(see ERF org chart institution)

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

Not applicable

3) An instructional matrix presenting all of the program's degree programs and concentrations including bachelor's, master's and doctoral degrees, as appropriate. Present data in the format of Template Intro-1.

Instructional Matrix - Degrees and Concentrations				
			Place-based	***Distance-based***
Master's Degrees	***Academic***	***Professional***		
Public Health	*MPH*	*MPH*	*MPH*	*MPH*

4) Enrollment data for all of the program's degree programs, including bachelor's, master's and doctoral degrees, in the format of Template Intro-2.

Degree		**Current Enrollment**
Master's		
	MPH	28 *

***** Current enrollment is specified as students who have taken classes in the last two years.

A1. Organization and Administrative Processes

The program demonstrates effective administrative processes that are sufficient to affirm its ability to fulfill its mission and goals and to conform to the conditions for accreditation.

The program establishes appropriate decision-making structures for all significant functions and designates appropriate committees or individuals for decision making and implementation.

The program ensures that faculty (including full-time and part-time faculty) regularly interact with their colleagues and are engaged in ways that benefit the instructional program (e.g., participating in instructional workshops, engaging in program specific curriculum development and oversight).

1) List the program's standing and significant ad hoc committees. For each, indicate the formula for membership (e.g., two appointed faculty members from each concentration) and list the current members.

    - *Admissions Committee (ongoing - All MPH faculty)*
    - *Faculty Search Committees (ad hoc - a minimum of two appointed MPH faculty members. Most recent search committee: Drs. Irene van Woerden, Elizabeth Fore, and Lisa Salazar - as well as Michael Mikitish and Melissa Caudle from outside the MPH program)*
    - *Galen Louis Scholarship Committee (annual - a minimum of two appointed MPH faculty members. Currently Drs. Irene van Woerden and Diana Schow)*
    - *Event Planning Committee (ad hoc e.g. colloquia/consortium - two appointed MPH faculty members. Currently Kristin Van De Griend and Lisa Salazar)*
    - *Handbook Review Committee (ad hoc - two appointed MPH faculty members. Currently Drs. Irene van Woerden and Kristin Van De Griend)*
    - *Program Assessment (ad hoc - all MPH faculty)*
    - *Promotion & Tenure Committee (ad hoc - a minimum of one appointed MPH faculty member)*

2) Briefly describe which committee(s) or other responsible parties make decisions on each of the following areas and how the decisions are made:

    a. degree requirements

    The ISU Graduate Council is responsible for ensuring the quality and appropriateness of graduate courses and graduate degree programs. The Graduate Council provides recommendations concerning establishment and maintenance of requirements for graduation; Changes to the curriculum requiring approval from the graduate council include changes to course naming, numbering, and degree offering modalities. These proposals are all reviewed and voted upon by program faculty. For instance, when the accelerated pathway for completing a bachelor's and MPH was proposed, faculty voted in favor of this change. Changes to pre-requisite courses is another example that was determined by vote among MPH faculty. An ad hoc committee to update the MPH student handbook was comprised of two faculty members.

    b. curriculum design

Proposals of new courses and changes to the catalog are reviewed and voted upon by MPH faculty. When we revised MPH 6607 US & Global Health Systems to MPH 5507 Rural Health Systems, the content of the course was reviewed by MPH faculty and proposed through the Graduate Council.

c. student assessment policies and processes

Program assessment and program health (i.e. program prioritization), are two initiatives through Academic Affairs at ISU to assess program effectiveness. The program assessment is an annual reporting process that ensures alignment in program goals, learning objectives, and assessment activities. Programs with specialized accreditation (including the MPH program through CEPH) can submit annual reports and self-study in lieu of ISU's standardized annual program assessment forms and self-study (every 7 years). The MPH program director has responsibility to compile and submit annual reports for CEPH and ISU's program assessment.

In AY 2020-2021 ISU implemented a new process that transitioned away from program prioritization to: "A Program Health and Sustainability assessment model should be aligned with the institutional mission, while evaluating student demand and providing indicators of quality. It should include measures for efficiency and effectiveness and ensure sufficient resources. Finally, it should be flexible and change as necessary over time." https://www.isu.edu/academicaffairs/institutional-effectiveness-and-initiatives/program-health/.

During AY2020-2021, the MPH program prepared information that included information on student enrollment, graduation, retention, and faculty and budgetary resources for the program. The MPH program director compiled the report with input from MPH faculty. The Deans then ranked programs which were categorized into quintiles with specific action plans required for those in certain quintiles. The MPH program was ranked in the 3rd quintile and will be submitting action plans in January of 2023. Again, the MPH program director will compile the report with input from MPH faculty.

d. admissions policies and/or decisions

Admissions policies must meet minimum requirements determined by the ISU Graduate School. Other admissions requirements can be added at the program level. Proposed changes to admission criteria are discussed and voted upon by the Admissions Committee. In terms of admission decisions, the Graduate School screens applications, and sends the applications that meet the minimum criteria to the MPH program. With the exclusion of the Department Chair, all of the MPH faculty are asked to independently review the student applications, and provide a brief note as to whether they suggest the applicant is accepted into the MPH program or not. The MPH program director then makes a determination based on committee feedback and voting. The Department Chair then reviews the decision, and either 1) accepts or denies the student based on a clear faculty review, or 2) reviews the student's application and then determines whether to admit the student into the MPH program.

e. faculty recruitment and promotion

Faculty recruitment and promotion follows standard ISU policies (see TITLE in ERF). The process for faculty recruitment has successfully resulted in the hiring of four faculty into the program over the last seven years (Jing Jing Niu, Irene van Woerden, Kristin Van De Griend, Diana Schow). Two faculty were promoted through the promotion process over the last seven years (Ryan Lindsay, Elizabeth Fore).

For faculty recruitment, a search committee from within the MPH program is formed (typically five people) and all of the search committee members review the job posting. Once agreement is reached for the job posting, a national search is undertaken. All of the search committee members review the candidates' applications and rate each candidate according to a pre-defined criteria (e.g., online and in-person teaching experience has a score between 0 and 20, with a total score for the candidate out of 100).

The search committee scores the candidates independently and these ratings are then compiled into one document. The search committee then meets to discuss the ratings and to discuss any major discrepancies in scoring (e.g., high vs low teaching score). When major discrepancies occur, the search committee members are asked if they wish to update their initial rating. Once the committee members are in general agreement over the candidate ratings, the top candidates are invited for a preliminary interview (typically 30 minutes, these have been over Zoom for the last three hires).

The search committee members rate each candidates' preliminary interview on a predetermined list of criteria, and then meet to discuss again. Once agreement is reached about the top candidates among the committee members then these top candidates are invited for a secondary interview (these were also over Zoom for the last three hires). The Chair of Department is the hiring manager and makes the final hiring recommendation to the Dean.

For faculty tenure, the DCPH will convene its own committee to review applications for tenure and/or promotion. The DCPH committee may be comprised of tenured, tenure track, research and clinical faculty members at .5 FTE or greater. The number (with a minimum of five) and make-up of committee members will be determined jointly between the candidate and the committee chair. One to two ISU student representatives, and a tenured, tenure track, clinical or research faculty at .5 FTE or greater from outside the DCPH, but within the University must be included on the committee. Disputes regarding the number and make-up of the committee will be resolved through consultation with the COH Dean. Anonymous voting is conducted for the areas of the applicants' scholarship, service and teaching. An overall vote to either grant or deny also takes place for both promotion and/or tenure. The student(s) only vote in the area of teaching; the student(s) do not vote to grant or deny tenure.

- *See ERF DCPH P&T Procedures_Final*

The portfolio is then reviewed as follows:

i. Department committee.
ii. Department chair/Program Director (if applicable).
iii. College committee.
iv. Dean of the college.
v. Vice President of Health Sciences (VPHS).
vi. University Provost.

vii. University President.

- *See ERF Kasiska Division of Health Sciences KDHS-Tenure-and-Promotion-Policy-and-Procedure-5-15-19.pdf*
- *See ERF Promotion-and-Tenure-ISUPP-4020*

f. research and service activities

Research.
The DCPH Research Forum are monthly one hour meetings that all faculty are invited to attend. Faculty are invited to present by the organizer (Kristin Van De Griend). Decisions regarding the format of these forums were determined by consensus of the DCPH.

Faculty in the MPH program have their own research agendas and service activities. The faculty have autonomy to make decisions on their research and service.

Faculty collaboration to develop tenure and promotion guidelines--providing input on how and what research and service activities are valued.

Service.
All MPH faculty serve on the program committees as assigned. For example, all MPH faculty serve on the admissions committee. For admissions, the MPH Director reviews the application and informs the MPH faculty that there are new applications. The MPH faculty then review the application and provide their feedback. The MPH program director reviews the MPH faculty decisions, and the student application, and makes a recommendation to the Department Chair. The Chair reviews and then makes a final decision (reviewing the application as appropriate).

3) A copy of the bylaws or other policy documents that determine the rights and obligations of administrators, faculty, and students in governance of the program.

Graduate students are expected to conduct themselves in an ethical and professional manner. The following statements of common values may serve as guidance for general decision making during our professional studies.

The handbook has adapted the Code of Ethics for the Health Education Profession (AAHE and SOPHE) and has sections on the responsibility to the Public, to the Profession, to Employers, in the Delivery of Health Education, in Research and Evaluation, in Professional Preparation. For instance, the handbook states that "Public Health Professionals are responsible for their professional behavior, for the reputation of their profession, and for promoting ethical conduct among their colleagues" and "Public Health Professionals promote integrity in the delivery of health education. They respect the rights, dignity, confidentiality, and worth of all people by adapting strategies and methods to meet the needs of diverse populations and communities." (see ERF MPH Handbook - v. Fall 2022)

The position descriptions for the program director and department chair are in the ERF: Director Public Health Position Description 2019, and Chair-Director-Position-Description_CPH_2019

For the Kasiska Division of Health Sciences (KDHS) policy listing, preamble, and policy on policies see

- *https://www.isu.edu/healthsciences/resources/for-faculty-and-staff/*
- *https://www.isu.edu/media/libraries/division-of-health-sciences/DHS-Preamble-Adopted.pdf*
- *https://www.isu.edu/media/libraries/division-of-health-sciences/DHS-Policy-on-Policies-Adpoted.pdf.*
  (See ERF KDHS policy list, KDHS preamble, KDHS policy on policies)

University Policies are available online at https://www.isu.edu/policy/ (see ERF ISU Policies and Procedures)

4) Briefly describe how faculty contribute to decision-making activities in the broader institutional setting, including a sample of faculty memberships and/or leadership positions on committees external to the unit of accreditation.

All MPH faculty serve as Graduate Faculty Representatives on Graduate Students thesis and dissertation committees for students outside the department as is possible. The Department Chair is part of the Kasiska Division of Health Sciences (KDHS) extended Health Science Administrative Council and College Leadership Council. Drs. Fore or Lindsay have served on these committees continually over the past 7 years.

Individual faculty service outside of the department include: Dr. Fore was appointed by the Provost to represent ISU in a project with the Idaho Department of Labor and has served the division by serving on the cultural competency committee. She also has served on faculty search and tenure & promotional review committees outside of the department. Dr. Lindsay has served the university through COVID-19 Health Committee to mitigate COVID-19 risks in the ISU community, served the KDHS on the annual research day planning committee and on faculty search and tenure & promotional review committees. Dr. van Woerden provides consulting services for faculty, students, and staff across the KDSH and Co-chaired the interprofessional Acute Disaster Response & Preparedness Conference. She served on 2 search committees for statistics faculty. Dr. Schow and Fore serve on the Area Health Education Council (AHEC) Advisory Board. Dr. Schow also served on the KDHS Health Disparities and Diversity Initiatives Committee and the Cluster Hire Committee for a Cluster Hire Initiative. Dr. Salazar represents KDHS on the Bachelor of Applied Science committee.

5) Describe how full-time and part-time faculty regularly interact with their colleagues (self-study document) and provide documentation of recent interactions, which may include minutes, attendee lists, etc.

The Department has historically had one meeting per semester, which in general all full-time and part-time faculty attended (see ERF A/1.5. Meeting Agendas for example agendas/minutes listing attendees). The number of meetings has now increased, with three meetings per semester for the 2022-2023 academic year.

The Department established the "DCPH Research Forum" in April 2022. These are monthly one hour meetings which all faculty are invited to attend. The typical format of these forums is a 25 minute faculty presentation, followed by a 15 minute Q&A, and then 10 minute open discussion for all faculty to share current/upcoming projects.

Presentations to date are:

- *May 13th: Presentation = Diana Schow. Attendees: Ryan Lindsay, Melissa Caudle, Lisa Salazar, Diana Schow, and Kristin Van De Griend*
- *September 9th: Presentation = Kristin Van De Griend. Attendees: Irene van Woerden, Ryan Lindsay, Melissa Caudle, Jeanette Olsen*
- *October 14th: canceled due to presenter illness*
- *November 11th: Presentation = Irene van Woerden. Attendees: Ryan Lindsay, Diana Schow, Janette Olsen, Christina Martinez*
- *January 13th: Presentation = Ryan Lindsay. Attendees: Janette Olsen, Diana Schow, Velma Payne, Melissa Caudle, Kristin Van De Griend, Nnamdi Moeteke, Irene van Woerden, Christina Martinez*
- *February 10th: Presentation = Jade Hans (MPH Student). Attendees: Ryan Lindsay, Diana Schow, Janette Olsen, Velma Payne, Melissa Caudle, Kristin Van De Griend, Nnamdi Moeteke, Irene van Woerden, Christina Martinez*

In addition, faculty regularly collaborate with each other, and meet as needed to discuss projects, student theses, and student projects, among others.

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

<u>Strengths</u>.
The administration processes in the Department are working. The new research forum has not only led to increased interactions between faculty and staff, but has also highlighted that faculty were doing similar processes differently. From these interactions faculty have discussed difficulties, and found easier routes for some processes.

<u>Weaknesses</u>.
Committees responsible for degree requirements, curriculum design, and student assessment policies and procedures are formed on an ad-hoc basis. While this has worked well historically, we plan to formalize who is on these committees, term of service, and program bylaws for decision making (e.g., who can vote, how votes are cast).

Faculty involvement in dept search committees has been limited after the initial screening telephone interview. While all faculty have a chance to view, ask questions, and provide feedback on the final candidates' presentations, faculty have not had their own session with final candidates at the campus/virtual visit stage to further ask questions of the candidate. However, the faculty on the search committee did meet to discuss the campus/virtual visit, review feedback, and rank the final candidates. In the future we plan to better involve the faculty at the candidates' final interview stage.

From the current regulations, an MPH faculty member could be considered for promotion and tenure with only one MPH faculty input. Rules about committee make-up with a required minimum of faculty from within the same program should be considered. We plan to update the promotion and tenure committee guidelines in Fall 2024 to ensure more tenured MPH faculty members are on candidates' promotion and tenure committees.

A2. Multi-Partner Programs
(applicable ONLY if functioning as a "collaborative unit" as defined in CEPH procedures)

Not applicable

A3. Student Engagement

Students have formal methods to participate in policy making and decision making within the program, and the program engages students as members on decision-making bodies whenever appropriate.

1) Describe student participation in policy making and decision making at the program level, including identification of all student members of program committees over the last three years, and student organizations involved in program governance.

   Students are members of the advisory board and are involved with the tenure and promotion process for faculty. They are also asked to provide feedback on hiring decisions. A student was also employed to assist with updating the MPH handbook, and led the creation of an orientation agenda for incoming students. Students also self-govern the Public Health Student Association.

   The Public Health Student Association of ISU is an officially registered ASISU organization. There are 10 active members of the PHSA this year. The PHSA is self-governed and adheres to a written constitution. As per the PHSA Constitution Article III (Membership), Membership in the Public Health Student Association is open to all ISU students, faculty, and staff. This organization will not deny membership to any person on the basis of race, religion, sex, gender, sexual affection/orientation, disability, age, marital status, veteran status, ethnicity, national origin, color, language or creed.The purpose of this organization is to promote public health education, awareness, and activities at Idaho State University, further enhancing and developing the supportive networks and available opportunities for ISU students, faculty, and staff that are active in the public health field. Membership is open to all ISU students, faculty, and staff. Voting members consist of all full fee paying members who have shown vested interest in the club by having signed the current membership roster. PHSA meets monthly. Meetings are conducted using Robert's Rules of Order and a quorum consists of two-thirds of the voting membership. Quorum may pass an issue with a simple majority vote. Any member of PHSA may sponsor any amendment. The amendment must be approved by a two-thirds majority vote of members present. The proposed amendment is not ratified until approved by ASISU. The student members of PHSA are fully responsible for decision making within their organization including but not limited to the election of officers, participation in activities, semester schedules, and budget/financial matters.

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

   <u>Strengths.</u>
   Students self-govern the Public Health Student Association of ISU, which is an officially registered ASISU organization

   <u>Weakness</u>. The advisory board met in February 2023, and advisory board members had been met with individually prior to that. However, the full advisory board had not been recently engaged with prior to the February 2023 meeting, partly due to Covid-19. Now that the faculty, and members of the advisory board, are no longer overwhelmed with Covid-19, we plan to continue to engage with our advisory board twice a year.

A4. Autonomy for Schools of Public Health

Not applicable.

A5. Degree Offerings in Schools of Public Health

Not applicable.

B1. Guiding Statements

The program defines a *vision* that describes how the community/world will be different if the program achieves its aims.

The program defines a *mission statement* that identifies what the program will accomplish operationally in its instructional, community engagement and scholarly activities. The mission may also define the program's setting or community and priority population(s).

The program defines *goals* that describe strategies to accomplish the defined mission.

The program defines a statement of *values* that informs stakeholders about its core principles, beliefs, and priorities.

1) The program's vision, mission, goals, and values.

   Due to university processes, the Department does not currently have a strategic plan. In Fall 2019 a two day operational planning process was conducted, during which the Mission of the Department of Community and Public Health was created. In 2020 the university President paused unit specific strategic planning so that the university planning could occur prior to unit level work so as to ensure a cogent and articulated strategic plan across the university. The university planning was completed on July 1, 2022 and is starting to be implemented. The Kasiska Division of Health Sciences and College of Health are now starting their strategic planning. The Department is planning to participate in both of these strategic plans, and start on the Department strategic plan once theDivision and College level plans are completed. We anticipate that the green light for strategic planning at the program level will occur in 2023.

   Vision.
   The MPH program does not yet have a vision (due to the required university delay described above). The vision of the university and Kasiska Division of Health Sciences (KDHS) are as follows:.
   University Vision: We inspire a passion for knowledge and discovery.
   KDHS Vision: The Kasiska Division of Health Sciences is a destination site for health profession education. The university recently established a new strategic plan and the Division, COH and associated departments are engaging in the strategic planning process currently.

   Mission.
   Department: We advance health for all through collaborative learning and scholarly activities, enabling students and communities to thrive.

   Program: The mission of the Master of Public Health (MPH) Program at Idaho State University is to improve the health and well-being of human populations through the application of the essential services of public health by excellence in instruction, community service, research, and continuing professional education.

   Goals.
   1. *Instruction: To deliver an evidence-based academic program that prepares students for public health practice.*

2. *Research: To promote and support public health research and scholarly endeavor, and provide leadership in public health priorities.*
3. *Community Service: To support students and faculty in demonstrating public health leadership and contributing to public health at the local, state, and national level.*
4. *Continuing Education: To strengthen the existing public health workforce by providing advanced skills, knowledge, and professional learning opportunities throughout Idaho.*

Values.
As a member of the ISU Kasiska Division of Health Sciences (KDHS), the MPH Program is guided in its performance by a set of division-wide core values.

- *Professional Integrity: Promoting professional, ethical standards and respect the integrated roles of all health professionals*
- *Holistic Approach to Health: Emphasizing a comprehensive view of human health, including curative and preventive dimensions*
- *Collaboration: Recognizing the value of internal and external partnerships through professional and community engagement*
- *Discovery and Innovation – Seeking new evidence or evidence based practice to improve health outcomes*
- *Dedication: Support to the mission and vision of the Program and DHS*
- *Excellence: Striving for excellence in all aspects of professional, academic and personal endeavors.*

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

Not provided as the Department does not currently have a strategic plan, see weakness below for more detail.

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

<u>Strengths</u>.

We fulfill and meet our mission through a rich research and scholarly research program in the department. The department has received over $3 million in funding to support community health worker training to support the health and wellness of Idahoans. This resource supports the work of the department to advance the health of our communities.

<u>Weaknesses</u>.
The Department does not currently have a strategic plan. Two faculty from the MPH program are currently assisting with the strategic plan for the College of Health. Once the University, KDHS, and College of Health have their strategic plans in place the MPH program will be allowed to start working on their strategic plan (expected start in 2023).

B2. Evaluation and Quality Improvement

The program defines and consistently implements an evaluation plan that fulfills the following functions:

- **includes all measures listed in Appendix 1 in these Accreditation Criteria**
- **provides information that allows the program to determine its effectiveness in advancing its mission and goals (as defined in Criterion B1)**
    - **Measures must capture all aspects of the unit's mission and goals. In most cases, this will require supplementing the measures captured in Appendix 1 with additional measures that address the unit's unique context.**
- **defines a process to engage in regular, substantive review of evaluation findings, as well as strategic discussions about their implications**
- **allows the program to make data-driven quality improvements e.g., in curriculum, student services, advising, faculty functions, research and extramural service, and operations, as appropriate**

1) Present an evaluation plan in the format of Template B2-1 that lists the following for each required element in Appendix 1:
    a. the specific data source(s) for each listed element (e.g., alumni survey, student database)
    b. a brief summary of the method of compiling or extracting information from the data source
    c. the entity or entities (generally a committee or group) responsible for reviewing and discussing each element and recommending needed improvements, when applicable
    d. the timeline for review (e.g., monthly, at each semester's end, annually in September)

				Goal Measured			
Measures	**Criteria or *Template***	**Data source & method of analysis**	**Who has review & decision-making responsibility?**	**1**	**2**	**3**	**4**
Student enrollment	*Intro-2*	Data obtained from the graduate school and institutional research., Tracked at the student level via the "student tracking summary" spreadsheet.	Admissions committee, Program Director, Department Chair, Administrators, and Advisory Board. Assessed at each semester				

Unit-defined measure 1 *The MPH faculty will review existing curricula each year to identify changes needed to enhance the preparation of students to meet emerging public health needs.*	*B2-1*	Student evaluations, alumni interviews	Program Director and Department Chair, assessed yearly	X			X
Unit-defined measure 2 *Eighty percent (80%) of ISU MPH graduates will be employed in a health related job, academic or practical research position or enrolled in another degree seeking position within one year of graduation.*	*B2-1*	Student Exit Survey	Program Director and Department Chair, assessed at the end of every semester	X			
Unit-defined measure 3 *MPH core faculty will publish one peer-reviewed journal article, book chapter or technical report or present at one peer-reviewed professional conference per year.*	*B2-1*	Annual review form	Program Director and Department Chair, assessed yearly		X		
Unit-defined measure 4 *At least one-third of MPH students or recent graduates will submit one poster presentation, one oral presentation, abstract or other scholarly work.*	*B2-1*	Reported by faculty	Program Director and Department Chair, assessed yearly				
Unit-defined measure 5+ *MPH core faculty will serve on one or more state, regional or national advisory council/workgroup by the third year of their employment.*	*B2-1*	Annual evaluations	Program Director and Department Chair, assessed yearly			X	

At least three specific examples of improvements undertaken in the last three years based on the evaluation plan. At least one of the changes must relate to an area other than the curriculum	*B2-2*						
Graduation rates	*B3-1*	Data obtained from the graduate school. Tracked at the student level via the "student tracking summary" spreadsheet.	Admissions committee, Program Director, Department Chair, Administrators, and Advisory Board. Assessed yearly	X			
Post-graduation outcomes (e.g., employment, enrollment in further education)	*B4-1*	Alumni interviews	Program assessment committee, Program Director, Department Chair, and Advisory Board. Assessed yearly	X	X		
Actionable data (quantitative and/or qualitative) from recent alumni on their self-assessed preparation for post-graduation destinations	B5	Alumni interviews	Program assessment committee, Program Director, Department Chair, and Advisory Board. Assessed yearly	X			
Budget table	*C1-1*						
Student perceptions of faculty availability	C2	Course evaluations	Program assessment committee, Program Director, Department Chair, and Advisory Board. Assessed yearly	X			

Student perceptions of class size & relationship to learning	C2	Student survey	Program assessment committee, Program Director, Department Chair, and Advisory Board. Assessed yearly	X			
List of all faculty, which concentrations they support & their FTE allocation to the unit as a whole	*C2-1, E1-1, E1-2*						
Ratios for student academic advising (all degree levels)	*C2-2*	Student databases, tracked at the student level	Program assessment committee, Program Director, Department Chair, and Advisory Board. Assessed yearly	X			
Ratios for supervision of MPH ILE	*C2-2*	Reported by faculty. Tracked at the student level via the "student tracking summary" spreadsheet	Program assessment committee, Program Director, Department Chair, and Advisory Board. Assessed yearly	X			
Count, FTE (if applicable), and type/categories of staff resources	*C3-1*						
Faculty participation in activities/resources designed to improve instructional effectiveness (maintain ongoing list of exemplars)	E3	Faculty self-report, tracked at the faculty level, CVs and annual evaluations	Program Director and Department Chair, assessed yearly	X			
Faculty currency & instructional technique measure 1 *Annual or other regular reviews of faculty productivity, relation of scholarship to instruction*	E3	Student evaluation documents	Program Director and Department Chair, assessed each semester	X			

Faculty currency & instructional technique measure 2 *Student satisfaction with instructional quality*	E3	Student evaluation documents	Program Assessment committee, Program Director and Department Chair, assessed yearly through annual evaluations	X			
Faculty currency & instructional technique measure 3 *Courses that use higher-level assessments*	E3	Faculty self-report	Program Director and Department Chair, assessed yearly	X			
Faculty currency & instructional technique measure 4 *Implementation of grading rubrics*	E3	Faculty self-report, course syllabi	Program Director and Department Chair, assessed yearly	X			
Faculty research/scholarly activities with connections to instruction (maintain ongoing list of exemplars)	E4	Faculty self-report, tracked at the faculty level, CVs and annual evaluations	Program Director and Department Chair, assessed yearly		X		
Faculty scholarship measure 1 *All MPH Core Faculty will submit one application for external funding per year OR be actively involved as the principal investigator or co-investigator in a funded research project.*	*E4-1*	Faculty self-report, tracked at the faculty level, CVs and annual evaluations	Program Director and Department Chair, assessed yearly		X		
Faculty scholarship measure 2 *MPH core faculty will publish at least one peer-reviewed journal article, book chapter or technical report, or present at one peer-reviewed professional conference per year.*	*E4-1*	Faculty self-report, tracked at the faculty level, CVs and annual evaluations	Program Director and Department Chair, assessed yearly		X		
Faculty scholarship measure 3 *All MPH core Faculty in their third year will secure external funding for research or service projects in the amount of $25,000 per year*	*E4-1*	Faculty self-report, tracked at the faculty level, CVs and annual evaluations	Program Director and Department Chair, assessed yearly		X		

(average over a three year period).							
Faculty extramural service activities with connections to instruction (maintain ongoing list of exemplars)	E5	Faculty self-report, tracked at the faculty level, CVs and annual evaluations	Program Director and Department Chair, assessed yearly			X	
Faculty service measure 1 *MPH core faculty will serve on one local council or workgroup by the second year of their employment at ISU.*	E5	Faculty self-report, tracked at the faculty level, CVs and annual evaluations	Program Director and Department Chair, assessed yearly			X	
Faculty service measure 2 *MPH core faculty will serve on one or more state, regional or national advisory council/workgroup by the third year of their employment.*	E5	Faculty self-report, tracked at the faculty level, CVs and annual evaluations	Program Director and Department Chair, assessed yearly			X	
Faculty service measure 3 *MPH core faculty will maintain a working relationship on as an advisor or actively contributing member of an advisory council/workgroup that is in the public area and external to the university by the time they are in their third year of employment and will maintain this requirement for every year thereafter.*	E5	Faculty self-report, tracked at the faculty level, CVs and annual evaluations	Program Director and Department Chair, assessed yearly			X	
Actionable data (quantitative and/or qualitative) from employers on graduates' preparation for post-graduation destinations	F1	Not currently obtained	Program Assessment committee, Program Director and Department Chair, assessed yearly	X			
Feedback from external stakeholders on changing practice & research needs that might impact unit priorities and/or curricula	F1	Stakeholder meetings	Program Assessment committee, Program Director and Department	X			X

			Chair, assessed yearly				
Feedback from stakeholders on guiding statements and ongoing self-evaluation data	F1	Stakeholder meetings	Program Director and Department Chair, assessed yearly	X			X
Professional AND community service activities that students participate in (maintain ongoing list of exemplars)	F2	Student tracking database, self-report	Program Director and Department Chair, assessed yearly			X	
Current educational and professional development needs of self-defined communities of public health workers (individuals not currently enrolled in unit's degree programs)	F3	Stakeholder meetings	Program Assessment committee, Program Director and Department Chair, assessed yearly				X
Continuing education events presented for the external community, with number of non-student, non-faculty attendees per event (maintain ongoing list)	*F3-1*	Continuing education database, faculty self-report	Program Director and Department Chair, assessed yearly				X
Quantitative and qualitative information that demonstrates unit's ongoing efforts to increase representation and support success of self-defined priority underserved populations—among students AND faculty **(and staff if applicable)**	G1	Advertising locations, mentoring of priority underserved populations	Program Director and Department Chair, assessed yearly				
Student AND faculty (staff, if applicable) perceptions of unit's climate regarding diversity & cultural competence	G1	Student survey, faculty check-in	Program Director and Department Chair, assessed yearly				
Student satisfaction with academic advising	H1	Student self-report	Program Director and Department	X			

			Chair, assessed yearly				
Student satisfaction with career advising	H2	Student self-report	Program Director and Department Chair, assessed yearly				
Events or services provided to assist with career readiness, job search, enrollment in additional education, etc. for students and alumni (maintain ongoing list of examplars)	H2	Career readiness tracking document	Program Director and Department Chair, assessed yearly				X
Number of student complaints filed (and info on disposition or progress)	H3	Tracked via faculty report, and from Program Director and Department Chair	Program Director and Department Chair, assessed at the end of each semester	X			
Recruitment & admissions measure	H4	Admissions database	Admissions Committee, Program Director and Department Chair, assessed yearly				

2) Provide evidence of implementation of the plan described in Template B2-1. Evidence may include reports or data summaries prepared for review, notes from meetings at which results were discussed, etc.

   The Program Director and Department Chair meet regularly to discuss the MPH program, however documentation for the tracking listed above has not been formally kept for all measures. The department is developing an improvement plan to address documentation needs with the new associate dean for curriculum and assessment in the newly established COH.

   See ERF for the faculty tracking document

3) Provide at least three specific examples of improvements undertaken in the last three years based on the evaluation plan in the format of Template B2-2. At least one of the changes must relate to an area other than the curriculum.

	Measure (copied from column 1 of Template B2-1) that informed the change	*Data that indicated improvement was needed*	*Improvement undertaken**
Example 1	*Unit-defined measure 1: The MPH faculty will review existing curricula each year to identify changes needed to enhance the preparation of students to meet emerging public health needs.*	*Students indicated that they wanted more flexibility in when they took courses.*	*We have offered courses more than one a year in some instances, and offered summer courses*
Example 2	*Unit-defined measure 1: The MPH faculty will review existing curricula each year to identify changes needed to enhance the preparation of students to meet emerging public health needs.*	*Upon review of where alumni are placed, and based on students' desires to work on real-world and local public health issues, a greater emphasis on rural health systems was provided*	*We converted the course "US & Global Health Systems" to "Rural Health Systems" so that we were able to provide that context to students.*
Example 3	*Unit-defined measure 1: The MPH faculty will review existing curricula each year to identify changes needed to enhance the preparation of students to meet emerging public health needs.*	*Feedback from students indicated the desire for an orientation at the beginning of the program*	*Discussions with the MPH faculty resulted in the decision to implement a one-credit orientation course for students first semester. The MPH Director is working to implement this change currently.*
Example 4	*Recruitment & admissions measure*	*Potential students were stating that the GRE was a barrier to admissions*	*Discussions with the MPH faculty resulted in the decision to remove the GRE requirement, and replace it with a proctored essay. The MPH Director is working to implement this change currently.*

Example 5	*Unit-defined measure 4: Fifty percent of MPH students or recent graduates will submit one poster presentation, one oral presentation, abstract or other scholarly work.*	*Students mentioned that they were not aware of the faculty research, which made it harder to connect to a suitable thesis/project advisor.*	*Discussions with the MPH faculty resulted in the decision to invite students to the research forums so that they can learn about the research projects underway, and also present their own research.*
Example 6	*Graduation rates*	*Some years had low graduation rates.*	*Discussion between the MPH Director and Department chair resulted in a Moodle page being created to make communications with the MPH students easier, and to enable more reliable contact with students*

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

<u>Strengths</u>.
The Program Director and Department Chair meet regularly to discuss the MPH program. Changes to the MPH courses are occurring to improve the student experience. Both students and faculty are actively engaged in research and service

<u>Weaknesses</u>.
Not all of the required data have been collected on a regular basis. We plan to institute a better tracking system for all of the required areas in the future. The program director and chair are working with the new associate dean of curriculum and assessment to devise a better data management plan.

B3. Graduation Rates

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

The program achieves graduation rates of 70% or greater for bachelor's and master's degrees and 60% or greater for doctoral degrees.

1) Graduation rate data for each degree in unit of accreditation. See Template B3-1.

Students in MPH Degree, by Cohorts Entering Between 2015-2016 and 2021-2022
Maximum Time to Graduate: 8 years

	Cohort of Students	2014 – 2015	2015 – 2016	2016 – 2017	2017 – 2018	2018 – 2019	2019 – 2020	2020 – 2021	2021 – 2022
2014	# Students entered	9							
-	# Students withdrew, dropped, etc.	0							
2015	# Students graduated	0							
	Cumulative graduation rate	0%							
2015	# Students continuing at beginning of this school year (or # entering for newest cohort)	9	10						
-	# Students withdrew, dropped, etc.	0	0						
2016	# Students graduated	2	0						
	Cumulative graduation rate	22%	0%						
2016	# Students continuing at beginning of this school year (or # entering for newest cohort)	7	10	10					
-	# Students withdrew, dropped, etc.	1	0	0					
2017	# Students graduated	2	0	0					
	Cumulative graduation rate	44%	0%	0%					
2017	# Students continuing at beginning of this school year (or # entering for newest cohort)	4	10	10	5				
-	# Students withdrew, dropped, etc.	0	0	0	0				
2018	# Students graduated	1	4	0	0				
	Cumulative graduation rate	56%	40%	0%	0%				
2018	# Students continuing at beginning of this school year (or # entering for newest cohort)	3	6	10	5	3			
-	# Students withdrew, dropped, etc.	0	1	2	0	0			

2019	# Students graduated	1	2	2	0	0			
	Cumulative graduation rate	67%	60%	20%	0%	0%			
2019	# Students continuing at beginning of this school year (or # entering for newest cohort)	2	3	6	5	3	6		
-	# Students withdrew, dropped, etc.	0	0	0	1	0	0		
2021	# Students graduated	2	0	1	1	0	0		
	Cumulative graduation rate	89%	60%	30%	20%	0%	0%		
2020	# Students continuing at beginning of this school year (or # entering for newest cohort)	0	3	5	3	3	6	11	
-	# Students withdrew, dropped, etc.	0	0	0	1	0	0	0	
2021	# Students graduated	0	0	1	1	2	3	1	
	Cumulative graduation rate	89%	60%	40%	40%	67%	50%	9%	
2021	# Students continuing at beginning of this school year (or # entering for newest cohort)	0	3	4	1	1	3	10	11
-	# Students withdrew, dropped, etc.	0	1	3	0	0	0	0	0
2022	# Students graduated	0	1	0	0	1	2	4	1
	Cumulative graduation rate	89%	70%	40%	40%	100%	83%	45%	9%

2) Data on doctoral student progression in the format of Template B3-2.

Not applicable

3) Explain the data presented above, including identification of factors contributing to any rates that do not meet this criterion's expectations and plans to address these factors.

Graduation rates for the cohorts 2016-2017 and 2017-2018 are low. Graduation rates for the cohorts from 2018-2019 onwards appear to be on track for a 70%+ graduation rates.

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

Strengths.
We have a 100% graduation rate for the 2018-2019 cohort already, and already have a graduation rate above 70% for the 2019-2020 cohort. The number of MPH faculty doubled (from 3-6) between 2020 and 2021, increasing the number of faculty who interact/advise students and can chair projects/theses. Also, the MPH program director position was created in June 2019, carving out the duties that the department chair had been responsible for. The program director position has allowed more time/effort to be devoted to advising and tracking the progress of MPH students.

Weaknesses.

The low graduation rates for cohorts 2016-2017 and 2017-2018 is a weakness. Students who have not taken classes in the past year are now being identified. We will be reaching out to these students to discuss any potential barriers that they may have in completing their MPH degree.

We plan to start using the new ISU software "Navigate" to track and increase contact with our MPH students that are not progressing. Navigate states that their partners see graduation rate increases of 3% to 15%.

Student advising is being improved upon, with the planned addition of an orientation for each new cohort to make it clear students know their advisor, MPH program director, and when to contact faculty for assistance in these positions. There is more guidance to faculty members and regular reminders about how to advise students, who their advisees are, and when to contact students.

The order classes are taken may be associated with graduation success. We have added some prerequisites to our courses so that students can be better prepared for these courses.

We have also created a suggested course order to best help students go through the program.

B4. Post-Graduation Outcomes

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

The program achieves rates of 80% or greater employment or enrollment in further education within the defined time period for each degree.

1) Data on post-graduation outcomes (employment or enrollment in further education) for each degree. See Template B4-1.

Post-Graduation Outcomes	2019-2020 Number and percentage	2020-2021 Number and percentage	2021-2022 Number and percentage
Employed	4 (100%)	5 (56%)	8 (80%)
Continuing education/training (not employed)	0 (0%)	2 (22%)	1 (10%)
Not seeking employment or not seeking additional education by choice	0 (0%)	1 (11%)	0 (0%)
Actively seeking employment or enrollment in further education	0 (0%)	0 (0%)	0 (0%)
Unknown	0 (0%)	1 (11%)	1 (10%)
Total graduates (known + unknown)	4	9	10

2) Explain the data presented above, including identification of factors contributing to any rates that do not meet this criterion's expectations and plans to address these factors.

The majority of the MPH graduates are employed, or go on for further training, after they graduate.

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

Strengths
The majority of the MPH graduates are employed, or go on for further training, after they graduate.

Weaknesses
Two graduate students currently have an "unknown" post-graduation outcome. We plan to stay in better touch with our graduates in the future through social media (Linked In), email newsletters, networking events, and inviting our graduates to open public lectures.

B5. Alumni Perceptions of Curricular Effectiveness

For each degree offered, the program collects information on alumni perceptions of their preparation for the workforce (or for further education, if applicable). Data collection must elicit information on what skills are most useful and applicable in post-graduation destinations, areas in which graduates feel well prepared, and areas in which they would have benefitted from more training or preparation.

The program defines qualitative and/or quantitative methods designed to provide useful information on the issues outlined above. "Useful information" refers to information that provides the unit with a reasonable basis for making curricular and related improvements. Qualitative methods may include focus groups, key informant interviews, etc.

The program documents and regularly examines its methodology, making revisions as necessary, to ensure useful data.

1) Summarize the findings of alumni self-assessment of their preparation for post-graduation destinations.

   Recent alumni were asked "On a scale of 1 to 5, where one is not well at all, and five is very well, how well did ISU MPH program prepare you for your post-graduation destination?" Six students responded to the survey, with three of these students providing a "5: very well" response. An additional two students gave a "4" response and one student gave a "3" response. No students gave a response of "1: not well at all" or "2".

   Comments for how well the ISU MPH program prepared the student for post-graduation destinations include assistance by faculty to help them get into their position (e.g., "Dr. Lindsay and Dr. Van Woerden have helped me every step of the way to get into the PhD program").

2) Provide full documentation of the methodology and findings from quantitative and/or qualitative data collection.

   <u>Methods</u>
   Students who had graduated in 2020-2021, 2021-2022, and 2022-2023 were contacted via email and invited to take part in this survey. Contact via LinkedIn was then attempted for students who did not respond to the email. An MPH student interviewed the alumni over zoom and asked the following questions regarding their perceptions of curricular effectiveness:

   - *On a scale of 1 to 5, where one is not well at all, and five is very well, how well did the program meet your expectations in terms of content and learning outcomes?*
     - *Any comments on how well did the program met your expectations in terms of content and learning outcomes?*
   - *On a scale of 1 to 5, where one is not well at all, and five is very well, how well were the program goals and objectives clearly defined and communicated?*
     - *Any comments on how well the program goals and objectives were clearly defined and communicated?*

- *What are some tasks or training areas in your current job that the ISU MPH program prepared you well for?*
- *What are some tasks or training areas in your current job that the ISU MPH program could improve upon?*
- *On a scale of 1 to 5, where one is not well at all, and five is very well, how well did ISU MPH program prepare you for your post-graduation destination?*
    - *Any comments on how well ISU MPH program prepare you for your post-graduation destination?*
- *On a scale of 1 to 5, where one is not well at all, and five is very well, How would you rate the teaching quality, availability and effectiveness of the instructors?*
    - *Any comments on how you would rate the teaching quality, availability and effectiveness of the instructors?*
- *Did the program provide you with enough hands-on learning and practical experience?*
    - *Any comments about hands-on learning and practical experiences?*
- *What did you enjoy most about the program?*
- *Would you recommend the ISU MPH program to a friend or colleague?*
    - *What are some reasons why/why not?*
- *Any additional feedback or suggestions for the ISU MPH program's improvement?*

Summary of Findings

In terms of content and learning outcomes, alumni stated that the majority of courses were beneficial. Lectures on health economics, health resources, and a broader choice of electives were requested, as was more policy related practical work. Two courses were mentioned as being areas that could be improved.

In terms of tasks and training areas that the MPH program prepared students' well for, data analyses and assessment/understanding of public health systems were mentioned several times. Program evaluation, policy and system analyses, epidemiology, communication, and needs assessments were also mentioned as areas that the alumni's MPH prepared them well for. Suggestions of more engaging classes, more practical work, project management, and health analyses were made.

Half of the alumni interviewed (3 of 6) stated that their MPH prepared them "very well" for their post-graduate destination. Half of the alumni also rated the teaching quality, availability, and effectiveness of the instructors as "very well". There were comments that the responsiveness of at least one professor had been problematic.

In terms of what the alumni enjoyed most about the program, the small class size, convenient timing of classes, and the attention received from instructors was mentioned. The alumni also stated that the environment was friendly and helpful, that they appreciated the relationship that they were able to develop with their professors. An international student also said that they appreciated the "soft skills" that they were taught. When asked if they would recommend the ISU MPH program to a friend or colleague, all of the interviewed alumni stated "definitely yes". When asked about the reasons for this response, one student stated "The accessibility of the programs for individuals who are not on site was very easy to connect with despite being online. Professors go above and beyond to make things work…" another student stated "Faculty and staff are great advocates for your success on both professional and academic levels. Faculty will go out

of their ways to make sure you get the best out of everything and are paid how much you deserve for the work you put in."

See ERF

- *Alumni survey - example email*
- *Alumni survey*
- *Alumni survey results - Spring 2023*
- *Student survey - request for responses*
- *Student survey*
- *Student survey results*
- *sub-folder: Older interviews which contains four additional interviews*

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

Strengths.
The majority of the MPH graduates go on to the workforce or further education. Students are positive about the program and how well it prepared them for the workforce.

Weaknesses.
Due to a variety of factors, the alumni perceptions of their preparation for the workforce have not been collected from all students. We plan to better follow-up on our graduated students in the future, and obtain both quantitative and qualitative information regarding their perceptions of preparation for the workforce and/or further education.

C1. Fiscal Resources

The program has financial resources adequate to fulfill its stated mission and goals. Financial support is adequate to sustain all core functions, including offering coursework and other elements necessary to support the full array of degrees and ongoing operations.

1) Describe the program's budget processes, including all sources of funding. This description addresses the following, as applicable:

   a) Briefly describe how the program pays for faculty salaries. If this varies by individual or appointment type, indicate this and provide examples. If faculty salaries are paid by an entity other than the program (such as a department or college), explain.

      The primary source of funds for the MPH program is through annual state appropriations. These dollars are allocated to the College of Health, then, re-apportioned to the department within that college, then to the MPH Program. These funds are used for faculty and staff salaries and operating costs of the programs. Additional funds are gained through awarded grants and contracts that are initiated by each program. There is a small endowment fund that can be used at the discretion of the MPH program director. This fund has only been used for student scholarship to date. In FY2019 the Office of the Provost made strategic investment in the MPH program of $350,477.00 to support a new faculty hire, faculty salaries, and provide additional marketing funds.

   b) Briefly describe how the program requests and/or obtains additional faculty or staff (additional = not replacements for individuals who left). If multiple models are possible, indicate this and provide examples.

      Programs can request through an annual strategic investment process for additional ongoing or one-time funding for their program which can be used for faculty and staff. Grants or contracts can provide additional funding for temporary faculty or staff positions. Through growth in enrollment, there is a process to request additional appropriated funds from central university accounts, or from new appropriations from the State of Idaho.

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

         Operational costs are appropriated from the state to the university, KDHS, and College to the Department. Operational costs include services rendered, supplies, travel, professional development, and annual accreditation costs.

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

         The MPH program has an endowment that can be spent at the discretion of the MPH program director. This has been used to support student scholarships. Approximately 95% of this has come from the endowment and 5% from the department budget.

PHSA's funding primarily comes from ASISU through the C.E.A.S.A.R. (Club Efforts Are Supplemented and Rewarded) Funding Program. The C.E.A.S.A.R. Funding System is made up of three components:

1. *Initial Deposits - PHSA applies each spring semester for $500 to be used for the next academic year. Certain participation requirements must be met to be eligible to apply.*
2. *Matched Deposits - PHSA may apply for any deposits they make (for example from a fundraiser or donation from a community partner) to be matched by ASISU. Matched deposits will be based on a predetermined ratio and are subject to funds available.*
3. *Incentive Points - PHSA earns additional funding based on attendance at ISU and club events. Students fill out and submit an Incentive Point Request form for each event attended. Deadlines are November and March of each year. Based on the number of students participating points are calculated and deposits are made based on a predetermined ratio and subject to funds available.*

Additional Individual fundraising efforts occur for specific projects for either money to purchase needed items or the items themselves (for example toothbrushes, children's books, canned food, etc.) All money is routed through the PHSA ASISU account.

Fall 2019-Spring 2020 Total Budget: $1,927.40
Fall 2020-Spring 2021 Total Budget: $929.02
Fall 2021-Spring 2022 Total Budget: $1,046.63

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

Faculty development funds are offered to all faculty irrespective of appointment type. In FY2022 the budgeted amount was $1,250 per faculty member and in FY 2023 increased to $1,500. These funds can be used for conference registration and travel, workshops, publication fees, association memberships, or other items at the approval of the Department Chair.

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

Through an identical process to that described above, programs can request through an annual strategic investment process for additional ongoing or one-time funding for their program which can be used for operational costs, student support and faculty development expenses. Grants or contracts can provide additional funding for these purposes. College and KDHS have small awards to help support faculty travel and professional development.

e) Explain how tuition and fees paid by students are returned to the program. If the program receives a share rather than the full amount, explain, in general terms, how

the share returned is determined. If the program's funding is allocated in a way that does not bear a relationship to tuition and fees generated, indicate this and explain.

Student tuition goes to the State of Idaho. The state returns an appropriation which includes, general appropriation from the State, and 2) request reimbursement for expenses against the tuition revenue. The institution then determines where the funds returned from the state go within the institution through an internal budget allocation process. This internal review process is currently under review and may change in FY 2024. Therefore, the amount allocated through the Division, College, to the Department does bear a direct relationship to tuition and fees generated.

The MPH program does not have program specific fees. Mandatory ISU student fees go to the support library, health center, recreational center, wellness, and other services on campus. These remain at ISU and under the discretion of the institution. No fees go directly to academic programs.

f) Explain how indirect costs associated with grants and contracts are returned to the program and/or individual faculty members. If the program and its faculty do not receive funding through this mechanism, explain.

Indirect costs for a grant are divided between units and the Principal Investigator within the University. As of July 2022, this disbursement is 39.5% to the Office of Research, 20.5% goes to Finance and Administration, 10% to the College, 5% to the library, and 15% to the Principal Investigator. The remaining 10% of indirect dollars are returned directly to the department of grant origination. It is at the discretion of the Chair as to where dollars are expended, these 10% are currently passed through directly to the Principal Investigator. Because state appropriated dollars are earmarked for specific line items, some indirect dollars historically have been used to fund start-up costs for new faculty and other unplanned expenditures that were not covered by specific line-items in the state appropriated budgets.

If the program is a multi-partner unit sponsored by two or more universities (as defined in Criterion A2), the responses must make clear the financial contributions of each sponsoring university to the overall program budget. The description must explain how tuition and other income is shared, including indirect cost returns for research generated by the public health program faculty appointed at any institution.

Not applicable

2) A clearly formulated program budget statement in the format of Template C1-1, showing sources of all available funds and expenditures by major categories, for the last five years.

Sources of Funds and Expenditures by Major Category, 2017 to 2022					
	2017-2018	***2018-2019***	***2019-2020***	***2020-2021***	***2021-2022***
Source of Funds					
Tuition & Fees					

State Appropriation	*$295,460.10*	*$302,802.52*	*$344,736.21*	*$371,124.75*	*$394,880.00*
University Funds		*$13,376.81*	*$8,000.00*	*$25,700.00*	*$186,344.00*
*Grants/Contracts**	*$73,688.00*	*$58,267.09*	*$55,797.41*	*$42,607.73*	*$220,676.00*
Indirect Cost Recovery	*$1,109.09*	*$2,378.97*	*$2,277.97*	*$2,390.60*	*$4,000.00*
Endowment					
Gifts					*$2,000.00*
Total	*$370,257.19*	*$376,825.39*	*$410,811.59*	*$441,823.08*	*$807,900.00*
Expenditures					
Faculty Salaries & Benefits	*$242,071.34*	*$331,664.93*	*$267,898.11*	*$339,055.54*	*$472,773.00*
Staff Salaries & Benefits	*$13,916.40*	*$26,146.31*	*$20,658.48*	*$19,282.50*	*$88,456.00*
Operations	*$4,783.87*	*$14,877.90*	*$24,278.88*	*$24,076.84*	*$80,550.00*
Travel and professional development	*$2,210.00*	*$2,745.09*	*$5,420.88*		*$5,288.00*
Student Support			*$1,000.00*		
University Tax					
Other (Explain) Irregular Salaries (Student Workers & Temps) & Fringe		*$1,391.16*	*$1,103.78*	*$952.20*	*$30,640.00*
Total	*$262,981.61*	*$376,825.39*	*$320,360.13*	*$383,367.08*	*$677,707.00*

**AY21-22 marked a large increase in the amount of grants/contracts revenue. The method that was used to calculate grants and contracts in previous years did not fully captured grants and contracts run through the department.*

The source of funds from grants/contracts across all years is not available as expenditures for the program but, rather, cover the grant/contract activities only. The excess funds available at the end of FY17-18, FY19-20, and FY20-21 were largely due to the fact that grant/contract expenditures are not accounted for. Also, in AY20-21 a mandatory furlough for faculty and staff as a result of changing revenues due to COVID, and restrictions on travel, impacted unspent appropriated dollars that year. At the end of each fiscal year, any unused state appropriated funds are automatically returned to the university accounts and are not available for departmental use. In

FY21-22, increases in operating expenditures is a result of expenditures on grant related activities and not the result of an increase in appropriated operating budget.

If the program is a multi-partner unit sponsored by two or more universities (as defined in Criterion A2), the budget statement must make clear the financial contributions of each sponsoring university to the overall program budget.

Not applicable

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

Strengths.
The proportion of FTEs to the MPH program has increased resulting in the appropriated revenue increasing to the program ensuring better faculty resources for MPH students. Increasing research dollars has brought salary savings to the program and allowed for course buyouts. Increasing research dollars and changes in the indirect cost recovery are bringing more revenues to the program generally and to faculty in the role of Principal Investigator.

Weaknesses.
Not all faculty are supported on appropriated salary; strategic investment money has not yet transitioned into an appropriated line. This transition will be requested in Spring 2023. More faculty have been added but there has been no increase in operational budget. Grants and contracts have alleviated some of this pressure temporarily through indirect cost recovery and salary savings. There is enough to award an annual scholarship, but there are not a lot of endowments or other funds to pay for student opportunities.

C2. Faculty Resources

The program has adequate faculty, including primary instructional faculty and non-primary instructional faculty, to fulfill its stated mission and goals. This support is adequate to sustain all core functions, including offering coursework and advising students. The stability of resources is a factor in evaluating resource adequacy.

Students' access to a range of intellectual perspectives and to breadth of thought in their chosen fields of study is an important component of quality, as is faculty access to colleagues with shared interests and expertise.

All identified faculty must have regular instructional responsibility in the area. Individuals who perform research in a given area but do not have some regular expectations for instruction cannot serve as one of the three to five listed members.

1) A table demonstrating the adequacy of the program's instructional faculty resources in the format of Template C2-1 (single- and multi-concentration formats available).

	FIRST DEGREE LEVEL			SECOND DEGREE LEVEL	THIRD DEGREE LEVEL	ADDITIONAL FACULTY+
CONCENTRATION	**PIF 1**	**PIF 2**	**PIF 3**	**PIF 4**	**PIF 5**	
Generalist MPH	Diana Schow 1.0			Kristin Van De Griend 1.0	Lisa Salazar (0.5)	PIF: 3 Non-PIF: 0

Totals

Named PIF	3
Total PIF	6
Non-PIF	

2) Explain the method for calculating FTE for faculty in the templates and evidence of the calculation method's implementation. Programs must present calculation methods for primary instructional and non-primary instructional faculty.

Primary Instructional Faculty with sole duties in the MPH program are 1.0 FTE.
Director positions take 0.1 FTE
Consulting positions for KDHS take 0.1 FTE
Chair duties take 0.2 FTE

One faculty member's time is split across the BS in Community and Public Health and Master of Health Education, and as such is 0.5 FTE

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

   Dr. Lindsay is the chair of the Department and as such is at 0.8 FTE. Drs. Fore and van Woerden have Director positions, which takes 0.1 FTE. Dr. van Woerden is additionally responsible for statistical consulting for the KDHS, which takes another 0.1 FTE. Dr. Salazar's time is split across the BS in Community and Public Health, Master of Health Education, and the Master of Public Health programs

4) Data on the following for the most recent year in the format of Template C2-2. See Template C2-2 for additional definitions and parameters.

General advising & career counseling			
Degree level	**Average**	**Min**	**Max**
Master's	4.7	2	6

Advising in MPH integrative experience		
Average	**Min**	**Max**
0.3	0	6

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

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

      This information has not yet been collected. We plan to review all of the questions that are asked in the course evaluations in Fall 2023, and add in this question during that process.

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

      In the course evaluations, students are asked to respond to the statement "The instructor was approachable and appeared interested in the needs and problems of the students" with one of three response options: "To a high degree", "Adequately", "Needs improvement". Of the 31 total survey responses in the last year, 23 (74%) agreed with the above statement "to a high degree". There were four responses of "adequately", and four responses of "needs improvement".

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

The following quotes related to perceptions of class size are from the student surveys:

"The class sizes are generally pretty small. I enjoy this because it makes it feel as if I am learning within a cohort rather than through an independent master's program."

"I consider that the classes have a good amount of students"

"The asynchronous option has had reasonable class sizes, so far, regarding opportunities to work in small groups."

"Maybe 5-12 is good. Enough to have discussions, but not too many to get lost"
.
"I like the small class sizes as it helps advance my learning. I do like attending live class because I feel that I learn more speaking with others "face-to-face"; however, I have taken great advantage of the asynchronous learning to fit my schedule".

The following quotes related to availability of faculty were obtained from the student evaluations:

> *"This is an excellent course! Dr. van Woerden really seems to care about the success of her students and was always willing to help ensure understanding of course content."*
>
> *"Her enthusiasm was contagious, and I am even more excited about environmental health than I was at the beginning of the semester. I appreciate the safe environment given to ask questions and voice opinions. I enjoyed the course."*
>
> *"There were several occasions where I reached out to the professor via email and never heard back."*
>
> *"It really seems that Dr. Van De Griend cares about her students, and though I didn't take her up on the opportunity to reach out, I feel that I would have been well received had I done so."*

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

<u>Strengths</u>.
The majority of student evaluation responses state that the instructor was approachable and appeared interested in the needs and problems of the students. Students indicate that faculty are experts in what they teach and are passionate about the topics they teach. Students also stated, in general, high levels of faculty availability in the qualitative section of the course evaluations

<u>Weaknesses</u>.
One course evaluation stated a lack of availability of their instructor. Given the anonymity of the student evaluations, it is unclear what the exact scenario was with this student.

However, not all students follow the instructions for emailing (adding in an email label so that the email is immediately highlighted to the professor), which can cause delays. In addition, this perceived lack of availability of the instructor may have been due to responses being posted on Moodle, or feedback via assignments, that wasn't seen as a "response". A statement has been added to the MPH handbook stating that if a faculty member is not being responsive to a student, that the student should reach out to the Program Director, and if that doesn't resolve the issue to reach out to the Department Chair.

C3. Staff and Other Personnel Resources

The program has staff and other personnel adequate to fulfill its stated mission and goals. The stability of resources is a factor in evaluating resource adequacy.

1) A table defining the number of the program's staff support for the year in which the site visit will take place by role or function in the format of Template C3-1. Designate any staff resources that are shared with other units outside the unit of accreditation. Individuals whose workload is primarily as a faculty member should not be listed.

Role/function	FTE
Christina Martinez/Administration Assistant	1

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

   In the last 5 to 7 years the Department has had between 1 to 3 student CPI'S (Career Path Internship; the CPI Program is a paid internship program which allows students to gain hands-on, real world experience in their chosen course of study or an internship which aligns with the student's career goals) each year. They have assisted the Administration Assistantwith a variety of activities including advertising, stuffing envelopes, running of miscellaneous errands they have also assisted in walking documentation between departments, colleges and other entities on campus, and generally helping with anything needed at that time.

   Other activities that the CPI does, they help the department with student club activities and operations, assisting faculty with data entry, research activities, undergrad course facilitation, outreach activities, and other miscellaneous activities needed by Department faculty.

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

   The CPI'S are utilized within universal guidelines. As university policies allow us, we will request additional CPI support. Current support is sufficient for now.

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

   None noted

C4. Physical Resources

The program has physical resources adequate to fulfill its stated mission and goals and to support instructional programs. Physical resources include faculty and staff office space, classroom space, student shared space and laboratories, as applicable.

1) Briefly describe, with data as applicable, the following. (Note: square footage is not required unless specifically relevant to the program's narrative.)

For the Pocatello campus, the office space, classrooms, and student space are all housed in the Reed building (multiple floors). For the Meridian campus, the office space and classrooms are all in the same building (different floors).

- Faculty office space

  Some MPH faculty are currently working remotely and are not using office space at ISU; however, all of the MPH faculty have dedicated office space (at ISU and/or at home).

- Staff office space

  The DCPH administrative assistant (Christina Martinez) has a dedicated office space on the Pocatello campus (Reed, Room 242). A DCPH grant program coordinator also has dedicated office space in Reed (Room 301).

- Classrooms

  The Pocatello campus has a dedicated conference room/classroom for the MPH program (Reed, Room 125). The Meridian campus has a shared classroom which the MPH program uses (Room 669)

- Shared student space

  The office space Reed 109 is available for the MPH Graduate Teaching Assistants (GTAs) and Career Path Interns (CPIs) to work from. The Public Health Student Association (PHSA) has storage space but no dedicated club space. However, the student union building provides activity space for student clubs.

- Laboratories, if applicable to public health degree program offerings

  Not applicable

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

The physical space is currently marginally sufficient. The faculty, staff, and students who currently require a physical space have a physical space. While the Public Health Student Association does not have a dedicated club space, there are multiple places on campus where they are able to meet. Some faculty are working in remote offices or different office space on campus (e.g. Institute of Rural Health).

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

The space is sufficient only because some faculty are working remotely. If faculty are not working remotely or in different office space on campus, we would need to procure more office space. At least one of the faculty who is working remotely is expected to return to campus for the academic year 2023/2024, and the current office space leaves no room for future growth. Discussions have been initiated with the university to ensure that the MPH program has enough physical space in the future.

C5. Information and Technology Resources

The program has information and technology resources adequate to fulfill its stated mission and goals and to support instructional programs. Information and technology resources include library resources, student access to hardware and software (including access to specific software or other technology required for instructional programs), faculty access to hardware and software (including access to specific software required for the instructional programs offered) and technical assistance for students and faculty.

1) Briefly describe, with data if applicable, the following:
   - library resources and support available for students and faculty

     Consistent with its mission, the institution employs qualified personnel and provides access to library and information resources with a level of currency, depth, and breadth sufficient to support and sustain the institution's mission, programs, and services. The faculty within the ISU library holds a Masters of Library Science or equivalent, which is the terminal degree for practice in the profession. Most staff within the library hold designated library assistant positions prescribed within the state's classified employee system.

     Both the Pocatello and Meridian campuses have health science librarians. The health sciences librarian prepared a Subject Guide for public health students (see ERF Library - Public Health & Health Education). Some of the public health journals that the library has are
     - *Addiction and Health*
     - *Advances in Public Health*
     - *American Journal of Epidemiology*
     - *American Journal of Public Health*
     - *Annals of Global Health*
     - *BMC Public Health*
     - *Environmental Health Perspectives.*
       (See ERF Library journals tagged public health page 1 for the first page of the 446 journals tagged as "public health" that the library has.

     The Department of Community and Public Health has a library liaison who can suggest books and journals that the library should stock. The MPH theses, like all ISU theses are also made publicly available through the library.

     ISU provides face-to-face and digitally delivered library instruction workshops taught by library staff and tailored to individual courses. These instructional workshops are available on-demand and, pursuant to course instructor's requests, cover the utilization of library resources either generally or in relation to specific course assignments.

     Moodle is ISU's current learning management system, and the library resource authorization process allows faculty to include links to recommended licensed resources within the students' window within Moodle. Librarians cooperate with course instructors to identify relevant resources that support course assignments. The library staff have developed new ways to strengthen the library's "presence" within Moodle at

a general level. For example, a library link leading to an online help function and news was embedded in each student's Moodle account's welcome screen.

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

  The hardware in the ITS-managed computer labs and computer lab classrooms is upgraded every three to four years. The most recent upgrade in fall 2019 included 432 computers and 32 printers. Many students do not have access to technology and the Internet at home, so ITS supported 15 campus computer labs configured to adhere to social distancing requirements.

  Students are provided headphones to keep if they lack a set. Also, 350 Chromebooks are available for students to check out, and 100 laptops are available for faculty. Home Internet is not always available or may not have adequate bandwidth to meet Zoom or course requirements. The Institution set up Wi-Fi connectivity to extend into some of its parking areas in Pocatello, Idaho Falls, and Meridian for students, faculty, and staff who didn't have adequate internet access. Nearly 1,100 students, faculty, staff, and community members took advantage of this service in spring 2020. The infrastructure updates and services are now permanent.

  Idaho State University's Information Technology Services (ITS) is dedicated to meeting the computing needs of ISU's students. ITS maintains nine full-service computer labs in Pocatello, three in Idaho Falls, and two in Meridian. (See https://tigertracks.isu.edu/TDClient/1950/Portal/KB/ArticleDet/?ID=80755 for more information on locations, hours, capacity, and software available in each lab. Students get ~500 pages of free black and white printing each semester, available in our computer labs.

  ITS also provides kiosk computers in numerous locations on each campus to provide fast and convenient stand-up email and Internet access. And finally, ITS provides wireless access (TigerNet) for students on campus who have their own mobile devices.

  Microsoft Office is a free program for those at Idaho State University, including different Microsoft Software. The Office 365 Education is a free suite for students and faculty and staff, which contains Word, Excel, PowerPoint, and OneNote. (See https://tigertracks.isu.edu/TDClient/1950/Portal/KB/ArticleDet?ID=62227). Qualtrics is available at no cost to students for conducting web-based surveys.

  Students are provided access to Hyper Research for a full semester, which is used for qualitative research. Faculty use free software when possible so that students can continue to use the software after they graduate. For instance, Jamovi is used for data analyses, and the free versions of Zotero and EndNote encouraged for citation management.

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

  The ITS Service Desk helps provide specifications and then sets up the digital devices and provides ongoing support. In response to the COVID-19 pandemic, the Institution

purchased 300 OWLs (video conference devices) to conduct online asynchronous and synchronous distance learning. The OWLS enable class recordings so students who become sick or aren't comfortable returning to a face-to-face environment can still complete their classes.

Like students, faculty have access to the MS suite. For citation management, EndNote is available for faculty. For statistical analyses the free, open-source, software of R and Jamovi are used. For qualitative analyses Hyper-research is used.

- technical assistance available for students and faculty

  The Customer Service and Support organization provides information and support related to ISU's IT services. The IT Service Desk can be contacted via phone [(208) 282-HELP (4357)] and email (help@isu.edu).

  For assistance with Moodle courses, the Instructional Technology Resource Center (ITRC) is available. Appointments can be scheduled online, and they can also be contacted via chat, phone [(208) 282-5880] and email (itrc@isu.edu). Faculty guides for how to use Moodle are also available online
  - *(See ERF Getting Started with Moodle).*

  The Quality+ Program is run by the Instructional Technology Resource Center and is available to all who teach or have been asked to teach an eISU course. Participants in the program are assisted to ensure that their course is quality. Participants create an individualized professional development plan and engage in professional development workshops. Participants then work one-on-one with an instructional design partner and update their course based on feedback

2) Provide narrative and/or data that support the assertion that information and technology resources are sufficient or not sufficient.

   The technology resources are sufficient. The ISU library employs qualified staff who are supportive of faculty and students. Students have access to hardware which is regularly updated, and relevant software. Faculty are provided the hardware and software that they require. The technical assistance for both faculty and students is prompt and helpful.

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

   Strengths.
   Students and faculty have access to the hardware and software that they need. The use of quality, free, open-source, software, is encouraged so that students can continue to use this after they graduate.

   Weaknesses.
   None noted.

D1. MPH & DrPH Foundational Public Health Knowledge

The program ensures that all MPH and DrPH graduates are grounded in foundational public health knowledge.

The program validates MPH and DrPH students' foundational public health knowledge through appropriate methods.

1) Provide a matrix, in the format of Template D1-1, that indicates how all MPH and DrPH students are grounded in each of the defined foundational public health learning objectives (1-12). The matrix must identify all options for MPH and DrPH students used by the program.

Content Coverage for MPH	
Content	Course number(s) & name(s) or other educational requirements
1. Explain public health history, philosophy and values	MPH 6601: Applications in Epidemiology MPH 6605: Leadership Policy and Administration MPH 6606: Environmental and Occupational Health MPH 6609: Seminar in Public and Community Health
2. Identify the core functions of public health and the 10 Essential Services	MPH 6605: Leadership Policy and Administration MPH 6609: Seminar in Public and Community Health
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	MPH 6602: Biostatistics MPH 6620: Program Planning and Evaluation MPH 6640: Research and Writing in Health
4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program	MPH 6601: Applications in Epidemiology MPH 5507: Rural Health Systems MPH 6609: Seminar in Public and Community Health
5. Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.	MPH 6601: Applications in Epidemiology MPH 6606: Environmental and Occupational Health MPH 5507: Rural Health Systems MPH 6609: Seminar in Public and Community Health
6. Explain the critical importance of	MPH 6601: Applications in Epidemiology

evidence in advancing public health knowledge	MPH 6605: Leadership Policy and Administration MPH 6620: Health Program Planning and Evaluation MPH 6640: Research and Writing in Health MPH 6660: Behavior Change Theory and Applications
7. Explain effects of environmental factors on a population's health	MPH 6606: Environmental and Occupational Health MPH 6609: Seminar in Public and Community Health
8. Explain biological and genetic factors that affect a population's health	MPH 6601: Applications in Epidemiology MPH 6606: Environmental and Occupational Health
9. Explain behavioral and psychological factors that affect a population's health	MPH 6606: Environmental and Occupational Health MPH 6609: Seminar in Public and Community Health MPH 6660: Behavior Change Theory and Applications
10. Explain the social, political and economic determinants of health and how they contribute to population health and health inequities	MPH 6601: Applications in Epidemiology MPH 6604: Social and Cultural Perspectives in Public Health MPH 6605: Leadership Policy and Administration MPH 6606: Environmental and Occupational Health MPH 6609: Seminar in Public and Community Health MPH 6660: Behavior Change Theory and Applications
11. Explain how globalization affects global burdens of disease	MPH 6605: Leadership Policy and Administration MPH 6606: Environmental and Occupational Health MPH 5507: Rural Health Systems MPH 6609: Seminar in Public and Community Health
12. Explain an ecological perspective on the connections among human health, animal health and ecosystem health (e.g., One Health)	MPH 6606: Environmental and Occupational Health MPH 5507: Rural Health Systems MPH 6609: Seminar in Public and Community

	Health MPH 6660: Behavior Change Theory and Applications

2) Document the methods described above. This documentation must include all referenced syllabi, samples of tests or other assessments and web links or handbook excerpts that describe admissions prerequisites, as applicable.

   See the ERF for the syllabi for all courses, samples of tests and other assessments, and the MPH handbook.

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

   Strengths.
   The foundational public health knowledge is highlighted in the MPH handbook (see Appendix). The foundational public health knowledge topics are taught in multiple different courses.

   Weaknesses.
   None noted.

D2. MPH Foundational Competencies

The program documents at least one specific, required assessment activity (e.g., component of existing course, paper, presentation, test) for each competency, during which faculty or other qualified individuals (e.g., teaching assistants or other similar individuals without official faculty roles working under a faculty member's supervision) validate the student's ability to perform the competency.

Assessment opportunities may occur in foundational courses that are common to all students, in courses that are required for a concentration or in other educational requirements outside of designated coursework, but the program must assess *all* MPH students, at least once, on each competency. Assessment may occur in simulations, group projects, presentations, written products, etc. This requirement also applies to students completing an MPH in combination with another degree (e.g., joint, dual, concurrent degrees).

Since the unit must demonstrate that all students perform all competencies, units must define methods to assess individual students' competency attainment in group projects Also, assessment should occur in a setting other than an internship, which is tailored to individual student needs and designed to allow students to practice skills previously learned in a classroom. Additionally, assessment must occur outside of the integrative learning experience (see Criterion D7), which is designed to integrate previously attained skills in new ways.

These competencies are informed by the traditional public health core knowledge areas, (biostatistics, epidemiology, social and behavioral sciences, health services administration and
environmental health sciences), as well as cross-cutting and emerging public health areas.

1) List the coursework and other learning experiences required for the program's MPH degrees, including the required curriculum for each concentration. Information may be provided in the format of Template D2-1 (single- and multi-concentration formats available) or in hyperlinks to student handbooks or webpages, but the documentation must present a clear depiction of the requirements for each MPH degree.

Requirements for MPH degree, Generalist Concentration		
Course number	**Course name**	**Credits (if applicable)**
Required courses (foundation and concentration)		
MPH 5540	Research and Writing - 1	1
MPH 5507	Rural Health Systems	3
MPH 6601	Applications in Epidemiology	3
MPH 6602	Biostatistics	3
MPH 6604	Social & Cultural Perspectives in Public Health	3

Requirements for MPH degree, Generalist Concentration		
Course number	**Course name**	**Credits (if applicable)**
Required courses (foundation and concentration)		
MPH 5540	Research and Writing - 1	1
MPH 6605	Leadership and Administration	3
MPH 6606	Environmental & Occupational Health	3
MPH 6609	Seminar in Community/Public Health	3
MPH 6620	Health Program Planning	3
MPH 6640	Research and Writing - 2	2
MPH 6660	Health Behavior Change Theory and Application	3
APE & ILE courses (as applicable)		
MPH 6651	Project	6[A]
MPH 6650	Thesis	6 [A]
Electives (as applicable)		
Electives		6
Requirements for degree completion not associated with a course (if applicable) ^		
	TOTAL CREDITS	**42**

[A] Students complete either MPH6651 (Project) or MPH6650 (Thesis).

2) List the required curriculum for each combined degree option in the same format as above, clearly indicating (using italics or shading) any requirements that differ from MPH students who are not completing a combined degree.

NA

3) Provide a matrix, in the format of Template D2-2, that indicates the assessment activity for each of the foundational competencies. If the program addresses all of the listed foundational competencies in a single, common core curriculum, the program need only present a single matrix. If combined degree students do not complete the same core curriculum as students in the standalone MPH program, the program must present a separate matrix for each combined degree. If the program relies on concentration-specific courses to assess some of the

foundational competencies listed above, the program must present a separate matrix for each concentration.

Assessment of Competencies for MPH (all concentrations)		
Competency	**Course number(s) and name(s)***	**Describe specific assessment opportunity[n]**
Evidence-based Approaches to Public Health		
1. Apply epidemiological methods to settings and situations in public health practice	6601: Applications in Epidemiology	MPH 6601: Comprehensive Final Exam
2. Select quantitative and qualitative data collection methods appropriate for a given public health context	6620: Health Program Planning 6640: Research and Writing in Health	MPH 6620: Reaction Paper 1 - Chapter 2, Question 3 MPH 6620: Reaction Paper 2 - identify target audience data collection methods 6640: Homework #8 and Homework #10 - requires students to select appropriate study designs to match research or project objectives
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming, and software, as appropriate	6602: Biostatistics 6609: Seminar 6640: Research and Writing in Health	MPH 6602: The majority of assignments require the use of statistical software to analyze quantitative data MPH 6609: Students analyze qualitative data using software 6640: Students use power analysis software to consider sample size for an activity in Week 9.
4. Interpret results of data analysis for public health research, policy or practice	6605: Leadership and Administration 6640: Research and Writing in Health	MPH 6605: Policy/Practice Development Exercise - gather data and interpret results of data analysis, make written recommendations including dissemination and implementation plans (written, oral presentation, and media of health content to designated audience) based upon ethical considerations and evidentiary research, and draft policy or practice to address the need

		6640: Students perform and analyze literature review for Homework #3, 4, 7, and 10.
Public Health & Health Care Systems		
5. Compare the organization, structure, and function of health care, public health, and regulatory systems across national and international settings	5507: Rural Health Systems	MPH 5507: Paper 1 - assess similarities and differences in organization, structure and function of health systems, including health care, public health services, and regulatory systems for two health systems MPH 5507: Discussion Forums for readings from Mountains Beyond Mountains compares rural health systems in international settings.
6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and systemic levels	6604: Social & Cultural Perspectives in Public Health	MPH 6604: Forum Posts - examples provided
Planning & Management to Promote Health		
7. Assess population needs, assets, and capacities that affect communities' health	6620: Health Program Planning	MPH 6620: Final Paper - development of program plan/grant proposal using PRECEDE-PROCEED
8. Apply awareness of cultural values and practices to the design, implementation, or critique of public health policies or programs	6604: Social & Cultural Perspectives in Public Health	MPH 6604: Final Paper - analysis of existing programs and their level of cultural competency for the target population, in addition to suggestions to improve cultural competency
9. Design a population-based policy, program, project, or intervention	6620: Health Program Planning 6640: Research and Writing in Health	MPH 6620: Final Paper - development of program plan/grant proposal using PRECEDE-PROCEED 6640: In Weeks 5-13, assignments and proposal papers, students propose research, a project, or intervention and design aims/objectives and corresponding methods.

10. Explain basic principles and tools of budget and resource management[1]	6620: Health Program Planning	MPH 6620: Final Paper - development of program plan/grant proposal using PRECEDE-PROCEED
11. Select methods to evaluate public health programs	6620: Health Program Planning	MPH 6620: Final Paper - development of program plan/grant proposal using PRECEDE-PROCEED
Policy in Public Health		
12. Discuss the policy-making process,[2] including the roles of ethics and evidence	6605: Leadership and Administration	MPH 6605: Policy/Practice Development Exercise - gather data and interpret results of data analysis, make written recommendations including dissemination and implementation plans (written, oral presentation, and media of health content to designated audience) based upon ethical considerations and evidentiary research, and draft policy or practice to address the need
13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes	6605: Leadership and Administration	MPH 6605: Negotiation Preparation Exercise
14. Advocate for political, social, or economic policies and programs that will improve health in diverse populations[3]	6605: Leadership and Administration	MPH 6605: Policy Briefing Exercise and Oral Presentation Exercise - written, oral presentation, and media plan for delivery of health content to a designated audience
15. Evaluate policies for their impact on public health and health equity	6605: Leadership and Administration	MPH 6605: Policy Review Exercises and Self Evaluation. MPH 6605: Policy writing and peer-review exercises. MPH 6605: Reviewing a Workforce Development Plan Policy/Practice Development Exercise
Leadership		
16. Apply leadership and/or management principles to address a relevant issue[4]	6605: Leadership and Administration	MPH 6605: Leadership Style/Values Assessment - leadership style assessment and values activity

		MPH 6605: Forum discussion about leadership perspectives that led to changes in defined milestones with Healthy People 2020 contrasted against Healthy People 2030. MPH 6605: Creating Vision and Mission Statement Exercises - outlining professional vision and mission within public health MPH 6605: Systems Thinking Mapping Exercise MPH 6605: Data Collection Technique quiz MPH 6605: Practice Exercises for Needs Assessment, Asset Mapping MPH 6605: Community Assessment Scenario Final Mapping Tools and Assessment Report MPH 6605 Change Readiness Assessment
17. Apply negotiation and mediation skills to address organizational or community challenges[5]	6605: Leadership and Administration	MPH 6605: Case 10 - A Study to identify the potential outcomes and negotiation opportunities worksheet MPH 6605: Negotiation Communication email exercise MPH 6605: Negotiation Class Activity MPH 6605: Best Practices Negotiation in many modalities Forum
Communication		
18. Select communication strategies for different audiences and sectors	6609: Seminar in Community/ Public Health 6640: Research and Writing in Health	MPH 6609: Review the WHO's Strategic Communications Framework and apply constructs from the framework to a public health issue.

		MPH 6640: Technical writing of a research/project proposal and oral presentation of the proposal.
19. Communicate audience-appropriate (i.e., non-academic, non-peer audience) public health content, both in writing and through oral presentation	6605: Leadership and Administration 6640: Research and Writing in Health	MPH 6605: Case 10-A Study to identify the potential outcomes and negotiation opportunities worksheet MPH 6605: Negotiation Communication email exercise MPH 6605: Negotiation Challenge Presentation MPH 6605: Infographic Exercise/worksheet to communicate proposed policy change MPH 6605 Class Policy Briefing presentations and facilitated discussions activity MPH 6640: Homework 8 covers readability statistics, software assistance, and requires submission of writing health information at a high-school level.
20. Describe the importance of cultural competence in communicating public health content	6604: Social & Cultural Perspectives in Public Health 6605: Leadership and Administration	MPH 6604: Discussion Forum Questions - weeks 9, 13, and 14 MPH 6605: Students will complete the course by NACCHO, http://rootsofhealthinequity.org/ and write a reflective paper on what they learned.
Interprofessional Practice		
21. Integrate perspectives from other sectors and/or professions to promote and advance population health[6]	6620: Health Program Planning	MPH 6620: Documentation on Interprofessional Group Work, Peer Assessment of Group Work - teamwork throughout the semester with groups consisting of students from multiple disciplines
Systems Thinking		

22. Apply a systems thinking tool to visually represent a public health issue in a format other than standard narrative[7]	6605: Leadership and Administration 6604: Social & Cultural Perspectives in Public Health	MPH 6605: Generate a Systems Thinking Tool Exercise - model a specific complex public health problem using an appropriate systems thinking tool or approach MPH 6605: Systems Thinking Mapping Exercise MPH 6605: Data Collection Technique quiz MPH 6605: Practice Exercises for Needs Assessment, Asset Mapping MPH 6605: Community Assessment Scenario Final Mapping Tools and Asssessment Report MPH 6604: Discussion Forum Questions - weeks 9, 13, and 14

4) Include the most recent syllabus from each course listed in Template D2-1, or written guidelines, such as a handbook, for any required elements listed in Template D2-1 that do not have a syllabus. If the syllabus does not contain a specific, detailed set of instructions for the assessment activity listed in Template D2-2, provide additional documentation of the assessment, e.g., sample quiz question, full instructions for project, prompt for written discussion post, etc.

See the ERF for the syllabi for all courses, and samples of tests and other assessments.

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

Strengths.
The MPH foundational competencies are highlighted in the MPH handbook (see Appendix). The foundational competencies are taught in multiple different courses.

Weaknesses.
None noted.

D3. DrPH Foundational Competencies

Not applicable

D4. MPH & DrPH Concentration Competencies

The program defines at least five distinct competencies for each concentration or generalist degree at each degree level. These competencies articulate the unique set of knowledge and skills that justifies awarding a degree in the designated concentration (or generalist degree) and differentiates the degree offering from other concentrations offered by the unit, if applicable.

The list of competencies may expand on or enhance foundational competencies, but, in all cases, including generalist degrees, the competency statements must clearly articulate the additional depth provided beyond the foundational competencies listed in Criteria D2 and D3.

The program documents at least one specific, required assessment activity (e.g., component of existing course, paper, presentation, test) for each defined competency, during which faculty or other qualified individuals validate the student's ability to perform the competency.

Except for cases in which a program offers only one MPH or one DrPH concentration in the unit of accreditation, assessment opportunities must occur in the didactic courses that are required for the concentration.

If the program intends to prepare students for a specific credential (e.g., CHES/MCHES) that has defined competencies, the program documents coverage and assessment of those competencies throughout the curriculum.

1) Provide a matrix, in the format of Template D4-1, that lists at least five competencies in addition to those defined in Criterion D2 or D3 for each MPH or DrPH concentration or generalist degree, including combined degree options, and indicates at least one assessment activity for each of the listed competencies. Typically, the program will present a separate matrix for each concentration.

Assessment of Competencies for MPH in Generalist Concentration		
Competency	Course number(s) and name(s)	Describe specific assessment opportunity
Map and analyze resources and needs within rural health care systems	MPH 5507	Paper 1

Identify challenges and develop strategies for addressing the unique public health systems needs in rural communities	MPH 5507	Paper 2
Communicate technical public health information in a short written summary to a general audience	MPH 6640	Discussion boards – written and commented
Demonstrate oral presentation skills to inform and persuade an audience, using current public health evidence	MPH 6650 and MPH 6651	Thesis/project
Apply theoretically based, systemic/community, interpersonal, and individual models in the planning, design, and implementation of programs	MPH 6660	Midterm paper

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2) For degrees that allow students to tailor competencies at an individual level in consultation with an advisor, the program must present evidence, including policies and sample documents, that demonstrate that each student and advisor create a matrix in the format of Template D4-1 for the plan of study. Include a description of policies in the self-study document and at least five sample matrices in the electronic resource file.

Not applicable

3) Include the most recent syllabus for each course listed in Template D4-1, or written guidelines for any required elements listed in Template D4-1 that do not have a syllabus. If the syllabus does not contain a specific, detailed set of instructions for the assessment activity listed in Template D4-1, provide additional documentation of the assessment, e.g., sample quiz question, full instructions for project, prompt for written discussion post, etc.

See the ERF for the syllabi for all courses, and samples of tests and other assessments.

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

Strengths
The MPH program has a commitment to rural health, which is a novel, and relevant, focus area.

Weaknesses
None noted

D5. MPH Applied Practice Experiences

MPH students demonstrate competency attainment through applied practice experiences.

The applied practice experiences allow each student to demonstrate attainment of at least five competencies, of which at least three must be foundational competencies (as defined in Criterion D2). The competencies need not be identical from student to student, but the applied experiences must be structured to ensure that all students complete experiences addressing at least five competencies, as specified above. The applied experiences may also address additional foundational or concentration-specific competencies, if appropriate.

The program assesses each student's competency attainment in practical and applied settings through a portfolio approach, which reviews practical, applied work products that were produced for the site's use and benefit. Review of the student's performance in the APE must be based on at least two practical, non-academic work products AND on validating that the work products demonstrate the student's attainment of the designated competencies.

Examples of suitable work products include project plans, grant proposals, training manuals or lesson plans, surveys, memos, videos, podcasts, presentations, spreadsheets, websites, photos (with accompanying explanatory text), or other digital artifacts of learning. Reflection papers, contact hour logs, scholarly papers prepared to allow faculty to assess the experience, poster presentations, and other documents required for academic purposes may not be counted toward the minimum of two work products.

Briefly describe how the program identifies competencies attained in applied practice experiences for each MPH student, including a description of any relevant policies.

Students complete an applied practice experience with a community-based organization's public health problem affecting rural areas in the term paper and presentation in MPH 5507: Rural Health Systems class. Students can propose their own ideas for an applied practice experience with a community partner, and if necessary the instructor will pose options from work that MPH faculty are currently collaborating on with community partners, or project. Projects ideas will be narrowed so that groups of 4-6 work on each project. Ideas, outlines of work plans, etc. will be assessed by the instructor throughout the semester to ensure that the problem addresses a rural health issue, and that each student's sections of the paper and presentation will show foundational competency for ability to:

19. Communicate audience-appropriate public health content, both in writing and through oral presentation

22. Apply systems thinking tools to a public health issue

And that students exhibit competency for 3 of the 4 competencies from the following:

4. Interpret results of data analysis for public health research, policy or practice

5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings

6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels

15. Evaluate policies for their impact on public health and health equity

Dependent on the type of public health problem identified by the community-based organization, the digital artifacts assessing learning could have different formats, but all will have a written component (e.g lesson plan, program or evaluation plan, sustainability plan) and corresponding presentation (e.g. video, slide deck, website, podcast). Varying formats could result in students showing competency in many foundational competencies. Furthermore, as these are group projects, different students may complete different aspects of the deliverables for the community/community-based organization. Students will identify which sections on the report they will work on in the planning phase, and this will be confirmed after deliverables are turned into the instructor. Therefore, all students are assessed individually on all foundational competencies in grading rubrics for the two deliverables (paper and presentation) as part of the APE. The students themselves and community representatives assess deliverables in addition to the instructor. The instructor takes self-assessments and community assessments into account in addition to their own scoring. The instructor provides the final grade.

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

See the ERF for documentation of the syllabi for MPH 5507 and rubrics.

Provide samples of practice-related materials for individual students from each concentration or generalist degree. The samples must also include materials from students completing combined degree programs, if applicable. The program must provide samples of complete sets of materials (i.e., Template D5-1 and the work products/documents that demonstrate at least five competencies) from at least five students in the last three years for each concentration or generalist degree. If the program has not produced five students for which complete samples are available, note this and provide all available samples.

See the ERF. This is a newly implemented process. So far 4 students have completed these activities and their work is included along with instructor rubrics. As this experience was being developed during the Fall 2022 semester, self-assessments and community representative assessments were not obtained and are not included. In the future these will be completed.

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

Strengths.
Community-based organizations in Idaho experience public health issues within a complex rural health system. Students will have the opportunity to apply 6+ foundational competencies through collaboration with a community-based organization that is seeking assistance from MPH faculty and students. Such experiences allow for students to 1) apply learning to a real-world problem, 2) better connect our faculty, students, and program to our community, and 3) help improve rural health systems resulting in improved rural health outcomes.

Weaknesses.

Not all students were required to take the Applied Practice Experience. We have corrected this by structuring the MPH 5507: Rural Health Systems course to require applied practice experience. Syllabus and grading rubrics and samples from 4 students are included.

D6. DrPH Applied Practice Experience

Not applicable

D7. MPH Integrative Learning Experience

MPH students complete an integrative learning experience (ILE) that demonstrates synthesis of foundational and concentration competencies. Students in consultation with faculty select foundational and concentration-specific competencies appropriate to the student's educational and professional goals; demonstrating synthesis and integration requires more than one foundational and one concentration competency.

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

The program identifies assessment methods that ensure that at least one faculty member reviews each student's performance in the ILE and ensures that the experience addresses the selected foundational and concentration-specific competencies. Faculty assessment may be supplemented with assessments from other qualified individuals (e.g., preceptors).

1) List, in the format of Template D7-1, the integrative learning experience for each MPH concentration, generalist degree or combined degree option that includes the MPH. The template also requires the program to explain, for each experience, how it ensures that the experience demonstrates synthesis of competencies.

   The planning process for the ILE typically starts at least two semesters prior to student graduation.

MPH Integrative Learning Experience for Generalist Concentration	
Integrative learning experience (list all options)	**How competencies are synthesized**
Project	The student works with their project committee chair to determine the work to be completed, and this proposal is then presented to the project committee. Any concerns about not meeting competencies are addressed at this stage.
Thesis	The student works with their thesis committee chair to determine the work to be completed, and this proposal is then presented to the thesis committee (proposal defense, typically when the student has a full draft of their introduction and methods, but has not yet started their results of discussion). Any concern about not meeting competencies is addressed at this stage. After the thesis is completed, the thesis committee chair and second thesis committee member complete a survey which indicates which competencies were observed.

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

   Students typically complete the ILE in the last two semesters of the program.

Project. Students design an applied health project that demonstrates their mastery of public health skills and concepts. The general steps for the project are topic approval by the committee chair, human subjects training, project proposal development under the guidance of the project committee chair, feedback of the project proposal by the second committee member, then final project preparation followed by project implementation and preparation and defense of the final project document.

The student sends the final project document to all committee members at least two weeks prior to the project defense date, and coordinates a date to orally present the project. The student orally presents the final project document to the project committee for approximately 20 minutes, which is followed by questions from the project committee. After this session, the committee votes on whether the student passed the oral examination.

Thesis. Students conduct original research that is designed to answer specific questions and to synthesize new information contributing to the understanding and solution of public health problems. The general steps for the project are topic approval by the committee chair, human subjects training, thesis proposal development under the guidance of the thesis committee chair.
The student then sends the thesis proposal document to the committee at least two weeks prior to the thesis proposal defense, during which the student defends their thesis proposal. The thesis proposal defense is an approximate 20-25 minute oral presentation of the proposal, followed by questions from the thesis committee. After this session the committee votes to either accept the thesis proposal as is, with modifications without another meeting, with modifications with another meeting, or reject the thesis proposal with further direction clarified.

After the thesis proposal defense the student prepares their final thesis document and sends the committee the final thesis at least two weeks prior to the thesis defense. then defends their final thesis. The thesis defense is an approximate 20-25 minute oral presentation, followed by questions from the thesis committee. After this session the committee vote to either accept the thesis as is, with modifications without another meeting, with modifications with another meeting, or reject the thesis with further direction clarified.

For projects, the committee chair and 2nd committee member must come from the DCPH. A 3rd committee member is optional for a project, and could be from anywhere in the university or another institution. For a thesis, the committee chair and 2nd committee member must come from the DCPH. A 3rd committee member is optional for a thesis and could be from anywhere in the university or another institution. A thesis committee must also include a graduate faculty representative (GFR) who must be from ISU but not from within the DCPH.

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

The MPH 6650 (project) and MPH 6651 (thesis) integrative learning experience policies and procedures are in the MPH handbook (see the ERF) and are also available online (see https://www.isu.edu/mph/)

4) Provide documentation, including rubrics or guidelines that explains the methods through which faculty and/or other qualified individuals assess the integrative learning experience with regard to students' demonstration of the selected competencies.

The scheduling of an oral examination for projects and theses are done through the Graduate School with the "Oral Examination Scheduling Form".

For a project, after the student has presented their final document, the committee members vote as to whether the student has passed or not.

For a thesis, after the student has completed their oral defense, the committee members vote as to whether the student has passed or not, and if they:

- *Accept the final thesis as is*
- *Accept the final thesis with modifications without another meeting*
- *Accept the final thesis with modifications with another meeting*
- *Reject the final thesis with further direction clarified.*

The committee members then individually submit their decision to the graduate school via the "Oral Examination Form". The faculty members from the MPH program (typically the chair and 2nd committee member) also complete the "MPH competencies check" survey which checks which competencies the student displayed.

In terms of competencies, the student's committee members complete a Qualtrics survey which indicates which competencies the student met.

See the ERF subfolder "Forms" for the Oral Examination Scheduling Form, Oral Examination Form (Page 1 and Page 2), and MPH competencies check survey (page 1, 2, and 3)

5) Include completed, graded samples of deliverables associated with each integrative learning experience option from different concentrations, if applicable. The program must provide at least 10% of the number produced in the last three years or five examples, whichever is greater.

See the ERF subfolders "Project examples" and "Thesis examples" for recent project and thesis examples.

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

<u>Strengths</u>.
MPH theses are being encouraged to be published. One MPH thesis is already accepted (Individual and Community Preparedness to Disasters & Pandemics in Idaho Falls: A Cross Sectional Analysis, Journal of Emergency Management, accepted on Oct 26, 2022), and another has been submitted to a journal (Acceptance of Silver Diamine Fluoride to Arrest Early Childhood Caries among Refugees, submitted to the International Journal of Dentistry Oct 17, 2022).

<u>Weaknesses</u>.

While students have historically met an average of 22 competencies at an "advanced" or "expert" level (minimum = 3) by their thesis/project, it is a weakness that these are evaluated at the end of the project/thesis. To ensure that students demonstrate synthesis of competencies, we plan to have the ILE advisor go over the competencies with the student at the proposal stage and ensure that at least five will be addressed to an advanced/expert level.

There is currently no grading rubric for either integrative learning experience. Creating a grading rubric for the final oral defense could help students to understand the expectations with the ILE.

D8. DrPH Integrative Learning Experience

Not applicable

D9. Public Health Bachelor's Degree Foundational Domains

Not applicable

D10. Public Health Bachelor's Degree Foundational Competencies

Not applicable

D11. Public Health Bachelor's Degree Cumulative and Experiential Activities

Not applicable

D12. Public Health Bachelor's Degree Cross-Cutting Concepts and Experiences

Not applicable

D13. MPH Program Length

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

Programs use university definitions for credit hours.

1) Provide information about the minimum credit-hour requirements for all MPH degree options. If the university uses a unit of academic credit or an academic term different from the standard semester or quarter, explain the difference and present an equivalency in table or narrative form.

   The minimum number of credits for the MPH program is 42.

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

   The credit, sometimes referred to as semester credit or semester hour, is a unit of academic work. One credit is defined to require fifty minutes in a class each week for one semester (or the equivalent).

   One semester credit hour in academic courses requires (1) fifty minutes in class each week for one semester (which assumes approximately twice this amount of time in study and preparation outside the classroom), (2) approximately two and one-half hours in laboratory each week for a semester, or (3) equivalent combinations of (1) and (2). For purposes of equivalency calculations, a semester is assumed to be sixteen weeks. Short-term courses of one week (five days) or more require time in class, laboratory, and preparation equivalent to the above for a total of 45 clock hours per credit.

D14. DrPH Program Length

Not applicable

D15. Bachelor's Degree Program Length

Not applicable

D16. Academic and Highly Specialized Public Health Master's Degrees

Not applicable

D17. Academic Public Health Doctoral Degrees

Not applicable

D18. All Remaining Degrees

Not applicable.

D19. Distance Education

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

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

1) Identify all public health distance education degree programs and/or concentrations that offer a curriculum or course of study that can be obtained via distance education. Template Intro-1 may be referenced for this purpose.

   The MPH degree program can be obtained via distance education; all of the MPH courses can be obtained via distance education.

2) Describe the public health distance education programs, including

   a) an explanation of the model or methods used,

      Asynchronous online. The course material is prepared by the instructor and uploaded into Moodle. There is no set meeting time/date for the student, however the student must complete the work at the pace determined by the instructor (e.g., weekly assignment). The student can complete quizzes, and exams in their own time – as long as they meet the deadline.

      Synchronous online. The course material is prepared by the instructor and delivered to the student via a Zoom class. There are set meeting times/dates for the student. Depending on the course, the student may be able to complete quizzes and exams in their own time – as long as they meet the deadline. For some classes, the synchronous class is recorded and uploaded as the asynchronous course material.

      In person. The student attends class, and is taught by an instructor in the classroom, as is traditional

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

      The online (asynchronous and synchronous) options enable students who do not live near campus to obtain an MPH degree. This is particularly relevant given how rural much of Idaho (where many students in the program are from) is, and the number of students whose situation means that they could not attend traditional in-person classes (such as working full-time jobs, caring for children). As a current student and member of our Advisory Committee states "Remaining rooted in their community is a value of our rural residents. Options that allow people to remain in their community acknowledge these values". However, as some students prefer an in-person classroom experience, we also offer this modality.

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

The program uses Moodle to deliver the coursework. Students meet with their instructors via Zoom, and phone call. Email, the chat feature of email, and the Moodle forums, are used for written communication. For courses that are delivered both in-person and online, a conference room linked with Zoom can be used, such that students can attend the same lecture at the same time either in person or remotely. For collaborations, Google Workspace and Box are also used such that files can be shared and updated in real time.

d) the manner in which it monitors the academic rigor of the programs and their equivalence (or comparability) to other degree programs offered by the university, and

Some of the MPH courses are cross-listed with other degree programs. As such, there are ongoing discussions between the Program Directors and Department Chairs regarding the rigor of these courses and to ensure that the course meets the requirements of both programs.

A syllabus comparison was conducted with the accelerated MPH program was planned and put forward. This was to ensure that the graduate coursework was building and adding to topics covered at the undergraduate level.

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

The student competencies are consistent, regardless of the manner in which the student takes the course. Educational outcomes are evaluated as per the grading outlines in the syllabus of each class.

3) Describe the processes that the university uses to verify that the student who registers in a distance education course (as part of a distance-based degree) or a fully distance-based degree is the same student who participates in and completes the course or degree and receives the academic credit.

Each student has a unique username and password which they are required to use to log in to Moodle and access the course materials. Students use the same username and password to submit graded work, such as assignments, quizzes, and exams.

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

<u>Strengths</u>.
The technologies for distance education, and the distance education process, are established. Many of the recent MPH graduates were distance students.

<u>Weaknesses</u>
A comparison of the rigor of the MPH program to other degree programs at ISU has not been officially monitored. We plan to compare the learning experience that the MPH

students complete, to other Master-level degree programs within the College of Health at ISU. In particular, we will compare the number of credits, core courses, applied practice experience, and integrative learning experience.

E1. Faculty Alignment with Degrees Offered

Faculty teach and supervise students in areas of knowledge with which they are thoroughly familiar and qualified by the totality of their education and experience.

Faculty education and experience is appropriate for the degree level (bachelor's, master's, doctoral) and the nature of the degree (research, professional practice, etc.) with which they are associated.

1) Provide a table showing the program's primary instructional faculty in the format of Template E1-1. The template presents data effective at the beginning of the academic year in which the final self-study is submitted to CEPH and must be updated at the beginning of the site visit if any changes have occurred since final self-study submission. The identification of instructional areas must correspond to the data presented in Template C2-1.

Primary Instructional Faculty Alignment with Degrees Offered						
Name	**Title/ Academic Rank**	**Tenure Status or Classification**	**Graduate Degrees Earned**	**Institution(s) from which degree(s) were earned**	**Discipline in which degrees were earned**	**Concentration affiliated with in Template C2-1**
Elizabeth Fore	Associate Professor	Tenured	1. M.Ed 2. PhD	1. Clemson University 2. University of South Carolina	1. Counseling and Guidance Services 2. Health Promotion, Education and Behavior	Generalist
Ryan Lindsay	Associate Professor	Tenured	1. MPH 2. PhD	1. Brigham Young University 2. San Diego State University/University of California, San Diego	1. Public Health 2. Public Health (emphasis Global Health)	Generalist
Nnamdi Moeteke	Visiting Assistant Professor	N/A	1. MBBS 2. MPH	1. University of Nigeria – Nsukka 2. University of Liverpool - Liverpool	1. Medicine 2. Public Health	Generalist
Lisa Salazar	Clinical Assistant Professor	N/A	1. MPH 2. PhD	1,2. Idaho State University	1. Public health 2. Instructional Design	Generalist
Diana Schow	Assistant Professor	Tenure-track	1. MA 2. MHE	1,2. Idaho State University	1. Anthropology (medical/cultural)	Generalist

			3. PhD	3. Friedrich Alexander University, Erlangen, Nuremberg (Germany)	2. Health Education 2, 3 - Public Health and Physical Activity	
Kristin Van De Griend	Assistant Professor	Tenure-track	1. MPH 2. PhD	1. University of Iowa 2. University of South Carolina	1. Epidemiology 2. Health Promotion, Education, and Behavior	Generalist
Irene van Woerden	Assistant Professor	Tenure-track	1. MS 2. MS 3. PhD	1. Canterbury University (New Zealand), 2,3. Arizona State University	1,2. Statistics 3. Nutrition and Exercise Sciences	Generalist

2) Provide summary data on the qualifications of any other faculty with significant involvement in the program's public health instruction in the format of Template E1-2. Programs define "significant" in their own contexts but, at a minimum, include any individuals who regularly provide instruction or supervision for required courses and other experiences listed in the criterion on Curriculum. Reporting on individuals who supervise individual students practice experience (preceptors, etc.) is not required. The identification of instructional areas must correspond to the data presented in Template C2-1.

   None

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

   See the ERF

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

   NA

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

   Strengths.
   The MPH faculty are appropriately educated and experienced for their positions.

   Weaknesses.
   None noted

E2. Integration of Faculty with Practice Experience

To assure a broad public health perspective, the program employs faculty who have professional experience in settings outside of academia and have demonstrated competence in public health practice. Programs encourage faculty to maintain ongoing practice links with public health agencies, especially at state and local levels.

To assure the relevance of curricula and individual learning experiences to current and future practice needs and opportunities, programs regularly involve public health practitioners and other individuals involved in public health work through arrangements that may include adjunct and part-time faculty appointments, guest lectures, involvement in committee work, mentoring students, etc.

1) Describe the manner in which the public health faculty complement integrates perspectives from the field of practice, other than faculty members' participation in extramural service, as discussed in Criterion E5. The unit may identify full-time faculty with prior employment experience in practice settings outside of academia, and/or units may describe employment of part-time practice-based faculty, use of guest lecturers from the practice community, etc.

   Dr. Kristin Van De Griend, Assistant Professor of Community and Public Health, served as a Program Evaluation Consultant for World Renew, Malawi; Violence Prevention Education Coordinator for Rape Victim Advocacy Program/University of Iowa; Board Member for Genesis House, housing and holistic supports for women and children impacted by homelessness and domestic violence in Iowa; Board Member for Family Crisis Centers in Iowa; Campus COVID Task Force, Dordt University; Director of Kielstra Center for Research and Grants, Dordt University; Consultant for Sioux County Community Health Partners, Iowa; Consultant for South Carolina Department of Health and Human Services; Technical Reviewer for United Nations Trust Fund to End Violence Against Women; Research Fellow for Gender, Human Rights, and Health at icddr,b, Bangladesh; LGBTQ Intimate Partner Violence Prevention Task Force, Harriett Hancock Center, South Carolina; State Innnovation Model Project Steering Committee Member, Community Health Partners, Iowa; and Advocacy Committee Member for Iowa Public Health Assocation. She was also a licensed foster parent for the South Carolina Department of Social Services and a Certified Sexual Abuse Counselor through Iowa Coalition Against Sexual Assault.

   Diana Through CommuniVax, funded by Johns Hopkins Center for Health Security, Dr. Schow and colleagues worked with leaders and clinicians at Southeastern Idaho Public Health to ensure COVID-19 vaccine access and accessibility for the LatinX population is southeast Idaho, doing so allowed two MPH students to interact with and learn from these professionals on a regular basis for an entire year during the pandemic. Dr. Schow is on the board of directors for the Idaho Rural Health association and interacts with its members and practitioners across the state to develop and implement the podcast, Eye on Idaho - which focuses on the intersection of community and health systems. Its first airing will be January 2023. She sits on Idaho Department of Health and Welfare's Alzheimer's Disease and Related Dementias (ADRD) task force and is responsible for connecting an MPH student with this group. They are now supporting him with an internship and training him on how to develop an ADRD data dashboard. Dr. Schow is the PI, founder and Director of the Idaho AHEC Program Office, funded through the Health Resources and Services Administration and regularly interacts with public health, primary care and allied health

practitioners across the state. Results from these interactions are incorporated into her curricula in MPH6609. She is responsible for developing the relationships that resulted in locating Southeast Idaho AHEC at Southeastern Idaho Public Health, which will give students more exposure to professionals from all programs there.

Idaho Collaborative for Infectious Disease Prevention, Drs. Van De Griend and Lindsay co-lead the statewide interprofessional education collaborative for infectious disease prevention and care. This collaborative, funded by Idaho Department of Health and Welfare, aims to develop and implement an interdisciplinary curriculum geared toward building the capacity of Idaho's workforce to respond to infectious diseases.

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

Strengths.
Some faculty have a substantial amount of professional experience in settings outside of academia.

Weaknesses.
Not all faculty are currently involved with public health agencies at the local, state, or national level. Faculty will be encouraged to identify a public health agency which they can become involved with.

E3. Faculty Instructional Effectiveness

The program ensures that systems, policies, and procedures are in place to document that all faculty (full-time and part-time) are current in their areas of instructional responsibility and in pedagogical methods.

The program establishes and consistently applies procedures for evaluating faculty competence and performance in instruction.

The program supports professional development and advancement in instructional effectiveness.

1) Describe the program's procedures for evaluating faculty instructional effectiveness. Include a description of the processes used for student course evaluations and peer evaluations, if applicable.

   At the end of each semester but before final grades are posted, an anonymous online course evaluation is posted through Moodle or emailed to students in each course (see ERF subfolder course survey for the survey, and an example response). The course evaluations are used to identify areas of instructional improvement. The course evaluations address course objectives and overall effectiveness of the instructor and include open-ended questions in order to solicit more information about the student's experience in the course. The results are summarized for each course and shared with the Program Director and faculty members. The Department Chair uses the results of the course evaluations and informal discussions with students to provide documentation of instructional effectiveness in the Annual Evaluation process.

   In addition to individual course evaluations, alumni of the MPH program are surveyed at the conclusion of their program through the Office of Institutional Research Survey. Because results of this survey have yielded very low response rates, the MPH program conducts a Student Exit Survey (see ERF subfolder Alumni Surveys).

   Finally, faculty may also request that the Program Director evaluate their teaching and/or other faculty may conduct peer review of teaching, course content, learning assessment methods, and/or other student evaluations (e.g., see ERF Email peer review of class).

2) Describe available university and programmatic support for continuous improvement in teaching practices and student learning. Provide three to five examples of program involvement in or use of these resources. The description must address both primary instructional faculty and non-primary instructional faculty.

   Program for Instructional Effectiveness (PIE)
   https://www.isu.edu/pie/
   The Program for Instructional Effectiveness provides monthly training opportunities for improving teaching practices and student learning. For instance, in September a presentation titled "Using Student Polling to Engage and Direct Classroom Learning" was given.
   (see ERF ISU PIE and ISU PIE resources)

Quality Matters https://www.isu.edu/itrc/quality-matters-at-isu/#:~:text=Quality%20Matters%20(QM)%20is%20a,distributed%20across%20eight%20broad%20standards.
Quality Matters (QM) is a faculty-centered, peer review program designed to certify the quality of online and hybrid courses. The QM rubric contains 41 specific standards, distributed across eight broad standards. Idaho State University is a subscriber to the Quality Matters Program based on the recommendations of the ISU QM Review Committee (ISU QM Review Recommendations).

Instructional Technology Resource Center (ITRC)
https://www.isu.edu/itrc/
The Instructional Technology Resource Center (ITRC) helps faculty leverage technology to achieve effective learning-centered instruction. The ITRC collaborates with other University support services and offers faculty one location to find the best approaches to teaching and learning. The ITRC provides faculty with a complete technology resource for all levels of instruction. The ITRC staff can aid with the instructional design process for preparing and delivering technology-enhanced course materials.

Example 1.Dr. van Woerden engaged with the ITRC to format the Moodle Course MPH 6602. This included creating a "book" with chapters and sub-chapters, forums, quizzes with multiple different question/answer formats, and assignments.

Example 2. Dr. Kristin Van De Griend attended multiple ISU-sponsored or ISU-partner workshops on culturally tailored pedagogy, including: Indigenous Peoples Day Native Power, Resilience & Strength in the 21st Century (A: Getting to Know the Shoshone-Bannock Tribes; B: Engaging Native Students in Research; C: Decolonizing Your Syllabus! Setting the tone for a more inclusive course; D: Honoring Traditional Ways of Knowing to Create Pathways in CTE and STEM) and the Shoshone Bannock Tribal Education Summit. Dr. Van De Griend's syllabi were subsequently revised and course materials were added to reflect learnings from these opportunities.

Example 3. Dr. Lindsay attended Quality Matters trainings that helped align weekly objectives to activities and assessments. This resulted in developing and listing accurate objectives each week that map to course objectives in MPH 6601, MPH 5507, and MPH 6640.

3) Describe means through which the school or program ensures that all faculty (primary instructional and non-primary instructional) maintain currency in their areas of instructional responsibility. Provide examples as relevant. This response should focus on methods for ensuring that faculty members' disciplinary knowledge is current.

All faculty are encouraged to attend the Program for Instructional Effectiveness seminars, and complete the Quality Matters program, and courses such as "introduction to Online Teaching" through our ITRC. Professional development funds can be used for training and multiple MPH faculty have utilized professional development funds to enhance skills that impact both research and teaching such as the storytelling workshop.

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

Instructional effectiveness is a critical component of tenure and promotion. The KDHS guidelines for tenure and promotion state the following:

<u>Teaching in the Profession</u>: An essential component for promotion or the granting of tenure is the ability to teach effectively. Teaching effectiveness in all appropriate settings should be documented through multiple formal and informal sources in addition to student surveys. These may include, but are not limited to, peer evaluations, letters of support from former students, annual evaluations, course evaluations, clinical site feedback, or other sources.

1. Demonstrated expertise in the profession. Examples of professional competence include, but are not limited to the following:

a. Evidence of command of the subject matter.
b. Examples of any work demonstrating command of an area of teaching and competence in the profession.
c. Evidence of scholarship of teaching.
d. Active interprofessional teaching involvement in the KDHS and/or across the university.
e. Evidence of continuous growth in the subject field.
f. Honors and awards related to teaching.

2. Demonstrated Interest in and Capacity for Teaching (such as, but not limited to the following examples)

a. Confidence displayed as a professional and professional attitude.
b. Ability to hold student interest in subject matter (manner of presentation, projected enthusiasm).
c. Command of subject matter.
d. Incorporation of current research and related literature and techniques in didactic and/or clinical teaching.
e. Invited participation as a teaching scholar.
f. High standards of performance utilizing fair and objective evaluation mechanisms.
g. Involvement in and attention to student concerns.
h. Participation in academic advising.
i. Development and delivery of interprofessional courses.
j. Summary of actual student evaluations of the faculty member that are representative of overall responses for all courses taught during the years being considered.
k. Peer evaluation of teaching
l. Mentoring faculty and students .

(See ERF KDHS-Tenure-and-Promotion-Policy-and-Procedure-5-15-19.)

5) Provide quantitative and/or qualitative information that characterizes the unit's performance over the last three years on its self-selected indicators of instructional effectiveness.

<u>Annual or other regular reviews of faculty productivity, relation of scholarship to instruction</u>

Faculty are required to reflect on their student evaluations during the annual evaluation. Faculty student evaluations are also discussed with the Department Chair during the Annual Evaluation process. The Department Chair determines if improvements are needed based on the evaluation.

In addition, several courses have changed their instructors, with the professor who initially designed the course sharing their course materials with the new instructor. This has provided the opportunity for an in-depth analysis of how the course was previously taught. Due to this sharing of course materials among peers, improvements/changes have been made and the prior instructor informed of the main changes (e.g., the course has been made more current).

Student satisfaction with instructional quality
Course evaluations are being analyzed currently, to formally determine how students' perceive each course. Courses with evaluations substantially lower than the average will be discussed and strategies for improvement made.

Student evaluations have historically not been formally analyzed. However, faculty members would review their evaluations and make changes as required. For instance, the evaluations for MPH6609 were very positive in 2021 for Dr. Schow's class, however, it was mentioned in the spring that more attention should be paid to the marketing assignment. In response to this, Dr. Schow added an additional lecture that focused on it during fall semester. Dr. Schow will keep this additional lecture and potentially add another, depending on student response.

Courses that use higher-level assessments
The course objectives for Research & Writing in Health (MPH 6640) involve higher order thinking when mapped onto the revised Bloom's Taxonomy of Educational Objectives. The first learning objective is to perform a literature review and critically analyze published research *(analyzing - appraising, comparing, explaining, and organizing).* The second learning objective is to articulate a research hypothesis, question, objectives and viable problem statement *(evaluating - hypothesizing, and creating - composing, developing, formulating, integrating, and planning).* The third learning objective is to compare and contrast methodologies to address research questions *(evaluating - assessing, critiquing, and justifying)*. Lastly, the fourth objective is to demonstrate effective communication of research to diverse audiences by rewriting a scientific abstract into a lay abstract and orally presenting their research proposal to the instructor and their classmates *(analyzing - deconstructing, illustrating, and explaining).*

Two learning objectives for Behavior Change Theory & Application (MPH 6660) involve higher order thinking. One of the objectives is for students to demonstrate that they are able to compare and contrast different constructs of health behavior theories through a written midterm paper *(analyzing - comparing, contrasting, and explaining).* The other objective is to plan and design a behavior change program by applying one or more theoretically based models through a written final exam paper *(creating - designing, developing, planning and writing).*

Implementation of grading rubrics
While grading rubrics may not work well for all courses and assignments, when possible grading rubrics are being used to help students' have a better understanding of their

grade. The current percent of graded work for which grading rubrics are used is being determined currently. In subsequent years this percentage will be compared, with the aim for as much graded work as feasible (we don't expect 100% compliance as grading rubrics do not work well for all courses) to use grading rubrics.

Grading rubrics have been instituted in MPH 6660 for each section of the research proposal: introduction, problem statement and aims, significance, literature review, and approach.

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

<u>Strengths</u>.
Some courses have listed weekly objectives the map to the course objectives. Faculty are collaborating to improve how the courses are taught, and reflecting on student evaluations to improve on their courses.

<u>Weaknesses</u>.
Tracking of what courses and graded work has grading rubrics and higher-level assignments is not yet in place. The MPH courses are going to start being more formally analyzed, and this tracking set into place. Courses that don't have grading rubrics and higher-level assignments will be discussed to determine if these are appropriate to include.

E4. Faculty Scholarship

The program has policies and practices in place to support faculty involvement in scholarly activities. As many faculty as possible are involved in research and scholarly activity in some form, whether funded or unfunded. Ongoing participation in research and scholarly activity ensures that faculty are relevant and current in their field of expertise, that their work is peer reviewed and that they are content experts.

The types and extent of faculty research align with university and program missions and relate to the types of degrees offered.

Faculty integrate research and scholarship with their instructional activities. Research allows faculty to bring real-world examples into the classroom to update and inspire teaching and provides opportunities for students to engage in research activities, if desired or appropriate for the degree program.

1) Describe the program's definition of and expectations regarding faculty research and scholarly activity.

   The MPH Program faculty are involved in a variety of funded and non-funded research projects in the areas of public health. The public health-related research areas include both applied and non-applied research and addresses diverse topics. Research results are submitted for publication in peer-reviewed professional journals and presented at professional conferences.

   Research is a supported activity at ISU and one that is expected of all faculty members. Research accomplishments are necessary for promotion and tenure and are assessed as part of the annual evaluation process which are tied to merit raises. The KDHS guidelines for tenure and promotion states the below (see ERF/E/KDHS-Tenure-and-Promotion-Policy-and-Procedure-5-15-19.)

   > *All members of the faculty should demonstrate continuous scholarship inclusive of research and creative activities. Scholarship includes pursuit of funding to support research endeavors. Faculty must have a consistent record of research. Qualifications will be evaluated on the quality of work, range and variety of intellectual endeavors, and ability to continuously complete and disseminate scholarship.*
   >
   > *Demonstrates sustained productive scholarship that includes a variety of research and creative activities that are disseminated. Following are examples of evidence of scholarship:*
   > *1. Publications of original research, critical reviews and/or theoretical constructs in refereed/peer-reviewed journals.*
   > *2. Publication of interprofessional research.*
   > *3. Evaluative descriptions of practice and instruction innovations.*
   > *4. Scholarship of teaching and learning.*
   > *5. Patents and copyrights.*
   > *6. Development and dissemination of standardized tests.*
   > *7. Books, book chapters, contributing authorship*

8. Peer reviewed professional podium and poster presentations at the local, regional, national and international levels will be valued more highly.
9. Documentation of pursuit of grant funding to support scholarly activity, as defined by the unit.

The KDHS and CoH monitor faculty engagement in research through annual faculty evaluations and annual tenure appraisals for untenured faculty that are conducted by the Department Chair. Bylaws outline the procedures for annual evaluation including a list of the number of points awarded for acceptable forms of scholarship and the rating scale for points earned (see ERF weighting2008 and weightingassumptions2008, also available at https://www.isu.edu/healthsciences/resources/for-faculty-and-staff/). Merit raises, when given are typically only for those earning "meets expectations" an "above expectations" or "exceptional" and overall and proportionate to a faculty's ranking.

The MPH faculty expectations are embodied in the following Objectives.

Objective 2.1 All MPH Core Faculty will meet the workload expectations which require 30% time dedicated to research and scholarly activity as part of annual faculty performance review.

Objective 2.2 All MPH Core Faculty will submit one grant application per year OR be actively involved as the principal investigator or co-investigator in a funded research project.

Objective 2.6 All MPH core Faculty in their third year will secure external funding for research or service projects in the amount of $25,000 per year (average over a three year period).

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

The CoH supports the research environment by allowing release time from teaching to write and submit research proposals and to administer successful grant awards. This proportion of FTE allowance is at the discretion of the Dean and the Department Chair in consultation with the Program Director. 5% of indirect dollars from grants and contracts are placed into an account and is used at the discretion of the Principal Investigator for professional development including research. In the College of Health, another 20% of indirect dollars from grants available to the department of grant origination. Those dollars are currently passed to the Principal Investigator by the Department Chair. Thus, 25% of indirect dollars is reinvested in the faculty member.

The Office of Sponsored Programs conducts and sponsors training to upgrade the skills of the new and existing faculty. In that regard, the MPH Program supports research through a strong commitment to its program research goal and associated objectives (1.1d). The program routinely reviews the success of its research efforts by examining the outcome measures related to each objective. Following University tenure and promotion policies, the program expects MPH faculty to produce scholarly work as indicated by peer-reviewed publications and presentations in fields related to public health. Faculty are encouraged to obtain external and internal funding for scholarship taking into account that the Program's primary mission is instruction. The program promotes students'

understanding of public health research through course work, individual research opportunities, and practice experiences. Research methodology is integrated throughout the curriculum.

The ISU Office for Research Faculty Seed Grant Program from the Office of Sponsored Programs and Support is intended to encourage new junior level faculty, as well as existing faculty who are refocusing their research programs, to develop research, scholarly, or creative programs that provide the potential extramural funding and long term professional development. Up to $20,000 may be requested.
(see ERF Faculty-Seed-Grant-Competition-Guidelines-Spring-2022_Final and Seed Grant _ Idaho State University, also available at https://www.isu.edu/research/osp/internal-grant-opportunities/seed-grant/)

3) Describe and provide three to five examples of student opportunities for involvement in faculty research and scholarly activities. This response should focus on instances in which students were employed or volunteered to assist faculty in faculty research projects and/or independent student projects that arose from or were related to a faculty member's existing research.

Example 1. Dr. van Woerden employed Sarah Hibbert (MPH student graduated Fall 2022) to assist with research investigating how college student food insecurity and finances were associated. Sarah assisted with all areas of the study. Some areas Sarah assisted with were: determining what survey questions to ask, creating the Qualtrics survey, participant recruitment, data cleaning and analyses, literature review, and manuscript writing.

,
Example 2. Dr. Schow mentored Megan Farrow (MPH student, graduated Summer 2022), who is a Career Path Intern and also paid by grant funds, as she conducted and analyzed interviews in preparation for two reports for the Green Dot Sexual Assault Bystander Trainings for North Idaho College and University of Idaho. This work included recruitment of interviewees who were in positions of influence and who were addressing a very sensitive topic. Megan was exposed to the intricacies of, and care required, when conducting sensitive work. She was also able to meet with members of the broader research team and the funder, Idaho Department of Health and Welfare. She now works for IDHW.

Example 3. Dr. Schow mentored 2 students (Laurel Buchi-Fotre, nursing, graduated 2021 and Wilson Trusty, psychology, currently enrolled), who were Southeast Idaho AHEC Scholars in implementation of "Use of a Research as Intervention approach to explore telebehavioral health services during the COVID-19 pandemic in southeastern Idaho (funded by University of Washington, WWAMI AHEC and Idaho State University)." These students worked on a literature review and background documents. They participated in all project meetings and helped write an article that was recently published in the Journal of Primary Care and Community Health (JPC-21-0544.R1). These students got exposure to the public health aspects of mental health and suicide and met leaders in mental health services in southeast Idaho who were members of our steering committee. The students also received credit through AHEC for their work, and she oversaw their submission to ISU's Research and Scholarship Day, where they presented their work in virtual poster format on April 9, 2021.

Example 4. An MPH student, Andrew Panatopolous, was able to carve an independent project out of an existing research project that Dr. Lindsay was involved in related to care

coordination among medically complex children. He analyzed a publicly available dataset that provided insight into the broader project, which turned into his thesis project. This also resulted in his being first author on a presentation at the American Public Health Association, and co-author on a publication in Global Pediatric Health in 2019.

Example 5. Dr. Van De Griend's contract to create an Infectious Disease Collaborative in Idaho was budgeted with student involvement in mind and created employment and scholarship opportunities for an MPH student as a Graduate Research Assistant that is currently ongoing and allowing the student to be involved in all aspects of the contract.

4) Describe and provide three to five examples of faculty research activities and how faculty integrate research and scholarly activities and experience into their instruction of students. This response should briefly summarize three to five faculty research projects and explain how the faculty member leverages the research project or integrates examples or material from the research project into classroom instruction. Each example should be drawn from a different faculty member, if possible.

Example 1. Dr. van Woerden uses one of her published manuscripts and datasets in teaching the MPH students statistics. The students are given the dataset and asked to analyze the data, without being informed that the analyses have been published. After submission of the homework assignment, the students are shown the manuscript. The analyses in the manuscript are all of the analyses that the students do.

Manuscript: Christensen, N., van Woerden, I., Aubuchon-Endsley, N. L., Fleckenstein, P., Olsen, J., & Blanton, C. (2021). Diet quality and mental health status among division 1 female collegiate athletes during the COVID-19 pandemic. International Journal of Environmental Research and Public Health, 18(24), 13377.

See ERF scholarly activity into student instruction assignment and scholarly activity into student instruction manuscript

Example 2. Dr. Lindsay incorporates grant work on workforce development of CHWs in Idaho into Rural Health Systems course work and modules on workforce development as a building block of a health system. He has leveraged community contacts to solicit classroom integrative learning experiences.

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

Faculty are required to show evidence of continued research and scholarly activities to advance from Assistant to Associate, and Associated to Full, Professor.

6) Provide quantitative data on the unit's scholarly activities from the last three years in the format of Template E4-1, with the unit's self-defined target level on each measure for reference. In addition to at least three from the list that follows, the program may add measures that are significant to its own mission and context.

Outcome Measures for Faculty Research and Scholarly Activities				
Outcome Measure	**Target**	**Year 2018 - 2019**	**Year 2019 - 2020**	**Year 2020 - 2021**
Percent of MPH Core Faculty submitting at least one grant application each year, or being actively involved as the Principal Investigator or co-Investigator on a funded research project	100%	100%	100%	100%
Percent of MPH core faculty who publish at least one peer-reviewed journal article, book chapter or technical report, or present at one peer-reviewed professional conference per year	100%	100%	100%	100%
Percent of MPH core faculty attending and/or participating in one professionally relevant statewide, regional or national conference per year.	100%	100%	100%	100%
Percent of MPH core Faculty in their third year securing external funding for research or service projects in the amount of $25,000 per year (average over a three year period).	100%	100%	100%	100%

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

Strengths.
The MPH faculty are engaged with scholarship, and we have 100% of faculty meeting the outcomes measures for each year.

Weaknesses.
None noted.

E5. Faculty Extramural Service

The program defines expectations regarding faculty extramural service activity. Participation in internal university committees is not within the definition of this section. Service as described here refers to contributions of professional expertise to the community, including professional practice. It is an explicit activity undertaken for the benefit of the greater society, over and beyond what is accomplished through instruction and research.

As many faculty as possible are actively engaged with the community through communication, collaboration, consultation, provision of technical assistance and other means of sharing the program's professional knowledge and skills. While these activities may generate revenue, the value of faculty service is not measured in financial terms.

1) Describe the program's definition and expectations regarding faculty extramural service activity. Explain how these relate/compare to university definitions and expectations.

   ISU defines service as faculty activities for the Program, Department, College and University level and for organizations and agencies external to the University. Service external to the University includes activity that extends professional or discipline-related contributions to local, state, national and/or international communities. ISU requires service as part of tenure-track and tenured faculty assignments as a primary responsibility (https://www.isu.edu/media/libraries/isu-policies-and-procedures/academic-affairs/Promotion-and-Tenure-ISUPP-4020.pdf). The KDHS defines service to the institution, discipline, community/Public service and community engagement activities, and provides examples of service (see ERF and https://www.isu.edu/media/libraries/division-of-health-sciences/FINAL-KDHS-Tenure-and-Promotion-Policy-and-Procedure-5-15-19..pdf). Service is expected at both the intramural (institution) and extramural (discipline and community) levels. In the DCPH non-tenure track faculty also have service required as part of their position.

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

   Typical MPH faculty loads include 10% effort for service.

   Additional support from the university includes Bengal Service Corps, an organization on campus with staff that helps faculty and students set up group service projects or find opportunities for service in the community. It also provides a way to track and log service by faculty and students. The university also recognizes select faculty annually for their outstanding service, one MPH faculty was selected for this award in Spring 2022.

3) Describe and provide three to five examples of faculty extramural service activities and how faculty integrate service experiences into their instruction of students. This response should briefly summarize three to five faculty extramural service activities and explain how the faculty member leverages the activity or integrates examples or material from the activity into classroom instruction. Each example should be drawn from a different faculty member, if possible.

   Example 1. Dr. Lindsay organized group journal article review of an article in peer-review with a journal with students in MPH 6640: Research and Writing in Health. This allowed him to show students an approach to the peer-review process, and allowed students to

participate in the process of providing peer review. Some students indicated feeling more empowered to assist in peer-reviews of journals as a result of this activit y.

<u>Example 2.</u> Dr. Schow mentored 20 students as part of the research project, CommuniVax Idaho. Dr. Schow, along with others from the research team, trained the students to conduct and analyze qualitative interviews using qualitative data analysis software. The students helped complete 89 interviews for this rapid ethnographic project. Dr. Schow trained one student very intensely, and this student was integral to the success of meeting the data analysis deadline. The research team met with all of the students once per week between late February and May of 2021 to ensure they had proper guidance. The students come from the communities where they did interviews, and represented a variety of health-related disciplines including Spanish for health professions, public health (Anne McDonald, MPH and Les Maldonado (certificate) and Rachel Byers, MPH), anthropology, pre-med, health sciences, healthcare administration, physical therapy, pre-pharmacy and medical lab science.*

The students had an opportunity, in real time, to help a) increase awareness of and access to COVID-19 vaccines and b) increase sustainable participation of underserved communities in local public health decision-making. After completion of the research project, five students were offered internships at Health West and at Southeastern Idaho Public Health. CommuniVax funds paid for these, which helped the community as well as students.

The entire project gave students interdisciplinary exposure to applied research in safe ways that resulted in immediate benefits. CommuniVax Idaho was funded by Johns Hopkins Center for Health Security and is a product of CommuniVax (Monica Schoch-Spana and Emily K. Brunson PIs) - funding provided by the Chan Zuckerberg Initiative, with additional support from the Rockefeller Foundation. All students had the opportunity to interact with members of the Johns Hopkins team, and were included as contributors to the Idaho report: Cartwright, L., Schow, D. (2021, August). Idaho Local Report: CommuniVax – Vaccine Access and Acceptability in Hispanic Communities of Southeastern Idaho.

** Abigail Adams, Rachel Byers, Carina Cardona, Edgar Carrasco, Payden Christensen, Diana Velasquez Duran, Victoria Eldredge, Maria Lupita Garcia, Samantha Grim, Beverly Jackson, Mitsy Ledesma, Leslie Maldonado, Anne McDonald, Carmen Partida, Jessica Flores Perez, Jade Spanton, Maya Tillotson, Dustyn Walton, Chyanne Yoder, Madisyn Villa*

<u>Example 3</u>. Dr. Irene van Woerden organized the Acute Disaster Response & Preparedness Workshop in 2021, and Disaster Preparedness Conference held at ISU in 2022. She involved an MPH student in the planning of each of these community events.

4) Provide quantitative and/or qualitative information that characterizes the unit's performance over the last three years on the self-selected indicators of extramural service, as specified below.

   Select at least three of the following indicators that are meaningful to the program. In addition to at least three from the list in the criteria, the program may add indicators that are significant to its own mission and context.

Outcome measures for Faculty Service				
Outcome Measure	*Target*	*Year 1 2019-2020*	*Year 2 2020-2021*	*Year 3 2021-2022*
Service to the Profession	*75% of MPH program faculty participate in professional organizations*	*100%*	*100%*	*100%*
Service to the Community	*75% of MPH Program faculty participate in community partnerships which support teaching, research, or service*	*100%*	*100%*	*100%*
Service to the Institution	*75% of MPH Program faculty participate in service to the institution at the university, college, or department level*	*100%*	*100%*	*100%*

We are utilizing the indicators for service described above. Targets for each category of service have been set at 75% rather than 100% to allow new faculty the opportunity to devote their time to research and instruction. As indicated in the table above, faculty have participated in each of the categories.

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

As a primary responsibility of faculty, an assessment of individual faculty service is part of the annual evaluation, which in turn is used in promotion and tenure decisions. In promotion and tenure decisions, service is assessed separately from teaching and research and is expected to show achievements and "sustained productivity" in the area of service (see https://www.isu.edu/media/libraries/division-of-health-sciences/FINAL-KDHS-Tenure-and-Promotion-Policy-and-Procedure-5-15-19..pdf).

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

Strengths.
All faculty are engaged in service to the profession, community, and institution.

Weaknesses.
Faculty service is not consistently being integrated into classroom activities. A more concerted effort to bring faculty service into the classroom will be started.

F1. Community Involvement in Program Evaluation and Assessment

The program engages constituents, including community stakeholders, alumni, employers, and other relevant community partners. Stakeholders may include professionals in sectors other than health (e.g., attorneys, architects, parks and recreation personnel).

Specifically, the program ensures that constituents provide regular feedback on its student outcomes, curriculum, and overall planning processes, including the self-study process.

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

A community advisory board convened in 2016, membership includes students, faculty both internal and external to the program and department, alumni, and community representatives. There are bylaws that were created in 2007 that govern the advisory board and revised in 2016 and adopted in 2017. The list of advisory board members was updated in 2018, and updated again in late 2022/early 2023. The majority of the board members from 2018 are still at the same organization and were reinvited to continue on the advisory board. The community partners include those from governmental public health entities such as health districts and the state department of health and welfare, health system, and non-profit partners. In addition to the advisory board, current students and alumni are updated to department happenings through our Facebook and LinkedIn social media websites, and the biannual department newsletter.

Advisory Board as of February 2023

STUDENTS:	
Jade Hans	*ISU*
Sadie Cole	*ISU*
Aysha Zahidie	*ISU*
Joseph Chacon	*ISU*
FACULTY:	
Elizabeth Margaret Fore, PhD	*ISU, Community and Public Health*
Ryan Lindsay, PhD, MPH	*ISU, Community and Public Health*
Diana Schow, PhD	*ISU, Community and Public Health*
Lisa Salazar, PhD, MPH	*ISU, Community and Public Health*
Irene van Woerden, PhD	*ISU, Community and Public Health*
Kristin Van De Griend, PhD, MPH	*ISU, Community and Public Health*
Nnamdi Moeteke, MBBS, MPH	*ISU, Community and Public Health*
Elizabeth Cartwright, PhD	*ISU, Anthropology*
Teresa Conner, PT, PhD, MBA	*ISU, College of Health*
Rex Force, PharmD	*ISU, Kasiska Division of Health Sciences*
FACULTY/ALUMNI:	
Cathleen Tarp, PhD, MPH	*ISU, Global Studies*

John Holmes, PharmD, MPH	*ISU, College of Pharmacy*

ALUMNI:

Tina Ghirarduzzi, MPH	*Panhandle Health District*
Mike Wucinich, PA, MPH	*St. Luke's Health System*
Meesha Iqbal, MD, MPH	*University of Texas Health Sciences*
Sowmya Natarjan BDS,MPH	*Idaho Department of Health and Welfare*

COMMUNITY REPRESENTATIVE / PRECEPTORS:

Maggie Mann	*Southeast Idaho Public Health District*
Robert Graff, PhD	*Idaho Dept of Health and Welfare*
Karen Sharpnack	*Idaho Immunization Coalition*
Samantha Kenney	*Southwest District Health*

2) Describe any other groups of external constituents (outside formal structures mentioned above) from whom the unit regularly gathers feedback.

Faculty engagement in the community. Faculty are engaged with professional organizations, most serving on public health boards. These interactions with community partners allow them to receive feedback on MPH student workforce readiness. They also review student scholarships opportunities through these public health organizations and are able to compare ISU MPH students with other students applying for these awards.

Hosting Guest lecturers. Community partners regularly present in certain MPH courses. These presentations allow partners to interact with students and assess student's preparation for the workforce.

Alumni engagement. Contact through engaging alumni in guest lectures, events such as public health colloquiums, etc. allow informal communications on MPH student readiness, desired additions to curricula, etc.

3) Describe how the program engages external constituents in regular assessment of the content and currency of public health curricula and their relevance to current practice and future directions.

The Advisory Committee is meeting once a semester, with the most recent meeting in February 2023. At the most recent Advisory Committee meeting there was a discussion of comments about the MPH program and changes that they would like to see, as well as feedback about the comments that alumni provided about the content and currency of the curricula.

MPH faculty or the program director have conducted employer interviews within 6-12 months of graduation. The purpose of these interviews is to assess workforce readiness of our graduates. Questions asked in these interviews are as follows:

1. What are some of our ISU MPH alumni's main tasks or responsibilities as part of their current job?

2.What are some tasks or responsibilities that our ISU MPH alumni were well prepared for in their current position?

3.What are some tasks or training areas that our ISU MPH alumni could have been better trained in so that they could fulfill your expectations in their current role?
4.In addition to the tasks and training areas that we discussed, what suggestions do you have for our faculty that would improve the training of students and better prepare them for the workforce?

5.Would you recommend the ISU MPH program to a friend or colleague?
a. What are some reasons why/why not?

4) Describe how the program's external partners contribute to the ongoing operations of the program, including the development of the vision, mission, values, goals, and evaluation plan and the development of the self-study document.

In 2019 the Department reviewed its mission, values, and goals and engaged a community advisory board member in this process. The community advisory board was sent the preliminary self-study for review and and asked for feedback prior to the final self-study being submitted. A meeting with the community advisory board was also held.

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

See ERF for evidence of the Advisory Board Meeting 02Feb16 and Employer Interview and Email Correspondence with Advisory Committee members involved in Operational Planning.

6) Summarize the findings of the employers' assessment of program graduates' preparation for post-graduation destinations and explain how the information was gathered.

Latest feedback indicated strengths were writing, data analysis, data literacy, and professional work. Things to focus on in the curriculum included reiterating the importance of collaboration, cultural awareness, logic models, grant writing, evaluation, theory, and practical application of principles learned are all included. These interviews in the past, though this has not occurred since 2019.

Alumni surveys have been re-started as of February 2023, through which employer contact information will be obtained. An employer survey, which asks about the graduates' preparation, is ready to be used. We plan to start the employer survey once we have the alumni surveys.

7) Provide documentation of the method by which the program gathered employer feedback.

The program tracks alumni's places of employment and emails students to get contact information of their direct supervisor and ask permission to reach out to them in order to

ask employer interview questions. The supervisor is then called, and if not reachable via telephone, emailed the interview questions.

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

Strengths.
We have had good representation from across sectors on our community advisory board.

Weaknesses.
Our community advisory board could represent more diverse areas of the state and include more racial/ethnic diversity. We have invited students and alumni that would improve diversity. Our major weakness is that employer surveys have not been conducted since 2019. We are updating tracking documents and started reaching out to recent graduates in Spring 2023 so that we could complete employer surveys. Engaging our advisory board through our Community Moodle site is more cumbersome than emailing updates from the program. Regular meetings are likely the best way to engage and receive immediate feedback and we have renewed efforts to hold these meetings virtually. The first meeting was held in February 2023, and we plan to have these meetings twice a year in the future (one per semester).

F2. Student Involvement in Community and Professional Service

Community and professional service opportunities, in addition to those used to satisfy Criterion D4, are available to all students. Experiences should help students to gain an understanding of the contexts in which public health work is performed outside of an academic setting and the importance of learning and contributing to professional advancement in the field.

1) Describe how students are introduced to service, community engagement and professional development activities and how they are encouraged to participate.

Students are introduced to service, community engagement and professional development activities in a variety of ways. One such way is through membership and/or participation in the Public Health Student Association of Idaho State University. This club is an interdisciplinary group of students with the common goal of promoting and protecting health for all people. Activities include holding monthly business meetings, attending professional development trainings, hosting speakers, participating in campus activities and multicultural events, fundraising, and service-learning projects providing needed services to the Bengal and greater communities in which students live.

Twice a year, students participate in planning meetings where they determine the trainings, events, and scope of public health work they wish to engage in for the semester. A schedule is created and these opportunities are announced and promoted in classes, through department correspondence, university newsletters and social media.

Students are encouraged to participate by their professors and by one another. Much of the motivation is intrinsic as students work on self-directed projects and goals that they find exciting and meaningful. Further, students are often motivated through a sense of altruism seeing the impact they can make and benefits of the work they complete.

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

Example. Dr. Schow was the career path intern (CPI) supervisor for Jonathan Argyle (MPH) Jonathan assisted with development of a qualitative evaluation strategy for Green Dot, a bystander training that works to shift social norms in relation to sexual misconduct. The evaluation, which was not conducted due to COVID-19, was fully developed and ready to be implemented with college students at two Idaho institutions of higher education. Jonathan developed a poster and it was accepted at KDHS Research Day and the ISU Graduate Research Symposium.

PHSA examples: Fall 2019 – Spring 2020

- *Professional service provided included hosting booths at the Idaho State Connections Week Fair where students provided an activity geared toward connection and mental health, and at the Experience ISU Night focusing on the topic "What is Public Health?"*
- *PHSA participated in the ISU Homecoming Parade. The float theme was handwashing and students passed out fliers with proper handwashing technique and small bars of soap.*
- *Students completed the following service projects:*
    - *"Happy Fall Brush Them All" a dental hygiene drive collecting supplies from local dental offices and community partners and assembling toothbrush/toothpaste kits that were then delivered to every location in the city of Pocatello serving free Thanksgiving meals to be distributed as needed.*
    - *Completed a children's book drive for Southeastern Idaho Public Health Department. The books were then used as prizes/giveaways for children attending immunization and WIC appointments.*
    - *Angel Tree Project - adopted a seven-year-old boy and were able to donate every item on his Christmas wish list.*
    - *Organized a Skate-A-Thon fundraising event at the local roller-skating rink where over $3,000 was raised for Family Service Alliance, the local domestic violence shelter.*
- *Students volunteered at the two-day SHAPE Idaho annual conference and assisted well as attended sessions.*

<u>PHSA examples; : Fall 2020 – Spring 2021</u>

- *Throughout the Fall 2020 semester, PHSA held a 'PHSA Supports #Bengal Pledge' campaign providing professional service to the community. The #Bengal Pledge was a university led-campaign focusing on COVID-19 mitigation strategies. During this campaign PHSA students served as 'public health mask ambassadors' across campus and filmed five videos on various COVID-19-related topics that were promoted on ISU's social media and websites (link to videos below).*
    - *PHSA Candle Test Video: https://www.youtube.com/watch?v=pqHCRvIzeTY&list=PLetifgV0MDEjC6QXr-cqSVezKrwWyyKcp&index=6&t=15s*
    - *Additional Videos: https://www.youtube.com/playlist?list=PLetifgV0MDEjC6QXr-cqSVezKrwWyyKcp*
- *Students completed a service project titled 'Secret Santa Movie Night'. Students began by selecting an underserved population and completing a brief needs assessment at assisted living facilities throughout Pocatello. Donations and supplies were gathered and 220 individual buckets full of popcorn, sugar-free candy, a beverage, and a greeting card were delivered to Pocatello assisted living facilities who then shared them with residents for a holiday movie night.*
- *Students planned and hosted a blood drive for the American Red Cross in April 2021.*
- *Throughout the Spring 2021 semester students completed a service project titled 'Boxes of Hope'. This project originated out of a desire to respond to a weather-related death of a man in a local park near campus. Students began by completing a needs assessment, organized a fundraiser, shopped for and*

gathered donated supplies, and assembled large plastic totes full of new household items (bedding, towels, dishes, pots and pans, utensils, a can opener, cleaning supplies, etc.). Students toured the Aid For Friends Homeless Shelter and met with the Associate Director for discussion. These boxes were donated to Aid For Friends and were then given to individuals as they transitioned from the shelter into long-term housing to help furnish their new homes. Fifteen boxes were assembled with an estimated value of $1,500. An evaluation of the project was performed in the Spring 2022 semester.

PHSA examples: Fall 2021 – Spring 2022

- *Fall 2021 activities included participation in the ISU/Idaho Foodbank Bengal Food Fight collecting canned food for Thanksgiving meal boxes. Additionally, students collaborated with the ISU Janet C. Anderson Gender Resource Center to host a pumpkin painting event raising awareness of domestic violence and local resources available.*
- *Students conducted a Public Service Announcement campaign. Students collaborated with the KISU Station Manager and the Senior Director of Marketing and Communications for the Kasiska Division of Health Sciences while learning to write, edit, and record PSAs on a variety of public health topics and issues that continue to be aired on the local radio station.*
- *Students planned and hosted two blood drives for the American Red Cross (one in November 2021 and one in April 2022).*
- *Professional service opportunities included planning and implementing a Healthy Breakfast campaign providing grab-and-go breakfast and education for ISU students, participating in the annual ISU Health Fair hosting an educational booth on the topic of sleep, and participating in ISU Bengal Visit Day hosting a booth on the topic of public health.*

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

Strengths.

The PHSA is an active student association that was recognized as ISU's Outstanding Student Organization of the Year 2019. The PHSA maintains a positive reputation in the community. Projects have been featured on local news stations and in the university's newspaper. Students receive many invitations/opportunities for collaboration and are sought after for support of events and activities across campus.

Weaknesses.

Challenges include students being located on multiple campuses or out of the area. For instance, there is only one PHSA student from the Meridian campus at the moment and all activities have been located on the Pocatello campus.Plans to address this include incorporating Zoom/online methods of attending meetings, promoting public health

activities and opportunities at all campus locations, strengthening our social media presence, and selecting a club officer to serve specifically as a liaison on the Meridian, Idaho campus.

F3. Delivery of Professional Development Opportunities for the Workforce

The program advances public health by addressing the professional development needs of the current public health workforce, broadly defined, based on assessment activities. Professional development offerings can be for-credit or not-for-credit and can be one-time or sustained offerings.

1) Provide two to three examples of education/training activities offered by the program in the last three years in response to community-identified needs. For each activity, include the number of external participants served (i.e., individuals who are not faculty or students at the institution that houses the program) and an indication of how the unit identified the educational needs. See Template F3-1.

Example	Education/training activity offered	How did the unit identify this educational need?	External participants served*
1	*CommuniVax Partnered with Southeastern Idaho Public Health to implement its vaccine access and acceptability program in SE Idaho - with real-time interventions. We kept the department informed (trained/educated) about the real-time perceptions and needs of the community so they could more effectively distribute the vaccine.*	*Need was determined by real-time qualitative data collection during the COVID-19 pandemic*	*Southeastern Idaho residents (total number unknown) COVID-19 workforce of Southeastern Idaho Public Health that serves 8 counties: clinical staff, contact tracers, administration*
2	*Disaster Preparedness and Response Workshop and Conference.*	*An MPH student thesis examined local disaster preparedness and response, and found that this was lacking. The MPH student published the results of the workshop, see Iqbal 2022 below.*	*A total of 18 participants at the workshop (Aug 24). 71 participants at the conference (April 8-9, 2022)*
3	*Certificate programs: Public Health Graduate Certificate and Rural Health Certificate*	*Community partners identified a need for the ability for further education, without the commitment for a full MPH.*	*Of the 16 students who have been admitted to the Public Health Graduate Certificate, we have already had 3*

			students graduate with the Certificate and three go on and graduate with either an MPH or MHE. There are 5 students currently enrolled in the Rural Health Certificate
4	*Community health worker core training through ISU's continuing education and workforce training (CEWT)*	*Stakeholder working groups identified the need (2015). Two state-wide training needs assessments also identified this need (2021, 2022)*	*200 community health workers trained since 2016*

Iqbal, M., Mashal, M., Khan, M. A., Grider, J., Squires, R., Richardson, R., ... & van Woerden, I. (2022). Should we offer disaster preparedness and response training workshops across Idaho? A feasibility study. Journal of Emergency Management (Weston, Mass.), 20(4), 351-364.

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

Strengths. Faculty have been engaged with the community and provided valuable training.

Weaknesses. None noted

G1. Diversity and Cultural Competence

The school or program defines systematic, coherent, and long-term efforts to incorporate elements of diversity. Diversity considerations relate to faculty, staff, students, curriculum, scholarship, and community engagement efforts.

The school or program also provides a learning environment that prepares students with broad competencies regarding diversity and cultural competence, recognizing that graduates may be employed anywhere in the world and will work with diverse populations.

Schools and programs advance diversity and cultural competency through a variety of practices, which may include the following:

- **incorporation of diversity and cultural competency considerations in the curriculum**
- **recruitment and retention of diverse faculty, staff, and students**
- **development and/or implementation of policies that support a climate of equity and inclusion, free of harassment and discrimination**
- **reflection of diversity and cultural competence in the types of scholarship and/or community engagement conducted**

1) List the program's self-defined, priority under-represented populations; explain why these groups are of particular interest and importance to the program; and describe the process used to define the priority population(s). These populations must include both faculty and students and may include staff, if appropriate. Populations may differ among these groups.

   Diversity goals were selected based on feedback from stakeholders and reviews of sociodemographic data for the population of Idaho and the students, staff, and faculty of Idaho State University in 2016. Approximately 88% of the university's students originate from Idaho,[1] and Idaho is largely homogenous in terms of race/ethnicity with 62% of Idahoans identifying as white alone and only 19% identifying as Hispanic or Latino.[2] The Advisory Committee identified Hispanics/Latinos as an underrepresented student population to target for admission to the MPH Program. An additional underrepresented student group, first generation college students, was also selected in 2016 based on Idaho State University's Trio Program's focus on that population.

   Other priority under-represented student populations of interest are Native American students, students from rural/agricultural communities and students who are low-income. These populations are of interest given the focus on rurality in the MPH program, and the typical lower graduation rates among these students.[3]

   Idaho is a rural state, and the priority populations of Hispanic/Latino, first-generation college students, Native American, and low-income are associated with rural/agricultural communities. As such the current priority population are students from rural/agricultural communities.

   Higher leadership and senior faculty of ISU is predominantly composed of people who are non-Hispanic White. Of the 217 (of 242) members of higher leadership with known race/ethnicity, 94% were non-Hispanic White. Similarly, of the 207 (of 217) tenured faculty with known race/ethnicity, 88% were non-Hispanic White. The priority under-represented

faculty population are faculty who are not non-Hispanic White. Of the seven faculty in the MPH program, only one is not non-Hispanic White. However, one of the six non-Hispanic White faculty members was not born or raised in the USA and as such brings a different culture into the program.

Of the 422 (of 488) classified employees at ISU with known race/ethnicity, 90% are non-Hispanic White. Staff who are not non-Hispanic White are the priority area.

References

[1]https://www.isu.edu/news/2021-fall/university-reports-sweeping-fall-enrollment-increases.html#:~:text=The%20fall%20enrollment%20report%20shows,at%20Idaho%20State%20was%2011%2C786.

[2]https://www.census.gov/library/stories/state-by-state/idaho-population-change-between-census-decade.html

[3]Byun, S. Y., Irvin, M. J., & Meece, J. L. (2015). Rural–nonrural differences in college attendance patterns. Peabody Journal of Education, 90(2), 263-279.

2) List the program's specific goals for increasing the representation and supporting the persistence (if applicable) and ongoing success of the specific populations defined in documentation request 1.

<u>Students</u>
Goal 1: To increase the percentage of admitted MPH students from rural/agricultural communities.
Goal 2: Graduation rates of students from rural/agricultural communities will be comparable with the graduation rates of their counterparts.

<u>Faculty</u>
Goal 1: Increase the diversity of the MPH faculty (no specific target identified).

Ongoing success: A male visiting assistant professor who is not non-Hispanic White has been hired (hire date Jan 1st). While this position is temporary, the department is working to retain this person. This would bring the ratio of non-Hispanic White faculty up to 14% (1/7), and the percentage of males to 28% (2/7). Of the three recent adjunct positions, two of these were filled by someone who was originally from Pakistan.

<u>Staff</u>
Goal 1: Maintain the diversity of the staff (no specific target identified)

Ongoing success: The MPH program is assisted by one Hispanic staff member (and one non-Hispanic White CPI student).

3) List the actions and strategies identified to advance the goals defined in documentation request 2, and describe the process used to define the actions and strategies. The process may include collection and/or analysis of program-specific data; convening stakeholder discussions and documenting their results; and other appropriate tools and strategies.

Students

We propose to utilize a holistic or mission-aligned admissions process that weighs many factors in the admission process. Factors such as applicant experiences, potential contribution to the incoming class, personal attributes and academic metrics will be considered. We are considering determining rural/agricultural background via an essay question with the student application. Supportive measures will be enacted to support all graduate students including those identified as having rural/agricultural backgrounds. More robust data collection will occur with the tracking of rural/agricultural background at admissions. We plan to ensure early connection with an advisor to help our students stay connected with the program and to help address any issues as quickly as possible. As it can be intimidating for students to "shop" for an ILE advisor, we also plan to introduce faculty to the students' early in the program so that students can quickly connect to a faculty who they are interested in working with for the ILE.

Discussions with stakeholders will be held in order to determine the best way to ensure applications to the MPH program of students who have rural/agricultural backgrounds. Scholarships for students from these priority areas are currently being discussed, as is targeted advertising. The university marketing campaigns are working to increase diversity, and we are also discussing partnering with colleges with more diverse student bodies to recruit MPH students.

Faculty

To recruit diverse faculty, the most recent faculty positions were posted nationally in the Chronicle of Higher Education and on the American Public Health Association's Public Health CareerMart site. The most recent adjunct faculty position was advertised at higheredjobs, apps.sph.emory.edu, publichealthjobs.com, handshake.come, and diversityinhighereducation.com.

Rubrics are used to rank applications with minimal bias. The Office of Equity and Inclusion review the ranked applications for all staff and faculty positions, as well as the candidates(s) that are invited for additional interviews, and recommend that search committees interview applicants from underrepresented populations.

In order to increase both recruitment and retention of diverse faculty, ISU MPH Program faculty have the option to be located at the ISU Pocatello Campus in Pocatello, Idaho or the ISU Meridian Campus in Meridian, Idaho, a suburb of Boise. The two campuses are located in cities that differ based on the sociodemographic composition of the populations, in addition to quality-of-life factors, such as recreational opportunities.

In the event that positions become available, the ISU MPH Program will seek qualified and diverse faculty members following Idaho State University hiring protocols - which ensure candidates from underrepresented groups are considered.

4) List the actions and strategies identified that create and maintain a culturally competent environment and describe the process used to develop them. The description addresses curricular requirements; assurance that students are exposed to faculty, staff, preceptors, guest lecturers and community agencies reflective of the diversity in their communities; and faculty and student scholarship and/or community engagement activities.

Students are exposed to diversity in their communities through service, and we also seek to expose students through guest lectures. An emphasis on rural health in the curriculum is another strategy used to support the diversity in the community.
The state of Idaho and other locations where students are from have many programs and services that address the unique needs of rural and underserved populations, many of which are culturally diverse. It is through capstone projects that many students are introduced to these programs as well as methods of increasing cultural competence to ensure it is prioritized as part of public health program delivery.

For example, Joseph Chacon, a Shoshone-Bannock Tribal member, has a thesis topic of dual-diagnosis and incarceration. He will be investigating incarceration in general and also how this topic impacts tribal members in southeastern Idaho. Native Americans are overrepresented in the incarceration system. He will: "Determine perceptions of those affecting court appointed treatment design and application by conducting a multi-level, qualitative analysis on court appointed treatment programs (CATPs) stakeholders' perceptions within Bannock county, Idaho. Explore and present pathways potentially leading to targeted co-occurring disorders treatment system reform"

5) Provide quantitative and qualitative data that document the program's approaches, successes and/or challenges in increasing representation and supporting persistence and ongoing success of the priority population(s) defined in documentation request 1.

Multiple recruitment efforts have been made to increase representation for faculty and students.

Students - increased representation: To reach a wide range of potential MPH students, a faculty and staff member have attended multiple university diversity events with the goal of recruiting students. In addition, there have been increased recruitment efforts across the state in metropolitan areas, which tend to have a higher level of diversity than rural Idaho. A joint degree with the Idaho College of Osteopathic Medicine (ICOM) has been established, which is also anticipated to increase the diversity of the MPH student applicants.

- *Faculty regularly attend recruitment fairs and cultural celebrations geared towards current and future students: Hispanic Youth Leadership Summit, Idaho Scholars Event, and Society for the Advancement of Chicanos/Hispanics and Native Americans in Science at ISU events.*
- *Other events that the faculty have attended are the "Equity, and Inclusion in Rural and Diverse Educational Communities Conference" (Sponsoring Organization: ISU, https://www.isu.edu/news/2021-fall/equity-and-inclusion-in-rural-and-diverse-educationalcommunities-conference---oct-29.html, the "Indigenous Peoples Day Native Power, Resilience & Strength in the 21st Century" (Sponsoring Organization: ISU), the "Shoshone Bannock Tribal Education Summit", the SBT-ISU Research Engagement Study", the "National Training: Hastings Center Health Equity Summit", and some of the "Hispanic Youth Leadership Summit" (https://www.isu.edu/hyls/)*

Students - supporting persistence:To support the persistence of students from the MPH priority population (students from rural/agricultural communities)

- *Maintaining an emphasis on our Rural Health Graduate Certificate*

- *Communicating diversity, equity, and inclusion events across campus to students through our Moodle department page*
- *A Moodle page has been created for an easier method of communication with MPH students, which we hope will be associated with increased persistence.*

<u>Faculty - increased diversity</u>: To increase the diversity of the faculty, the most recent job posting for a visiting Assistant Professor was shared across an even broader range of platforms. The resulting hire for this position increased the diversity of the faculty in terms of both gender and race/ethnicity.

- *Multiple MPH Faculty serve in leadership roles on the Idaho Rural Health Association*
- *Faculty and staff on search committees are required to attend training on appropriate, legal and equitable interviewing and hiring practices through the ISU Office of Equity and Inclusion.*
- *Faculty regularly attend and present at workshops: Equity, and Inclusion in Rural and Diverse Educational Communities Conference through ISU (attendee), Indigenous Peoples Day Native Power, Resilience & Strength in the 21st Century through ISU (attendee), Shoshone Bannock Tribal Education Summit in Fort Hall, Idaho (attendee), Hastings Center Health Equity Summit (attendee), and the National Rural Health Association Health Equity Conference (presenter).*

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

All students, faculty and staff were emailed asking for their perceptions of the program's climate regarding diversity and cultural competence. The responses are below.

<u>Student comments</u>
As a student enrolled in the Idaho State University Master of Public Health program, I have found that the program invests a considerable amount of effort to embed diversity and cultural competence in its academic coursework and through extracurricular opportunities. Each class that I have taken has grounded its teachings in health equity and underscored the importance of engaging with diverse communities, understanding the importance of cultural competence in each aspect of public health, and highlighting disparities to be aware of as future public health professionals.

I believe it is very positive. The opportunities surrounding diversity and cultural differences are available and discussed openly. Other students freely share their stories and opinions, and faculty appear to be well educated and sensitive to the topics.

The program is pretty inclusive

I am an online student so I don't notice much about the diversity in campus but online there seems to be a diverse group of students. Staff seems knowledgeable and open to new cultures. There is also a mix of cultures in some of my classes but not much cross-cultural exchange.

I feel the program works to prepare students for employment with diverse cultures, but it does feel that certain minority cultures are valued above other minority cultures... almost

like the program is following the current public health trends rather than openly seeking to include all minority cultures.

I've not had too many courses yet, so I've yet to make a clear assessment. There is diversity of professions, however, meaning I get to read discussion posts informed by this variety.

Very good

I think that professors are welcoming of diversity and cultural competence. I am sure some international students may have difficulty with the language, as I know I would. Maybe we could emphasize that we have the Writing Center available for help with papers. Maybe also reminding students that we have the Diversity Center available to all if they would like support or other assistance.

Faculty comment
When I consider cultural competence I am referring to the ability of a person to effectively interact, work, and develop meaningful relationships with others regardless of cultural background. This includes the beliefs, customs, and behaviors of people from all different walks of life. The program and the family work diligently to increase levels of self-awareness, develop social skills and guide behaviors of students, faculty, and staff to create a safe and tolerant learning environment that nurtures and respects diversity in our communities, ourselves, and our students. While the overall look of our program very much represents the communities in which we are located, there is a diversity of thought, experiences, and other components (religion, sexual orientation, ethnicity, etc.) that continue to propagate that inclusive feeling and prepare the students we teach to succeed in a globalized workforce by engaging them in ways that they learn to understand and appreciate that diversity in all its many forms. For me personally, this ability to motivate a movement of inclusivity in a very homogenetic location such as Southeast Idaho, is a key piece of establishing a model for students who have also grown up in the tight and restrictive confines that it is okay to embrace, interact, and respect those who are different (for whatever reason) from ourselves.

Staff comment
I believe Idaho State University has an excellent team of instructors who are experts in the field, specifically ethnic minorities who face disproportionate health inequities. Dr. Diana Schow addresses social justice issues in rural and underserved populations. Idaho has historically underserved migrant and seasonal farm workers who are predominantly Latino. Dr. Schow and Dr. Fore have a breadth of knowledge about the rural Hispanic populations and the Native American community. The collaboration with other Idaho State University departments, like Spanish for Health professions, involving ISU students in field research further strengthens the work addressing current issues among the Latino community, native American, and rural population.

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

Strengths.

The MPH program students are substantially more diverse than the rest of ISU, Idaho, and the rest of the USA.

Weaknesses.
The faculty composition reflects much of Idaho as a fairly homogenous state with an extensive rural population. The faculty represent a rural heritage with geographic diversity. The faculty is committed to recruiting adjuncts and full time faculty that represents a broader diversity of individuals. A liaison for culture and people has been appointed by the Dean of the COH and this individual has a strong background in multiculturalism. She is available to consult on faculty recruitment along with the University Office of Equity and Inclusion.

H1. Academic Advising

The program provides an accessible and supportive academic advising system for students. Each student has access, from the time of enrollment, to advisors who are actively engaged and knowledgeable about the program's curricula and about specific courses and programs of study. Qualified faculty and/or staff serve as advisors in monitoring student progress and identifying and supporting those who may experience difficulty in progressing through courses or completing other degree requirements. Orientation, including written guidance, is provided to all entering students.

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

   The Graduate School provides an orientation to all incoming students. As each student starts the MPH program their advisor reaches out to them and asks if they have any questions and for a chat (either via zoom or in person). A new course (MPH 5540) has just been approved by the Graduate School, which will also help orientate new students to the MPH program.

2) Describe the program's academic advising services. If services differ by degree and/or concentration, a description should be provided for each public health degree offering.

   Each student is assigned an advisor from the MPH faculty member upon acceptance into the MPH program. At the minimum, the advisors are requested to email their advisees each semester to check if there is anything that they can assist with.

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

   Advisors are selected based upon potential match of interests, and on the number of current students an advisor has.

4) Provide a sample of advising materials and resources, such as student handbooks and plans of study, that provide additional guidance to students.

   The handbook is a comprehensive resource for MPH students, see ERF.

5) Provide data reflecting the level of student satisfaction with academic advising during each of the last three years. Include survey response rates, if applicable.

   The data for this is currently being collected through a student survey. This survey question is planned to be sent out to students yearly so that academic advising satisfaction can be tracked.

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

   <u>Strengths</u>.
   All students have an advisor, and the handbook provides a comprehensive guide to students.

Weaknesses.
Student satisfaction with the academic advising has not been tracked. We have added this question to our study survey, and plan to track this moving forward, as well as identify and improve upon any weaknesses that are found with the advising.

H2. Career Advising

The program provides accessible and supportive career advising services for students. All students, including those who may be currently employed, have access to qualified faculty and/or staff who are actively engaged, knowledgeable about the workforce and sensitive to their professional development needs; these faculty and/or staff provide appropriate career placement advice, including advice about enrollment in additional education or training programs, when applicable. Career advising services may take a variety of forms, including but not limited to individualized consultations, resume workshops, mock interviews, career fairs, professional panels, networking events, employer presentations and online job databases.

The program provides such resources for both currently enrolled students and alumni. The program may accomplish this through a variety of formal or informal mechanisms including connecting graduates with professional associations, making faculty and other alumni available for networking and advice, etc.

1) Describe the program's career advising and services. If services differ by degree and/or concentration, a brief description should be provided for each. Include an explanation of efforts to tailor services to meet students' specific needs.

   Career advising is currently being done on an ad-hoc basis by all faculty. Typically, when students are starting their project/thesis, the faculty who are involved talk with the student about their career goals. In this way the project/thesis can be used to best align the student with the area they want to go into. Faculty also send job openings to students who may be a good fit for the position. Faculty also go over the students' CV, cover letter, other application materials, and discuss interview tips on an ad-hoc basis.

   The university provides a career advising and services for all students (https://www.isu.edu/career/students/). The Career Center helps students with resumes, mock interviews, grad school applications, career counseling, and job searching. They also do presentations around campus in various departments to teach students about these services. They help all students, as well as faculty, staff, alumni and community members. The Career Center sends out emails through Handshake to all ISU students when they have career fairs and other general career related events such as the JCPenney Suit Up Event. The Career Center also sends out targeted emails to specific students if there is an employer doing an information session related to their major (see ERF ISU Career support).

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

   Currently all faculty provide career advising on an ad-hoc basis.

3) Provide three examples from the last three years of career advising services provided to students and one example of career advising provided to an alumnus/a. For each category, indicate the number of individuals participating.

Example 1. An MPH student who wanted to go on to obtain their PhD had not been accepted to any of the schools that they had applied too. Dr. van Woerden worked with the student to determine what they wanted to do for their PhD, and suggested schools to apply to. Dr. van Woerden then went over all of their application materials and provided suggestions to better showcase their expertise. Dr. van Woerden then worked with the student to further strengthen their CV by having them run a workshop (and subsequently, conference) in the area of their interest. The student was accepted into multiple PhD programs, and is now working as both a teaching assistant and research assistant while doing their PhD.

Example 2. Students are regularly connected to Idaho Health and Welfare (IDHW) and Utah Health Departments frequently. As an example, an MPH student wasn't sure if they wanted to stay and work in the State of Idaho or not. Dr. Schow worked with the student on a one to one basis to help the student decide whether they wanted to stay in the state of Idaho and work or not. The student now works at the IDHW.

Example 3. Dr. Lindsay was informed of a job opening at the Idaho Department of Health and Welfare and passed this along to a qualified student. He explained the process of applying and explained that an exam would be required for work with the State of Idaho and how to prepare for it. When the student was invited for an interview, he and Dr. van Woerden helped the student prepare for the interview. He and Dr. van Woerden provided references for the student's employment.

Example 4. Dr. Lindsay discussed several times with an alumnus about career progression. He was satisfactorily employed at a clinic but was looking for growth opportunities, including potentially a career teaching public health as well as a transition to a governmental public health agency. Dr. Lindsay indicated that teaching as an adjunct instructor at ISU could help him gain more experience and helped provide that opportunity, which he fulfilled. They discussed pros and cons of a career in a public health district. He made a transition to the health district and continues to discuss satisfaction and goals in his current career.

4) Provide data reflecting the level of student satisfaction with career advising during each of the last three years. Include survey response rates, if applicable.

   The majority of students who complete the MPH program are employed. Informal data collection shows that the students are satisfied with their positions of employment after graduation. Formal data collection has been initiated, and we plan to formally ask this of our current students on an annual basis.

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

   Strengths.
   The MPH students who do not go on for further education tend to find good employment. Faculty are working with students and alumni to ensure that applications are competitive, and providing opportunities that will help them meet their goals.

   Weaknesses.

Career advising has not been done formally within the MPH program. We have added a question to career advising to our student survey, and will and improve upon our approach as needed. We also plan to formalize our approach to career advising for the MPH students, ensuring that all students are provided the opportunity for assistance.

H3. Student Complaint Procedures

The program enforces a set of policies and procedures that govern formal student complaints/grievances. Such procedures are clearly articulated and communicated to students. Depending on the nature and level of each complaint, students are encouraged to voice their concerns to program officials or other appropriate personnel. Designated administrators are charged with reviewing and resolving formal complaints. All complaints are processed through appropriate channels.

1) Describe the procedures by which students may communicate complaints and/or grievances to program officials, addressing both informal complaint resolution and formal complaints or grievances. Explain how these procedures are publicized.

   Student complaints are addressed at the university level in the student handbook and at https://www.isu.edu/eisu/complaint-procedures/. The general procedure for complaints and/or grievances is for the student to first discuss the matter with the instructor. If differences are unable to be resolved, then appeals may be made to the Program Director. Other concerns about the MPH Program should be directed first to the MPH Program Director. Students retain the right to file a grievance with the University in the event the issue is not satisfactorily addressed at the Program/Division level.

2) Briefly summarize the steps for how a formal complaint or grievance is filed through official university progresses. Include information on all levels of review/appeal.

   Grade disputes.
   Students should begin the process of appealing a grade by carefully re-reading the syllabus and reviewing the grading process articulated therein. If consulting the syllabus does not resolve the concern, students should begin to collect and organize information or evidence that leads them to suspect their grade was assigned incorrectly or inappropriately. Once the student has collected the available evidence, they should engage the academic administration in the following sequence 1) The Course Instructor, 2) The Department Chair, 3) The College/School Dean, 4) Scholastic Appeals Committee.

   Equal Opportunity/Affirmative Action.
   Students need to contact the ISU Office of Equity and Inclusion or view the policy online at https://www.isu.edu/media/libraries/isu-policies-and-procedures/humanresources/Equal-Opportunity-and-Affirmative-Action-Policy-ISUPP-3080.pdf.

   All other complaints/grievances
   A student should first attempt to resolve the complaint informally by meeting with the University instructor and/or official responsible for the rule, policy, procedure, or decision that results in the student's complaint or grievance. Students seeking advocacy or guidance on this process may consult with the Director of Student Life or delegate.

   Academic Complaints/Grievances
   Students with academic complaints/grievances should first meet with the instructor responsible for the policy, procedure or decision that resulted in the student's initial complaint/grievance. If the student is still dissatisfied after that meeting, the student should next meet with the instructor's department head and then with the dean of the college in

which the course is offered. If the complaint/grievance involves an academic policy, the student should first meet with the official responsible for the policy, procedure, implementation or decision. If the student is still dissatisfied after that meeting, the student should next meet with the official's supervisor. If, after that meeting, the student is still dissatisfied, the student may appeal the decision, in writing, to the Provost/Vice President for Academic Affairs who shall have ten (10) business days to investigate and render a decision on the student's complaint/grievance. The Provost/Vice President for Academic Affairs may elect to meet with the student or may decide the merits of the case based upon the written appeal. This is the final appeal at the University level.

Non-Academic Complaints/Grievances
Students with non-academic complaints/grievances should first meet with the University official responsible for the policy, procedure or decision that resulted in the student's initial complaint/grievance. If the student is still dissatisfied after that meeting, the student should next meet with the University official's supervisor. If, after that meeting, the student is still dissatisfied, the student may appeal the decision, in writing, to the Vice President for Student Affairs who shall have ten (10) business days to investigate and render a decision on the student's complaint/grievance. The Vice President for Student Affairs may elect to meet with the student or may decide the merits of the case based upon the written appeal. This is the final appeal at the University level.

Further Review
A student who is dissatisfied with the institution's response to their complaint/grievance has one further level of review by the Idaho State Board of Education.

3) List any formal complaints and/or student grievances submitted in the last three years. Briefly describe the general nature or content of each complaint and the current status or progress toward resolution.

No formal complaints have been documented over the past three years by the Director of the MPH program. There have been a few anonymous complaints through the course evaluations and a few direct emails to the Program Director and Department Chair. These tend to be about the instructors rather than content, usually related to not responding quickly enough or grading assignments in a timely manner.

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

Strengths.
There have been no formal complaints over the last three years.

Weaknesses.
No weaknesses noted.

H4. Student Recruitment and Admissions

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

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

   The Program has a recruitment plan that takes into consideration strategies to best attract a diverse student body that will help to achieve the Program goals and objectives. The following are procedures used to recruit students:

   - *Word of mouth. Many admitted students join the MPH program due to other MPH students recommending the program.*
   - *Website. (https://www.isu.edu/mph/): The MPH website is found through the ISU homepage. Students and applicants have noted that the MPH website was one source that helped them find out about the program. Information on the MPH site includes: program overview, CEPH accreditation, curriculum, program of study, course descriptions, course sequence, electives, admission standards, faculty profiles, student handbook, scholarships and assistantships, student club and contact information. This information is kept current and is linked to or pulls from the original source material to maintain consistency across the ISU website (e.g., the admissions tab takes one to the graduate school page; the course descriptions and search tabs take one to those sites; the program of study is pulled in from the graduate school website).*
   - *Social Media. The MPH utilizes a Facebook to keep interested followers abreast of program activities (Idaho State University Master of Public Health Program). A closed group on LinkedIn is utilized to network between current students, alumni, and faculty.*
   - *Printed Materials. Current handouts are kept in the Program Offices in Pocatello and Meridian and will be mailed to distance students upon request.*
   - *Newsletters. Department newsletters that highlight MPH student, faculty, and alumni achievements are sent out at least twice per year to a list of over 400 community partners and alumni.*
   - *Lecture events. We have hosted 2 lectures from the President of the American Public Health Association, and brought in other speakers for a Public Health Colloquium that are open to the campus community and provide opportunities to recruit students and expand our community partner connections.*
   - *Advertising videos. Videos highlighting the MPH program were created in June 2021 and are shown at recruiting events. These videos can be seen at the links below:*
     - *Commercial: https://youtu.be/T5PWmGQKufc used with Google Ads, Facebook, and at recruitment events*
     - *Academic Program Video: https://youtu.be/jKp1SOYqDLQ used at recruitment events and on the MPH website.*
   - *Recruitment Expos: ISU offers several opportunities each year to participate in recruiting and informational activities. The program has a table with displays, flyers and faculty available to answer questions. Graduate school staff also travel throughout the state to attend graduate expos at other universities.*

- *The Program received approval as a WRGP participant in April 2015 (http://wiche.edu/wrgp). The WRGP website includes information about the Program. The WRGP designation will also serve as a recruitment tool when Graduate School staff attend graduate expos throughout the West.*
- *Online advertisements: In calendar years 2019-2022, the Program purchased revolving online advertisements on Google Ads and Facebook in order to recruit students.*

2) Provide a brief summary of admissions policies and procedures. If these differ by degree (e.g., bachelor's vs. graduate degrees), a description should be provided for each. Detailed admissions policies, if relevant, may be provided in the electronic resource file and referenced here.

Admission to the MPH program requires the following:

- *All ISU Graduate School requirements met (a BS degree and an overall undergraduate GPA of 3.0 or higher)*
- *A minimum of a 3.0 GPA based on the last 60 hours of undergraduate work.*
- *Have two letters of recommendation from non-relative individuals familiar with your academic or professional abilities*
- *Submit a proctored typed essay (one to two pages, single-spaced) describing their interest in pursuing the MPH degree and their vision of how it will facilitate the candidate's career goals.*
- *International students who have not graduated from an accredited college or university in the US, and whose native language is not English, must achieve satisfactory scores on the Test of English as a Foreign Language (TOEFL).*

Applications for admission are online (https://isu.edu/apply/) by clicking on the Apply Now button. Once a student applies the graduate school checks the materials are complete, and then sends the application to the MPH faculty. The MPH Director reviews the application and informs the MPH faculty that there are new applications. The MPH faculty (excluding the Chair of the Department) then each individually review the applications and then suggest whether to admit, admit with requirements, or deny the student. Once the MPH faculty have had time to review the applications, the Director of the MPH program makes a recommendation to the Chair of the Department. The Chair of the Department makes the final admission decision (reviewing the application as appropriate.

Applicants who have been accepted into Graduate Studies will receive a notification letter and a copy of the Approval for Admission form from the Graduate School. Those who have not been admitted will receive a letter from the Graduate School or from the department/college to which the student made an application.

- *See ERF ISU Admission and MPH Admission*

3) Provide quantitative data on the unit's student body from the last three years in the format of Template H4-1, with the unit's self-defined target level on each measure for reference. In addition to at least one from the list that follows, the program may add measures that are significant to its own mission and context.

Outcome Measures for Recruitment and Admissions				
Outcome Measure	*Target*	*2019-20*	*2020-21*	*2021-22*
Percentage of students admitted who meet our priority areas	*NA*	*60%**	*55%**	*25%**

** Due to these priority areas not being tracked at admission stage, these are estimates based on the percentage of enrolled students with known race/ethnicity who were not non-Hispanic White. In 2019-2020 one of six students had an unknown race/ethnicity, in 2021-2022 three of 11 students had an unknown race/ethnicity. All students' race/ethnicity was known for the 2020-2021 cohort.*

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

<u>Strengths</u>.
More than half of the students in the 2019-2020 and 2020-2021 cohorts with known race/ethnicity reported that they were not non-Hispanic White

<u>Weaknesses</u> The website and Facebook site are under-utilized. We are improving on the extent we use these mediums. There are a large number of undergraduate students who take courses the Department of Community and Public Health offers. We plan to increase the awareness of the MPH in these undergraduate courses. The percentage of admitted students who met our priority areas in 2021-2022 was potentially less than 33% (an estimate of 25% not non-Hispanic White).

H5. Publication of Educational Offerings

Catalogs and bulletins used by the program to describe its educational offerings must be publicly available and must accurately describe its academic calendar, admissions policies, grading policies, academic integrity standards and degree completion requirements. Advertising, promotional materials, recruitment literature and other supporting material, in whatever medium it is presented, must contain accurate information.

1) Provide direct links to information and descriptions of all degree programs and concentrations in the unit of accreditation. The information must describe all of the following: academic calendar, admissions policies, grading policies, academic integrity standards and degree completion requirements.

   Academic Calendar
   https://www.isu.edu/academiccalendar/

   Master of Public Health – Graduate Course Catalog (Admissions and degree completion requirements)
   https://coursecat.isu.edu/graduate/college-of-health/community-and-public-health/mpublichealth/

   Master of Public Health – Program website (Admissions policies, degree completion requirements, and links to handbook and professionalism policy):
   https://www.isu.edu/mph/

      Master of Public Health – Handbook (grading policies, academic integrity standards and degree completion requirements)

      Master of Public Health – Professionalism Policy (academic integrity standards)