

Master of Public Health Program

Self-Study

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[\[website\]](#)



Department of
Public Health
UNIVERSITY *of* WEST FLORIDA

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Introduction

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

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

The University of West Florida (UWF) is one of 12 members of the public State University System of Florida and celebrated its 50th anniversary in 2012. The University was established in 1967.

- 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)

The College of Health was founded in 2016 and renamed the Usha Kundu, MD College of Health (UKCOH) in 2017, following the generous gift from a local donor.

Other colleges at UWF include the College of Business, the College of Education and Professional Studies, the College of Arts, Social Sciences and Humanities, and the Hal Marcus College of Science and Engineering.

Schools at UWF include the School of Nursing within the UKCOH and the Dr. Grier Williams School of Music within the College of Arts, Social Sciences and Humanities.

The university offers undergraduate degrees in 49 different areas with 110 specializations, Master's degrees in 24 different areas with 50 specializations, two specialist degrees, a doctorate in education (Ed.D.) with five specializations, and a Doctor of Philosophy degree in robotics (Ph.D.).

- c. number of university faculty, staff and students

Student Population:

As of Fall 2021, UWF's student population consists of 13,259 actively enrolled students, including:

- 8,918 undergraduate students (67%)
- 3,680 graduate students (28%)
- 661 non-degree-seeking students (5%)

Faculty Composition:

As of Fall 2021, UWF has a total of 659 faculty members, of which 59% (n=392) are full-time teaching personnel and 41% (n=267) are part-time adjunct faculty.

University Support Staff:

As of Fall 2021, UWF has 927 full-time and part-time staff positions.

- d. brief statement of distinguishing university facts and characteristics

In addition to its main campus in Pensacola, UWF serves students east of Santa Rosa County at UWF Emerald Coast locations in Fort Walton Beach, Eglin Air Force Base, Hurlburt Field, and shared facilities at regional community colleges. UWF also owns waterfront beach property on Santa Rosa Island that is available for recreational, academic, and research pursuits. In downtown

Pensacola, the university manages 22 historic properties. Programs have been developed to maximize the use of these facilities and to integrate the university more deeply into the economic development of Northwest Florida.

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

UWF is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award associate, baccalaureate, Master’s, specialist, and doctorate level degrees in education and robotics. The university had its most recent regional accreditation reaffirmation in 2015. Table 1 lists the professional accrediting bodies to which UWF responds.

Table 1. Accrediting Agencies for UWF, Colleges, and Programs

Unit Name	Accrediting Agency
University of West Florida	Southern Association of Colleges and Schools Commission on Colleges (SACSCOC)
Athletic Training, B.S.	Commission on Accreditation of Athletic Training Education (CAATE)
Chemistry, B.S.	American Chemical Society (ACS)
Clinical Laboratory Sciences, B.S.	National Accrediting Agency for Clinical Laboratory Sciences (NAACLS)
College of Business, B.S.B.A., M.Acc., M.B.A.	AACSB International (The Association to Advance Collegiate Schools of Business)
Computer Engineering, B.S.	Engineering Accreditation Commission of ABET, Inc.
Computer Science, B.S.	Computing Accreditation Commission of ABET, Inc.
Electrical Engineering, B.S.	Engineering Accreditation Commission of ABET, Inc.
Music, B.M.	National Association of Schools of Music (NASM)
Nursing, B.S.N., MSN	Commission on Collegiate Nursing Education (CCNE)
Psychology (Counseling & Industrial Organizational Programs), M.A.	Master’s in Psychology Accreditation Council (MPAC)
Social Work, B.A., M.S.W.	Council on Social Work Education (CSWE)
Teacher Education/Professional Education Programs, B.A., M.A., M.Ed., Ed.S., Ed.D.	National Council for Accreditation of Teacher Education (NCATE)

A direct link to university-published information on the accrediting bodies to which UWF responds is as follows:

- <https://uwf.edu/academic-affairs/departments/institutional-effectiveness/accreditation/specialized-accreditation/> [maintained by Division of Academic Affairs]

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

The MPH Program at UWF was founded in 2005 and transitioned into a fully online format in 2006. At the time the program enrolled about 5 students. The online format was chosen to reach the widest possible audience within the broad geographic region and to meet the educational needs of an increasingly mobile population health workforce including the large presence of military students. The program started as a Generalist offering and remained so for the first ten years.

In 2017, a year after the inception of the then new College of Health, the MPH Program added the Health Promotion, Education and Behavior concentration. The MPH in Health Promotion,

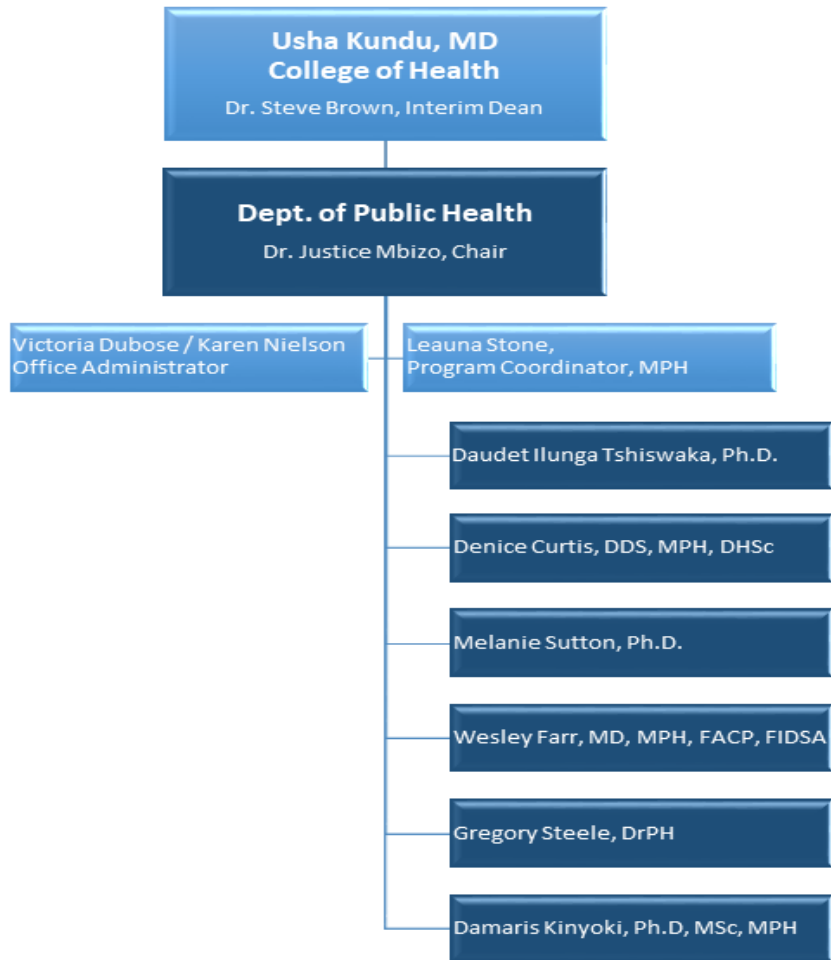
Education and Behavior was created to consolidate an existing M.S. in Health Promotion with a psychosocial emphasis. In 2019 the Global Health concentration was added. The Global Health concentration was inspired by a growing desire among our military partners to train their preventive medicine residency candidates for future engagements within the global health sector. This coincided with a growing interest in the MPH degree from students based outside the United States for whom this concentration is a natural fit.

The program has grown in enrollment from 5 students at inception in 2005 to 185 students enrolled in MPH courses at the start of Fall 2021. The program has graduated a total of 412 MPH professionals, two of which are deceased. During the same period, the program has increased program personnel from 3 to 7 full-time faculty, including growth from 2 tenure-earning faculty lines to five such lines. In the last 5 years, two faculty in the program have achieved tenure and promotion. The MPH Program received its initial CEPH accreditation in 2009 and completed its first 7-year re-accreditation cycle in 2014.

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

Figure 1. Organizational Chart, UKCOH



- 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

The Department of Public Health is one of six units within the UKCOH. Each unit is semi-autonomous and functions as an independent unit reporting to the Dean of the UKCOH through the Chair of the Department. Department faculty serve on several College and university level governance committees.

The following documentation related to this item is provided in the **Introduction** folder of the Electronic Resource File:

- Organizational Chart, UKCOH

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

The Department Chair serves as the Director of the MPH Program and reports to the Dean of the UKCOH, who reports to the President through the Provost and Senior Vice President for Academic Affairs.

The following documentation related to this item is provided in the **Introduction** folder of the Electronic Resource File:

- Organizational Chart, Academic Affairs

- 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.

Template Intro-1: Instructional Matrix - Degrees and Concentrations						
			Categorized as public health	Campus based	Executive	Distance based
Master's Degrees	Academic	Professional				
Concentration	Degree	Degree				
Generalist		MPH				X
Health Promotion, Education & Behavior		MPH				X
Global Health		MPH				X

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.

Template Intro-2: Enrollment Data by Degree		
MPH Concentration		Fall 2021
	MPH – Generalist	114
	MPH – Health Promotion, Education and Behavior	30
	MPH – Global Health	35

Source: Fall 2021, after Drop/Add period, 9/9/2021

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 (eg, 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 (eg, two appointed faculty members from each concentration) and list the current members.

MPH Curriculum Committee

Charge: The MPH Curriculum Committee makes recommendations to the Department Chair with respect to the following responsibilities:

- Review and approve or deny all proposed changes to the MPH curriculum and degree requirements, including academic standards and policies, as well as course competencies emphasized to address workforce needs.
- Maintain the MPH Honor Code and MPH Practicum Guide in accordance with all approved policies and procedures.
- Participate in ongoing and systematic data collection, monitoring, and assessment for program and professional accreditation standards, including agenda and minutes of actions taken with respect to curriculum changes.

Composition: The MPH Curriculum Committee is comprised as follows:

- MPH Primary Instructional Faculty (2, one must chair the committee)
- MPH Program Coordinator
- MPH Student
- Department Chair, *Ex Officio*

How Often it Meets: The MPH Curriculum Committee meets at least once a year or more frequently if necessary.

Table A1.a summarizes the historical and current membership on this committee.

Table A1.a. MPH Curriculum Committee Membership

Membership Type	2018-2019	2019-2020	2020-2021	2021-2022
MPH Primary Instructional Faculty	Melanie Sutton (Chair)	Denice Curtis (Co-Chair)	Denice Curtis (Co-Chair)	Melanie Sutton (Co-Chair)
	Denice Curtis	Wes Farr (Co-Chair)	Wes Farr (Co-Chair)	Damaris Kinyoki (Co-Chair)
				Wes Farr

MPH Program Coordinator	Leauna Stone	Leauna Stone	Leauna Stone	Leauna Stone
MPH Student	Rose Belony	Rose Belony	Bridgette Robinson	Elizabeth Ramsamooj
Department Chair	Justice Mbizo	Justice Mbizo	Justice Mbizo	Justice Mbizo

With respect to the MPH Student representative on the MPH Curriculum Committee, from 2012 until the 2019-2020 academic year, the President of the UWF Student Association for Public Health, who resides in the local area and is engaged in face-to-face, on-campus activities, was tapped to serve on the Curriculum Committee. Beginning in 2020, this committee position was opened up to any interested MPH student.

MPH Admission Committee

Charge: The MPH Admission Committee is charged with making recommendations to the Department Chair on issues related to the admission of students into the MPH Program and also evaluates for approval or denial all applications to the MPH Program based on established program policies.

Composition: The MPH Admission Committee is comprised as follows:

- MPH Primary Instructional Faculty (1, must chair the committee)
- MPH Program Coordinator
- UKCOH (UKCOH) Graduate Admissions Assistant
- Department Chair, *Ex Officio*

How Often it Meets: The MPH Admissions Committee meets at least twice each semester or more frequently if necessary.

Table A1.b summarizes the historical and current membership on of the Admissions committee.

Table A1.b. MPH Admission Committee Membership

Membership Type	2018-2019	2019-2020	2020-2021	2021-2022
MPH Primary Instructional Faculty	Daudet Ilunga Tshiswaka (Chair)	Daudet Ilunga Tshiswaka (Chair)	Daudet Ilunga Tshiswaka (Chair)	Daudet Ilunga Tshiswaka (Chair)
MPH Program Coordinator	Leauna Stone	Leauna Stone	Leauna Stone	Leauna Stone
UKCOH Graduate Admissions Assistant	NA (position did not exist)	NA (position did not exist)	Anika Moore	Anika Moore
Department Chair	Justice Mbizo	Justice Mbizo	Justice Mbizo	Justice Mbizo

The MPH Admission Committee does not include a student member due to UWF's compliance with privacy-related policies outlined in the Family Educational Rights and Privacy Act (FERPA).

Workforce Development & Community Outreach Committee

Charge: This committee is charged with making recommendations to the Department Chair and faculty on community outreach, workforce development needs, grants, and community engagement at the local, regional, national, and global levels.

Composition: The Workforce Development & Community Outreach Committee is comprised as follows:

- MPH Primary Instructional Faculty (2, one must chair the committee)
- MPH Student
- Department Chair, *Ex Officio*

How Often it Meets: The Workforce Development & Community Outreach Committee meets at least once a year or more frequently if necessary.

Table A1.c summarizes the historical and current membership on this committee.

Table A1.c. Workforce Development & Community Outreach Committee Membership

Membership Type	2018-2019	2019-2020	2020-2021	2021-2022
MPH Primary Instructional Faculty	Peter Memiah (Chair) Melanie Sutton	Melanie Sutton (Chair) Daudet Ilunga Tshiswaka	Melanie Sutton (Chair) Daudet Ilunga Tshiswaka Gregory Steele	Daudet Ilunga Tshiswaka (Chair) Denice Curtis Gregory Steele
MPH Student	NA (position did not exist)	NA (position did not exist)	Logan Goodson	Sarah Green
Department Chair	Justice Mbizo	Justice Mbizo	Justice Mbizo	Justice Mbizo

MPH Accreditation & Programmatic Assessment Committee

Charge: This committee consists of faculty charged with making recommendations to the Department Chair and faculty with stewardship over:

- Maintaining ongoing and systematic data collection, monitoring, and assessment for program (UWF), professional (CEPH, including self-study and electronic resource file resources), and regional (SACSCOC) accreditation standards
- Applied practice experience
- Integrative learning experience
- Comprehensive exam

Composition: The MPH Accreditation & Programmatic Assessment Committee is comprised as follows:

- MPH Primary Instructional Faculty (2, one must chair the committee)
- MPH Program Coordinator
- Department Chair, *Ex Officio*

How Often it Meets: The MPH Accreditation & Programmatic Assessment Committee meets at least once a year or more frequently if necessary.

Table A1.d summarizes the historical and current membership on this committee.

Table A1.d. MPH Accreditation & Programmatic Assessment Committee

Membership Type	2018-2019	2019-2020	2020-2021	2021-2022
MPH Primary Instructional Faculty	Melanie Sutton (Chair) Peter Memiah	Melanie Sutton (Chair) Daudet Ilunga Tshiswaka	Melanie Sutton (Chair) Damaris Kinyoki	Melanie Sutton (Chair) Damaris Kinyoki
MPH Program Coordinator	Leauna Stone	Leauna Stone	Leauna Stone	Leauna Stone
MPH Student	NA	NA	NA	Elizabeth Ramsamooj
Department Chair	Justice Mbizo	Justice Mbizo	Justice Mbizo	Justice Mbizo

With respect to the MPH Student representative on the MPH Accreditation & Programmatic Assessment Committee, this position was not filled in 2018-2020 as MPH Program faculty and adjuncts focused on the technical implementation details of migrating to CEPH's 2016 Accreditation Criteria. Beginning in 2021-2022, this committee position was re-opened up to any interested MPH student.

Significant Ad Hoc Committees

The Chair establishes Ad Hoc committees as the need develops to carry out specific responsibilities. These committees are disbanded following completion of assigned duties. Significant Ad Hoc Committees during the period of this Self-Study include:

- **Mentoring Committees:** Each faculty member is assigned a 1-2-member Mentoring Committee. Within the first semester of employment, the Chair meets each new hire to make a good faith effort to balance the qualifications on the Mentoring Committee with the track-appropriate career goals of each mentee, including finding outside mentors where necessary. The Mentoring Committee is then charged to meet with the faculty member on an annual basis to review his/her progress towards track-appropriate career goals and make recommendations for success.
- **Search Committees:** The Chair is charged to create Search Committees with compositions appropriate to the job title of the search. The Committee must include a student, a member external to the department, and a member of underrepresented minority groups. Table A1.e summarizes Search Committees formed during the period of this Self-Study.

Table A1.e. Search Committees During Self-Study Period

Position Type	Committee Chair	Committee Members	Year
Assistant Professor [#122020; Kinyoki hired]	Melanie Sutton (faculty)	Denice Curtis (faculty) Daudet Ilunga Tshiswaka (faculty) John Morgan (external member) Tasnim Mridha (student)	2019-2020
Office Manager	Melanie Sutton (faculty)	Daudet Ilunga Tshiswaka (faculty) Diana Walker (external member) Rose Belony (student)	2018-2019
Visiting Lecturer [#114260; Steele hired]	Daudet Ilunga Tshiswaka (faculty)	Melanie Sutton (faculty) Kristen Coffey (external member) Anthony Okafor (external member) Michelle Bellanova (student)	2018-2019
Lecturer in Public Health [#104010; Farr hired]	Daudet Ilunga Tshiswaka (faculty)	Melanie Sutton (faculty) Kristen Coffey (external member) Anthony Okafor (external member) Michelle Bellanova (student)	2018-2019
Assistant Professor [#100480; Lee hired]	Peter Memiah (faculty)	Enid Sisskin (faculty) Melanie Sutton (faculty) Crystal Bennett (external member) Brittany Hensley (student)	2017-2018

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

Changes to degree requirements are proposed through the MPH Curriculum Committee and discussed at full faculty meetings before approval. The Department Chair may when necessary recommend changes to address gaps that impact on accreditation standards. Outside the Department, approval of any changes is next guided by the University's Graduate Council and Academic Council. Final approval rests with the Office of Academic Affairs in accordance with academic regulations for the State of Florida University System Board of Governors.

b. curriculum design

Changes to curriculum design are proposed through the MPH Curriculum Committee and discussed at full faculty meetings before approval. Outside the Department, final approval of any changes is next guided by the University's Curriculum Change Request System, alongside articulation with any other departments impacted by the curriculum design change.

c. student assessment policies and processes

Changes to student assessment policies and processes are proposed through the MPH Curriculum Committee and discussed at full faculty meetings before approval. Outside the Department, input has typically been requested from UWF's Center for University Teaching, Learning, and Assessment (CUTLA) unit, as well as from UWF's Global Online unit to ensure any new assessment policies or processes are in line with university-promoted best practices. Beginning in Fall 2021, input will be sought from UWF's new Center for Global Online Learning and Development unit which is a restructured and enhanced combination of the services formerly provided by UWF's CUTLA and Global Online units.

d. admissions policies and/or decisions

Changes to admissions policies and/or decisions are proposed through the MPH Admission Committee and discussed at full faculty meetings before approval. The Department Chair or faculty members in the unit can also bring up recommendations for changes. In either case, recommendations for changes are discussed by the MPH Curriculum Committee and unit faculty before implementation. Outside the Department, final approval of any changes is next guided by Graduate School policies established by the University's Graduate Council, following academic regulations for the State of Florida University system.

e. faculty recruitment and promotion

Faculty recruitment is a critical process that ensures not only adequate and qualified personnel, but also a diverse complement. All faculty searches are conducted through an assembled Ad Hoc Search Committee. Ad Hoc Search Committees follow guidelines on faculty recruitment provided by Human Resources. The Chair seeks guidance from the faculty on venues for advertising positions and then coordinates these ads with Human Resources and the UKCOH Dean. Human Resources requires that at least one of the portals or platforms where the position advertisement is posted must be a minority-serving outlet, such as *Diverse Issues in Higher Education*.

Faculty promotion is guided by Departmental bylaws, the UKCOH Dean (with advice and votes from the College Personnel Committee), and the Provost and Senior Vice President of Academic Affairs, who receives recommendations from the University Personnel Committee.

The Chair proactively promotes faculty within and outside the Department throughout the year. Additionally, the Chair provides updates at each faculty meeting and/or via email on openings for college-wide and university-wide committee positions and regularly nominates faculty for all appropriate matches.

f. research and service activities

During on-campus interviews, applicants for faculty positions are scheduled for one-on-one meetings with the pre-award staff from the Research Administration and Engagement (RAE) unit. Research Administration and Engagement is the university-designated office which assists faculty in the following: 1) identifying and matching requests for proposals with the appropriate faculty based on research interests; 2) preparing and submitting sponsored research grants; and 3) assisting faculty with grant management once awarded, as well as grant close-out. Once hired, each faculty has an institutional account created to ping for funding opportunities in the faculty member's areas of research interest. RAE staff, in collaboration with leadership from the UKCOH, regularly conduct workshops to help new faculty with grant writing and navigating the grant submission processes for a myriad of funding agency types.

The Chair also proactively engages with the RAE unit to learn of relevant support for faculty research. New research support programs are shared with faculty via email and/or summarized during faculty meetings.

For service activities outside the university, the Chair and faculty members subscribe to the email announcements of various local community partners such as BRACE, the Florida Department of Health, faith-based organizations, and other health-related affiliates. Details are then forwarded around the department so all faculty are informed. Faculty in the Department of Public Health are also engaged in different community organizations where opportunities for services are announced and forwarded back to the Department for interested faculty.

Additionally, for service activities within the university, the Chair or individual faculty members may receive requests for participation on college-wide and university-wide committees. Faculty members are encouraged to discuss these opportunities with the Chair prior to commitment, especially if the faculty member is in the pre-tenure stage. Additionally, the Chair and the UKCOH Dean collaborate to identify meaningful opportunities for service for tenure-earning faculty to ensure that the pre-tenure faculty member is not overstretched.

- 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.

The following documentation related to this item is provided in the **A1** folder of the Electronic Resource File:

- Department of Public Health Bylaws
 - Faculty Handbook
 - Student Handbook
 - Chair Handbook
 - University Tenure and Promotion Guidelines
- 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.

The University of West Florida operates under a Collective Bargaining Agreement which provides for a shared governance framework. All faculty are evaluated annually by the Chair and the Dean of the UKCOH on their engagement with the university community. Further, UWF values and rewards faculty service in broad areas of the university community outside one's department. Direct links to university-published information on service-related recognition and award programs supported by UWF's leadership are as follows:

- <https://uwf.edu/academic-affairs/awards-recognition/list-of-awards--recognition> [maintained by Division of Academic Affairs]
- <https://uwf.edu/offices/human-resources/i-am-a/employee/erap/> [maintained by Human Resources]

For example, the Division of Academic Affairs sponsors an annual Distinguished Faculty Service Award for a faculty member who, while in the employment of the University of West Florida, has given outstanding service to the University and/or the community. Additionally, UWF's Human Resources unit administers service-related awards such as the President's Award for Leadership in Diversity.

Table A1.f summarizes full-time and adjunct faculty memberships and/or leadership positions on committees external to the unit of accreditation during the period of this Self-Study.

Table A1.f. Faculty Institutional Engagement Outside the Department of Public Health

Faculty Name	2017-2018	2018-2019	2019-2020	2020-2021	2021-2022
Denice Curtis (full-time)	UWF Honorary Awards and Recognition Committee UWF Institutional Review Board UWF Library Committee	UWF Honorary Awards and Recognition Committee UWF Institutional Review Board UKCOH Intellectual Property Committee	UKCOH Graduate Student Awards Committee UWF Honorary Awards and Recognition Committee UKCOH Strategic Planning Committee	UKCOH Graduate Student Awards Committee UKCOH Personnel Committee (Alternate) UKCOH Strategic Planning Committee	UKCOH Graduate Student Awards Committee
Wes Farr (full-time)	NA	NA	NA	UKCOH College Council UWF Institutional Review Board	UKCOH College Council UWF Institutional Review Board
Daudet Ilunga Tshiswaka (full-time)	UKCOH College Council UKCOH Resource Allocation Committee	UKCOH College Council UKCOH Resource Allocation Committee	UKCOH College Council UKCOH Curriculum Change Request Committee UKCOH High Impact Advisory Committee UKCOH Resource Allocation Committee	UKCOH Curriculum Change Request Committee UKCOH High Impact Advisory Committee	UKCOH Curriculum Change Request Committee UKCOH High Impact Advisory Committee School of Nursing, Assistant Professor Search Committee
Damaris Kinyoki (full-time)	NA	NA	NA	NA	NA
John Lanza (adjunct)	UKCOH Advisory Board	UKCOH Advisory Board	UKCOH Advisory Board	UKCOH Advisory Board	UKCOH Advisory Board

Justice Mbizo (full-time)	Academic Affairs, UKCOH Dean Search Committee Graduate Council President Council on Diversity and Inclusion UKCOH Personnel Committee University Professional Development Committee University Public Health Committee	Leadership, Enhancement, Activities & Development (LEAD): The Faculty Version President Council on Diversity and Inclusion UKCOH Personnel Committee University Professional Development Committee University Public Health Committee	President Council on Diversity and Inclusion UKCOH Graduate Admissions Assistant Search Committee UKCOH Internship Coordinator Search Committee University Professional Development Committee University Public Health Committee	President Council on Diversity and Inclusion UKCOH BSPH Proposal Development Committee University Professional Development Committee University Public Health Committee	Graduate Council, Chair President's Council on Diversity and Inclusion University Public Health Committee
Gregory Steele (full-time, Visiting)	NA	NA	NA	UKCOH BSPH Proposal Development Committee	University Space Planning Committee, Member
Melanie Sutton (full-time)	Leadership, Enhancement, Activities & Development (LEAD): The Faculty Version University Personnel Committee	UKCOH Bylaws Task Force	Graduate Council UKCOH Adjunct Onboarding Work Group UKCOH Bylaws Task Force UKCOH FTIC Task Force 7-Year Program Review Team for Anthropology (B.A., M.A.) and Maritime Studies (B.A.)	FACS Replacement Work Group UKCOH Adjunct Onboarding Work Group UKCOH FTIC Task Force 7-Year Program Review Team for Anthropology (B.A., M.A.) and Maritime Studies (B.A.)	FACS Replacement Work Group UKCOH Faculty Personnel Committee UKCOH FTIC Task Force

- 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.

During the most recent full academic year (2020-2021), faculty regularly interacted with each other using web conferencing software. Prior to COVID-19 pandemic, faculty members interacted via face-to-face meetings in Building 38, using web conferencing software when needed for full-time or adjunct faculty located off-site.

Faculty members regularly provide updates of any external committee work at faculty meetings. Additionally, the Chair shares updates on important developments in the college or university via email whenever necessary.

The following documentation related to this item is provided in the **A1** folder of the Electronic Resource File:

- Meeting minutes and attendee lists (e.g., for Faculty Meetings and Committee Meetings)

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

For **Criterion A1, Organization and Administrative Processes**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** There is broad engagement of unit faculty on key university governance committees. The Department is regularly well-represented on college and university-level committees, including serving in leadership roles. The Chair and Mentoring Committees advise new faculty, beginning in their first year of employment, to ensure they are aware of opportunities outside the unit and the expectations and importance of their engagement with these activities.
- **Weaknesses/Plans for Improvement:** During the 2020-2021 academic year, the Chair reached out to the UKCOH Dean regarding suggested practices going forward to ensure sufficient slots become available on committees external to the Department. For example, the UKCOH leadership could encourage committee compositions that support less redundancy in terms of the same faculty member not serving on more than one college-wide and/or university-wide committee in a given academic year. This guidance would open up more opportunities for junior faculty earlier in their careers to participate on committees external to the Department.

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.

Student engagement in an academic program is challenging for any program and remains so for the UWF MPH Program as a 100% online program. The majority of our students are adults who have work schedules and family obligations that make it sometimes difficult to schedule events, especially during daytime hours. Thus, the program has maintained and nurtured a student organization known as the Student Association for Public Health (SAPH) to serve as mechanism for students' engagement. Historically, however, the level of engagement and activity level tends to fluctuate. SAPH at UWF is comprised of students from the MPH Program and charged with the following mission:

- The mission of SAPH is to prepare and educate leaders in public health through service to the community, to serve as a platform for communicating with students and among students in the MPH Program at UWF, to create an atmosphere of camaraderie among students, and to provide students with an avenue for performing public service in the health care and public health communities.

Officers and members of SAPH are invited to participate on Departmental committees as opportunities arise and when feasible.

Table A3.a additionally summarizes student members of program committees over the last three years, as well as the upcoming academic year.

Table A3.a. Student Members of Program Committees

Committee Name	2018-2019	2019-2020	2020-2021	2021-2022
MPH Curriculum Committee Membership	Rose Belony	Rose Belony	Bridgette Robinson	Elizabeth Ramsamooj
Workforce Development & Community Outreach Committee Membership	NA (position did not exist)	NA (position did not exist)	Logan Goodson	Sarah Green
MPH Accreditation & Programmatic Assessment Committee	NA (not open to students)	NA (not open to students)	NA (not open to students)	Elizabeth Ramsamooj
Search Committees	Rose Belony (Position: Office Manager) Michelle Bellanova (Position: Visiting Lecturer) Michelle Bellanova (Position: Lecturer in Public Health)	Tasnim Mridha (Position: Assistant Professor)	NA (no active searches)	NA (no active searches)

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

For **Criterion A3, Student Engagement**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** All MPH students are afforded an opportunity to participate in policy making and decision making through UWF's Student Association for Public Health. In addition, students have opportunities to serve on committees within the Department.
- **Weaknesses/Plans for Improvement:** We continue to explore innovative solutions to create opportunities and avenues by which students can still be engaged using teleconferencing technologies. We are spearheading new plans to invite students who graduated from UWF to spearhead efforts by leveraging their connections with the university SGA. Students that have been offered but then turned down invitations for committee participation during this Self-Study period have indicated their primary concern is lack of time due to balancing work and school constraints. The Department began to address this concern beginning in Fall 2021 by encouraging support for web-conferencing options during face-to-face meetings of the Student Association for Public Health (SAPH). In line with this recommendation, the first meeting of SAPH for the 2021-2022 academic year was conducted entirely online on September 21, 2021, with an attendance of over 70 students logging in from across the country and overseas.

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) A one -to three-page document that, at a minimum, presents the program's vision, mission, goals and values.

Vision:

Healthy communities for all people through innovative competency-based education, translational research, and service.

Mission:

The mission of the Department of Public Health is to empower a generation of public health professionals with skills, knowledge, and competencies to contribute creatively and ethically to education, research, and service to promote public health and disease prevention. The program fosters community engagement through education, service, and public health research.

Goals and Objectives:

This mission is fostered in an environment that provides quality academic education and structured professional experiences to emphasize engagement in community service and the generation, dissemination, and integration of scientific knowledge into public health practice. The following goals and objectives provide the framework for promoting the mission and goals of the MPH Program by emphasizing the recruitment of a committed pool of MPH candidates to a learning environment that supports diversity and individual potential, with service aligned to community needs, teaching responsive to continuous quality improvement, and research activities engaging both faculty and students.

- **Goal #1 - Education:** Train and equip future generations of the public health workforce with professional competencies to address the health challenges of the 21st century and beyond.
 1. Objective 1: Recruit academically prepared students.
 2. Objective 2: Prepare students to acquire competencies in public health.
 3. Objective 3: Evaluate the effectiveness of the MPH Program curriculum through continuous program assessment.
- **Goal #2 - Research:** Promote faculty, student, and community engagement in public health research to improve and sustain health locally, nationally, and globally.

1. Objective 1: Support engagement of program faculty in scholarly activities following criteria established in program tenure and promotion guidelines.
 2. Objective 2: Strive to increase extramural funding associated with core faculty scholarly activities.
 3. Objective 3: Increase student involvement in faculty research and community-based participatory research.
- **Goal #3 - Service:** Promote a culture of engagement to serve Northwest Florida and beyond through outreach, education, and community collaborations.
 1. Objective 1: Develop partnerships with health agencies, community-based organizations, health care institutions, and military communities to facilitate reciprocal learning and the application of scholarship that contributes to improving population health.
 2. Objective 2: Strive to promote and increase experiential learning opportunities for students to provide service to community-based and governmental organizations in their geographical areas.
 3. Objective 3: Increase opportunities for community stakeholders to contribute to the mission and goals of the MPH Program.
 - **Goal #4 - Faculty and Staff:** Recruit, retain, and support faculty and staff in an environment that emphasizes professional development and excellence in teaching, research, and service.
 1. Objective 1: Recruit, promote, and retain high-quality faculty that supports the mission, goals, and values of the program.
 2. Objective 2: Recruit and retain a qualified and productive staff that supports the mission, goals, and values of the program.
 - **Goal #5 - Diversity:** Provide and promote an environment that emphasizes diversity, inclusion, and respect for all persons and communities.
 1. Objective 1: Recruit, promote, and retain a diverse faculty who support the mission, goals, and values of the program.
 2. Objective 2: Recruit, promote, and retain a diverse staff who support the mission, goals, and values of the program.
 3. Objective 3: Recruit, retain, and graduate a diverse student population who support the mission, goals, and values of the program.

Values:

The values for the MPH Program evolved from the University's institutional-level values and those of the UKCOH. All faculty, staff, and students in the Department of Public Health are expected to employ these values in their teaching, research, and service. These values are reinforced during routine interaction with administration, students, faculty, and adjuncts teaching in the Department of Public Health. In addition, these values are integrated throughout the fabric of the Department of Public Health's teaching, research, and service initiatives.

1. **Integrity:** Promote professional and ethical behaviors among our faculty, staff, and students in the pursuit of knowledge through intellectual inquiry and discourse.
2. **Excellence:** Cultivate an environment that encourages and supports high standards in teaching, scholarship, and practice.

3. **Creativity and Innovation:** Provide opportunities to imagine, inspire, and generate solutions to existing and anticipated needs and challenges.
 4. **Collaboration:** Engage with other UWF units and community partners in providing quality education, research, and service opportunities in population health sciences.
 5. **Stewardship:** Participate responsibly in managing, utilizing, and protecting our resources and the environment.
 6. **Caring:** Promote a dynamic learning environment that encourages development of individual potential.
 7. **Diversity and Inclusion:** Cultivate a welcoming and respecting workspace that celebrates the differences and similarities among people and ideas.
- 2) If applicable, a program-specific strategic plan or other comparable document.

Challenges faced during the COVID-19 pandemic forced the issue of continuity of operations related to data tracking to the forefront of discussions for the Chair and members of the Department's MPH Accreditation & Programmatic Assessment Committee during the previous and current academic years. In addition to impediments resulting from access to some databases during campus closures, faculty faced licensing issues associated with off-site access to networks and tools, and significant delays (i.e., over multiple semesters) for key computer repairs due to supply chain issues. The Department had also not previously addressed continuity planning in the event of multiple senior faculty simultaneously experiencing health issues, navigating bereavement-related challenges, and/or medical emergencies at the same time these and other faculty were diverted to address other significant time-limiting constraints (e.g., eldercare, childcare, and travel-based restrictions).

In response to these discussions, formalized continuity planning was undertaken in Summer 2021 by the MPH Accreditation & Programmatic Assessment Committee along the following two directions:

- First, the template for a new **CEPH Accreditation Faculty Handbook** inside Canvas has been started that will serve as a teaching guide and data warehouse going forward in support of all procedures and survey deployments related to CEPH accreditation. A primary objective of the portal will be to ensure continuity of data-driven operations from any geographic location, by any faculty member in the unit and/or UWF staff member, if needed.
- Secondly, a new **Continuity of Operations for Survey Deployment and Reporting** technical report has been created to summarize the administration and scheduling responsibilities for all survey instruments used by the Department of Public Health in support of assessment planning and departmental committee work. Documentation is now available for the following instruments:
 - MPH Program Current Students Feedback Survey
 - MPH Graduate 2016 Criteria Competency Self-Assessment Survey
 - MPH Employer Competency Assessment Survey
 - State University System Student Assessment of Instruction Survey

The report links each survey to the subpopulations to be assessed and outlines the specific responsibilities for contact list maintenance, data analysis, data interpretation, and scheduled administration. Additionally, documentation has been created to the granularity of each individual survey question on each of the four instruments named above, in terms of committee responsibility for data interpretation and reporting within specific CEPH Self-Study areas. Teaching resources related to this technical report are currently under development for inclusion in the **CEPH Accreditation Faculty Handbook** described above.

The following documentation related to this item is provided in the **B1** folder of the Electronic Resource File:

- Continuity of Operations for Survey Deployment and Reporting (technical report)

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

For **Criterion B1, Guiding Statements**, the MPH Program acknowledges the following strengths, weaknesses, and plans for improvement:

- **Strengths:** The vision statement is aspirational and outward looking to remind our faculty and students of the role we all play in a larger society. The MPH Program faculty meet annually to review the program's mission and goals. These meetings are also used to ensure that all new faculty have the opportunity to contribute to a shared vision of the program. These meetings additionally allow all faculty to learn about changes in the mission and vision directions for the UKCOH or University that warrant consideration for adjusting the MPH Program's mission and goals in future academic years.
- **Weaknesses:** The most recent 2021-2022 academic year presented some unique challenges for face-to-face engagement with external stakeholders compared to previous accreditation cycles. To be more prepared for continuity of operations in this regard in future accreditation cycles, going forward the Department will conduct at least one meeting per year with external stakeholders via web conferencing.
- **Plans for Improvement:** As noted above, the MPH Accreditation & Programmatic Assessment Committee will be focused on continuity of operations planning for the coming academic year. In addition to putting in place resources for future Self-Study reporting as noted in the previous section, the Committee will also be developing an additional set of guides to ensure continuity of data warehousing, interpretation, and reporting to address the annual reporting requirements to CEPH.

B2. Graduation Rates

The program collects and analyzes graduation rate data for each degree offered (eg, 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 the unit of accreditation. See Template B2-1.

For Template B2-1 below, the expected maximum time to graduate with an MPH degree at UWF is 6 years.

Template B2-1: Degree Completion of MPH Students, By Cohorts Entering Between 2014-2015 and 2020-2021								
	Cohort of Students	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
2014-2015	# Students entered	56						
	# Students withdrew, dropped, etc.	0						
	# Students graduated	1						
	Cumulative graduation rate	2%						
2015-2016	# Students entered	55	79					
	# Students withdrew, dropped, etc.	3	0					
	# Students graduated	19	2					
	Cumulative graduation rate	36%	3%					
2016-2017	# Students entered	33	77	61				
	# Students withdrew, dropped, etc.	2	17	0				
	# Students graduated	16	20	0				
	Cumulative graduation rate	64%	28%	0%				
2017-2018	# Students entered	15	40	61	72			
	# Students withdrew, dropped, etc.	0	5	10	0			
	# Students graduated	7	19	15	0			
	Cumulative graduation rate	77%	52%	25%	0%			
2018-2019	# Students entered	8	16	36	72	66		
	# Students withdrew, dropped, etc.	3	2	3	11	0		
	# Students graduated	4	8	15	14	0		
	Cumulative graduation rate	84%	62%	49%	19%	0%		
2019-2020	# Students entered	1	6	18	47	66	76	
	# Students withdrew, dropped, etc.	1	2	4	11	8	1	
	# Students graduated	0	2	8	21	18	0	
	Cumulative graduation rate	84%	65%	62%	49%	27%	0%	
2020-2021	# Students entered	-	2	6	15	40	75	106
	# Students withdrew, dropped, etc.	-	0	3	5	4	11	0
	# Students graduated	-	1	1	5	16	19	1
	Cumulative graduation rate	84%	66%	64%	56%	52%	25%	0.01%

Source: Tableau Report on Degrees Awarded by Academic Term; MPH Student Tracking Database

- 2) Data on doctoral student progression in the format of Template B2-2.

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.

Of note in Template B2-1 is that while the 2014-2015 cohort exceeds the 70% required graduation threshold, the cohorts that follow include some higher withdrawal rates than we normally observe. The 2015-2016 academic year in particular was impacted by a state-wide performance funding metric implementation in which state universities across Florida initiated a new streamlined pathway for graduate admissions to programs of strategic emphasis. This pathway provided students with complementary tuition for two courses upon admission.

While successful in recruiting students to programs of strategic emphasis, some students admitted under this pathway were not able to maintain their academic commitment to the program after one year. Recognizing this challenge, the Department has worked to expand communication on expectations for academic progress with students using the Public Health Student Learning Community portal in Canvas and targeted emails sent from the Chair to students.

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

For **Criterion B2, Graduation Rates**, the MPH Program acknowledges the following strengths, weaknesses, and plans for improvement:

- **Strengths:** The program carefully monitors factors that impact students graduating on-time and works with relevant units on campus to identify issues that may require additional steps to ensure students stay on target.
- **Weaknesses:** We have noted an unusual dropout rate in academic year 2015-2016 impacting the projected 6-year graduation rate. While there are still three students actively engaged in the program, we recognize that for this academic year, we will fall short of the graduation threshold by 2%. As noted above, withdrawal rates beginning with the 2015-2016 cohort are of concern to the MPH Program, as well as similar larger withdrawal rates in the academic years impacted by the COVID-19 pandemic.
- **Plans for Improvement:** To address concerns with compliance with the 70% required graduation threshold in upcoming cohorts, the following plans for improvement are being undertaken:
 - First, of note is that UWF defines full-time status for graduate students as 6 semester credit hours, or two courses, per semester. From historical data the MPH Program knows that its graduation rate can be improved by proactively encouraging students to take three or more courses per semester. This suggestion is currently communicated to students upon admission to the program by the MPH Program Coordinator.
 - We will continue to monitor graduation rates and increase the number of foundational and required courses offered each semester. This will ensure that students progress towards graduation much more quickly and keep them motivated to reach crucial benchmarks as part of their professional development.
 - Finally, the MPH Program Coordinator, working with the Academic Advisor for MPH students, will conduct outreach to students who withdrew from the program for those cohorts where the number of withdrawals is 10 or more to identify common themes. This will help to ensure that fewer students drop out and stay motivated to complete the degree.

B3. Post-Graduation Outcomes

The program collects and analyzes data on graduates' employment or enrollment in further education post-graduation, for each degree offered (eg, 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 B3-1.

Template B3-1: Three Year Post-Graduation Outcome			
Post-Graduation Outcomes	2017-2018 Number and percentage [N=41]	2018-2019 Number and percentage [N=42]	2019-2020 Number and percentage [N=43]
Employed	40 (97.6%)	39 (92.9%)	39 (90.7%)
Continuing education/training (not employed)	0 (0%)	1 (2.4%)	1 (2.3%)
Not seeking employment or not seeking additional education by choice	0 (0%)	0 (0%)	0
Actively seeking employment or enrollment in further education	0 (0%)	1 (2.4%)	3 (7.0%)
Unknown	1 (2.4%)	1 (2.4%)	0
Total graduates (known + unknown)	41 (100%)	42 (100%)	43 (100%)

Source: MPH Student Tracking Database

- 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 program has always done well in regards to the post-graduation metric, with significantly higher rates of students employed. The last three academic years, the MPH Program exceeded the 80% threshold for students employed or continuing in their education post-graduation. Most importantly, a significant number of our graduates are working in the public health field, including community-based organizations with a focus on health and wellness.

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

For **Criterion B3, Post-Graduation Outcomes**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** During the period of the Self-Study, MPH graduates have consistently been employed in diverse settings within public health and the broader healthcare industry or continued in additional professional education programs such as medicine, pharmacy, physician assistant, veterinary medicine, or doctoral programs.
- **Weaknesses/Plans for Improvement:** While there are no deficiencies in the post-graduation metric, we will continue to promote the monthly webinars hosted by SAPH to ensure students are connected to the Department and made aware of public health opportunities in the regional area and beyond.

Additionally, following up on the collaboration the Chair initiated in 2017 with the Career Development and Community Engagement unit on campus to develop a Careers in Public Health brochure (see the brochure in the ERF), the MPH Program will reach out to alumni to showcase their post-graduation accomplishments in creative ways going forward.

Finally, staff in the Career Development and Community Engagement unit now provide monthly updates to the Department to track how many students and alumni utilize each of their services. The Workforce Development & Community Outreach Committee has subsequently been charged with analysis going forward to alert the Chair regarding trends associated with service utilization that may be impacting post-graduation outcomes.

B4. Alumni Perceptions of Curricular Effectiveness

For each degree offered, the program collects information on alumni perceptions of their own success in achieving defined competencies and of their ability to apply these competencies in their post-graduation placements.

The program defines qualitative and/or quantitative methods designed to maximize response rates and provide useful information. Data from recent graduates within the last five years are typically most useful, as distal graduates may not have completed the curriculum that is currently offered.

- 1) Summarize the findings of alumni self-assessment of success in achieving competencies and ability to apply competencies after graduation.

An early version of an alumni-based survey was administered in 2015 for the 2014-2015 AY, prior to the full suite of curricula changes undertaken to address competency coverage in alignment with the 2016 Criteria. Results from this administration are thus not presented here.

A new **MPH Graduate 2016 Criteria Competency Self-Assessment Survey** was created to gather annual feedback from alumni of the program going forward. This instrument contains items related to students' levels of confidence in achieving competencies and their ability to apply these competencies in public health practice. In addition to specially ranking their level of confidence with each of the 22 competencies from the 2016 Criteria, students are also solicited for comments and suggestions related to any missing skills or course content.

The survey was first administered in Spring and Summer 2021 and sent to graduates from the last several academic years. The responding students were distributed across calendar years as follows:

- 2018 – 6 students responded
- 2019 – 13 students responded
- 2020 – 20 students responded

Table B4.a provides a summary of these students' mean ratings by competency domain, while Table B4.b provides mean ratings expanded across all 22 competencies.

Table B4.a. Alumni Responses to Level of MPH Education Preparation by Domain

Question: Overall, how well do you feel your UWF MPH education prepared you for public health practice in the following domains?				
Response values: 1=Not Confident, 2=Somewhat Not Confident, 3=Neither, 4=Somewhat Confident, and 5=Very Confident				
Domain	Question #	Mean Ratings [N=120]		
		2018 [n=6]	2019 [n=13]	2020 [n=20]
Evidence-based approaches to public health	Q3_1	4.3	4.8	4.7
Leadership in public health field	Q3_2	4.5	4.6	4.6
Communication for public health practice	Q3_3	4.5	4.9	4.7
Systems thinking	Q3_4	4.3	4.5	4.3
Interprofessional practice	Q3_5	4.3	4.9	4.7

Source: MPH Graduate 2016 Criteria Competency Self-Assessment Survey | **Administration Date:** Spring-Summer 2021
Response Rate: 33%

Table B4.b. Alumni Responses to Level of MPH Education Preparation by Competency

Question: Beginning in Fall 2016, all MPH graduates from programs accredited by the Council on Education for Public Health are required to demonstrate a set of foundational core public health competencies. During your MPH studies, you completed courses that equipped you with these critical workforce competencies. Using the scale below, how confident do you feel about your preparedness on each of the items?				
Response values: 1=Not Confident, 2=Somewhat Not Confident, 3=Neither, 4=Somewhat Confident, and 5=Very Confident				
Competency	Question #	Mean Ratings [N=120]		
		2018 [n=6]	2019 [n=13]	2020 [n=20]
Evidence-based Approaches to Public Health				
1. Apply epidemiological methods to the breadth of settings and situations in public health practice	Q2_1	4.2	4.5	4.5
2. Select quantitative and qualitative data collection methods appropriate for a given public health context	Q2_2	3.8	4.6	4.2
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate	Q2_3	3.2	3.9	4.1
4. Interpret results of data analysis for public health research, policy or practice	Q2_4	4.2	4.7	4.8
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	Q2_5	4.7	4.5	4.2
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	Q2_6	3.8	4.8	4.5
Planning & Management to Promote Health				
7. Assess population needs, assets and capacities that affect communities' health	Q2_7	4.2	4.9	4.8
8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs	Q2_8	4.2	4.7	4.6
9. Design a population-based policy, program, project or intervention	Q2_9	4.0	4.5	4.6
10. Explain basic principles and tools of budget and resource management	Q2_10	3.8	4.1	3.8
11. Select methods to evaluate public health programs	Q2_11	4.2	4.4	4.3
Policy in Public Health				
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence	Q2_12	4.0	4.2	4.5
13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes	Q2_13	3.7	4.5	4.5
14. Advocate for political, social or economic policies and programs that will improve health in diverse populations	Q2_14	3.2	4.2	4.5
15. Evaluate policies for their impact on public health and health equity	Q2_15	3.7	4.5	4.5
Leadership				
16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making	Q2_16	4.2	4.6	4.6
17. Apply negotiation and mediation skills to address organizational or community challenges	Q2_17	4.0	4.2	4.2
Communication				

18. Select communication strategies for different audiences and sectors	Q2_18	4.0	4.7	4.8
19. Communicate audience-appropriate public health content, both in writing and through oral presentation	Q2_19	4.2	4.8	4.8
20. Describe the importance of cultural competence in communicating public health content	Q2_20	4.0	4.9	4.8
Interprofessional Practice				
21. Perform effectively on interprofessional teams	Q2_21	4.3	4.9	5.0
Systems Thinking				
22. Apply systems thinking tools to a public health issue	Q2_22	4.5	4.8	4.6

Source: MPH Graduate 2016 Criteria Competency Self-Assessment Survey | Administration Date: Spring-Summer 2021
Response Rate: 33%

In addition to these quantitative data, students also provided invaluable feedback regarding areas that they believe would be beneficial to their practice of public health post-graduation. Specifically, students were asked to provide comments in response to the question:

- Thinking about your MPH training and current work, what courses or skills do you think would be valuable to your career in public health or health field that were not offered in the program?

The following are some of the students' comments:

- “Leadership development, MAPP, grant management, local regulations, regulatory authority of each sector of state government (not exclusively DOH)”*
- “A more comprehensive review of all the known ways a public health education can be used”*
- “I would love to opportunity to learn more about leadership within public health. Also it would be great to incorporate tools to foster virtual partnerships and trainings in your education plan.”*

2) Provide full documentation of the methodology and findings from alumni data collection.

Of note in Table B4.a was the lowest mean rating for the **Systems thinking** domain, across all three years. This domain also had the lowest mean rating across all five domains in the most recent full year of data in 2020. This result was not unanticipated as the implementation of this domain has evolved since 2018 to address constructive feedback from students on course **State University System Student Assessment of Instruction Surveys**. Additionally, the Chair has provided one-on-one support to faculty engaged with implementing this competency and determining best practices.

Drilling down on specific competencies within Table B4.b, the lowest mean ratings in 2020 were for Competency 10 (budgeting and resource management at 3.8) and Competency 3 (biostatistics at 4.1). Additionally, Competency 2 (quantitative and qualitative data collection methods), Competency 5 (regulatory systems), and Competency 17 (negotiation and mediation skills) were tied with low ratings of 4.2. With respect to these results, mastery of these skills has been a recognized challenge when teaching online, especially when instructors with different teaching styles have been assigned to teach the course across several academic years. In light of this, the Chair is currently working with the MPH Curriculum Committee and instructors teaching the impacted courses to research organizations such as the Association for Prevention Teaching and Research (APTR) to determine if one or more standardized modules are available to include with the course(s) to provide a consistent interface for some key course topics.

- 3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

For **Criterion B4, Alumni Perceptions of Curricular Effectiveness**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** Although the sample sizes are smaller for 2018 and 2019 compared to 2020, the quantitative results across this data set indicate mean confidence ratings of MPH graduates across 20 out of 22 competencies trending upward from 2018 to 2020.
- **Weaknesses:** The quantitative results across this data set indicate mean confidence ratings of MPH graduates across 1 out of 22 competencies trending downward from 2018 to 2020 (i.e., Competency 5-regulatory systems) or remaining essentially flat for 1 out of 22 competencies (i.e., Competency 10-budgeting and resource management). Additionally, the limitations of using a single survey deployment to capture multiple years of data compared to an annual administration included a lower response rate from earlier years.
- **Plans for Improvement:** Now that the Department has moved into the final stages of implementing the APEX and ILE requirements of the 2016 Criteria, a more refined focus of attention will be undertaken by the Chair and the MPH Curriculum Committee for sharing best practices for online teaching that have evolved across 2018-2021.

Additionally, comments and suggestions from students indicate that the MPH Program has some areas where the program can improve in terms of providing resources to students on various topics (e.g., leadership development). The complete list of topics suggested by students will be considered for review and possible actions by the MPH Curriculum Committee in the coming academic year.

B5. Defining Evaluation Practices

The program defines appropriate evaluation methods and measures that allow the program to determine its effectiveness in advancing its mission and goals. The evaluation plan is ongoing, systematic and well-documented. The chosen evaluation methods and measures must track the program's progress in 1) advancing the field of public health (addressing instruction, scholarship and service) and 2) promoting student success.

- 1) Present an evaluation plan that, at a minimum, lists the program's evaluation measures, methods and parties responsible for review. See Template B5-1.

Template B5-1: Evaluation Plan		
Evaluation measures	Identify data source(s) and describe how raw data are analyzed and presented for decision making*	Responsibility for review
Goal #1 - Education: Train and equip future generations of the public health workforce with professional competencies to address the health challenges of the 21st century and beyond.		
Admitted students with standardized Graduate Admission Test scores at the national average or higher of students admitted to schools and programs of public health [Objective 1]	MPH Program Coordinator provides updates to Chair based on MPH Student Tracking Database	Chair reviews tracking data and makes recommendations to the MPH Admission Committee as needed
Entering class with degrees in Public Health and other health-related majors [Objective 1]	MPH Program Coordinator provides updates to Chair based on MPH Student Tracking Database	Chair reviews tracking data and makes recommendations to the MPH Admission Committee as needed
Courses that include projects, case-study analysis, or interprofessional simulations [Objective 2]	Chair regularly reviews course syllabi from foundational and concentration courses	Chair makes recommendations to MPH Curriculum Committee and MPH Accreditation & Programmatic Assessment Committee as needed
Faculty participation in the instruction-related training (e.g., CUTLA, Global Online, Coursera, etc.) or other professional development workshops to improve teaching and programmatic assessment [Objective 3]	Chair reviews Faculty Annual Evaluation Report Database	Chair makes recommendations to individual faculty members and relevant Mentorship Committee as needed
Students graduate on-time with skills aligned to post-graduation employment and success [Objective 3]	Chair periodically reviews courses to identify those in need of revision with respect to course description, SLOs, topic relevancy, and assessment instruments	Chair presents results of course review to individual faculty members, MPH Curriculum Committee, and/or MPH Accreditation & Programmatic Assessment Committee as needed
	MPH Program Coordinator reports updates to Chair based on: <ul style="list-style-type: none"> • Tableau Report on Degrees Awarded by Academic Term and MPH Student Tracking Database • email correspondence with graduates and research on alumni network on LinkedIn • student progress and scores on Comprehensive Exam in Canvas 	Chair reviews updates for issues related to on-time graduation and post-graduation employment and success and discusses at faculty meetings as needed

	<p>MPH Accreditation & Programmatic Assessment Committee provides updates to Chair on:</p> <ul style="list-style-type: none"> • assignment of “G” (incomplete) grades in PHC6946 • related items from MPH Graduate 2016 Criteria Competency Self-Assessment Survey and MPH Employer Competency Assessment Survey 	
<p>Goal # 2 - Research: Promote faculty, student, and community engagement in public health research to improve and sustain health locally, nationally, and globally.</p>		
<p>Faculty participation in dissemination of research findings through scientific organizations, professional conferences, and publications in a peer-reviewed journal. [Objective 1]</p>	<p>Chair reviews Faculty Annual Evaluation Report Database</p>	<p>Chair meets with faculty and relevant Mentorship Committee to make a plan for areas of improvement as needed</p>
<p>Internal or extramural funding proposals submitted by primary instructional faculty. [Objective 2]</p>	<p>Chair reviews Faculty Annual Evaluation Report Database</p>	<p>Chair meets with faculty and relevant Mentorship Committee to make a plan for areas of improvement as needed</p>
<p>Faculty participating in collaborative research projects with local, regional, state, national, or international partners. [Objective 3]</p>	<p>Chair reviews Faculty Annual Evaluation Report Database</p>	<p>Chair makes recommendations at faculty meetings regarding the importance of these activities</p>
<p>Students participating in faculty-directed research or community-based participatory research. [Objective 3]</p>	<p>Chair reviews Faculty Annual Evaluation Report Database</p>	<p>Chair makes recommendations at faculty meetings regarding the importance of engaging students within these activities</p>
<p>Goal #3 - Service: Promote a culture of engagement to serve Northwest Florida and beyond through outreach, education, and community collaborations.</p>		
<p>Faculty collaboration with local, regional and state health agencies, non-profit organizations, and healthcare institutions on community health improvement projects. [Objective 1]</p>	<p>Chair reviews Faculty Annual Evaluation Report Database</p>	<p>Chair makes recommendations to faculty regarding seeking opportunities</p>
<p>Workforce development training opportunities that address areas of critical need in public health in the Florida Panhandle and surrounding regions. [Objective 1]</p>	<p>Chair reviews Faculty Annual Evaluation Report Database</p> <p>Workforce Development & Community Outreach Committee provides updates at faculty meetings</p> <p>MPH Accreditation & Programmatic Assessment Committee provides updates to Chair based on related items from MPH Employer Competency Assessment Survey</p>	<p>Chair makes recommendations to Workforce Development & Community Outreach Committee regarding opportunities and employer interests</p>
<p>Students participating in faculty-directed service or in volunteer service activities in</p>	<p>Chair reviews Faculty Annual Evaluation Report Database to complete the departmental template for the Annual Community Engagement Report</p>	<p>Chair meets with Faculty Advisor for Student Association for Public Health (SAPH) as needed to promote activities and share information about</p>

the community where they reside. [Objective 2]	maintained by the Community Engagement unit of the Division of Academic Engagement and Student Affairs	upcoming events and opportunities for SAPH engagement
Formal community affiliations agreements entered into by the program to facilitate faculty research and technical support, while promoting student experiential learning and practicum experiences. [Objectives 2 and 3]	Chair reviews Student Internship and Affiliation Agreements Database maintained by the Office of the Provost	Chair and MPH Program Coordinator review to plan or expand stakeholder and student experiential learning opportunities as needed
Stakeholder engagement activities, including membership on governance committees, providing internships sites and evaluation of internship students, assessment for workforce development needs, and student career mentoring. [Objective 3]	MPH Program Coordinator maintains Preceptor Practicum Evaluation Forms	Chair meets with MPH Program Coordinator to discuss feedback on Preceptor Practicum Evaluation Forms as needed
	Chair reviews the membership roster for the UKCOH Advisory Board	Chair makes recommendations to UKCOH Dean of key community constituents in populations to invite to the Advisory Board
	Chair gathers input from stakeholders during meetings of the UKCOH Advisory Board MPH Accreditation & Programmatic Assessment Committee provides updates to Chair based on related items from MPH Employer Competency Assessment Survey and MPH Program Current Students Feedback Survey	Chair forwards workforce development needs identified by the UKCOH Advisory Board, MPH Employer Competency Assessment Survey , and MPH Program Current Students Feedback Survey to the Workforce Development & Community Outreach Committee
	MPH Program Coordinator maintains Department of Public Health website and digital form soliciting mentors Chair maintains Public Health Alumni and Friends Mentor Network List based on completed forms	Chair makes student recommendations to members of Public Health Alumni and Friends Mentor Network List
Goal #4 - Faculty and Staff: Recruit, retain, and support faculty and staff in an environment that emphasizes professional development and excellence in teaching, research, and service.		
Faculty with formal training in public health or a related field experience in public health practice, or teaching experience in public health. [Objective 1]	Chair reviews SACSCOC Faculty Credentials Database	Chair meets with faculty member, UKCOH Dean, and the Office of Academic Affairs to discuss as needed
Primary instructional faculty who receives a satisfactory rating for progress toward tenure and promotion or sustained performance evaluation from the Department Chair on the annual evaluation. [Objective 1]	Chair reviews Faculty Annual Evaluation Report Database	Chair meets with faculty member and UKCOH Dean to discuss as needed
Faculty who received funding for external professional development annually. [Objective 1]	Chair reviews Faculty Annual Evaluation Report Database and UKCOH RAC Travel Fund Report	Chair meets with UKCOH Dean to request additional support and provide rationale/justifications if needed

Staff participation in professional development training each academic year. [Objective 2]	Chair reviews UWF SCOOP Training Database	Chair meets with UKCOH Dean or representative and staff member to discuss progress as needed
Goal #5 - Diversity: Provide and promote an environment that emphasizes diversity, inclusion, and respect for all persons and communities.		
Faculty and staff promoting an environment that emphasizes diversity, inclusion, and respect for all persons and communities. [Objectives 1 and 2]	Chair maintains and reviews Department Personnel Database	Chair presents review to UKCOH Dean during staff and faculty searches Chair presents to Search Committees
Student and graduate diversity, participation in inclusion, and respect for all persons and communities. [Objective 3]	MPH Program Coordinator provides summary report to Chair from Tableau Report on Graduate Admissions	Chair and MPH Program Coordinator review summary report and present to MPH Admission Committee
	MPH Accreditation & Programmatic Assessment Committee provides updates to Chair based on related items from MPH Program Current Students Feedback Survey	Chair reviews updates from MPH Accreditation & Programmatic Assessment Committee and discusses issues at faculty meetings as needed
	Chair reviews State University System Student Assessment of Instruction evaluations of teaching within the Faculty Annual Evaluation Report Database for related items	Chair meets with faculty member to discuss as needed

The following documentation related to this item is provided in the **B5** folder of the Electronic Resource File:

- MPH Program Current Students Feedback Survey
- MPH Graduate 2016 Criteria Competency Self-Assessment Survey
- MPH Employer Competency Assessment Survey
- State University System Student Assessment of Instruction Survey

2) Briefly describe how the chosen evaluation methods and measures track the program's progress in advancing the field of public health (including instruction, scholarship and service) and promoting student success.

First and foremost, the chosen evaluation methods and measures used to track the MPH Program's success align with the Goals and Objectives for the MPH Program that were developed by the MPH faculty over several faculty retreats.

Secondly, the Department is steadfast in its commitment to developing and delivering high-quality online education and relevant practicum experiences that provide each student with the skills needed to address the complex public health problems faced nationally and globally, as well as in their immediate local communities. Along these lines, evaluation methods to track student engagement are a priority in 4 out of 5 of the MPH Program goals, with the only exception being Goal 4 (focused on faculty and staff only).

Finally, the current suite of evaluation measures and proposed data tracking and review responsibilities has been designed to balance the professional development needs of newer, untenured faculty that may be time-limited in their first few semesters while launching their research programs, teaching online for the first time, adjusting to a 3-3 teaching load that may include new course preparations for the first 1-2 years, and becoming acclimated to the community engagement possibilities within the Northwest Florida geographic region.

- 3) Provide evidence of implementation of the plan described in Template B5-1. Evidence may include reports or data summaries prepared for review, minutes of meetings at which results were discussed, etc. Evidence must document examination of progress and impact on both public health as a field and student success.

The following documentation related to this item is provided in the Electronic Resource File:

- Meeting minutes for faculty meetings and retreats

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

For **Criterion B5, Defining Evaluation Practices**, the MPH Program acknowledges the following strengths, weaknesses, and plans for improvement:

- **Strengths:** The MPH Program has a robust set of data sources to support program evaluation and, as noted in Section B1, a new written plan for continuity of operations related to survey deployment and reporting both on and off-campus going forward. This new plan empowers the Chairs and members of the Workforce Development & Community Outreach Committee and the MPH Curriculum Committee to work alongside the Department Chair and MPH Accreditation & Programmatic Assessment Committee throughout the year on goal attainment and associated documentation within the new Canvas-structured **CEPH Accreditation Faculty Handbook**.
- **Weaknesses:** While the program has delegated specific tasks for program evaluation across its committee assignments, during the course of the development of the Self-Study over several semesters impacted by the COVID-19 pandemic, technical issues with off-site deployment of surveys and associated data warehousing were encountered. While resolved, these challenges also contributed to a delay in the scheduling of the annual faculty retreat where development of new subgoals for the next 1-3 years based on the Self-Study was an anticipated priority.
- **Plans for Improvement:** With the opening of the campus for the 2020-2021 academic year and new departmental committee assignments in place, faculty of the MPH Program are already moving forward with subgoal planning within their assigned committees. Additionally, the Chair has scheduled a series of mini-retreat themed meetings throughout the Fall semester in place of the all-day retreat in anticipation of finalizing strategic planning for the next 1-3 years by the end of the Fall term.

B6. Use of Evaluation Data

The program engages in regular, substantive review of all evaluation findings, as well as strategic discussions about the implications of evaluation findings.

The program implements an explicit process for translating evaluation findings into programmatic plans and changes and provides evidence of changes implemented based on evaluation findings.

- 1) Provide two to four specific examples of programmatic changes undertaken in the last three years based on evaluation results. For each example, describe the specific evaluation finding and the groups or individuals responsible for determining the planned change, as well as identifying the change itself.

Example 1: Format Change to Comprehensive Exam

- **Relevant Goal/Objective:** Goal #1, Objective 3
- **Year/Change made:** In 2018 the Comprehensive Exam was modified from a 6-part exam to a single-section exam to simplify the exam scheduling and completion process.
- **Evaluation finding contributing to this change:** Prior to 2018, at the conclusion of each internship defense, the Chair queried students regarding the scheduling of their Comprehensive Exam requirement. Following the defense, the Chair and MPH Program Coordinator then followed up with students and noted recurrent issues with scheduling delays. Discussions of the impact of these scheduling delays on graduation date targets were then conducted in faculty meetings.
- **Groups responsible for planned change:** Department Chair, MPH Program Coordinator, and MPH Accreditation & Programmatic Assessment Committee
- **Indicator tracking to assess need and impact of programmatic change:** See Table B6.a below.

Table B6.a. Programmatic Change Tied to Evaluation Data, Example 1

Format Change to Comprehensive Exam					
Goal #1 - Education: Train and equip future generations of the public health workforce with professional competencies to address the health challenges of the 21st century and beyond.					
Objective 3: Evaluate the effectiveness of the MPH Program curriculum through continuous program assessment.					
Evaluation Measure: Students graduate on-time with skills aligned to post-graduation employment and success.					
Indicator	Target	2017-2018 [N=44] n (%)	2018-2019 [N=40] n (%)	2019-2020 [N=48] n (%)	2020-2021 [N=42] n (%)
% of graduating students passing Comprehensive Exam within one attempt	80%	37 (84%)	27 (68%)	30 (63%)	35 (83%)

Source: CompExam_Data.xlsx, MPH Program Coordinator

Example 2: Course Restructuring for Internship I and Internship II

- **Relevant Goal/Objective:** Goal #1, Objectives 2 and 3
- **Year/Change made:** Discussions regarding changes to address this finding began in the 2020-2021 academic year. The proposed changes were submitted in Fall 2021 through the MPH Curriculum Committee and involved renaming the courses as follows:
 - PHC6945 Internship in Public Health I to PHC6945 Applied Practice Experience
 - PHC6946 Internship in Public Health II to PHC6946 Integrative Learning Experience

Timely student progress through practicum (i.e., APEx and ILE) stages of the curriculum have always been areas of interest and focus to the program as this impacts on-time graduation. Beginning with Summer 2022, these courses will be scheduled independently. Additionally, the student learning outcomes associated with each course will support student completion with two different instructors.

- **Evaluation finding contributing to this change:** Following the 2016 Criteria implementation of the APEx and ILE requirements, the MPH Program designated PHC6945 Internship in Public Health I as the course through which students accomplished the requirements for the APEx. Alternatively, PHC6946 Internship in Public Health II was designated as the course through which students accomplished the requirements for the ILE. The Chair determines the scheduling of PHC6945 and PHC6946 to facilitate continuity of student mentorship with the same instructor whenever possible. However, summer teaching loads are optional at UWF, which contributed to disruptions in student continuity of completing projects on time if the same instructor was not available for PHC6945 and PHC6946.
- **Groups responsible for planned change:** Department Chair, MPH Curriculum Committee, and MPH Accreditation & Programmatic Assessment Committee
- **Indicator tracking to assess need and impact of programmatic change:** See Table B6.b below.

Table B6.b. Programmatic Change Tied to Evaluation Data, Example 2

Course Restructuring for Internship I and Internship II				
Goal #1 - Education: Train and equip future generations of the public health workforce with professional competencies to address the health challenges of the 21st century and beyond.				
Objective 2: Prepare students to acquire competencies in public health.				
Objective 3: Evaluate the effectiveness of the MPH Program curriculum through continuous program assessment.				
Evaluation Measure: Students graduate on-time with skills aligned to post-graduation employment and success.				
Indicator	Target		2019-2020	2020-2021
% of students with "G" grade in PHC6946	< 5% across all sections	Fall	PHC6946-80916 (11/17 students, 65%)	PHC6946-80768 (5/11 students, 45%)
		Spring	PHC6946-11222 (1/22 students, 5%)	PHC6946-11222 (2/23 students, 9%)
		Summer	PHC6946-50140 (5/14 students, 36%)	PHC6946-50140 (4/8 students, 50%)
		Cumulative	17/53 = 32%	11/42 = 26%

Source: Grade Entry (my.uwf.edu)

As Table B6.b demonstrates, course sequencing methods prior to 2021 were not working to meet the target for the indicator.

Example 3: Expanding Delivery Modes for Workforce Development Trainings in GIS

- **Relevant Goal/Objective:** Goal 3, Objective 1
- **Year/Change made:** During the face-to-face 2018 Data Management Analysis, Interpretation and Utilization Training workshop hosted by the Department of Public Health at an off-campus location in Pensacola, FL, participants expressed an interest in follow-up trainings on this topic. Various delivery modes discussed for development by GIS-trained students and faculty included YouTube for just-in-time video training and WebEx for extended trainings. The design of a website to promote the materials was also discussed.
- **Evaluation finding contributing to this change:** Prior to 2018, all workshop trainings developed and delivered by Department faculty were done face-to-face, and there were no goals associated with developing and deploying alternative formats. Beginning in 2018, YouTube, WebEx, and website deployments were slated for implementation.
- **Groups responsible for planned change:** Department Chair and Workforce Development & Community Outreach Committee
- **Indicator tracking to assess need and impact of programmatic change:** See Table B6.c below.

Table B6.c. Programmatic Change Tied to Evaluation Data, Example 3

Expanding Delivery Modes for Workforce Development Trainings in GIS				
Goal #3 - Service: Promote a culture of engagement to serve Northwest Florida and beyond through outreach, education, and community collaborations.				
Objective 1: Develop partnerships with health agencies, community-based organizations, health care institutions, and military communities to facilitate reciprocal learning and the application of scholarship that contributes to improving population health.				
Evaluation Measure: Workforce development training opportunities that address areas of critical need in public health in the Florida Panhandle and surrounding regions.				
Indicator	Target	2018-2019	2019-2020	2020-2021
Delivered face-to-face	record at least 1 every other year	1 Sep 2018 [workshop]	1 Feb 2020 [conference]	0
Delivered face-to-face and online, synchronously		-	1 Mar 2020 [conference, recorded]	0
Delivered online, asynchronously	promote to alumni or community member at least once per year	1 YouTube Nov 2018 [email link to student]	1 WebEx & website May 2020 [email link to group lead contact]	2 WebEx & website Jul 2020 [email link to group lead contact] Aug 2020 [email link to student]

Source: Workforce Development and Community Outreach Committee

In support of this change going forward, the 2021 feedback from the **MPH Employer Competency Assessment Survey** indicated that 38% of employers surveyed (N=8) answered “Yes [virtual]” to collaborating with the MPH program on in-service training for public health workforce development targeted at employees at their agency or organization.

Example 4: Promoting Faculty Grant Submissions

- **Relevant Goal/Objective:** Goal 2, Objective 2
- **Year/Change made:** Based on 2018-2019 annual evaluation reports, the Chair began negotiations with the UKCOH Dean for course release allocations for faculty members in support of external grant applications allowing for this.
- **Evaluation finding contributing to this change:** Prior to 2018-2019, faculty were reluctant to submit external grant applications due to the time-limiting requirements of a 3-3 teaching load.
- **Groups responsible for planned change:** Department Chair
- **Indicator tracking to assess need and impact of programmatic change:** See Table B6.d below.

Table B6.d: Programmatic Change Tied to Evaluation Data, Example 4

Promoting Faculty Grant Submissions					
Goal # 2 - Research: Promote faculty, student, and community engagement in public health research to improve and sustain health locally, nationally, and globally.					
Objective 2: Strive to increase extramural funding associated with core faculty scholarly activities.					
Evaluation Measure: Internal or extramural funding proposals submitted by primary instructional faculty.					
Indicator	Target	2018-2019 [N=6] n (%)	2019-2020 [N=7] n (%)	2020-2021 [N=7] n (%)	2021-2022 [N=7] n (%)
Number of external grants awarded with external agency with faculty course release	1-2 faculty members supported w/ this policy	0	1	1	0
% of faculty with grants/contracts submitted	30%	3 (50%) Mbizo, Memiah: UWF RSP	2 (29%) Curtis: FL DOH	-	1 (14%) Ilunga Tshiswaka: NIH- RO1
% of faculty with grants/contracts funded	15%	3 (50%) Mbizo, Memiah: UWF RSP	4 (57%) Curtis: FL DOH Ilunga Tshiswaka: NIH-Supp Mbizo, Sutton: UWF ITEP	2 (29%) Curtis: FL DOH Ilunga Tshiswaka: NIH-Supp	2 (29%) Curtis: FL DOH Ilunga Tshiswaka: NIH- Supp ¹

Source: Faculty Annual Evaluation Report | ¹ Extension granted due to COVID-19

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

For **Criterion B6, Use of Evaluation Data**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** The Chair and the MPH Program Coordinator work closely to monitor student progress towards degree requirements throughout the student's program and proactively report issues impacting on-time graduation at faculty meetings. The MPH Program has been systematic in making program changes that tie back to the Goals and Objectives approved by the MPH faculty. Additionally, evaluation measures have been used to both assess the need for and impact of proposed and implemented programmatic changes.
- **Weaknesses/Plans for Improvement:** The MPH Curriculum Committee will continue to monitor the implementation of the APEX and ILE requirements and suggest changes to ensure student compliance and high-quality product outcomes for these requirements. The Chair and MPH Program Coordinator have documented course scheduling issues with PHC6945 and PHC6946 that warranted additional discussions and the actions in the coming year, as noted in the previous section.

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.

All faculty salaries are allocated and administered by the Division of Academic Affairs, including all tenure-track, non-tenure-track, and visiting lines. Adjunct salaries are paid at the UKCOH level. Adjunct pay does not vary by individual and is based on a flat rate set by the UKCOH Dean. The only difference between undergraduate and graduate courses is the course level rate.

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.

The Chair, in consultation with the Dean of the UKCOH, submits a request to the Division of Academic Affairs with a rationale documenting program growth and teaching resource needs of the unit. Following review and approval by the Dean and Provost, faculty or staff positions are allocated to the Department and a search to fill the approved position begins.

c) Describe how the program funds the following:

a. operational costs (programs define "operational" in their own contexts; definition must be included in response)

For the MPH program, there are two types of operational costs 1) those paid for by the departments, and 2) costs paid for by the Division of Finance and Administration. Department operational costs are those related to the daily functioning of the accredited unit through funds provided in the annual budget that the Department manages. Departmental operational costs include:

- Printing costs, including printer cartridges
- Phone lines
- Office supplies
- Routine technology maintenance and upgrades on faculty/staff devices

Additional funds are available through the Department, the UKCOH, and other intramural and extramural sources for cost sharing and special allocations for equipment, travel, supplies, and student assistantships.

Operational costs covered outside of the Department paid by the Division of Finance and Administration include:

- Building maintenance
- Electric, water, Internet

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

Student engagement in high impact activities is a critical and priority goal of the Department, the UKCOH, and UWF as all whole. Thus, the university is intentional about providing resources for scholarships and support for student conference travel. Scholarship and financial support opportunities available to MPH students are funded as follows:

- Graduate Assistantships – funded by the Graduate School (GTA or GA)
- Pace Scholarship – funded by the Graduate School (for incoming students)
- Merit Scholarship – funded by the Graduate School (for continuing students)
- Student (Tuition) Grant – funded by the Graduate School (for qualifying MPH students, new and continuing)
- Partnership for Public Health Endowment – funded by an endowment

Student conference travel is funded as follows:

- Department – funded when available
- Graduate Student Travel Grant – funded by the Graduate School (student applies)
- Student Government Association (SGA) Travel Grant – funded by SGA (student applies)

Student activities are supported with the following resources:

- Department – funded when available
- Student Government Association (SGA) Activities Grant – funded by SGA (student applies)
- Research Administration and Engagement – funded when available

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

The Department and the UKCOH are equally committed to providing resources, including financial support, for faculty and adjunct development. Depending on availability of funds, faculty travel to professional meetings and other events relevant to professional development of faculty are supported through supplementation of grant funds or cost-sharing with the UKCOH and Academic Affairs. The Department also provides a base professional development and travel budget for each full-time faculty member in the unit, without regard to tenure-earning or non-tenure status. As resources permit, visiting lines are also supported. Priority is given to attend conferences or professional development training.

Tenure-earning and non-tenure earning full-time faculty whose scholarly work has been accepted for a professional conference presentation are also eligible to apply for cost-sharing and/or direct travel grants from the UKCOH and/or the Division of Academic Affairs. University policies fund faculty travel with some priorities based on appointment type. When funds are limited, priority is given to tenure-earning lines.

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

Professional Membership Fees: For professional membership fees, faculty can request reimbursement up to \$100 per year from the Division of Academic Affairs. Faculty may also offset the cost of membership dues through grant funds, when appropriate.

Publication Costs: For publication fees, faculty members are responsible, but can apply for support from Research Administration and Engagement. The Department also covers a portion of publication costs for faculty or students with accepted manuscripts.

Instructional Technology: At the time of hire, all faculty are provided a workstation and a printer by Academic Affairs. For additional instructional technology support, faculty members can apply for special an Instructional Technology Enhancement Project (ITEP) grants through the Division of Academic Affairs, or the Office of the College Dean.

For special needs not noted in other categories above, if the department cannot cover the cost, the Chair submits a special request to the Dean of the UKCOH with a rationale and justification for mission critical relevance of the request to either student success or faculty research productivity.

- d) 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.

The University does not use a cost sharing model. The MPH Program budget is a permanent, recurring budget established by the Division of Academic Affairs. The Provost is responsible for allocations to the academic colleges. The Deans of the colleges determine allocations to the units within their respective colleges. The unit heads (Chairs and Directors) oversee, with input from unit faculty, expenditures on behalf of the unit. The budget bears no relationship to tuition and fees generated.

- e) 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 cost rates (ICR) are set by Research Administration and Engagement based on the limits established by the granting agency. Recovered ICR funds are distributed as follows:

- Research Administration and Engagement: 70%
- Dean of the UKCOH: 10%
- Chair: 10% (held in a seed account that can used to fund select faculty needs, upon Chair approval)
- Principal Investigator: 10% (returned to the individual faculty member's Seed Account to support further research)

- f) 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) 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.

Template C1-1: Sources of Funds and Expenditures by Major Category, 2017 to 2022					
	AY 2016-17	AY 2017-18	AY 2018-19	AY 2019-20	AY2020-21
Source of Funds					
Tuition & Fees <i>(estimated)</i>	\$1,314,181.44	\$1,945,876.32	\$1,689,112.44	\$1,860,623.32	\$2,047,048.28
Grants/Contracts		\$43,000.00	\$63,551.57	\$51,932.00	\$35,700.00
Endowment		\$100,000.00	\$100,000.00	\$100,000.00	\$100,000.00
Total	\$1,314,181.44	\$2,088,876.32	\$1,852,664.01	\$2,012,555.32	\$2,182,748.28
Expenditures					
Faculty Salaries & Benefits	\$650,659.97	\$886,981.00	\$889,162.25	\$967,996.53	\$938,450.11
Adjuncts	\$49,363.72	\$27,025.92	\$35,507.55	\$31,956.84	\$20,290.04
Staff Salaries & Benefits	\$88,445.34	\$93,256.43	\$75,734.41	\$71,315.00	\$38,375.65
Operations		\$21,439.00	\$40,605.22	\$40,605.00	\$28,050.00
Travel	\$0.00	\$16,533.00	\$11,317.14	\$11,317.14	\$6,789.92
Student Support	\$0.00	\$0.00	\$17,119.65	\$17,119.65	\$15,518.50
Other (Capital Outlay)	\$0.00	\$26,258.01	\$92.68	\$0.00	\$3.01
Total	\$788,469.03	\$1,071,493.36	\$1,069,538.90	\$1,140,310.16	\$1,047,477.23

- 3) 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.

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

For **Criterion C1, Fiscal Resources**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** There is an adequate, permanent, recurring budget to support the MPH Program. There are a variety of additional sources to support specific needs for both faculty and students.
- **Weaknesses:** The Program is not without exposure to potential threats. While the pandemic has raised the profile of the public health profession and resulted in increased interest in professional training population health sciences, the program is susceptible to the financial constraints facing UWF as a state school.
- **Plans for Improvement:** Given that profit sharing is not a current model for budget allocation at UWF, the Department will continue to encourage and support extramural sources of funding and grant solicitation for faculty members with additional funding needs to support their projects beyond the base allocations provided by the Department or other sources within UWF. Further the program developing a sustainability plan for presentation to the College Dean centered around *“Why Fund Public Health” in hopes of*

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.

Template C2-1: Program's Instructional Faculty Resources by Concentration						
CONCENTRATION	FIRST DEGREE LEVEL			SECOND DEGREE LEVEL	THIRD DEGREE LEVEL	Additional Faculty
	PIF 1	PIF 2	FACULTY 3	PIF 4	PIF 5	
Generalist MPH	Daudet Ilunga Tshiswaka 1.0 FTE	Denice Curtis 1.0 FTE	Melanie Sutton 0.5 FTE	NA	NA	PIF: Gregory Steele (1.0 FTE) Non-PIF: William Bullock (0.125 FTE) Michael Findley (0.25 FTE) John Lanza (0.375 FTE) Joseph LaVan (0.125 FTE) John Venezia (0.25 FTE)
Health Promotion, Education and Behavior MPH	Daudet Ilunga Tshiswaka 1.0 FTE	Debra Vinci 0.50 FTE	Patricia Barrington 0.5 FTE	NA	NA	PIF: NA Non-PIF: Maureen Howard (0.125 FTE) John Todorovich (0.04 FTE) Guy-Lucien Whembolua (0.625 FTE) Christopher Wirth (0.125 FTE)
Global Health MPH	Denice Curtis 1.0 FTE	Wes Farr 1.0 FTE	Damaris Kinyoki 1.0 FTE	NA	NA	PIF: NA Non PIF: Theresa Caples (0.625 FTE) Meredith Marten (0.33 FTE) Justice Mbizo (0.167 FTE)
TOTALS:	Named PIF	7	[Counted: Barrington, Curtis, Farr, Ilunga Tshiswaka, Kinyoki, Sutton, Vinci]			
	Total PIF	8	[Counted: Named PIF + Steele]			
	Non-PIF	12	[Counted: Bullock, Caples, Findley, Howard, Lanza, LaVan, Marten, Mbizo, Todorovich, Venezia, Whembolua, Wirth]			

- 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.

Faculty FTE is computed based on the expected number of courses the individual faculty member teaches in an academic year, as follows:

- PIF, tenure-track, full-time faculty with 3/3 teaching load: FTE is calculated by determining the number of courses taught by the individual faculty member and then dividing by 6 courses (1 course = 0.167 FTE).
- PIF, non-tenure track, full-time faculty with 4/4 teaching load: FTE is calculated by determining the number of courses taught by the individual faculty member and then dividing by 8 courses (1 course = 0.125 FTE).
- Non-PIF, including adjuncts: FTE is calculated by using the formula for non-tenure track personnel (1 course = 0.125 FTE).
- Exceptions: One Non-PIF (Todorovich) has been listed as 0.04 FTE (1/8 course value) to document his availability to provide expertise to the other faculty in his unit teaching in the Health Promotion, Education and Behavior concentration.

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

Not applicable.

- 4) Data on the following for the most recent year in the format of Template C2-2. See Template C22 for additional definitions and parameters.

4.a General Advising and Career Counseling Load

Beginning in 2017, the University has adopted a centralized advising model in which all general academic advising is performed by designated advising personnel within the UKCOH Advising Center. MPH faculty do not perform general academic advising as part of their work assignment responsibilities. Notwithstanding the centralized advising available through the UKCOH Advising Center, the Chair and MPH Program Coordinator communicate regularly with the staff from the UKCOH Advising Center assigned to work with MPH students as well as directly with MPH students.

Template C2-2: Faculty regularly involved in advising, mentoring and the integrative experience			
General advising & career counseling			
Degree Level	Average	Min	Max
Master's	NA	NA	NA

4.b Advising on Integrative Learning Experience

The MPH Integrative Learning Experience (ILE) is completed through the formal course PHC6946 Internship in Public Health II in which the student enrollment cap is set at 20 students. The faculty member assigned to teach PHC 6946 is the designated advisor for the ILE. The average value shown in Template C2-2b below is based on the number of students enrolled in PHC 6946 for academic year 2020-2021, including Fall 2020, Spring 2021, and Summer 2021 semesters. In general, the minimum number of students required for a course to be offered is 15 students, a standard set by leadership in the UKCOH. However, with justification, the Chair can negotiate with the UKCOH Dean to allow a course section that is under 15 students to be offered.

Template C2-2: Faculty regularly involved in advising, mentoring and the integrative experience Advising on MPH integrative experience			
Degree Level	Average	Min	Max
Master's	14	15	25

As noted later in Section B6 of this Self-Study, the ILE was initially designed to be directly tied to work completed as part of the student's Applied Practice Experience requirements (completed in PHC6945). Decoupling these two courses was approved by the MPH Curriculum Committee, with the approval process external to the Department initiated in Summer 2021 to make the sequencing of the two courses PHC6945 and PHC6946 less restrictive. This will allow students to be able to complete the ILE based on activities completed as part of the APEX (if they choose) while at the same time allowing flexibility for students to undertake truly integrative projects that allow demonstration of project management skills in other contexts.

- 5) Quantitative data on student perceptions of the following for the most recent year:
- a. Class size and its relation to quality of learning (eg, the class size was conducive to my learning)

Table C2.a summarizes the most recent quantitative data on student perception of class sizes, derived from the **MPH Program Current Students Feedback Survey**.

Table C2.a Student Perceptions of Class Size

Question Response values: 1=Very unsatisfied, 2=Somewhat unsatisfied, 3=Neither satisfied nor unsatisfied, 4=Somewhat satisfied, 5=Very satisfied	Question #	Mean Ratings [N=212]
		2021 [n=78]
How satisfied are you with class size(s) and its relation to quality of learning?	Q8	4.4

Source: MPH Program Current Students Feedback Survey | Administration Date: Spring-Summer 2021
Response Rate: 37%

Additionally, every semester students are surveyed with the **State University System Student Assessment of Instruction Survey** for each course they are enrolled in and asked to provide this specific feedback confidentially to each course instructor and the Chair:

- Facilitation of Learning Environment
- b. Availability of faculty (ie, Likert scale of 1-5, with 5 as very satisfied)

Table C2.b summarizes the most recent quantitative data on student perception of faculty availability, derived from the **MPH Program Current Students Feedback Survey**.

Table C2.b. Student Feedback on Availability of Faculty

Question Response values: 1=Very unsatisfied, 2=Somewhat unsatisfied, 3=Neither satisfied nor unsatisfied, 4=Somewhat satisfied, 5=Very satisfied	Question #	Mean Ratings [N=212]
		2021 [n=78]
How satisfied are you with faculty availability and engagement with the students in your classes?	Q6	4.1

Source: MPH Program Current Students Feedback Survey | Administration Date: Spring-Summer 2021
Response Rate: 37%

Additionally, every semester students are surveyed with the **State University System Student Assessment of Instruction Survey** for each course they are enrolled in and asked to provide this specific feedback confidentially to each course instructor and the Chair:

- Availability to Assist Students

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

Qualitative data received from students responding to the **MPH Program Current Students Feedback Survey** on their perceptions of class size and availability of faculty included in the following:

- “The classes sizes are not a problem and the faculty is available when needed.”
- “Live recorded classes would be more engaging for online students.”
- “I do wish there was a synchronous component to the classes, even just once a week....”
- “Faculty availability/interaction has varied widely with different professors.”

Additionally, every semester students are surveyed with the **State University System Student Assessment of Instruction Survey** for each course they are enrolled in and asked to provide this specific feedback confidentially to each course instructor and the Chair:

- Strength of performance and specific recommendations to improve the quality of instruction (Online students: please describe any technical issues you would like to address as well)

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

For **Criterion C2, Faculty Resources**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** Since the last site visit and the reconstitution of the faculty complement, the MPH Program has maintained a consistent number of faculty. Most recently, in the 2020-2021 academic year, the Department successfully completed a faculty search and was able to fill a vacant position with a faculty member with expertise to cover both the critical core area of epidemiology and concentration competencies in Global Health.
- **Weaknesses/Plans for Improvement:** The qualitative results from students completing the most recently administered **MPH Program Current Students Feedback Survey** provide valuable insights into their perceptions of class size and availability of faculty. For example, comments indicate that the MPH Program has some areas where the program can improve in terms of instructor presence (e.g., providing live lectures for some topics). This suggestion will be presented to the MPH Curriculum Committee in the 2021-2022 academic year. In proactive support of faculty accommodating this request in their future course launches, faculty nominating new members for the Department’s Public Health Alumni and Friends Mentor Network have been identifying mentors interested in offering a live guest lecture in courses to discuss their personal public health journey, career planning, and/or research interests.

Finally, with respect to class sizes, the Chair proactively reaches out to the UKCOH Dean regularly to note enrollment trends and expectations for needs for future faculty lines consistent with increasing growth.

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.

Table C3-1 below summarizes the staff support resources available to the Department and program in support of the core missions of student support and administrative processes. Up until Fall 2020 the program had a designated Office Administrator, who was reassigned to another unit in the UKCOH. This position was eliminated in Summer 2020, with the program now sharing administrative support positions with two other departments in the UKCOH.

Template C3-1: Staff support	
Role/function	FTE
Office Administrators, Department of Public Health: Karen Nielson (shared with Department of Health Sciences and Administration) Victoria Dubose (shared with Department of Medical Laboratory Sciences)	0.5 ¹ 0.5 ¹
Leauna Stone, MPH, Department of Public Health Serves within an OPS position as MPH Program Coordinator	1.0
Kimberlee Glover, Academic Advisor, UKCOH Advising Center Serves as primary Academic Advisor for MPH Program (all three concentrations, as well as other UKCOH graduate programs in the Departments of Psychology, Health Sciences and Administration, and Movement Sciences and Health)	0.25 ¹
Fiona Mowbray, MPH, Assistant Director of Advising, UKCOH Advising Center Serves as backup Academic Advisor for MPH Program, when needed	0.25 ¹
Anika Moore, Graduate Admission Assistant, UKCOH Serves other UKCOH graduate programs in the Departments of Psychology, Health Sciences and Administration, and Movement Sciences and Health	0.25 ¹
June Strohmetz, Affiliation Agreement/Memorandum of Understanding Coordinator, UKCOH Provides college-wide support, and all agreements must be finalized through her position	1.0

¹ FTE is estimated based on how many departments or programs the staff person supports

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

While each unit in the UKCOH is semi-autonomous, some college business processes are coordinated with staff positions at the level of the UKCOH Dean, as noted in Table C3.a below.

Table C3.a. Staff Support at the Level of the UKCOH Dean

Staff	Support to Accredited Units
Genia Taylor, Senior Administrative Specialist, UKCOH, Dean's Office	Provides assistance for hiring process/documents and certification of teaching credentials (UKCOH Dean is the hiring official for faculty positions); provides support to the Department during periods of heavy workload
Diane Burkhammer, Office Administrative Assistant, UKCOH, Dean's Office	Provides support for managing grants/contracts
Donna Bare, Business Manager, UKCOH, Dean's Office	Provides assistance for budget issues

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

Two areas of insufficiency for the program's staff are the following:

- The MPH Program Coordinator position is an OPS position which leaves it vulnerable to turn-over and low morale.
 - The Office Administrator position is shared with other units. The first shared Office Administrator (Karen Nielson) is located in our building. The second shared Office Administrator (Victoria DuBose) is located in a different building from the one housing MPH Program faculty.
- 4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

For **Criterion C3, Staff and Other Personnel**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** The MPH Program has access to staff resources who provide a broad range of services from academic advising to facilitating travel arrangements or other academic activities for faculty and students. While this may be sufficient at the time of the self-study, as we emerge from the pandemic and faculty return fully to campus and engage in research and grants submissions, this may create a stress point for the program.
- **Weaknesses/Plans for Improvement:** Now in its third accreditation cycle, the program does not have a full-time, salaried MPH Program Coordinator. The current OPS position is not stable and a concern to the Chair and faculty, especially as the role is a critical student support position outside of academic advising. Additionally the loss in Summer 2020 of a dedicated Office Administrator focused on serving the needs of students and faculty, while also serving as a point of contact for community affiliates is a cause for concern. The Chair will continue to advocate to the UKCOH Dean for the conversion of the OPS position of MPH Program Coordinator to a full-time, salaried position and for the restoration of the Office Administrator position.

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.)

- Faculty office space

All full-time faculty members work on campus with the exception of one Visiting Instructor that participates via web conferencing. Each faculty member is assigned an office at the time of hire. A listing of faculty and space allocation in Buildings 38 and 72 is provided in Table C4.a below.

Table C4.a. Faculty Office Space

#	Faculty Name	Office Location
PIF		
1	Patricia Barrington, Lecturer	Individual office: Building 72, Room 259
2	Denice Curtis, Associate Professor	Individual office: Building 38, Room 133
3	Wes Farr, Lecturer	Individual office: Building 38, Room 104
4	Daudet Ilunga Tshiswaka, Assistant Professor	Individual office: Building 38, Room 129
5	Damaris Kinyoki, Assistant Professor	Individual office: Building 38, Room 108
6	Gregory Steele, Visiting Lecturer (remote worker)	Individual office: Building 38, Room 131
7	Melanie Sutton, Professor	Individual office: Building 38, Room 102
8	Debra Vinci, Associate Professor	Individual office: Building 72, Room 249
Non-PIF¹		
1	Meredith Marten, Assistant Professor	Individual office: Building 13, Room 116
2	Justice Mbizo, Associate Professor	Individual office: Building 38, Room 127
3	John Todorovich, Professor	Individual office: Building 72, Room 257
4	Christopher Wirth, Assistant Professor	Individual office: Building 72, Room 250

¹ Non-PIF with home office: Bullock, Caples, Findley, Howard, Lanza, LaVan, Venezia, Whembolua

- Staff office space

All staff in the Department are assigned an office equipped with a computer, scanner, telephone service, fax machine, access to a central copier, and storage areas.

- Classrooms

The MPH Program is offered 100% online, thus there is no need for classroom space. For hosting on-campus student presentations, the MPH Program shares a conference room with other units located in Building 38 on the main campus, as well as a multi-purpose room administered by the UKCOH in Building 242.

- Shared student space

On the main campus, students have access to shared student space at the John C. Pace Library, located a short walk from the Department. The Great Good Place on the Pace Library’s second floor is a popular student meeting/conversation area. Additionally, there are multiple collaboration areas located on the first and second floors of the library deploying Smart Boards (wall-mounted touch-enabled computers). The fifth floor of the

Pace Library also serves as a multimedia production room (Sky Lab) with specialized software and technology assistance.

- 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 Department is housed in Building 38 on the main campus. The Department has sufficient office space for faculty/staff, a shared conference room, and work spaces for students in the main campus library.

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

For **Criterion C4, Physical Resources**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** The MPH Program has sufficient physical resources to support the mission of the unit and promote student learning. The MPH Program also has access to a large multi-purpose room in the main UKCOH building for large gatherings when needed. Additionally, UWF's conference center has space for up to 300 participants, while the Pace Library has a conference room and a technology classroom with standard Dell computers for training purposes when needed. These facilities are accessible to the MPH faculty and students.
- **Weaknesses/Plans for Improvement:** There are no weaknesses or plans for improvement for this criterion.

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

The University of West Florida Libraries include:

- John C. Pace Library - Pensacola campus
- Emerald Coast Library - Fort Walton Beach campus.

Seating options for use by students and faculty include lounge chairs, task chairs at tables, group study rooms, and individual study carrels.

The Pace Library is an inviting six-story structure with desktop student productivity workstations, equipped with Microsoft Office, Adobe, and other basic productivity software programs located throughout the building. Additionally, laptops and iPads are available for loan. On-site, students have access to flatbed scanners, photocopiers, networked printers and book scanners.

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

Online students working on-site utilize hardware and software available at the Pace Library. Off-site students use their own personal hardware devices to access software using these resources:

- **my.uwf.edu**
 - Seamless access to a variety of network-based resources using a username/password provided at admission
 - Supported services include electronic mail, centralized file storage, web page hosting, eDesktop virtual lab, eLearning, and digital library services
- **ArgoApps**
 - Virtual computer lab to access university-licensed computer applications via the Internet, such as:
 - SPSS
 - SAS
 - MPH faculty work with the HelpDesk to secure course-specific software packages
- faculty access to hardware and software (including access to specific software or other technology required for instructional programs)

All faculty are provided computers and printers located in their office space, as well as laptops and iPads for use at home and during travel. Each faculty also has access to a central copier with scanning capabilities in Building 38. Faculty devices are configured for access to all university support services, including access to a network drive, standard statistical software

(i.e., SPSS, SAS), Microsoft Office, and specialized course software available through ArgoApps. Additionally faculty have access to other software including Stata and ArcGIS for research purposes.

- technical assistance available for students and faculty

The ITS Help Desk is the first point of contact for students needing technology assistance, and has primary responsibility for providing technology support to online students. The ITS Help Desk provides technical support to UWF’s online students on a variety of university technology services. The Help Desk provides students with “live” chat during weekday business hours (60 hours weekly) and email and telephone support on computer account activation, computer account password/PIN reset, MyUWF services, eLearning & Canvas (online Classroom), and residential networking.

Technical assistance for students and faculty is available through the **ITS HelpDesk** as follows:

- Technology assistance provided for computer account activation, computer account password/PIN reset, MyUWF services, Canvas eLearning online classroom, and residential networking
- Provides primary source of technical support to UWF’s online students on a variety of university technology services, using face-to-face counter service, “live” chats, email, and telephone support

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

As summarized in Table C5.a, the information and technology resources available to faculty are sufficient.

Table C5.a Faculty Computer

#	Faculty Name	Technology Resources
PIF		
1	Patricia Barrington	Dell Workstation, Dell laptop, Surface pro
2	Denice Curtis	Dell Precision Workstation, Dell laptop, Dell LaserJet printer
3	Wes Farr	Mac Workstation, MacBook, Dell printer
4	Daudet Ilunga Tshiswaka	Dell Precision Workstation, iPad, MacBook
5	Damaris Kinyoki	Dell Laptop, Dell LaserJet printer
6	Gregory Steele	Dell Workstation, Dell laptop
7	Melanie Sutton	Dell Precision Workstation, Dell laptop, iPad, Dell printer
8	Debra Vinci	Dell Workstation, Dell laptop
Non-PIF¹		
1	Meredith Marten	iMac Desktop computer, Mac laptop computer, iPad, Dell printer
2	Justice Mbizo	Dell Precision Workstation, Dell laptop, iPad, HP LaserJet printer
3	John Todorovich	Surface pro
4	Christopher Wirth	Dell Workstation, Dell laptop

¹ Self-resourced Non-PIF: Bullock, Caples, Findley, Howard, Lanza, LaVan, Venezia, Whembolua

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

For **Criterion C5, Information and Technology Resources**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** The UWF Pace Library's collections and information technology support for the MPH degree program are strong. Each academic discipline is assigned a Reference Librarian to serve as a discipline specialist, providing library instruction and specific reference assistance for students and faculty in that area, including distance education students. The collective holdings of the library supporting the discipline of public health are adequate and meet student and faculty needs. UWF adequately funds information technology to meet the needs of the MPH faculty.
- **Weaknesses/Plans for Improvement:** There are no weaknesses or plans for improvement for this criterion.

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.

Template D1-1: Content Coverage for MPH (SPH and PHP)	
Content	Course number(s) & name(s) or other educational requirements
1. Explain public health history, philosophy and values	<p>Course: PHC5102 Principles of Public Health</p> <p>Instructional Activity: Covered in Modules 1, 2, 4, 5, 6, 12</p> <p>Assessment: Exam essay questions. <i>[questions redacted for publicly posted Self-Study]</i></p>
2. Identify the core functions of public health and the 10 Essential Services ¹	<p>Course: PHC5102 Principles of Public Health</p> <p>Instructional Activity: Lecture - Module 2</p> <p>Assessment: Exam questions <i>[questions redacted for publicly posted Self-Study]</i></p> <p>Module 2 assignment describing them: The activity is to go to the Orientation to Public Health training site and take the Orientation to Public Health Course and answer questions. <i>[questions redacted for publicly posted Self-Study]</i></p>

<p>3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health</p>	<p>Course: PHC5102 Principles of Public Health</p> <p>Instructional Activity: Lecture - Modules 5 and 10</p> <p>Assessment: Essay assignment. <i>[questions redacted for publicly posted Self-Study]</i></p>
<p>4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program</p>	<p>Course: PHC5102 Principles of Public Health</p> <p>Instructional Activity: Lecture - Modules 1, 6, 7, 8</p> <p>Assessment: Students are assessed using exam questions. <i>[questions redacted for publicly posted Self-Study]</i></p>
<p>5. Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.</p>	<p>Course: PHC5102 Principles of Public Health</p> <p>Instructional Activity: Lecture - Module 2</p> <p>Assessment: Exam essay questions. <i>[questions redacted for publicly posted Self-Study]</i></p>
<p>6. Explain the critical importance of evidence in advancing public health knowledge</p>	<p>Course: PHC5102 Principles of Public Health</p> <p>Instructional Activity: Lecture - Modules 5, 6, 10, 11</p> <p>Assessment: 1) Exam questions: Students complete an exam with short answer questions. 2) Students conduct and synthesize the scientific literature to develop a policy brief in support or against deployment of elective vaccine.</p>
<p>Factors Related to Human Health</p>	
<p>7. Explain effects of environmental factors on a population's health</p>	<p>Course: PHC5102 Principles of Public Health</p> <p>Instructional Activity: Lecture - Modules 6, 7, 8</p> <p>Assessment: 1) Students complete a written exam question. 2) Short paper: Students select a community level public health problem and write a mini paper about this public health issue in their community.</p>
<p>8. Explain biological and genetic factors that affect a population's health</p>	<p>Course: PHC5102 Principles of Public Health</p> <p>Instructional Activity: Covered in Modules 1 and 10</p> <p>Assessment: Exam Two: Essay question <i>[questions redacted for publicly posted Self-Study]</i></p>

9. Explain behavioral and psychological factors that affect a population's health	<p>Course: PHC5102 Principles of Public Health</p> <p>Instructional Activity: Covered in Modules 9, 10, 11</p> <p>Assessment: Exam questions and Group Assignment in which students develop a script and story board for a PSA around a specific health issues for a targeted community or population.</p>
10. Explain the social, political and economic determinants of health and how they contribute to population health and health inequities	<p>Course: PHC5102 Principles of Public Health</p> <p>Instructional Activity: Covered in Modules 1, 2, 10</p> <p>Assessment: 1) Discussion: Students participate in a threaded discussion using examples to explain the social, political, and economic determinants of health disparities in their community or state. 2) Students respond to essay exam questions. <i>[questions redacted for publicly posted Self-Study]</i></p>
11. Explain how globalization affects global burdens of disease	<p>Course: PHC5102 Principles of Public Health</p> <p>Instructional Activity: Lecture and assigned readings Module 6</p> <p>Assessment: Students are assessed in Exam essay questions. <i>[questions redacted for publicly posted Self-Study]</i></p>
12. Explain an ecological perspective on the connections among human health, animal health and ecosystem health (eg, One Health)	<p>Course: PHC5102 Principles of Public Health</p> <p>Instructional Activity: Covered in Module 7</p> <p>Assessment: Students complete Exam essay questions. <i>[questions redacted for publicly posted Self-Study]</i></p>

- 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.

The following documentation related to this item is provided in the Electronic Resource File:

- PHC5102 Syllabus
- Clarification of Coverage of Foundational Knowledge Area (items 7 and 9) – see subfolder **D1**

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

For **Criterion D1, MPH & DrPH Foundational Public Health Knowledge**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** Since the inception of the MPH Program, foundational public health knowledge objectives have been covered in the required PHC5102 Principles of Public Health course. PHC5102 offers a combination of basic public health concepts and hands-on-exercises that allow the students to develop communication skills to share public health information with elected officials and the community as a whole. The strength of this course lies in the

ability to draw concepts from other disciplines and areas associated with health which provides a comprehensive view of public health practice.

- **Weaknesses/Plans for Improvement:** Applying the foundational public health knowledge objectives to current events helps students to understand their relevance and significance. During the most recent 2020-2021 academic year, assignments tied to the COVID-19 pandemic were integrated into the course to engage students in discussing this topic. Going forward, these assignments will be periodically reviewed and updated to support similar development of critical thinking related to the foundational knowledge objectives.

One recent weakness identified in PHC5102 was that the students were not prepared to present their projects in virtual settings that became the norm during the COVID-19 pandemic. In order to address this, the students were asked to develop either narrated posters or videos as a means to enhance their communication skills and adapt them to communicate their findings in a virtual environment. This type of flexibility will be promoted in the course going forward.

D2. MPH Foundational Competencies

The program documents at least one specific, required assessment activity (eg, component of existing course, paper, presentation, test) for each competency, during which faculty or other qualified individuals (eg, preceptors) 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 (eg, joint, dual, concurrent degrees). For combined degree students, assessment may take place in either degree program.

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

MPH – Generalist Curriculum [42 credit hours]

Foundational Core Courses

All students seeking a Master of Public Health degree must take **all** of the following core courses:

Course Number	Course Name/Title	Credit Hours
PHC5410	Social and Behavioral Sciences in Public Health	3
PHC6000	Epidemiology for Public Health Professionals	3
PHC6300	Environmental Health	3
PHC5050	Biostatistics for Public Health	3
PHC6150	Public Health Policy	3
PHC5102	Principles of Public Health	3
Subtotal hours		18

Generalist Practice Concentration Courses

Students must complete required coursework from the following courses:

PHC5123	Biological Basis of Public Health	3
PHC6251	Disease Surveillance and Monitoring	3
PHC6015	Epidemiological Research Designs and Methods	3
PHC6196	Applied Data Analysis in Public Health	3
Subtotal hours		12

Practicum and Culminating Experience

All students seeking a Master of Public Health degree must successfully complete 6 hours in the practicum and culminating experience

PHC6945	Internship in Public Health I [APEX]	3
PHC6946	Internship in Public Health II [ILE]	3
MPH Electives	[Select 2 courses from approved list]	6
Subtotal hours		12
Non-credit MPH Comprehensive Exam		0
Total required credit hours		42

MPH in Health Promotion, Education and Behavior [42 credit hours]

Foundational Core Courses

All students seeking a Master of Public Health degree must take **all** of the following core courses:

Course Number	Course Name/Title	Credit Hours
PHC5410	Social and Behavioral Sciences in Public Health	3
PHC6000	Epidemiology for Public Health Professionals	3
PHC6150	Public Health Policy	3
PHC6300	Environmental Health	3
PHC5050	Biostatistics for Public Health	3
PHC5102	Principles of Public Health	3
Subtotal hours		18

Health Promotion, Education and Behavior Concentration Courses

Students must complete required coursework from the following courses:

PHC6015	Epidemiological Research Designs and Methods	3
HSC6037	Philosophical Foundations of Health Education	3
HSC6587	Health Education Program Planning and Evaluation	3
HSC6667	Social Marketing in Health Education	3
HSC6135	Health Literacy and Cultural Competency	3
Subtotal hours		15

Practicum and Culminating Experience

All students seeking a Master of Public Health degree must successfully complete 6 hours in the practicum and culminating experience.

PHC6945	Internship in Public Health I [APEX]	3
PHC6946	Internship in Public Health II [ILE]	3
MPH Electives	[Select 1 course from approved list]	3
Subtotal hours		9
Non-credit MPH Comprehensive Exam		0
Total required credit hours		42

MPH in Global Health [42 credit hours]

Foundational Core Courses

All students seeking a Master of Public Health degree must take **all** of the following core courses:

Course Number	Course Name/Title	Credit Hours
PHC5410	Social and Behavioral Sciences in Public Health	3
PHC6000	Epidemiology for Public Health Professionals	3
PHC6150	Public Health Policy	3
PHC6300	Environmental Health	3
PHC5050	Biostatistics for Public Health	3
PHC5102	Principles of Public Health	3
Subtotal hours		18

Global Health Concentration Courses

Students must complete required coursework from the following courses:

PHC5442	Global Health	3
PHC6110	Comparative Health Systems	3
PHC6670	Ethical Issues in Global Health	3
PHC5108	Monitoring and Evaluation in Global Health	3
PHC6196	Applied Data Analysis in Public Health	3
PHC6676	Public Health Response in Humanitarian Emergencies	3
Subtotal hours		18

Practicum and Culminating Experience

All students seeking a Master of Public Health degree must successfully complete 6 hours in the practicum and culminating experience.

PHC6945	Internship in Public Health I [APEX]	3
PHC6946	Internship in Public Health II [ILE]	3
Subtotal hours		6
Non-credit MPH Comprehensive Exam		0
Total required credit hours		42

- 2) 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.

Template D2-2: Foundational Competencies Assessment of Competencies for MPH		
Competency	Course number(s) and name(s)*	Describe specific assessment opportunity ⁿ
1. Apply epidemiological methods to the breadth of settings and situations in public health practice	PHC6000 Epidemiology for Public Health Professionals	Semester Project - Project A: Students complete an epidemiology analysis and discuss the implications for the findings as related to public health practice
	PHC5050	Discussion board and exam 1.

2a. Select quantitative data collection methods appropriate for a given public health context	Biostatistics for Public Health	Students are asked to identify the different sampling methods based on different scenarios. See example: Select from the following choices: Systematic Sampling, Stratified Random Sampling, Cluster Sampling
2.b Select qualitative data collection methods appropriate for a given public health context	PHC6015 Epidemiological Research Designs and Methods <i>[required for Generalist and Health Promotion, Education and Behavior concentrations]</i>	Mixed Methods Research Assignment: After reviewing the lectures and reading the assigned articles select a set of one exposure (E), one disease or outcome (D), and one population (P). Identify one quantitative study design (such as a cross-sectional survey) and one qualitative methodology that would enable you to explore complementary aspects of the EDP's. Describe briefly the methods you would use to select participants for both study components and how you would collect quantitative and qualitative data. Explain how mixed methods research that combines quantitative and qualitative methodologies enables a more comprehensive understanding of the EDP's than could be achieved with a single approach.
	PHC6196 Applied Data Analysis in Public Health <i>[required for Global Health concentration]</i>	Assessment: Critical Review of Peer Reviewed Journal Description: Students are asked to search for two peer-reviewed public papers, including a qualitative and quantitative manuscript. They are asked to read and summarize the findings in their own words for each paper. In the summary, they should determine the type of data reported on the retrieved papers.
3a. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate	PHC5050 Biostatistics for Public Health	Assessment: Discussion board, quizzes, exams, and final project. Description: During weeks 4-12 students are given questions, exercises, datasets, etc. to analyze quantitative data and identify the different statistical tests to be used in different case scenarios. The final project is a practical application of the knowledge and skills the students have acquired throughout the class related to quantitative data analysis and interpretation. The students are provided with a dataset and asked to conduct descriptive statistics, correlation analysis and hypothesis testing of continuous and categorical variables using simple linear and multilinear regression in SPSS.
3b. Analyze qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate	PHC6015 Epidemiological Research Designs and Methods <i>[required for Generalist and Health Promotion, Education and Behavior concentrations]</i>	Assessment: The Bare Bones Qualitative Analysis assignment Description: Using a qualitative data analysis approach, students analyze and interpret results of qualitative data to determine themes within health constructs for informing public health practice.
	PHC6196 Applied Data Analysis in Public Health	Assessment: Qualitative Data Analysis Assignment Description: Students are provided a link to a qualitative data source and use the data to analyze using MS Excel. The students develop a short report identifying thematic patterns in the results.

	[required for Global Health concentration]	
4. Interpret results of data analysis for public health research, policy or practice	PHC5050 Biostatistics for Public Health	Discussion board, assignments, quizzes, exams and final project. During weeks 1-12 the students are given questions, exercises, datasets, etc. to analyze quantitative data and interpret the results. The final project is a practical application of the knowledge and skills the students have acquired throughout the class related to quantitative data analysis and interpretation. The students are provided with a dataset and asked to conduct descriptive statistics, correlation analysis, and hypothesis testing of continuous and categorical variables using simple linear and multilinear regression in SPSS. For each of the exercises, the students are asked questions to help them interpret the results.
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	PHC6150 Public Health Policy	Comparative Health Systems Case Study: Student will develop a comparative analysis paper to compare and contrast the US healthcare structure and those of other developed, as well as low-to- middle income countries.
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	PHC5410 Social and Behavioral Sciences in Public Health	Module Discussion post: Students provide a practical example of how structural bias, social inequalities, and racism can shape health outcomes and identify at least four measures that can be implemented at the organizational, community, and governmental level to address such disparities.
Planning & Management to Promote Health		
7. Assess population needs, assets and capacities that affect communities' health	PHC5410 Social and Behavioral Sciences in Public Health	Precede-Proceed Module Assignment: Using the Precede-Proceed model, students are presented with a case study to address rural obesity patterns in Florida. They present the population needs, assets, and capacity that may affect community health in Florida.
8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs	PHC5410 Social and Behavioral Sciences in Public Health	Health Behavior Theory Application Assignment: Using a health behavior theory, students identify a population of choice (e.g., Hawaiians, Miners in South Africa, Intravenous drug users, HIV gay community, stroke belt residents, etc.) and then research and list the basic health statistics and health disparities regarding the population relating to the selected group – i.e., what are the health disparities in this group. Finally, they explain at least four potential techniques and challenges in providing culturally competent healthcare/services to this population.
9. Design a population-based policy, program, project or intervention	PHC5410 Social and Behavioral Sciences in Public Health	Maternal Child Health Assignment: Students analyze a case study depicting a public health problem and design a program to improve Maternal Child Health among a diverse population.
10. Explain basic principles and tools of budget and resource management	PHC6150 Public Health Policy	Take Home Essay Exam: Students complete an essay exam answering questions in detail and demonstrating a grasp of the principles and tools of budgeting and resource management in public health. The student must develop a draft budget and provide a budget justification statement.

11. Select methods to evaluate public health programs	PHC6150 Public Health Policy	Health Program Evaluation Case Study Review: Students are assigned a case study based on a population health program to read and provide a detailed analysis of the appropriate methods for evaluating the public health program presented in the case review. Students are assessed using a discussion grading rubric provided at the beginning of the assignment.
Policy in Public Health		
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence	PHC6150 Public Health Policy	Module Discussion: Students respond to a two-part discussion question on the public health policy-making process in the United States and ethical considerations for public health policy. The student response must include the role of data and evidence in informing the policy making process. The second discussion question asks students to discuss the ethics of public policy, using the Public Health Code of Ethics framework.
13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes	PHC6300 Environmental Health	Underserved Community Discussion: Students propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes in an underserved community.
14. Advocate for political, social or economic policies and programs that will improve health in diverse populations	PHC5410 Social and Behavioral Sciences in Public Health	Semester Project B: For the project students choose an issue that needs an advocacy push and do the background research to lay the groundwork for a solid advocacy effort. They learn about the issue and what has been done to date and analyze the strategies and obstacles faced by the advocates. Next, they identify current advocacy goals, existing/likely targets and change agents, constituencies and stakeholders, and ways to mobilize action.
15. Evaluate policies for their impact on public health and health equity	PHC6150 Public Health Policy	Policy Evaluation Assignment: Students will use population health data from different sources such as CDC Wonder or those from the National Center for Health Statistics and write a summary analysis of the impact of a specific health policy (e.g., ACA or SCHIP) before and after policy implementation.
Leadership		
16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making	PHC6150 Public Health Policy	Team Leadership Role Playing Assignment: Students work on a small group project where members of the team play different roles represented by the different stakeholders in the public health system. The team produces a policy statement on a given priority health issue, identified by the team using a consensus team-building process. Student groups self-identify methods of team correspondence, collaboration of ideas, and select a leadership role to compile and submit the assignment for each group. Assessment: Health Policy Analysis (group and individual assignment).
17. Apply negotiation and mediation skills to address organizational or community challenges	PHC6150 Public Health Policy	Assessment: Health Policy Analysis (group and individual assignment) Description, Working Together for One Health Assignment: Students are given a scenario about a public health problem that affects multiple sectors of the community. Students are then assigned to teams.

		Working in a team, students develop a brief project addressing an immediate problem in the community. Students use negotiation and mediation skills to come to a consensus among different stakeholders with competing interests and address organizational or community challenges that may impede the success of the program.
Communication		
18. Select communication strategies for different audiences and sectors	PHC6300 Environmental Health	Semester Environmental Health Project: Students select appropriate strategies for communicating environmental health risk and health effects affecting a low-income community. The target audience must be a broad base of stakeholders (examples include social media campaigns or fliers tailored to the health issue and target community).
19. Communicate audience-appropriate public health content, both in writing and through oral presentation	PHC6300 Environmental Health	Semester Environmental Health Project: Students pick a local environmental issue and discuss the health implications. Students create a PowerPoint presentation to communicate the health implications of a selected environmental health issue. The information is written at the 8th grade level and communicated in writing through the presentation and orally (through a recording), both shared with the class. Fellow students serve as the target audience and peer evaluators. Students also submit a 1-page summary of the project with reflections on lessons learned.
20. Describe the importance of cultural competence in communicating public health content	PHC6300 Environmental Health	Students first take a web-based course in "Cross Cultural Communication" and then pick a role to discuss a public health issue with their classmates from the point of view of that role.
Interprofessional Practice		
21. Perform effectively on interprofessional teams	PHC6300 Environmental Health	Assessment: Semester Project on Applied Interprofessional and/or Intersectoral Practice for Environmental Health Description: Students complete a semester project on an environmental health issue in the student's local community. In developing the proposed solution, each student must directly engage either in person or using teleconferencing means to gather the perspectives, knowledge and input from external sector/professionals outside mainstream public health. Students integrate the external professional's perspective in the proposed recommendations for addressing the environmental health problems. The project concludes with a reflection in which the student discusses how the external sector/professional's input changed the student's own perspective and influenced the final proposal recommendations to address the environmental health problems. The project is graded using a rubric.
Systems Thinking		
22. Apply systems thinking tools to a public health issue	PHC5410 Social and Behavioral Sciences in Public Health	Case Study Analysis Discussion: Students watch a video and answer questions related to using a systems approach- building on WHO building blocks.

Note in the table above that Competencies 2 and 3 have each been split into two subcomponents (2a/2b and 3a/3b), and we have identified required courses within each concentration to address these parts. This implementation plan was selected by faculty in place of a new course previously proposed (PHC5990 Applied Qualitative Research Methods) in order to keep the program at 42 credits for all three concentrations.

- 3) 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.

The following documentation related to this item is provided in the Electronic Resource File:

- Course Syllabi

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

For **Criterion D2, MPH Foundational Competencies**, the MPH Program acknowledges the following strengths and weaknesses:

- **Strengths:** The MPH Program has a dedicated cadre of faculty and adjuncts committed to the successful integration of the identified competencies in each course.
- **Weaknesses/Plans for Improvement:** We continue to refine the assessment items in the foundational courses. One of the challenges is maintaining consistency when there is a change in the faculty member teaching the course after the instructor who championed the development of the originally planned assessment activity leaves the program. In 2019, due to challenges in addressing the qualitative research methods requirements, the Chair recommended integration assessments for qualitative analysis. This has been implemented using an integrated project that uses mixed methods in PHC6015.

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 in addition to those listed in Criterion D2 or D3.

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

If the program intends to prepare students for a specific credential (eg, 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.

Template D4-1a: Assessment of Competencies for MPH - Generalist		
Competency	Course number(s) and name(s)	Describe specific assessment opportunity
Incorporate biological and scientific information to design and deliver an educational product for promoting health and wellness in a community setting.	PHC5123 Biological Basis of Public Health	Assessment: Take Home Essay Exam Question Description: Students are given a take home essay exam question. <i>[questions redacted for publicly posted Self-Study]</i>
Describe how evidence from data, analysis, findings reported in peer-reviewed literature is used in public health planning/decision-making.	PHC6015 Epidemiological Study Design and Research Methods	Community Improvement Project: Students develop a population health-based project that assesses factors related to population needs and capacities that affect communities. Students use data from multiple sources related to the community or population they choose to develop a proposal for addressing the problem or health needs gap. The proposal must include input from members of the target community or population, and a time line for project implementation with realistic indicators.
Explain how disease surveillance tools and systems are used to assess population health, disease trends, health status, and community health needs.	PHC6251 Disease Surveillance and Monitoring	Assessment: Exam Essay question Description: During the midterm, students are asked to answer an essay question. <i>[questions redacted for publicly posted Self-Study]</i>
Describe national disease registries and systems utilized in the U.S. for the surveillance of chronic and infectious disease	PHC6251 Disease Surveillance and Monitoring	Assessment: Exam Essay Question Description: Using examples, students are asked to answer an essay question. <i>[questions redacted for publicly posted Self-Study]</i>

Present and defend findings of population health data analysis in making recommendations for improving health.	PHC6196 Applied Data Analysis in Public Health	Assessment: Semester Project Data Analysis Description: Students complete a culminating report submitted at the end of the semester. The final report is a manuscript with the following sections: Abstract, Introduction, Methods, Results, Discussions, and Conclusion. The report should be doubled spaced and in APA 6 th or 7 th edition format. Students should select one of the provided national datasets (e.g., BRFSS or NHIS) for analysis. Results are to be based on the aforementioned datasets. The discussion section will highlight findings and compare them to the results of previous studies, as well as propose future research options for improving health.
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Template D4-1b: Assessment of Competencies for MPH – Health Promotion, Education and Behavior		
Competency	Course number(s) and name(s)	Describe specific assessment opportunity
Summarize and discuss peer-reviewed journal articles related to health promotion and program planning for population health improvement.	HSC6587 Health Education Program Planning & Evaluation	Assessment: Peer-review Journal Article Review Description: Students are provided a journal article and asked to write a summary and discuss peer-reviewed journal articles related to health promotion and program planning for population health improvement.
Discuss the philosophical foundations of health education and how they influence health promotion efforts in contemporary public health practice.	HSC6037 Philosophical Foundations of Health Education	Assessment: Semester Project Description: Students complete a semester project and philosophical statement that is shared with the class and archived in the e-portfolio.
Integrate program planning models, theories, and disciplinary knowledge for health promotion/education program development, implementation, and evaluation.	HSC6587 Health Education Program Planning & Evaluation	Assessment: Program Planning Semester Project Description: Students develop a comprehensive program including: statement of the problem, literature review, logic model, program activity, grant proposal, and presentation. These components will be activities throughout the semester and will culminate as the Final Paper and presentation.
Utilize evidence-based strategies in developing health promotion or education communication campaigns.	HSC6667 Social Marketing in Health	Assessment: Semester Project Description: Students develop a social marketing plan for health promotion.
Formulate an intervention based on identified gaps in community needs	PHC6015 Epidemiological Study Design and Research Methods	Assessment: Health Intervention Project Description: Students develop a brief project addressing a community-based problem. Students use the state or local health data to formulate an intervention based on identified gaps in community needs.

Template D4-1c: Assessment of Competencies for MPH – Global Health		
Competency	Course number(s) and name(s)	Describe specific assessment opportunity
Describe the relationship between access to clean water, sanitation, food, education, and environment on individual and population	PHC5442 Global Health	Assessment: Exam Essay question: Description: Students are provided the following question: students are asked to answer an essay question. <i>[questions redacted for publicly posted Self-Study]</i>

health in low-and-middle income countries.		
Describe different national models of health systems and healthcare expenditure, and the effects of cultural and social norms on population health in low-and middle-income countries.	PHC5442 Global Health	Assessment: Poster Project Description: Students create an electronic poster that will present information about a single topic in the area of global health. Posters will not be printed or created in hard copy. Creation of visual materials that present substantive information, and the ability to discuss the visual materials, is an acquired skill that is now essential in many career fields.
	PHC6110 Comparative Health Systems	Assessment: Semester Project Description: Students complete a semester Comparative Health Systems Paper on two instructor-approved countries from different world regions. Topics to be compared include: 1) Type of healthcare system (public or private); 2) Government's role; 3) Other major stakeholders and leadership; 4) Financial structure (who pays); 5) Population covered; 6) Technology status; 7) Cost effectiveness (%GPD or cost/patient); 8) Coverage options for low-income patients; 9) Specific key issues of concern; 10) Progress or barriers to addressing concerns; 11) Sustainability and future expectations.
Determine disease trends and the impact of specific country demographic and other major factors can influence patterns of morbidity, mortality, and disability in a defined population.	PHC5108 Monitoring and Evaluation in Global Health	Assessment: Case-Study Analysis Description: Using the Institute of Health Metrics data dashboard, students complete a national case study analysis on a health issue of their choice.
Evaluate national and international public health system capacity, including legal, ethical and cultural factors in responding to public health humanitarian crises.	PHC6670 Ethical Issues in Global Health	Assessment: Semester Project Description: Students develop an individual ethics analysis paper, on an instructor-approved topic to examine national health capacity and implications for ethical challenges given the cultural environment of the country of focus. Students must use a Framework for Writing an Ethics Paper.
Evaluate barriers to population health services in low and middle-income countries and capacity of public health systems for disease surveillance and monitoring.	PHC5108 Monitoring and Evaluation in Global Health	Assessment: Semester project Description: Using data from publicly available national and international repositories, students conduct an analysis to identify barriers to health services use and the impact of population health program.

- 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.

The following documentation related to this item is provided in the Electronic Resource File:

- Course Syllabi

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

For **Criterion D4, MPH & DrPH Concentration Competencies**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** The MPH Program has clearly defined concentrations with curriculum unique to each concentration.
- **Weaknesses/Plans for Improvement:** The MPH Program will continue to evaluate the current set of concentration competencies with the goal of clearly delineating the degree skills appropriate to each concentration. This will include continued evaluation of the assessment instruments. Additionally, the MPH Program will work on strategies for ensuring continuity of instruction when multiple faculty are assigned to teach different sections of the same course in the same semester or across academic years.

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 demonstrates and allows assessment of competency attainment. It must include at least two products. Examples include written assignments, projects, videos, multi-media presentations, spreadsheets, websites, posters, photos or other digital artifacts of learning. Materials may be produced and maintained (either by the program or by individual students) in any physical or electronic form chosen by the program.

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

When students seek approval to begin the applied practice experience, and after identifying a practice site, the student submits a Preceptor Approval Form (see ERF) to the Department. The Form is routed through the Department Chair who assesses the qualifications of the selected preceptor. Following approval of the Preceptor, the student completes and submits a Practicum Approval Form (see ERF), working with the preceptor and in consultation with department faculty assigned to teach PHC6945 Applied Practice Experience (formerly Internship I). The name change from Internship I to Applied Practice Experience is currently under review through the university curriculum review process. The Practicum Approval Form provides the students with the opportunity to select three foundational competencies and two concentration competencies that align with the goals and objectives of the practice activities. The students can use the same form to indicate the types of applied practice artifacts that will be produced for the practice site. All student practice projects must lead to the development of two applied practice experience (APEX) products of use to the host site. These products must be approved by the Preceptor and Faculty Advisor.

Additional policies for the applied practice experiences requirement for MPH students are outlined in Appendix B of the Public Health Practicum Guide. Key points are summarized below.

Excerpted from MPH Practicum Guide:

APPENDIX B - MPH Applied Practice Experience (APEX)

The Council on Education for Public Health (CEPH) requires that all professional degree students develop skills in basic public health concepts and demonstrate the application of these concepts through a practice experience. Students complete the requirements for the Applied Practice Experience (APEX) by successfully completing the PHC6945 Applied Practice Experience course. Students select five competencies (3 foundational and 2 concentration-based). The proposed project must be reviewed and approved by MPH Program faculty. All MPH students are required to complete this milestone prior to graduation.

In order to meet the requirements of the APEX, internship activities must take place in a professional setting, with prior authorization from the practicum course instructor, and activities must include the documentation requirements stated in the Public Health Practicum Guide. At the end of the first

part of the practicum (PHC6945 Applied Practice Experience), students submit two APEX products for inclusion in their e-portfolio, following consultation with the Preceptor and discussions with the instructor for PHC6945 to ensure the products are of use to the practice site or host agency.

Examples of appropriate APEX products include, but are not limited to those described in Table D5.a.

Table D5.a. Examples and Descriptions of APEX Products

APEX PRODUCT	EXAMPLES/DESCRIPTIONS
Written or Digital Artifacts of Learning	Brochures, Websites, or Social Media resources Developed for the host agency to promote a health program or intervention or raise awareness about a particular health issue
Multi-Media Presentation	Multi-media slideshow Developed for the host agency for use by the host site for in-house workforce development or community health improvement
Grant/Research Proposal	Grant/research proposal for population health improvement
Policy Brief	Public policy proposal Developed policy and rationale for host site to promote a new law or regulatory program to address a public health problem
Evaluation Plan	Developed an evaluation plan for use by the host agency: Use of a Logic Model or other evaluative framework

Grading of the APEX products is conducted by faculty teaching PHC6945. Additionally, during the oral defense at the conclusion of PHC6946, students are required to showcase their e-portfolio and APEX products as part of their presentation. The evaluation form for the oral defense is completed by all faculty in attendance and includes the set of competencies the student selected for the practicum experience. Using this form, faculty members evaluate competency attainment using the following scale: Below Expectations, Meets Expectations, or Exceeds Expectations.

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

The following documentation related to this item is provided in **D5** folder of the Electronic Resource File:

- Preceptor Approval Form
- Practicum Approval Form
- Practicum Guide

- 3) 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 (ie, 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.

Template D5-1a: Practice-based products that demonstrate MPH competency achievement: Generalist Concentration		
#	Specific products in portfolio that demonstrate application or practice	Competency as defined in Criteria D2 and D4¹
1	Development of a food survey and brochure for Cambodian and Laotian Refugees Community in Bayou La Batre, Alabama	C-2 Select quantitative and qualitative data collection methods appropriate for a given public health context
		C-18 Select communication strategies for different audiences and sectors
		C-21 Perform effectively on inter-professional teams
		MPHG-1 Use biological and scientific information on a given public health issue for health promotion and disease prevention
		MPHG-4 Develop a research paper based on quantitative data using analytical methods
2	Development of the narrative for a Breastfeeding Video Series in order to increase prenatal and postnatal breastfeeding knowledge in WIC enrolled women of Escambia County	C-7 Assess population needs, assets, and capacities that affect communities' health
		C-9 Design a population-based policy, program, project, or intervention
		C-21 Perform effectively on inter-professional teams
		MPHG-1 Use biological and scientific information on a given public health issue for health promotion and disease prevention
		MPHG-3 Develop a population health based project that determines factors related to population needs and capacities that affect communities
3	Developed a multimedia presentation using ArcGIS showing fresh food access points for low income communities	C-3 Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming, and software, as appropriate
		C-4 Interpret results of data analysis for public health research, policy, or practice
		C-7 Assess population needs, assets and capacities that affect communities' health
		MPHG-1 Use biological and scientific information on a given public health issue for health promotion and disease prevention
		MPHG-5 Design and report quantitative and qualitative information for the investigation of communicable or noncommunicable diseases
4	Development of a brochure on alcohol abuse in order to increase awareness in aviators	C-4. Interpret results of data analysis for public health research, policy or practice
		C-8: Apply awareness of cultural values and practices to the design or implementation of public health policies or programs
		C-9. Design a population-based policy, program, project or intervention
		MPHG-1: Use biologic and scientific information on a given public health issue for promotion and disease prevention
		MPHG-2. Create a public health intervention that integrates cultural values and practices in design and evaluation of public health policies or programs
5		C-7: Assess population needs, assets, and capacities that affect communities' health

Development of a brochure on vaccination among emergency first responders	C-9. Design a population-based policy, program, project, or intervention
	C-16: Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making
	MPHG-1: Use biological and scientific information on a given public health issue for health promotion and disease prevention
	MPHG-2: Create a public health intervention that integrates cultural values and practices in design and evaluation of public health policies or programs

¹ Earlier versions of some competences used in the previous years are provided in this table.

Template D5-1b: Practice-based products that demonstrate MPH competency achievement: Health Promotion, Education and Behavior Concentration		
#	Specific products in portfolio that demonstrate application or practice	Competency as defined in Criteria D2 and D4¹
1	Development of an infographic to train people how to protect their eyes from cataracts	C-3 Analyze quantitative and qualitative data
		C-9 Design a population-based program, policy or intervention
		C-18 Select communication strategies for different audiences and sectors
		MPHP-1 Articulate the determinants of health and illness
		MPHP-4 Utilize evidence-based strategies in developing health promotion/education communication campaigns
2	Development of a PowerPoint presentation on sexual violence prevention for student-athletes	C-3 Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate
		C-4: Interpret results for data analysis for public health research, policy or practice
		C-9: Design a population-based policy, program, project or intervention
		MPHP-2: Apply health promotion/education concepts from disciplinary knowledge (description of state, local, and federal public health agencies, history of health education/promotion, epidemiology, health program planning and evaluation, health behavior change, and related course work) when planning, implementing and evaluating health programs
		MPHP-3: Utilize program planning models and theories for health promotion/education program development, implementation, and evaluation
3	Development of a brochure to educate stakeholders on addressing access to care in Monroe County, Florida	C-7: Assess population needs, assets and capacities that affect communities' health
		C-16: Apply principles of leadership, governance and management, which include creating vision, empowering others, fostering collaboration and guiding decision making
		C-21: Perform effectively on interprofessional teams
		MPHP-1: Articulate the determinants of health and illness and factors (including social/lifestyle choices, socioeconomic, environmental, and genetic influences) contributing to health promotion/education and disease prevention
		MPHP-5: Assess internal & external factors that may impact delivery of health promotion/education programs
4	Development of a PowerPoint presentation to highlight the problem of infant mortality in Santa Rosa County, FL	C-4: Interpret results for data analysis for public health research, policy or practice
		C-5: Compare the organization, structure, and function of healthcare, public health, and regulatory systems across national and international settings
		C-9: Design a population-based policy, program, project or

		intervention
		MPHP-1: Articulate the determinants of health and illness and factors (including social/lifestyle choices, socioeconomic, environmental, and genetic influences) contributing to health promotion/education and disease prevention
		MPHP-3: Utilize program planning models and theories for health promotion/education program development, implementation, and evaluation
5	Development of a PowerPoint presentation to educate people on domestic violence in men and the LGBTQ community	C-9: Design a population-based policy, program, project or intervention
		C-13: Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes
		C-18: Select communication strategies for different audiences and sectors
		MPHP-3: Utilize program planning models and theories for health promotion/education program development, implementation, and evaluation
		MPHP-4: Utilize evidence-based strategies in developing health promotion/education communication campaigns

¹ Earlier versions of some competences used in the previous years are provided in this table.

Template D5-1c: Practice-based products that demonstrate MPH competency achievement: Global Health Concentration		
#	Specific products in portfolio that demonstrate application or practice	Competency as defined in Criteria D2 and D4¹
1	Policy brief to educate the Naval hospital senior leadership about the benefits of a formal penicillin allergy testing process to the military patient population as well as to highlight the potential cost savings associated with a successful program.	C-2 Select quantitative and qualitative data collection methods appropriate for a given public health context.
		C-3 Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming, and software, as appropriate.
		C-4 Interpret results of data analysis for public health research, policy, or practice.
		MPHG-1 Use biological and scientific information on a given public health issue for health promotion and disease prevention.
		MPGH-4 Develop a research paper based on quantitative data using analytical methods.
2	Development of a brochure on state loan repayment program for medical professionals in West Virginia rural area	C-1: Apply epidemiological methods to the breadth of settings and situations in public health practice
		C-4: Interpret results of data analysis for public health research, policy or practice
		C-17: Apply negotiation and mediation skills to address organizational or community challenges
		MPHG-3: Develop a population health based project that determines factors related to population needs and capacities that affect communities
		MPHG-4: Develop a research paper based on quantitative data using analytical methods
3	Development of a policy brief on psychotropic medication waivers in US Naval aviation	C-3 Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming, and software, as appropriate
		C-4: Interpret results of data analysis for public health research, policy or practice
		C-9: Design a population-based policy, program, project or intervention
		MPHG-1 Use biological and scientific information on a given public health issue for health promotion and disease prevention.
		MPHG-5: Design and report quantitative and qualitative information

		for the investigation of communicable or non-communicable diseases
4	Development of a GIS presentation using Excel that determines if a mental health diagnosis altered the rate of being initially categorized as unsuitable and on final recommendation remaining unsuitable for USNH command	C-1: Apply epidemiological methods to the breadth of settings and situations in public health practice
		C-2: Select quantitative and qualitative data collection methods appropriate for a given public health context
		C-11: Select methods to evaluate public health programs
		MPHG-3: Develop a population health based project that determines factors related to population needs and capacities that affect communities
5	Development of a PowerPoint presentation to educate the parents of middle and high school-aged students on the effects of the adolescent electronic cigarette consumption.	MPHG-5: Design and report quantitative and qualitative information for the investigation of communicable or non-communicable diseases
		C-2: Select quantitative and qualitative data collection methods appropriate for a given public health context
		C-4: Interpret results of data analysis for public health research, policy or practice
		C-9: Design a population-based policy, program, project or intervention
		MPHG-1: Use biological and scientific information on a given public health issue for health promotion and diseases
		MPHG-4: Develop a research paper based on quantitative data using analytical methods

¹ Earlier versions of some competences used in the previous years are provided in this table.

The following documentation related to this item is provided in the **D5** folder of the Electronic Resource File:

- Applied Practice Experiences: Samples of Student Work

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

For **Criterion D5, MPH Applied Practice Experiences**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** The MPH Program has made significant progress during the period of the Self-Study addressing the implementation of the Applied Practice Experience requirement in PHC6945.
- **Weaknesses/Plans for Improvement:** The Department has been engaged in a year-long discussion during the most recent 2021-2022 academic year on ways to improve competency assessment in PHC6945 for the requirements of documenting applied practice experiences. From these discussions, the Department has initiated plans to change the name of this course to Applied Practice Experience to reflect the competency alignment more directly, and avoid confusion among students.

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.

Professional certification exams (eg, 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 (eg, 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.

Template D7-1: MPH Integrative Learning Experience for all MPH Concentrations	
Integrative learning experience (list all options)	How competencies are synthesized
Capstone project	<p>Students in all MPH concentrations have so far used the Applied Practice learning experience to develop a comprehensive report in which they synthesize theories and concepts from the didactic courses.</p> <p>Students may select different competencies from those emphasized in the APEX. However, in all projects, students must select and reinforce foundational Competency 19.</p> <p>The ILE capstone is completed in the last semester of enrollment in the MPH program.</p> <p>For the final ILE report, students receive feedback over the duration of the course on their work before the final draft is submitted (i.e., the development of the ILE report is completed through an iterative process requiring an initial draft of each ILE section to be submitted for feedback from the course instructor before all sections are integrated together in the final ILE report).</p> <p>Students are also required to provide a reflection on their learning experience in the concluding sections of the ILE report on lessons learned and professional development.</p> <p>An oral defense evaluation form is completed by all faculty in attendance at the student's presentation of their ILE report and includes the set of competencies the student selected for the practicum experience. Using this evaluation form, faculty members evaluate competency attainment using the following scale: Below Expectations, Meets Expectations, or Exceeds Expectations.</p>

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

The UWF MPH Program adopted the capstone option to meet the requirements of the Integrative Learning Experience. As such, naturally the ILE report flows from activities that include the student's work on the APEX products. Students are expected to select the foundation competencies on their Practicum Approval Form that meet the requirements noted below for the project producing the final ILE report.

Excerpted from Practicum Approval Form:

SECTION 2: PRACTICUM PROJECT DESCRIPTION

Each practicum experience should reinforce the foundational competencies as well as the cross-cutting competencies in communication, informatics, diversity and culture, leadership, professionalism, program planning, systems thinking, and public health biology.

Tailor the competencies to the specific tasks to be undertaken in the practicum.

Select competencies from the **Table of Competencies for MPH Practicums**. Students and Preceptors should work together to select those competencies most directly aligned with the proposed project. The selected competencies will be assessed during the student's oral presentation. Competency C-19 is required for all projects.

Project Competencies Most Relevant to your Project [from Table of Competencies for MPH Practicums]	
1	FOUNDATIONAL competency 1 here.
2	FOUNDATIONAL competency 2 here.
3	FOUNDATIONAL competency 3 here.
4	CONCENTRATION-BASED competency 1 here.
5	CONCENTRATION-BASED competency 2 here.
6	C-19. Communicate audience-appropriate public health content, both in writing and through oral presentation.

Policies for the integrative learning experience requirement for MPH students are outlined in Appendix B of the MPH Practicum Guide. Key points are summarized below.

Excerpted from MPH Practicum Guide:

APPENDIX C: MPH Integrative Learning Experience (ILE)

The Integrative Learning Experience (ILE) is required for all Master of Public Health (MPH) students. The ILE is the culminating component of the student's training demonstrating integration of foundational and concentration-based knowledge and skills. Successful completion of the ILE is demonstrated by submission of a final report with recommendations for the practice domain of public health at the organizational or community level.

Students submit capstone products for the ILE upon successful completion of the PHC6946 Internship in Public Health II course. Table D7.a provides examples of ILE products or artifacts that students must include in their e-portfolio.

Table D7.a. Examples and Descriptions of ILE Products

PRODUCT	DESCRIPTIONS
<p>ILE Capstone Report</p>	<p>Students submit a high-quality written report on the Integrative Learning Experience to the instructor.</p> <p>The capstone report must include the following:</p> <ul style="list-style-type: none"> Abstract Practicum Rationale Public Health Significance Literature Review Methodology Results Discussion Lessons Learned Recommendation Conclusion <p>Each report is evaluated using a rubric by a primary faculty member who is the practicum instructor.</p>
<p>ILE Capstone Presentation</p>	<p>Students present the ILE report summary in an oral presentation before the preceptor and program faculty.</p> <p>The capstone presentation must include the following:</p> <ul style="list-style-type: none"> Title / Authors / Affiliations / Disclosures Outline Background / Statement of the Problem Public Health Significance Methodology Results Discussion Conclusions Limitations Public Health Lessons Learned Recommendations / Future Work Acknowledgements References <p>Each presentation is evaluated by the program faculty using a rubric based on the student's selected competencies from PHC6945 Internship in Public Health I.</p>

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

The following documentation related to this item is provided in the Electronic Resource File:

- PHC6946 Public Health Integrative Experience (formerly Internship in Public Health II): Course Syllabus
- Public Health Practicum Guide

- 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 following documentation related to this item is provided in the **D7** folder of the Electronic Resource File:

- ILE Evaluation Tool (screenshot)

- 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.

Template D7-1: Capstone Projects Associated with Integrative Learning Experience		
Generalist Concentration		
#	Capstone Project Title	Competency as defined in Criteria D2 and D4¹
1	Hypoxia's effects on simulator performance and SpO2 levels among US Naval Aviators [Generalist Concentration]	C4. Interpret results of data analysis for public health research, policy or practice
		C-18. Select communication strategies for different audiences and sectors
		C-21 Perform effectively on interprofessional team
		MPHG-1. Use biological and scientific information on a given public health issue for health promotion and disease prevention
2	Monocular Reduced Vision in Pilot Performance [Generalist Concentration]	C-4. Interpret results of data analysis for public health research, policy or practice
		C-9. Design a population-based policy, program, project, or intervention
		C-21. Perform effectively on inter-professional teams
		MPHG-4. Develop a research paper based on quantitative data using analytical methods
		MPHG-5. Design and report quantitative and qualitative information for the investigation of communicable or-non-communicable diseases
3	HIV Awareness in Brevard County: Assessing barriers for HIV care and increasing awareness in Brevard County about HIV issues to reduce stigma [Generalist Concentration]	C-9. Design a population-based policy, program, project or intervention
		C-16. Apply principles of leadership, governance, and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making
		C-18. Select communication strategies for different audiences and sectors
		MPHG-1: Use biological and scientific information on a given public health issue for health promotion and disease prevention
		MPHG-3: Develop a population health-based project that determines factors related to population needs and capacities that affect communities
4	COVID-19 Associated thromboembolic sequelae and implications for aviation	C-2. Select quantitative and qualitative data collection methods appropriate for a given public health context
		C-3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming, and software, as appropriate
		C-4. Interpret results for data analysis for public health research, policy or practice

	[Generalist Concentration]	MPHG-1. Use biological and scientific information on a given public health issue for health promotion and diseases
		MPHG-5. Design and report quantitative and qualitative information for the investigation of communicable or noncommunicable diseases
5	COVID-19 incident management team: Island County, WA [Generalist Concentration]	C-7. Assess population needs, assets, and capacities that affect communities' health
		C-9. Design a population-based policy, program, project, or intervention
		C-16: Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making
		MPHG-1: Use biological and scientific information on a given public health issue for health promotion and disease prevention
		MPHG-3: Develop a population health-based project that determines factors related to population needs and capacities that affect communities
Health Promotion, Education and Behavior Concentration		
#	Capstone Project Title	Competency as defined in Criteria D2 and D4¹
1	Evaluation of special Olympics Florida's health programs to identify opportunities for supplementary program development to meet population needs [Health Promotion Concentration]	C-7: Assess population needs, assets and capacities that affect communities' health
		C-9: Design a population-based policy, program, project or intervention
		C-11: Select methods to evaluate public health programs
		MPHP-2: Apply health promotion/education concepts from disciplinary knowledge (description of state, local, and federal public health agencies, history of health education/promotion, epidemiology, health program planning and evaluation, health behavior change, and related course work) when planning, implementing and evaluating health programs
		MPHP-3: Utilize program planning models and theories for health promotion/education program development, implementation, and evaluation
2	Corporate Wellness Program Planning, Implementation, and Evaluation [Health Promotion Concentration]	C-7: Assess population needs, assets and capacities that affect communities' health
		C-9: Design a population-based policy, program, project or intervention
		C-11: Select methods to evaluate public health programs
		MPHP-3: Utilize program planning models and theories for health promotion/education program development, implementation, and evaluation
		MPHP-4: Utilize evidence-based strategies in developing health promotion/education communication campaigns
3	An Analysis of Factors Associated with a Lower Likelihood of Getting Tested for HIV [Health Promotion Concentration]	C-2. Select quantitative and qualitative data collection methods appropriate for a given public health context
		C-4: Interpret results for data analysis for public health research, policy or practice
		C-7: Assess population needs, assets and capacities that affect communities' health
		MPHP-1: Articulate the determinants of health and illness and factors (including social/lifestyle choices, socioeconomic, environmental, and genetic influences) contributing to health promotion/education and disease prevention
		MPHP-3: Utilize program planning models and theories for health promotion/education program development, implementation, and evaluation
4	An analysis of strategies to	C-4: Interpret results for data analysis for public health research, policy or practice
		C-5: Compare the organization, structure, and function of healthcare, public

	prevent injuries among infants [Health Promotion Concentration]	health, and regulatory systems across national and international settings C-9: Design a population-based policy, program, project or intervention MPHP-1: Articulate the determinants of health and illness and factors (including social/lifestyle choices, socioeconomic, environmental, and genetic influences) contributing to health promotion/education and disease prevention MPHP-3: Utilize program planning models and theories for health promotion/education program development, implementation, and evaluation
5	An evaluation of WIC participation in Pasco County, FL during the COVID-19 pandemic [Health Promotion Concentration]	C-4: Interpret results of data analysis for public health research, policy or practice C-15: Evaluate policies for their impact on public health and health equity C-22: Apply systems thinking tools to a public health issue MPHP-2: Apply health promotion/education concepts from disciplinary knowledge when planning, implementing and evaluating health programs MPHP-5: Assess internal & external factors that may impact delivery of health promotion/education programs
Global Health Concentration		
#	Capstone Project Title	Competency as defined in Criteria D2 and D4¹
1	Which is the Greatest Indicator of Success in Naval Flight Training: Intelligence, Optimism, or Grit? [Global Health Concentration]	C-4: Interpret results of data analysis for public health research, policy or practice C-7: Assess population needs, assets and capacities that affect communities' health C-16: Apply principles of leadership, governance and management, which include creating vision, empowering others, fostering collaboration and guiding decision making MPHG-3: Develop a population health based project that determines factors related to population needs and capacities that affect communities MPHG-4: Develop a research paper based on quantitative data using analytical method
2	The effect of T-6 Flights on respiratory physiology [Global Health Concentration]	C-2 Select quantitative and qualitative data collection methods appropriate for a given public health context C-3: Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming, and software, as appropriate. C-4: Interpret results for data analysis for public health research, policy or practice MPHG-1 Use biological and scientific information on a given public health issue for health promotion and disease prevention MPHG-4: Develop a research paper based on quantitative data using analytical methods

¹ Earlier versions of some competences used in the previous years are provided in this table.

The following documentation related to this item is provided in the **D7** folder of the Electronic Resource File:

- Integrative Learning Experiences: Samples of Student Work

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

For **Criterion D7, MPH Integrative Learning Experience**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** The MPH Program has made significant progress during the period of the Self-Study addressing the implementation of the Integrative Learning Experience requirement in PHC6946.
- **Weaknesses/Plans for Improvement:** The Department has been engaged in a year-long discussion during the most recent 2021-2022 academic year on ways to improve competency assessment in PHC6946 for the requirements of documenting the integrative learning experience. From these discussions, the Department has initiated plans to change the name of this course to Integrative Learning Experience to reflect the programmatic alignment more directly.

D8. DrPH Integrative Learning Experience

Not applicable.

D9. Public Health Bachelor's Degree General Curriculum

Not applicable.

D10. Public Health Bachelor's Degree Foundational Domains

Not applicable.

D11. Public Health Bachelor's Degree Foundational Competencies

Not applicable.

D12. Public Health Bachelor's Degree Cumulative and Experiential Activities

Not applicable.

D13. Public Health Bachelor's Degree Cross-Cutting Concepts and Experiences

Not applicable.

D14. 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 MPH Program at UWF is a 42-credit program, and all courses are 3 semester credit hours. The MPH Program allows a maximum of 9 credit hours of transfer from courses earned within 6 years of admission to the UWF MPH program with a grade of B or better. All courses are offered at 16 weeks of length for Fall and Spring semesters and at 13 weeks of length for Summer semesters.

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

UWF defines a credit hour as an amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally established equivalency that reasonably approximates not less than—

- One hour of classroom or direct faculty instruction and a minimum of two hours of out of class student work each week for approximately fifteen weeks for one semester or trimester hour of credit, or ten to twelve weeks for one quarter hour of credit, or the equivalent amount of work over a different amount of time; or
- At least an equivalent amount of work as required in paragraph (1) of this definition for other academic activities as established by the institution including laboratory work, internships, practica, studio work, and other academic work leading to the award of credit hours.

A direct link to university-published information in this area is as follows:

- UWF Definition of a Credit Hour
 - <https://catalog.uwf.edu/undergraduate/academicpolicies/credit/#definitionofacreditourtext>

D15. DrPH Program Length

Not applicable.

D16. Bachelor's Degree Program Length

Not applicable.

D17. Academic Public Health Master's Degrees

Not applicable.

D18. Academic Public Health Doctoral Degrees

Not applicable.

D19. All Remaining Degrees

Not applicable.

D20. 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.

As noted in Template Intro-1, the MPH degree at UWF is delivered via distance education.

- 2) Describe the public health distance education programs, including

- a) an explanation of the model or methods used,

Courses in the MPH Program are delivered via the Canvas eLearning management system. Prior to Canvas, Desire2Learn was used by UWF.

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

Distance education was selected as the modality for delivering the MPH Program to address the needs of the regional area as well as national needs in public health training.

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

Support services are provided by UWF's HelpDesk for login-related problems. Questions directly related to the Canvas eLearning management system are addressed directly to the Canvas technical support services.

- 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

The academic rigor of online programs at UWF is evaluated using the same expectations used for traditional face-to-face courses at UWF. As a primary indicator, every semester students are surveyed with the **State University System Student Assessment of Instruction Survey** for each course they are enrolled in and asked to provide this specific feedback confidentially to each course instructor and the Chair:

- Intellectual Challenge of Course Requirements
- Instructor Responsive to Technical Issues
- Overall Assessment of Course Organization
- Based on your performance to date, what grade do you anticipate earning in this course?
- Approximately how many hours per week have you devoted to working on this particular course in addition to required class sessions?
- Strength of performance and specific recommendations to improve the quality of instruction (Online students: please describe any technical issues you would like to address as well)

Additionally, the Chair monitors scores for graduating students on the Comprehensive Exam as an indicator of potential issues with instructional consistency, as shown in Table D20.a.

Table D20.a. Mean First Attempt Scores on Comprehensive Exam by Graduating Students

Indicator	Target	2018-2019 [N=40]	2019-2020 [N=48]	2020-2021 [N=42]
Average scores on Comprehensive Exam	75%	74.9	78.5	78.9

Source: Tableau: ACAD_Graduation and REG_Graduation Conferral Report | MPH Program Coordinator

Finally, all currently enrolled students are polled with the **MPH Program Current Students Feedback Survey** and asked to provide this specific feedback:

- o Instructors in my classes facilitate student interaction and provide constructive feedback conducive to my learning.
- e) the manner in which it evaluates the educational outcomes, as well as the format and methods.

The MPH Program works with the Global Online unit at UWF to evaluate educational outcomes in online courses using best practices promoted by its adopted Quality Matters® initiatives.

- 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.

MPH faculty have access to software applications within the Canvas eLearning management system that support proctored exams, including video-monitoring preceded by a registration process that requires the student to hold up their UWF-issued photo identification card.

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

For **Criterion D20, Distance Education**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** The MPH Program adheres to best practices derived from the nationally-recognized Quality Matters® standards for developing high-quality online instructional experiences.
- **Weaknesses/Plans for Improvement:** The MPH Program will be proactive in the coming academic year to understand new opportunities for faculty training as the services previously housed under its Center for University Teaching, Learning, and Assessment unit are merged into the newly centralized Global Online unit.

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.

Template E1-1: 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
1	Patricia Barrington	Lecturer	Non-tenure-track	Ed.D., MS	University of West Florida	Doctor of Education / Community Health Education	MPH Health Promotion
2	Denice Curtis	Associate Professor	Tenured	DHSc., DDS, MPH	NOVA Southeastern University, University of Kansas Medical Center, Central University of Quito, Ecuador	Health Sciences / Public Health / Dentistry	MPH Generalist MPH Global Health
3	Wes Farr	Lecturer	Non-tenure-track	MD, MPH	University of West Virginia	Medicine / Public Health	MPH Global Health
4	Daudet Ilunga Tshiswaka	Assistant Professor	Tenure-track	Ph.D.	University of Illinois at Urbana-Champaign	Community Health / Health Education	MPH Generalist MPH Health Promotion
5	Damaris Kinyoki	Assistant Professor	Tenure-track	Ph.D., MSc, MPH	University of Warwick, Coventry, UK, University of Nairobi, Kenya	Health Sciences / Medical Statistics / Family Health	MPH Global Health
6	Gregory Steele	Visiting Lecturer	Non-tenure-track	Dr.PH, MPH	University of Alabama, Birmingham	Epidemiology / Biostatistics	MPH Generalist
7	Melanie Sutton	Professor	Tenured	Ph.D., Graduate GIS Certificate	University of South Florida, University of West Florida	Computer Science / Geographic Information Science	MPH Generalist
8	Debra Vinci	Associate Professor	Tenured	Dr.PH MS	Loma Linda University/ University of Washington	Public Health / Human Nutrition	MPH Health Promotion

- 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.

Template E1-2: Non-Primary Instructional Faculty Regularly Involved in Instruction								
#	Name	Academic Rank	Title and Current Employment	FTE or % Time Allocated	Graduate Degrees Earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Concentration affiliated with in Template C2-1
1	William Bullock	Adjunct Faculty	Health Officer, CSX Railroad	0.125 FTE	Ph.D., MSPH, CIH, CSP, CIE	Tulane University	Environmental Health	MPH Generalist
2	Teresa Caples	Adjunct Faculty	Independent Consultant	0.625 FTE	Dr. Bioethics, MS, MA, CIP	Loyola University, Chicago, Middle Tennessee State University	Bioethics / Health Policy / Biostatistics	MPH Global Health
3	Michael Findley	Adjunct Faculty	Independent Consultant	0.25 FTE	Ph.D., MSPH	University of Tennessee at Knoxville	Safety / Industrial Hygiene	MPH Generalist
4	Maureen Howard	Adjunct Faculty	Department of Movement Sciences and Health	0.125 FTE	Ed.D., CHES	University of West Florida	Health Promotion	MPH Health Promotion
5	John Lanza	Adjunct Faculty	FDOH Medical Director, Community Health Northwest Florida	0.375 FTE	MD, Ph.D., MPH	University of Florida	Medicine / Public Health	MPH Generalist
6	Joseph LaVan	Adjunct Faculty	Independent Consultant	0.125 FTE	DO, MPH	University of Miami	Medicine / Public Health	MPH Generalist
7	Meredith Marten	Adjunct Faculty	Assistant Professor, UWF Department of Anthropology	0.33 FTE	Ph.D., MPH	University of Florida, Michigan State University	Medical Anthropology / Public Health	MPH Global Health
8	Justice Mbizo	Associate Professor	Chair, UWF Department of Public Health	0.167 FTE	Dr.PH, MS	Morgan State University, Central Michigan University	Public Health / Health Services Administration	MPH Generalist
9	John Todorovich	Professor	Department of Movement Sciences and Health	0.04 FTE	Ph.D., M.A. Ed.	University of Alabama	Human Performance Pedagogy	MPH Health Promotion
10	John Venezia	Adjunct Faculty	United States Army/ Occupational Health	0.25 FTE	DO, MPH	Nova Southeastern / University of Texas	Occupational Medicine	MPH Generalist
11	Guy-Lucien Whembolua	Adjunct Faculty	Associate Professor,	0.625 FTE	Ph.D.	Pennsylvania State University	Psychosocial Sciences	MPH Health Promotion

			University of Cincinnati					
12	Christopher Wirth	Assistant Professor, non-tenure track	Department of Movement Sciences and Health	0.125 FTE	Ph.D., MS	University of Florida	Health Education and Human Performance / Exercise Science and Human Sports Science	MPH Health Promotion

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

The following documentation related to this item is provided in the **E1** folder of the Electronic Resource File:

- CVs: Primary Instructional Faculty and Non-Primary Instructional Faculty
- Course Schedules

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

The information on faculty expertise is drawn from the University's FACS system which tracks all instructional faculty qualifications at the beginning of each academic year. Department Chairs and the UKCOH leadership, in collaboration with the Division of Academic Affairs, review the credentials of all hired faculty, including adjuncts, to ensure compliance with regional accreditation standards. For UWF, regional accreditation standards are established by the Southern Association of Colleges and Schools Commission on Colleges. In general all persons providing instructional services at the graduate level must hold a terminal degree in the discipline.

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

For **Criterion E1, Faculty Alignment with Degrees Offered**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** The MPH Program is supported by a qualified group of faculty with expertise that crosses the broad spectrum of public health disciplines. Equally so, there is diverse public health expertise among the non-primary instructional faculty to support our mission and serve the students.
- **Weaknesses/Plans for Improvement:** While there are no major weaknesses noted in this area, as the program grows there is a need to periodically evaluate the base faculty full-time equivalent loading. This is the primary instructional faculty resources against student ratios for career advising, engagement of students in both service and research, class sizes, and time to address student feedback on faculty availability. This is even more critical as the program grows, given faculty expectations for scholarship and professional service.

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, including information on appointment tracks for practitioners, if applicable. Faculty with significant practice experience outside of that which is typically associated with an academic career should also be identified.

Non-primary instructional faculty with practice experience include the following:

- William Bullock, Ph.D., MSPH, CIH, CSP, CIE - Serves as Health Officer at CSX Railroad
- Michael Findley, Ph.D., MPH - Provides independent services as an Occupational Safety Consultant
- John Lanza, MD, Ph.D., MPH - Serves as FDOH Medical Director at Community Health Northwest Florida (retired from the Florida Department of Health in Escambia County)
- Joseph LaVan, DO, MPH - Serves as US Navy Flight Surgeon and practices occupational and operational medicine, bringing his professional expertise to students in the Applied Practice Experience, as well as the Integrative Learning Experience course
- John Venezia, DO, MPH – Serves while practicing occupational and operational medicine, bringing his professional expertise to students in the Applied Practice Experience course, as well as the Integrative Learning Experience course
- Teresa Caples, Dr. Bioethics, MS, MA, CIP - Provides independent services as a consultant

Examples of methods these faculty use to integrate their practice experience into the instruction of students are summarized in Table E2.a below.

Table E2.a. Methods Used to Integrate Practice Experience into the Instruction of Students

Faculty Name	Significant Practice Experience	Courses Taught	Summary of Integration Methods
William Bullock, Ph.D., MSPH, CIH, CSP, CIE	Serves as Health Officer at CSX Railroad	PHC5356 Fundamentals of Industrial Hygiene	I keep the course content relevant to current events through my active practice at CSX Transportation and through the AIHA (a preeminent Industrial Hygiene professional organization). For example, for the last two years, I have added elements related to COVID-19 by updating an article critique of effectiveness of face-coverings and ventilation systems. I have also revised several discussion topics to cover the AIHA Safe Return to Work procedures. The practice of industrial hygiene includes the anticipation, recognition, evaluation and control of occupational health hazards. COVID-19 is one of the emerging areas for IH's to evaluate and control in the work place and OSHA has an emphasis program on this. Another area that was added is silica hazard and control, as that too is a special emphasis program for OSHA.

Michael Findley, Ph.D., MPH	Provides independent services as an Occupational Safety Consultant	PHC5355 Fundamentals of Occupational Safety and Health	Students complete OSHA employer mandated forms 300 & 300A and conduct a management audit. These two skills are required of senior managers and safety managers.
		PHC5351 Occupational Safety and Health in the Health Care Environment	Students conduct a simulated audit of a healthcare workplace and identify preventative measures and corrective actions. These two skills are required of senior managers and safety managers.
John Lanza, MD, Ph.D., MPH	Currently serves as practicing pediatrician at Community Health Northwest Florida	HSC5205 Public Health Preparedness	When I worked for the Florida Department of Health, I was a leader in statewide anti-terrorism efforts lead by the Florida Department of Law Enforcement. I was involved with distributing hundreds of millions of dollars to various Florida organizations including the FDOH. Module 4 of the course covers funding for PHP programs by federal, state, tribal, and local funding sources. Within the FDOH, I was involved in the preparedness and response for all-hazards incidents and events including 20 tropical events. Course modules 2, 3, 5, and 7 cover all-hazards preparedness principles and response activities. I wrote the state policy on radiological incident preparedness and response that is covered in Modules 2, 3, 5 and 9. In addition, I developed the current iteration for how Florida handles special needs patients in shelters that is covered in Modules 7, 9, and 10. Practical legal matters including COVID-related matters are covered in Module 12. In addition, all students are required to obtain their permanent, life-long, FEMA Student Identification Number and take 10 online FEMA-certified classes including: IS-230.D (Fundamentals of Emergency Management); IS-800.d (National Response Framework, An Introduction); IS-100.C (Introduction to Incident Command System) and IS-700.B (National Incident Management System (NIMS)); IS-366.A: Planning for the Needs of Children in Disasters; IS-200.C: Basic Incident Command System for Initial Response; IS-29.A: Public Information Officer Awareness; IS-26: Guide to Points of Distribution; IS-317.A: Introduction to Community Emergency Response Teams; IS-909: Community Preparedness: Implementing Simple Activities for Everyone.
Teresa Caples, Dr. Bioethics, MS, MA, CIP	Provides independent services as a consultant	PHC6110 Comparative Health Systems	The course topics are kept current and relevant to the competencies using online health care resources, many from my own training experiences with the World Health Organization and Center for Disease Control and Prevention, as well as my personal experiences working with the Guatemalan government to open a new nursing school, and other international research experiences. I guide students to complete a comparative table of health systems of two countries, which is expanded into a paper for the final project. The countries must be in two different world regions to contrast cultures and social norms, as well country level income.
		PHC6150 Public Health Policy	My years of team policy-process experiences from public health, compliance, and research help to guide the students as they form their own teams to analyze and prepare a memo for leadership. Students select their own topic of concern, research justifications, and their team's leadership to submit the work – which is all similar to my own participation on research and healthcare committees. And my research and compliance work guides the students as they prepare individual policy analysis with research justifications. The students learn valuable real world skills in teamwork and data research to provide their final policy analysis and memos for leadership.

		PHC6670 Ethics in Global Health	I keep the course current using online resources from my World Health Organization (WHO) and Center for Disease Control and Prevention training, as well as online legal databases, gender-based violence database, and professional resources from my association with Public Responsibility in Medicine and Research (PRIMR) and Loyola University Chicago. Students also play a WHO-recommended online game of misinformation to better understand the current crisis of healthcare Infodemics. The students use these resources to analyze their own current global healthcare issue of concern for the final paper, with justifications from the foundational ethical principles and theories.
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- 2) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

For **Criterion E2, Integration of Faculty with Practice Experience**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** Our non-primary instructional/adjunct faculty have practice expertise across a broad range of disciplines, including preventative medicine, public health, occupational health and safety, and bioethics. Primary instructional faculty are engaged with community practice agencies through supervision of students engaged in the applied practice experiences.
- **Weaknesses/Plans for Improvement:** Engagement related to the practice of public health was limited for the primary instructional faculty during the most recent 2020-2021 academic year due to the complexities of the COVID-19 pandemic if mechanisms for virtual participation were not available. The MPH Program will be initiating discussions in the 2021-2022 year on ways to increase engagement moving forward as virtual internship opportunities continue to be pursued by students and supported by external agencies.

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 means through which the program ensures that faculty are informed and maintain currency in their areas of instructional responsibility. The description must address both primary instructional and non-primary instructional faculty and should provide examples as relevant.

The following means are available for faculty to be informed and maintain currency in their areas of instructional responsibility:

- **Work assignment:** At the beginning of the academic year, each faculty member is notified of their work assignment and expectations for teaching.
- **Engagement** - Both primary and non-primary instructional faculty are expected to engage with colleagues, as well as other professionals at conferences and via outreach activities, to ensure they maintain instructional currency with topics in assigned courses. Where appropriate, faculty also engage with other departments on campus with respect to maintaining currency in software applications.
- **Student feedback:** For each course taught by PIF and non-PIF faculty, students are surveyed with the **State University System Student Assessment of Instruction Survey** at the end of the semester and asked to provide this specific feedback confidentially to each course instructor and the Chair:
 - Instructor's Command of the Subject
 - Overall Assessment of Instructor
 - Value of Course Assignments

Finally, the Chair completes the following additional steps to ensure faculty are informed and maintain currency in their areas of instructional responsibility:

- **Primary instructional faculty** - These faculty are formally evaluated regularly as part of their annual evaluation process. During these evaluations, the Chair reviews any weaknesses noted within the **State University System Student Assessment of Instruction Survey** for the items noted above. The Chair and the faculty member then work together to identify training opportunities available on-campus or at upcoming conferences that should be completed prior to the next year's annual evaluation. For example, a recent textbook change based on student feedback in PHC5123 Biological Basis of Public Health was made in 2020-2021 to respond to student's concerns on the recentness of the text.
- **Non-primary instructional faculty** - Adjunct faculty are evaluated following each semester of teaching and annually as part of contract renewals. Student evaluation items within the **State University System Student Assessment of Instruction Survey** are similarly used to determine areas that need improvement. For these areas, the Chair and the adjunct faculty member work together to identify training opportunities available on-campus that should be completed prior to the next cycle of contracting. For example, in 2018, based on student evaluations for PHC5410 Social and Behavioral Science in Public Health, the Department made a change in the assigned adjunct instructor after failed

attempts to get the previous instructor to address foundational competency alignment requests.

Faculty have also been polled to provide their methods for maintaining currency in their areas of instructional responsibility, with results summarized in Table E3.a below.

Table E3.a. Methods Faculty Use to Maintain Instructional Currency

Year	Faculty	Methods Used to Maintain Instructional Currency
2018-2019	Bullock	Presentation skills professional development course through AIHA
	Caples	Public Responsibility in Medicine and Research (PRIMR) Research Ethics Digest Self-Study Program
	Lanza	Practical experience at the FDOH
	Mbizo	Discussions on SLOs with Director of CUTLA
	Sutton	Attended Southern Criminal Justice Association Conference; Consulting for IRB project on “Development and assessment of data visualization methods to support sleep disorder screening”; ITEP grant on “Enhancing Student High Impact Practices Through Big Data Analysis and Systems-Level Thinking”
	Vinci	Implemented Year 3 research project: Promoting Physical Activity in Preschool Setting that included evaluation of childcare provider training workshops and dissemination of research findings at APHA Annual Meeting
2019-2020	Bullock	Completed university diversity and harassment training
	Caples	PRIMR Research Ethics Digest Self-Study Program
	Lanza	Practical experience at the FDOH
	Steele	Inclusion of new articles pertinent to subject
	Sutton	Consulting for: “Using Esri’s ArcGIS Living Atlas portal to design cost-effective marketing strategies for expanding community engagement and diversity in outreach programs”; Consulting for IRB project on “Onboarding adjuncts in a College of Health Using Online Training: Challenges and rewards”; ITEP grant on “Enhancing Student High Impact Practices Through Big Data Analysis and Systems-Level Thinking”; The Lancet & Consortium of Universities for Global Health Webinar Series: Building Your Career in Global Health and International Development (webinar); Gun Violence in the Americas, Focus: Mexico (webinar); Increasing Equity in Global Health (webinar); Academic Health Department Learning Community: Innovating a Teaching Health Department (webinar, including Council on Linkages Between Academia and Public Health Practice and the Public Health Foundation); Attended: UWF/VIPRA (Viral Infection Propagation Through Air-Travel) project: Workshop on Pedestrian Dynamics and Epidemic Modeling; Attended: GIS Day
	Vinci	Nvivo Training; American Institute for Cancer Research – conference research presentations on diet, PA, obesity and cancer
	Whembolua	Inclusion of new articles pertinent to subject
2020-2021	Barrington	Attended SOPHE Digital Health Promotion Executive Leadership Summit
	Bullock	Read several articles on student engagement and retention
	Caples	PRIMR Research Ethics Digest Self-Study Program
	Curtis	Fundamentals of Nvivo 12; Advanced Qualtrics; Contact Tracing Course
	Lanza	Practical experience at the FDOH
	Steele	Literature review of class subjects
	Sutton	Consulting for IRB projects on “Spatial data analysis for predictive modeling of community engagement” and “Onboarding adjuncts in a College of Health Using Online Training: Challenges and rewards”; Attended: Esri’s Imagery and Remote Sensing Educators Summit; FEMA training (11 courses); Esri training: 31 different hands-on courses offered through Esri’s Virtual Campus; Johns Hopkins University training: COVID-19 Contact Tracing Course
Vinci	Completed 75 CEUs for RDN and 30 for FL State Licensure	
Whembolua	Literature review of class subjects; addition of articles on current issues	
2021-2022	Barrington	Attended SOPHE conference
	Caples	Webinars: International Perspectives on Acupuncture Research- Overview of safety and efficacy of acupuncture, cross-culture reviews; The FDA Bad Ad

		Program and Prescription Drug Promotion-Identifying how drug promotions may be misleading. Describe common regulatory issues raised by prescription drug promotion; The IRB's Role in Achieving Diversity in Research; Complexity in Clinical Trials: A Primer on Adaptive and Platform Trial; Meaningful Metrics: How HRPPs Can Use Their Data Effectively; Expectation vs. Reality: Reporting Obligations to the IRB; Wearing Multiple Hats in your Research Compliance Program; Race-Based Medicine and Race-Based Research: Ethical Considerations for IRBs; IRBs and Research Ethics Consultation Services: An Emerging Resource and Opportunity for Collaboration; Forward-Looking Strategies for IRBs in the Genomic Age: Preparing for Shifting Concepts of Identifiability; Data Sharing in SBIR: Balancing Transparency and Human Research Protections
	Lanza	Various websites including FDOH, CDC, DHS, etc.
	Sutton	Various websites including GISCorps; Consulting for IRB project on "Spatial data analysis for predictive modeling of community engagement"
	Whembolua	Literature review of class subjects; addition of articles on current issues

- 2) 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.

Prior to teaching at the graduate level, all faculty credentials are reviewed and certified by the Department Chair, the UKCOH Dean, and Academic Affairs to ensure the alignment of faculty expertise and teaching assignments.

Faculty evaluation with respect to teaching effectiveness is assessed by students through the UWF-mandated end-of-semester **State University System Student Assessment of Instruction Survey**. This is an online, anonymous survey required for each course in order for final course grades to be released to the student. The evaluation consists of students rating the items noted in Table E3.b which were approved by the State University System and UWF faculty related to teaching effectiveness.

Table E3.b. State University System Student Assessment of Instruction Survey

Item #	Question Details
1	Clarity of Communication of Ideas and Information
2	Respect and Concern for Students
3	Availability to Assist Students
4	Intellectual Challenge of Course Requirements
5	Value of Course Assignments
6	Explanation of Grading Practices
7	Return of Student Work
8	Facilitation of Learning Environment
9	Instructor Responsive to Technical Issues
10	Instructor's Command of the Subject
11	Overall Assessment of Instructor
12	Overall Assessment of Course Organization
13	Based on your performance to date, what grade do you anticipate earning in this course?
14	Approximately how many hours per week have you devoted to working on this particular course in addition to required class sessions?
15	This student assessment of instruction form enables me to express the quality of my experience in this course.
16	Strength of performance and specific recommendations to improve the quality of instruction (Online students: please describe any technical issues you would like to address as well)

Availability of this survey is announced via a global banner message in eLearning each semester. Directions for accessing the survey are also automatically emailed to each student by UWFSAI@uwf.edu with contact information for the UWF unit in charge of addressing any IT errors associated with electronic submission.

The faculty member, Department Chair, and UKCOH Dean receive the results of the student evaluations following the close of the semester and after all grades have been submitted. Review and discussion of these evaluations is conducted by the faculty member and the Chair. The Chair considers both the quantitative results, as well as student comments, when evaluating the faculty member for teaching effectiveness in their annual evaluation. Where areas of improvement are identified, the Chair and Dean recommend that the faculty member attend workshops offered by the support units at UWF (e.g., CUTLA, Global Online) or external vendors (e.g., Coursera).

- 3) Describe available university and programmatic support for continuous improvement in faculty's instructional roles. 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.

Available university and programmatic support for continuous improvement in faculty's instructional roles includes access to the following units that are available to both primary instructional faculty and non-primary instructional faculty:

- **Center for University Teaching, Learning, and Assessment** (CUTLA, a campus-wide unit through 2021, when it will merge with Global Online, noted below): CUTLA facilitates the efforts of faculty and academic units to develop and sustain instructional practices that promote the highest quality of teaching and learning, with workshops on alignment of student learning outcomes and assessment strategies, and services such as peer-review of instruction.
- **Global Online Learning and Development** (centralized, campus-wide unit): As the new central agent for online learning at UWF, Global Online prioritizes training directly applicable to high-quality online instruction, with an emphasis on innovative uses of technology within the Canvas eLearning management system.
- **MPH Program support** - New faculty are provided the opportunity to shadow teach in online courses to observe course delivery methods prior to teaching the course independently.

Additionally, where appropriate, faculty are encouraged to seek training from external vendors such as Coursera, EdX, or CITI, as well as through software-specific sites (e.g., Stata).

PIF and non-PIF faculty were polled to assess their utilization of these services, with results summarized in Table E3.c below.

Table E3.c. Frequency of PIF¹ and non-PIF² Faculty Utilization of Support Services for Instructional Skill Development

Support Service	Faculty Name and Number of Trainings Completed			
	2018-2019	2019-2020	2020-2021	2021-2022
Center for University Teaching, Learning, and Assessment (or equivalent at UWF or another institution)	Caples (1) Marten (1) Mbizo (1)	Bullock (1) Caples (3) Curtis (1) Ilunga Tshiswaka (2) Marten (1) Mbizo (1) Stone (1) Sutton (2) Vinci (1)	Bullock (1) Caples (2) Ilunga Tshiswaka (2) Steele (3) Sutton (1) Vinci (2)	Caples (3)
Global Online Learning and Development	Sutton (2) Vinci (1)	Mbizo (1) Vinci (2)	Marten (1) Steele (1) Vinci (4)	Steele (1) Vinci (2)
Coursera/EdX or equivalent (e.g., CITI, Stata, WHO, etc.)	Caples (1) Sutton (5)	Sutton (3)	Caples (4) Ilunga Tsishwaka (4) Mbizo (1) Sutton (3)	Caples (5) Sutton (1)
Course shadowing	NA	NA	Ilunga Tshiswaka & Kinyoki	Curtis & Venezia

¹ PIF: Barrington, Curtis, Farr, Ilunga Tshiswaka, Kinyoki, Steele, Sutton, Vinci

² Non-PIF: Bullock, Caples, Findley, Lanza, LaVan, Marten, Mbizo, Todorovich, Venezia, Whembolua, Wirth

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

As a regional comprehensive institution, UWF puts great emphasis on effective and student-centered teaching. Faculty annual evaluations are a critical measure of faculty advancement, both for tenure-earning and non-tenure-earning instructional personnel. Annual evaluations are completed by the Chair and the UKCOH Dean. The evaluation is based on the annual work assignment letter and the faculty member's accomplishments in addressing expectations for teaching. The evaluation is written by the Chair and acknowledged by the faculty member.

In the category of teaching, tenure-earning faculty are required to earn Excellent ratings from the Chair and UKCOH Dean for the three consecutive years prior to going up for promotion to Associate Professor and receiving tenured status.

- 5) Select at least three indicators, with one from each of the listed categories that are meaningful to the program and relate to instructional quality. Describe the program's approach and progress over the last three years for each of the chosen indicators. In addition to at least three from the lists that follow, the program may add indicators that are significant to its own mission and context.

INDICATOR #1 [Faculty currency]: Peer/internal review of syllabi/curricula for currency of readings, topics, methods, etc.

Program's approach and progress over the last three years:

- Chair provides feedback during the annual evaluation process on courses in need of updates based on review of course assessments from students completing the **State University System Student Assessment of Instruction Survey**.
- Chair identifies at least two courses per year for review and works with subgroups of faculty to address changes related to the currency of readings, topics, and methods.
- Chair forwards emails to MPH program faculty on current topics related to their area of instructional responsibility.

Faculty were polled to assess their progress on making recommended updates to their courses, with results summarized in Table E3.d below.

Table E3.d. Course Updates to Improve Currency of Readings, Topics, or Methods

Year	Faculty	Course Topics, Readings, or Methods Updated ¹
2018-2019	Barrington	HSC 6037 Philosophical Foundations of Health Education ALP Assessment Improvement to student learning: revise the Areas of Responsibility when the updated list is released
	Bullock	Added video lectures to the previous written unit guidelines to improve student engagement.
	Ilunga Tshiswaka	Updated Applied Data Analysis course (PHC 6196) based on student feedback by adding an FAQ page that lists and fixes issues with course content or clarifies course assignments; added topics on “qualitative analysis” based on peer feedback; added various videos demonstrating how to perform certain tasks, including how to create an APA style table in Word document and how to perform basic calculation procedures in SPSS
	Mbizo	PHC 6015: Updated content to add a module on qualitative research methods
	Sutton	GIS6194 (ArgoApps updates)
2019-2020	Barrington	HSC 6587 Health Education Program Planning ALP Assessment Improvement to student learning: include narrative recording requirement in the final project
	Caples	Redesign of NGR 6893 Health Systems Policy and Leadership, based on student/faculty feedback
	Farr	PHC 6676: including a World Health Organization simulation module to provide students with real world examples
	Ilunga Tshiswaka	Updated Applied Data Analysis course by deleting the “Literature Review” assignment because students confused it with the introduction section assignment; recorded another video that demonstrates how to prepare data for analysis in SPSS; based on how students were performing on the “Reporting Bivariate Results” topic, added key bullet points that explain how to accurately report the Chi-Square test of independence results
	Mbizo	PHC 6015: Added a semester project grading rubric
	Steele	Updates to Biostatistics and Epidemiology
	Sutton	GIS6194 (ArgoApps updates)
	Vinci	Updated HSC6667 Social Marketing course shell based on student feedback
Whembolua	Updated Social and Behavioral Sciences in Public Health and Prevention of Infectious Diseases	
2020-2021	Caples	Development of PHC 6110 Comparative Health Systems
	Farr	PHC 6676: including a World Health Organization simulation module to provide students with real world examples
	Ilunga Tshiswaka	Biological Basis course (PHC 5123): updated textbook to latest edition; Disease Surveillance and Monitoring course (PHC 6251): added a new video related to the use of social determinants of health to fight COVID-19 and a study question to assess students with regards to the video content
	Steele	Updates to: Health Policy, Epi Research Methods, Applied Epi, Global Health
	Sutton	GIS6194 (ArgoApps updates)
	Vinci	Updated HSC6667 Social Marketing course shell based on student feedback
	Whembolua	Updated Social and Behavioral Sciences in Public Health, Prevention of Infectious Diseases, Principles of Public Health, and Biological Basis of Public Health
2021-2022	Caples	Development of PHC 6670 Ethics in Global Health

	Ilunga Tshiswaka	Biological Basis course (PHC 5123): Created a custom textbook that combined topics covered exclusively in the previous version of the textbook and the latest version with permission and assistance from the publisher
	Lanza	Updates to HSC 5205 and PHC 6251
	Steele	Updates to Epi Research Methods
	Sutton	GIS6194 (ArgoApps updates)
	Vinci	Updates to HSC6587 Health Education Program Planning and Evaluation based on feedback from previous faculty teaching course
	Whembolua	Updated Social and Behavioral Sciences in Public Health

¹ Does not include updates in course taught by faculty no longer teaching in the program

INDICATOR #2 [Faculty instructional technique]: Participation in professional development related to instruction

Program's approach and progress over the last three years:

- Chair encourages faculty to attend trainings by CUTLA or Global Online as part of annual evaluation process
- Chair requests lists from CUTLA on workshop attendance and monitors trends
- Chair promotes faculty discussions on best practices for online teaching in faculty meetings and retreats

Table E3.e summarizes the number of faculty engaged in the professional development activities promoted by the Chair.

Table E3.e. Number of PIF¹ and non-PIF² Faculty Using Support Services for Professional Development

Support Service	Number of Faculty Utilizing Support Services for Professional Development							
	2018-2019		2019-2020		2020-2021		2021-2022	
	PIF	Non-PIF	PIF	Non-PIF	PIF	Non-PIF	PIF	Non-PIF
Center for University Teaching, Learning, and Assessment (or equivalent at UWF or another institution)	0	3	4	4	4	2	0	1
Global Online Learning and Development	2	0	1	1	2	1	2	0
Coursera/EdX or equivalent (e.g., CITI, Stata, WHO, etc.)	1	1	1	0	2	2	1	1

¹ PIF: Barrington, Curtis, Farr, Ilunga Tshiswaka, Kinyoki, Steele, Sutton, Vinci

² Non-PIF: Bullock, Caples, Findley, Lanza, LaVan, Marten, Mbizo, Todorovich, Venezia, Whembolua, Wirth

INDICATOR #3 [School- or program-level outcomes]: Implementation of grading rubrics

Program’s approach and progress over the last three years:

- Chair forwards information on best practices for the development and implementation of grading rubrics to faculty. Faculty are responsible for updating the course resources.

PIF and non-PIF faculty were polled to assess progress in adding or refining grading rubrics in their courses, with results summarized in Table E3.f below.

Table E3.f. PIF¹ and non-PIF² Faculty Progress Adding or Refining Grading Rubrics

Year	Faculty	Description of Progress ³
2018-2019	Caples	New rubrics for Health Systems Policy and Leadership
	Curtis	Quality Matters QM Rubric Update Sixth Edition
2019-2020	Bullock	Added grading rubric for the discussion boards
	Ilunga Tshiswaka	Added rubric for assessing qualitative analysis assignments
	Mbizo	Created an analytical rubric in Canvas for grading student discussion postings. This grew out of the need to discriminate good postings from less meaningful ones, in the hopes of improving student written communication skills.
	Sutton	PHC6194: Created rubric for evaluating Excel 3D Maps case study assignment
	Vinci	Updated rubrics for HSC6667 assignments
2020-2021	Caples	Added new rubrics for Comparative Health Systems MPH Course
	Vinci	Updated rubrics for HSC6667 assignments
2021-2022	Caples	Added new rubrics for Ethics in Global Health
	Steele	Rubric updated in Epi Research Methods for grading the semester project

¹ PIF: Barrington, Curtis, Farr, Ilunga Tshiswaka, Kinyoki, Steele, Sutton, Vinci

² Non-PIF: Bullock, Caples, Findley, Lanza, LaVan, Marten, Mbizo, Todorovich, Venezia, Whembolua, Wirth

³ Does not include updates in course taught by faculty no longer teaching in the program

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

For **Criterion E3, Faculty Instructional Effectiveness**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** The program has a uniform process for seeking input from students on instructional effectiveness through standardized course evaluations (see sample in ERF). All instructional faculty have access to the Chair who provides routine evaluation of their instructional performance and suggests relevant on-campus training opportunities or external vendors for improvement. The newly centralized and campus-wide Global Online unit at UWF demonstrates the university’s ongoing commitment to high quality online instruction.
- **Weaknesses/Plans for Improvement:** Analysis of the progress made by faculty in refining or adding rubrics to their courses suggests additional goals need to be established to ensure all faculty are aware of the relevant virtual trainings available on implementation in Canvas.

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 Department of Public Health utilizes UWF's framework in defining scholarship and creative projects as those activities that *must* be externally reviewed and publicly available. These projects include the following:

- Creation, production, exhibition, artistic performance, or publication of works by one or more individuals demonstrating originality in design or execution
- Discovery of new knowledge
- Development of new technologies, pedagogy, methods, materials, or uses
- Integration of knowledge leading to new understanding
- Application of knowledge to consequential problems

Faculty in tenure-earning positions are assigned the equivalent of one course release a semester to engage in research and scholarly activities. There are no expectations for research for faculty in non-tenure earning lines. Specific criteria for research and scholarship are outlined in the Department of Public Health Bylaws (see ERF).

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

The University of West Florida has several mechanisms for faculty research. In general, expectations for research and scholarly activities are dictated by the contract of the individual faculty member at the time of hire. Tenured and tenure-track faculty members are expected to conduct scholarly research in their roles as university citizens. University support for research and scholarly activities includes:

- When resources are available, at the time of hire, all new faculty are provided a startup fund to support their research efforts. These funds are generally provided to support the purchase of research equipment, publication costs, and the hiring of student research assistants.
- UWF also provides support for faculty annually for scholarly conferences and presentations. Upon acceptance of the faculty member's scholarly work by a professional organization, faculty submit a proposal with justification for the activity. Peer-reviewed conference presentations are almost always supported with a 3-way split of expenses covered by the Department, Academic Affairs, and the UKCOH.
- The on-campus Office of Undergraduate Research (OUR) also provides funds for faculty research. When a faculty member mentors an undergraduate student in research, the

faculty member can apply for and receive a \$1000 stipend in unrestricted funds to further support the faculty member's scholarly work.

Program support for research and scholarly activities includes:

- The Department budget includes a \$750 line item for each faculty to support research and professional development.
- The Department does from time to time have sufficient resources to provide funding, up to a \$1000 each, for faculty attending professional public health meetings.

3) 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.

PIF and non-PIF faculty were polled to assess the methods used to integrate research and scholarly activities and experience into their instruction of students, with results summarized in Table E4.a below.

Table E4.a. Strategies used by Faculty to Integrate Research into the Instruction of Students

Faculty Name	Research Expertise	Course	Strategies
Barrington	Grant for cancer collaborative	HSC6587 Health Education Program Planning And Evaluation	Provide examples of current and relevant community collaborative process and activities in the instruction
Bullock	Evaluate relevant occupational health standards Gather data from a workplace exposure assessment, analyze data using a statistical tool, report on findings	PHC5356 Fundamentals of Industrial Hygiene	Students take a virtual tour by watching a video of a foundry. They are asked to research relevant OSHA regulations to chemical agents found within the foundry. Next, they are given air monitoring data from the foundry, asked to run general statistics on the data, and report on the acceptability or unacceptability of the exposures as related to the published safe levels of exposure. Students write a research paper covering their evaluation, findings, and recommendations to control exposures at the foundry.
Caples	3+ years working with prior MPH Director (at VUMC), assisting students with numerous (dozens) of student research projects, data collection and internship placement	PHC6150 Public Health Policy	Integrate student-identified (faculty approved) policy topic into a final policy memo with research justifications, following writing framework and aligned with the course outcomes
	Research in other countries, including data collected in remote Mayan village to drive curriculum in our newly forming Nursing School	PHC6110 Comparative Health Systems	Integrate student-identified country health system comparisons into a final research comparative paper, using a writing framework and aligned with the course outcomes
	Many ethical research projects related to my doctorate in Ethics, including a recent book	PHC6670 Ethical Issues in Global Health	Provide continual feedback and outside resources for students to complete their assignments

	chapter on Ethics in Cardiovascular Treatment, Chap 14, Early Termination of Cardiovascular Research; Guided research projects for VUMC Pediatric fellows in several world-projects;		Integrate student-identified (faculty approved) ethics topic into a final ethics research paper, with justifications, following ethical writing framework developed for the course, and aligned with the course outcomes
	Many years working within health care administration at two large health care systems, as well as compliance, IRBs; Doctorate in Bioethics included an emphasis in Organizational Ethics which studied leadership styles in healthcare	PHC6150 Public Health Policy	Provide continual feedback and outside resources for students to complete their assignments Integrate student-identified (faculty approved) health care topic into a final Policy Brief, with justifications, and following Policy Brief writing framework developed for the course, and aligned with the course outcomes
Curtis	Oral health; Global Health	PHC5442 Global Health	Includes results of international research in Ecuador, including white papers in the global health class for discussion - allows the students to assess the impact of social determinants of health on the health of rural communities
Ilunga Tshiswaka	Primary and Secondary Data Analysis Techniques	PHC 6196 Applied Data Analysis in Public Health	Added personally published manuscripts to show students what their final reports should look like; used expertise in conducting primary or secondary research to teach students how to effectively conduct scientific research and scholarly activity; as part of the semester project, students work with the BRFSS or NHIS datasets in this class
Marten	Medical anthropology, global health, maternal health, HIV	PHC 5442: Global Health	Include publications in required reading list; include research experiences and findings in lectures
Steele	Epidemiological Data Analysis and Interpretation	PHC 6000 Epidemiology for Public Health Professionals HSC5205 Public Health Preparedness	Inclusion of published research articles into class readings
Sutton	GIS; public health informatics; image processing	PHC6194 GIS Applications in Public Health	Highlight data visualization strategies used in various maps created as part of scholarly activities
Whembolua	Behavioral Sciences	PHC 5410 Social and Behavioral Sciences in Public Health	Inclusion of my published research on psychosocial aspects of public health articles into class discussion when needed
Vinci	5 -2-1-0 NW Florida Social marketing campaign	HSC 6667 Social Marketing in Health Education	Integrated examples of social marketing into course

- 4) Describe and provide three to five examples of student opportunities for involvement in faculty research and scholarly activities.

Students are recruited by MPH faculty as collaborators on conference presentations and peer-reviewed manuscripts, with representative examples summarized in Table E4.b below.

Table E4.b. Student Involvement in Research and Scholarly Activities

Professional Conference Presentations [** indicates MPH student co-author/participant]
<p><u>2019-2020:</u></p> <ul style="list-style-type: none"> ● Okafor, A., Osa Benjy-Osarenkhoe, O.**, & Mbizo, J., Uptake of colorectal cancer screening using the take home tool kit. Accepted for presentation at American Public Health Association Annual Meeting and Exposition. San Francisco– 2020. ● Okafor, A., Benjy-Osarenkhoe, O.**, Guy, K.**, Shato, T., Ilunga Tshiswaka, D., Mbizo, J., & Hughes, G., Early sexual debut, polygyny, and risk of gender-based violence among women ages 15 - 49 in Nigeria. Accepted for presentation at American Public Health Association Annual Meeting and Exposition. San Francisco– 2020. ● Sutton, M.A., Okafor, A., Mbizo, J., Le, B., Rogers, K., Goodson, L.**, & Semaan, N. (2020, March 6-7). Data exploration and engagement strategies for just-in-time tutoring and promoting active learning. Workshop presented at the Florida Chapter Annual Meeting of the American Statistical Association, Pensacola, FL. ● Sutton, M.A., Okafor, A., & Goodson, L.** (2020, February 21-22). Visual engagement techniques for motivating students and just-in-time tutoring. Workshop presented at the Joint Annual Meeting of the Florida Section of Mathematical Association of America and the Florida Two-Year College Mathematics Association, Pensacola, FL. <p><u>2018-2019:</u></p> <ul style="list-style-type: none"> ● Mbizo, J., Kimm, M**, Okafor, A., Richardson, K.**, & Belony R.**, “Food Insecurity and Medication Non-Adherence Among the Elderly with Diabetes,” Presented at American Public Health Association Annual Meeting and Exposition. San Diego, CA – 2018. ● Hensley, B.**, Okafor, A., Nyathi, N., King, D., Hughes, G., & Mbizo, J., “Sexual gender-based violence and pregnancy termination among Zimbabwean women” Presented at American Public Health Association Annual Meeting and Exposition. San Diego, CA – 2018. ● Memiah, P., Kingori, C., Mwangi, W., Morrow A.**, Cook, C., Adebisi E., Sebeza, J., Mbizo, J., Buchanan, C.**, & Baribwira, C., A country wide Gap Analysis to assess Health Workforce Competencies in HIV Care and Treatment Services. Submitted to American Public Health Association Annual Meeting and Exposition. San Diego, CA – 2018.
Peer Reviewed Manuscripts [** indicates MPH student co-author/participant]
<p><u>2019-2020:</u></p> <ul style="list-style-type: none"> ● Ilunga Tshiswaka, D., Agala, C.B., Guillory, A.J.**, Walters, B.**, & Mbizo, J. (2020). Risk factors associated with age at diagnosis of diabetes among noninstitutionalized US population: The 2015-2016 National Health and Nutrition Examination Survey. <i>BMC Public Health</i>. https://doi.org/10.1186/s12889-020-09231-1

PIF and non-PIF faculty were polled to provide examples of student opportunities for involvement in faculty research and scholarly activities outside of those included in course instruction and to also describe strategies the faculty employs to promote and engage students in these opportunities, with results summarized in Table E4.c below.

Table E4.c. Engaging Students in Research Outside of Course Instruction

Faculty Name	Research Activity	Strategies Used to Promote and Engage Students in Research Activities
Barrington	Community health collaborative	Invites students to engage in community health promotion events and projects
Curtis	Qualitative research with homeless individuals in Escambia County to assess the level of knowledge about oral health prevention	Invited MPH students to be involved in this study, with results presented at APHA in 2020
Ilunga Tshiswaka	Disparity in chronic and infectious diseases, including stroke, diabetes, or HIV/AIDS	Invites students into research activities based on their research interests, resulting in 5 co-authored manuscripts with students over the past 3 years
Mbizo	Conference papers at APHA and peer-reviewed manuscripts	Invites students to be engaged in scholarly work and professional presentations through emails and discussions with students
Sutton	GIS research on assessing community access to nutrition in targeted Escambia County regions with high obesity rates	Invites students to be part of manuscript development outside of class
Vinci	Program Evaluation for the Florida Cancer Control Program & Florida Breast and Cervical Cancer Early Detection Program for the Florida Department of Health, Division of Community Health Promotion/Bureau of Tobacco Free Florida	Provides an hourly position, mentored by faculty, to work on grant-related activities

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

In the category of research and scholarly activity, tenure-earning faculty are required to earn Excellent ratings from the Chair and UKCOH Dean for the three consecutive years prior to going up for promotion to Associate Professor and receiving tenured status.

- 6) Select at least three of the measures that are meaningful to the program and demonstrate its success in research and scholarly activities. Provide a target for each measure and data from the last three years in the format of Template E4-1. 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.

Table E4.d summarizes outcomes related to faculty research in the last three years. While only tenured faculty are expected to engage in scholarly research, the Department and College encourage all faculty to engage students in the generation of scientific knowledge needed to advance public health as a science as well as practice.

Table E4.d. Measures of Success in Faculty Research and Scholarly Activities

Outcome Measure	Target	2018-2019 [N=6] n (%)	2019-2020 [N=7] n (%)	2020-2021 [N=7] n (%)
Number of unit faculty engaged in public health related scholarly activities leading to peer-reviewed manuscript submissions	100%	6 (100%)	4 (57%)	4 (57%)
Percent of faculty presenting at national or international professional public health conferences	70%	5 (83%)	4 (57%)	4 (57%)
Number of primary instructional faculty-led research projects involving MPH students	5	4	3	3

In academic year 2018-2019, the program lost two tenure-track faculty members (Dr. Peter Memiah and Dr. Crystal Lee). The Department subsequently filled two faculty positions (Dr. Wesley Farr, Lecturer and Dr. Gregory Steele, Visiting Lecturer). As non-earning faculty, Dr. Steele and Dr. Farr are not required to conduct research, and this affects the overall research output of the department. Notwithstanding the failure to meet some of the targets noted above (e.g., Number of primary instructional faculty-led research projects involving MPH students), the program believes that this is an important measure to retain. We believe the addition of Dr. Damaris Kinyoki (tenure-earning) as a replacement for Dr. Memiah, will help the department make improvements on this measure.

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

For **Criterion E4, Faculty Scholarship**, the MPH Program acknowledges the following strengths, weaknesses, and plans for improvement:

- Strengths:** Faculty in the program are engaged in research and dissemination. The MPH Program has a consistent track record of engaging students as collaborators in a variety of ways with faculty members' scholarly endeavors, including community projects, conference presentations, and peer-reviewed manuscripts. All tenure-earning and tenured faculty continue to engage students in research and professional presentations at conferences in public health. Of the current faculty, Drs. Curtis, Tshiswaka, and Mbizo are perennial presenters at the American Public Health Association annual meeting.
- Weaknesses:** The current teaching load of 4-4 limits the ability of non-tenure earning faculty to engage in both research and scholarly activities, and thus by extension, engage students in meaningful research work leading to peer-reviewed publications. Our current annual evaluation system does not reward non-tenure track faculty for engaging in research, meaning there is no incentive for faculty who are not contractually obligated to conduct research. The Chair is hopeful that this will change as the University and governance teams work in the coming academic years.
- Plans for improvement:** In the most recent 2020-2021 academic year, MPH Program faculty and the Chair have engaged in discussions with the Department of Mathematics and Statistics to coordinate on the storage and availability of future large-scale data sets for geospatial data analysis and predictive modeling. Support for this interdepartmental activity will allow for the development of a set of case studies in public health that interested faculty in both departments can cross-use as part of research and instructional activities with students.

It is expected that more grant submissions, research collaborations, and engagement of students in these activities will occur in the future as the number of faculty increases and workload re-distributions are finalized. Towards this end we have been selective in the assembly of several joint faculty which have been very successful in attracting extramural funding, and we have encouraged them to engage MPH students in their research programs. The MPH program is committed to ongoing and innovative efforts to build an online community to assist with these plans that foster research collaboration.

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.

The MPH core faculty and students are involved in community and professional service through engagement with local, regional, and national organizations. This helps build relationships with diverse communities and populations and also helps foster the development of partnerships which can provide opportunities for scholarly community participatory research, including grant writing, whenever possible.

All faculty are required to participate in service. In the category of service, tenure-earning faculty are required to earn Excellent ratings from the Chair and UKCOH Dean for the three consecutive years prior to going up for promotion to Associate Professor and receiving tenured status. Faculty are expected to allocate about 10% of their time on Service activities. Ratings of service productivity are based on Departmental Bylaws. There are no university-wide or college-wide criteria, however, Departmental Bylaws guide the ratings both at the Chair and Dean level. In the evaluation, the Chair has the prerogative to agree or disagree with the faculty member's self-rating and can either raise or down-grade the rating. The Dean's evaluation is also independent of the Chair's evaluation. The Dean may in his/her review of the faculty member's support material change the rating however he/she sees. In either case the evaluation is guided by the Departmental Bylaws. Up until AY 2020, departmental bylaws were updated on an as needed basis at the discretion of the Department. Starting in Fall 2021, departmental bylaws are reviewed and approved annually.

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

The university values and recognizes the scholarly benefit of faculty participation in service as a core element of advancing the discipline and providing technical support to communities and organizations working to improve health. There is no budgetary allocation for extramural activities separate from research support as a general practice. However, faculty participating in professional service activities that take them further than a 75-mile radius of the campus are supported through Department and College funds. For example, in the past, Dr. Justice Mbizo served on the Executive Board of the Association of Accredited Public Health Programs (AAPHP) and would receive funding to attend annual meetings.

- 3) Describe and provide three to five examples of faculty extramural service activities and how faculty integrate service experiences into their instruction of students.

PIF and non-PIF faculty were polled to assess the methods used to integrate service experience into their instruction of students, with results summarized in Table E5.a below.

Table E5.a. Strategies used by Faculty to Integrate Service into the Instruction of Students

Faculty Name	Service Activity	Course	Strategies
Barrington	Membership in community health partnerships and collaboratives	HSC 6587 Health Education Program Planning And Evaluation	Provide examples of current and relevant community collaborative process and activities in the instruction
Bullock	Volunteer member of several professional groups at AIHA	PHC5356 Fundamentals of Industrial Hygiene	As a member of the AIHA Exposure Assessment Strategies committee of the AIHA, Bullock participates in the development of products and services to improve the knowledge of workplace exposure evaluation and control of occupational health hazards. Current body of knowledge elements from the AIHA work are integrated into the course to ensure that the students receive the most up-to-date principles related to the practice of industrial hygiene.
Caples	UWF, OUR reviewer, 2020-present UWF IRB, 2017-2020 Ascension St. John IRB, 2017-present Ascension Sacred Heart IRB, 2016-2018 Ascension Sacred Heart Ethics Committee, 2017-2018	Where relevant	Ongoing integration of new concepts into projects and discussions. For example, some online “games” from World Health Organization training were assigned to Global Ethics to help understand mis/disinformation. New challenges in topics such as biotechnology, patents, and genetics are incorporated into discussion questions. New databases for research are shared with the classes as resources for their own projects.
Lanza	Director FDOH Escambia Pediatrician, Community Health Northwest FL	HSC 5205 PHC 6251	Previous public health experiences in public health preparedness, epidemiology, surveillance and monitoring while working for FDOH
Steele	Doctoral dissertation committee participation	Where relevant	Incorporation of new findings into class readings
Vinci	Steering Committee Member Achieve Healthy EscaRosa Community Health Needs Assessment Workgroup and Community Health Improvement Plan for Escambia and Santa Rosa Counties since 2016	HSC6667 Social Marketing HSC6587 Health Education Program Planning and Evaluation	Used involvement in the process and documents from these service activities as examples/resources in these two courses
Whembolua	Black Male Professors and Researchers Collective, Founding member	Where relevant	Adjust teaching style to different types of learning

- 4) Describe and provide three to five examples of student opportunities for involvement in faculty extramural service.

The Student Association for Public Health (SAPH) was established at the inception of the MPH Program with the purpose of providing a platform for student-led community services, led by an MPH faculty advisor.

PIF and non-PIF faculty were polled to provide examples of student opportunities for involvement in faculty extramural service outside of those included in course instruction and to also describe

strategies the faculty employs to promote and engage students in these opportunities, with results summarized in Table E5.b below.

Table E5.b. Engaging Students in Service Outside of Course Instruction

Faculty Name	Service Activity	Strategies Used to Promote and Engage Students in Service Activities
Barrington	Community health collaborative	Invite students to engage in community health promotion events and projects
Caples	Attending conferences or online professional learning opportunities	Class announcements are sent out to inform students of opportunities
Mbizo	Community health fairs; Community health coalitions	Announcements in the class; invitation to students on social media platforms; e-mail invitations to SAPH
Sutton	Association of Accredited Public Health Programs (AAPHP) Executive Board; BRACE	Encouraging attendance at trainings or webinars (e.g., emails, announcements, discussion postings)

- 5) Select at least three of the indicators that are meaningful to the program and relate to service. Describe the program’s approach and progress over the last three years for each of the chosen indicators. In addition to at least three from the list that follows, the program may add indicators that are significant to its own mission and context.

The MPH faculty and students are involved in community and professional service through engagement with local, regional and national organizations. The Program views service as a critical component for professional development both for faculty and students. Further, this helps build relationships with diverse communities and populations, and partnerships which can provide opportunities for scholarly community participatory research including grant writing, whenever possible. Service activities have also provided linkages for the recruitment of students, especially in underserved communities.

Table E5.c summarizes outcomes related to service in the last three years.

Table E5.c. Measures of Success in Service

Outcome Measure	Target	2018-2019 [N=6] n (%)	2019-2020 [N=7] n (%)	2020-2021 [N=7] n (%)
Number of faculty service collaborations including priority populations per year	1	2	3	2
Number of community-based service projects per year	1	2	1	4
Percent of in-unit faculty per year participating in extramural service activities	70%	83%	100%	100 %

The program’s approach for the indicators described above is informed by the University, College, and Departmental vision for engaging in community outreach, particularly with respect to priority populations. The table above notes that we are meeting our currently set targets for these indicators. Strategies employed the faculty and Chair that support this progress include working throughout the regional community given UWF’s positioning as a regional comprehensive university. The priority population most impacted by the activities described in Table E5.c included Black/African Americans.

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

Faculty are evaluated on teaching, scholarship, and service. Service and teaching are the only two criteria that apply to all faculty regardless of rank and tenure status. Within the service category, faculty must demonstrate a distributed load of contribution to the University, including their academic department, service to the community, and to the profession.

Within the university, service contribution is demonstrated by serving on governance committees, such as the MPH Admission Committee and MPH Curriculum Committee. At the college level, opportunities include College Council or University/College Personnel Committees. In the category of service, tenure-earning faculty are required to earn Excellent ratings from the Chair and UKCOH Dean for the three consecutive years prior to going up for promotion to Associate Professor and receiving tenured status.

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

For **Criterion E5, Faculty Extramural Service**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** There is strong commitment within MPH Program faculty for engagement with the surrounding community for health improvement in key areas of priority in the region. The MPH core faculty and students are involved in community and professional service through engagement with local, regional, and national organizations. The Program views service as a critical component for professional development, both for faculty and students. Further, this helps build relationships with diverse communities and populations, as well as partnerships which can provide opportunities for scholarly community participatory research including grant writing, whenever possible.
- **Weaknesses:** A major challenge that continues in the program is the level of student service activities. Student participation in service is constrained in part by the online nature of our program. While SAPH members have been able to participate in local service activities, the level of participation remains low and only accessible to local opportunities within the university's catchment area. Secondly, the program has no reliable mechanisms for identifying events happening in cities where the students resides, for those students located outside the Pensacola area that choose to participate.
- **Plans for Improvement:** We will continue to promote faculty engagement with the local community. We are also ramping up our social media platforms to disseminate information on events that we become aware through the LinkedIn and Facebook program pages. We are also developing an MPH Alumni and Friends page on the program website to build a network through which we continue to search for service opportunities both for local and distant students. In the coming academic year we anticipate collaborating with health, human, and social services agencies in areas where we have large concentrations of students.

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 (eg, 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 (eg, community advisory board, alumni association, etc.). List members and/or officers as applicable, with their credentials and professional affiliations.

Formal structures for constituent input include the UKCOH Advisory Board, with current membership that includes:

- Public health department representative: John Lanza, MD, PhD, MPH, FAAP, Director, Florida Department of Health/Community Health Northwest Florida
- UWF Movement Sciences and Health: Debra Vinci, DrPH, Chair & Associate Professor
- Public health department representative: Karen A. Chapman, MD, MPH, Director, Florida Department of Health, Okaloosa County
- Public health department representative: Shaun May, MPH, REHS, Environmental Health Services Director, Larimer County Department of Health and Environment Windsor, Colorado
- Community Health Northwest Florida representative: George Smith, MD, Medical Director
- Public health department representative: Douglas Kent, MPH, Administrator/COO, Florida Department of Health, Bay County
- Public health department representative: Holly B. Holt, RN, BSN, MSN, Administrator, Florida Department of Health, Walton County
- Community Health representative: Joy Sharp, Community Health Program Director, Baptist Healthcare, Pensacola
- U.S. Armed Forces representative: John Venezia, DO MPH, Army, Director of Graduate Medical Education, Occupational Medicine Residency, US Army School of Aviation Medicine, Fort Rucker, Alabama
- U.S. Armed Forces representative: Steven Gaydos, DO MPH, Army, Dean, US Army School of Aviation Medicine, Fort Rucker, Alabama
- U.S. Armed Forces representative: Nathan Almond, DO, MPH, Navy, Director, USN Aerospace Medicine Residency, Naval Aerospace Medical Institute, Pensacola, FL
- U.S. Armed Forces representative: Joseph T. LaVan, MD, MPH, Navy, Officer-in-Charge, USN Aerospace Medicine Residency, Naval Aerospace Medical Institute, Pensacola, FL
- Global Health Practice representative: Gail Hughes, Dr.PH, MPH, University of the Western Cape, South Africa
- Academic Public Health representative: Gemechu Gerbi, Ph.D., Associate Professor, Morehouse School of Medicine, former CDC Epidemiologic Intelligence Officer
- Student President of SAPH or appointed representative: Current President,
- MPH Alumnus representative: Pamela Perrich, MPH, Naval Hospital, Pensacola UWF Office of Diversity and Inclusion, representative
- UWF Public Health Faculty – Ex Officio

Prior to the COVID-19 pandemic, the UKCOH Advisory Board met annually. It is anticipated with the reopening of the campus for the 2020-2021 academic year that this schedule will be maintained in the future.

- 2) 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.

Prior to 2018, an MPH Steering Committee met annually to regularly assess the content and currency of the public health curricula. For the years 2018-2020, under the leadership of a new UKCOH Dean, a new umbrella UKCOH Advisory Board was formed and held annual community advisory meetings to guide the UKCOH and its programs. Many of the key former MPH Steering Committee members were invited to be part of the UKCOH Advisory Board, and the Chair of the Department of Public Health is also a member.

Recognizing the need for broad input from our region on issues of importance to public health and the populations we serve, the Chair is also a member of additional advisory boards where he provides program updates and solicits input, including the following:

- Navy Aerospace and Occupational Medicine Residency Advisory Committee, NAS-Pensacola
- U.S. Army School of Aviation Residency Program in Aerospace and Occupational Medicine, Fort Rucker, AL

These boards hold meetings bi-annually (for a total of 4 additional meetings per year).

Assessment of the content and currency of public health curricula and their relevance to current practice and future directions is also sought from employers of recent MPH Program graduates. This is done electronically with the **MPH Employer Competency Assessment Survey**, and respondents are asked to provide this specific feedback:

- Regarding the competencies in which you rated the graduate employee as "Not Competent", what courses or skills do you think would be valuable to enhancing future employees' competency level for public health practice?
- Would you be willing to host a public health intern at your agency in the future?
- Do you have any comments or suggestions for us on how best we can prepare our students for workforce needs?

Finally, recent MPH Program graduates are also surveyed for their post-graduation input on the relevance of the curricula. This is done electronically with the **MPH Graduate 2016 Criteria Competency Self-Assessment Survey**, and respondents are asked to provide this specific feedback:

- Thinking about your MPH training and current work, what courses or skills do you think would be valuable to your career in public health or health field that were not offered in the program?
- Do you have any comments or suggestions for us?

- 3) Describe how the program's external partners contribute to the ongoing operations of the program. At a minimum, this discussion should include community engagement in the following:

- a) Development of the vision, mission, values, goals and evaluation measures

Members of the UKCOH Advisory Board that had previously served on the MPH Steering Committee were engaged during the review process for the vision, mission, goals, and evaluations measures of the MPH program. This engagement primarily occurred via email.

b) Development of the self-study document

Development of the self-study document was conducted primarily via email with members of the UKCOH Advisory Board that had previously served on the MPH Steering Committee.

c) Assessment of changing practice and research needs

The use of an umbrella, college-wide advisory board, while helping the emerging college acclimate to its regional mission, does not afford as much time as the former MPH Steering Committee to the specific changing practice and research needs of the underlying programs in the UKCOH, however, meaningful conversations still emerge. In this setting, the Chair provides updates on programmatic enrollment, future directions, and accreditation-related updates and changes. An example of an outcome from these types of discussions in 2018 was the MPH Program's decision to require that Competency 19 be addressed in all final practicum projects presented by students to strengthen communication skills in graduates of the program.

Members of the Department's Workforce Development & Community Outreach Committee have also separately solicited input from regional public health practitioners as one additional means to gather input on changing practice needs when designing training content or scheduling workshops.

d) Assessment of program graduates' ability to perform competencies in an employment setting

To gather input from employment settings, the Department administers the **MPH Employer Competency Assessment Survey**.

The Chair of the Department additionally engages with employers on an as-needed basis, typically in person. Faculty engage with employers, typically by phone, also on an as-needed basis.

Finally, a **Preceptor Internship Evaluation Form** is completed at the end of the practicum experience and is used as a proxy for identifying weaknesses in students' competencies in employment settings. This form is completed by the Preceptor and mailed to the MPH Program Coordinator. Questions on this form relevant to graduates' ability to perform competencies in an employment setting include soliciting input for the following domains:

- Accomplishment of Assignments
- Reliability and Initiative
- Communication Skills
- Interpersonal Skills
- Knowledge and Commitment

4) Provide documentation (eg, minutes, notes, committee reports, etc.) of external contribution in at least two of the areas noted in documentation request 3.

The following documentation related to this item is provided in the **F1** folder of the Electronic Resource File:

- Meeting minutes and agenda
- MPH Employer Competency Assessment Survey
- Preceptor Internship Evaluation Form

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

For **Criterion F1, Community Involvement in Program Evaluation and Assessment**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** The Chair meets formally with the UKCOH Advisory Board to provide updates on program status, solicit input, and proactively reach out for feedback on the MPH Program's progress in meeting expectations for student training.
- **Weaknesses:** Due to on-campus restrictions and the complexity of workload scheduling during the COVID-19 pandemic, UKCOH Advisory Board meetings did not occur regularly in 2020-2021 as had originally been planned. During this time, email and phone contact was initiated between the Chair and various members to provide program status updates. However, with the UWF campus officially re-opening for the 2021-2022 academic year, regular face-to-face engagement with the advisory groups noted above will be conducted going forward.

In addition, while the new use of an umbrella, college-wide advisory board provides one mechanism for communicating with public health practitioners, it is limited in its capacity to allocate meeting time for fostering program-specific working relationships with members that the MPH Program finds beneficial, particularly for the assessment of changing practice and research needs.

- **Plans for Improvement:** Given the meeting schedule of the UKCOH Advisory Board is still under development, the MPH Program is moving forward with the following steps to ensure external partners have other pathways to contribute to the ongoing operations of the program:
 - The **MPH Employer Competency Assessment Survey** will be enhanced to include 1-2 questions soliciting input on assessment of changing practice and research needs.
 - The Workforce Development & Community Outreach Committee will be charged in 2021-2022 with ensuring future needs assessment instruments solicit input on any requests for training tied to changing practice and research needs.
 - The Curriculum Committee will be charged in 2021-2022 with updating the **Preceptor Internship Evaluation Form** to include competencies in addition to the current domains.
 - To address the limited time for one-on-one conversations with public health practitioners visiting campus for the UKCOH Advisory Board meetings, going forward, to more completely receive assessment of changing practice and research needs from interested members of this group, the Chair will be asking the UKCOH leadership for guidance on a specific subcommittee or independent advisory group focused on public health.

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.

The program values and encourages student engagement in community and professional services as a way to build team and interprofessional skills and competencies among our graduates. This occurs in two ways: 1) individual students, and 2) group activities facilitated by the Student Association of Public Health. Individual students engage in volunteer activities in local health or community organizations with a health focus. The primary mechanism by which students are introduced to service, community engagement and professional development activities is via the Student Association for Public Health (SAPH), which is the service arm of the MPH Program to encourage and facilitate outreach to the regional community around UWF and the local community around where the student resides. To incentivize participation, attendance records of SAPH meetings are forwarded to all faculty who can use this for awarding extra credit. Separately, faculty may also award extra credit or assignment credit for various specific service or professional development opportunities (e.g., completion of related CITI-sponsored trainings).

MPH students are also introduced and encouraged to participate in service, community engagement, and professional development activities through the Public Health Student Learning Community portal in Canvas. Announcements are made in this area by the Chair, the MPH Program Coordinator, and MPH faculty as opportunities arise.

Finally, emails are also sent to students by the Chair when the Chair receives information in this area.

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

Students can participate in professional and community service opportunities in one of two ways: under the umbrella of the Student Association for Public Health (SAPH) or independently in their community's local events.

Student Association for Public Health (SAPH)

Students become members of SAPH upon acceptance into the MPH Program. The rationale for this automatic inclusion is to build a sense of community among students given the distance learning nature of the program. The organization is assigned an MPH faculty advisor who provides guidance to the executive board of SAPH. The President of SAPH also serves as a liaison between SAPH and the university-wide Student Government Association to ensure there is a linkage between public health students and opportunities for service available to the UWF community population. Elected officers of SAPH then encourage participation in these volunteer events through their networks. Examples where SAPH members have participated in community service the last several years include:

- Organized and facilitated a webinar on developing a professional resume and e-portfolio, 2021
- Recruiting member volunteers in Fall 2021 for World AIDS Day (to be held December 1, 2021), in collaboration with the Florida Department of Health in Escambia County
- Volunteered at a booth for UWF Health Professions Fair, 2018

Students in Their Local Communities

Examples of independent activities executed by students in their local communities include:

- [Student Name \[redacted\]](#) (alumnus, Fall 2019) and [Student Name \[redacted\]](#) (alumnus, 2021), served as volunteers for National Black HIV/AIDS Awareness Day at Brownsville Community Center, Spring 2020, in collaboration with FDOH in Escambia County.
- [Student Name \[redacted\]](#) (MPH alumnus, Summer 2019) was elected as Chair of the Student Interest Group of the Florida Public Health Association in 2019.
- [Student Name \[redacted\]](#) (MPH alumnus, Fall 2019) participated in a HIV/STDs Community Project for the Dallas County Health Department in 2019.
- [Student Name \[redacted\]](#) (MPH alumnus, Fall 2019) participated as volunteers for the Wedgewood Annual Health Fair in 2018.
- [Student Name \[redacted\]](#) (MPH alumnus, Spring 2019), [Student Name \[redacted\]](#) (MPH alumnus, Summer 2018), and [Student Name \[redacted\]](#) (MPH alumnus, Fall 2019) participated as volunteers for the Wedgewood Annual Health Fair in 2018.
- [Student Name \[redacted\]](#) (MPH alumnus, Fall 2019) coordinated and presented workshops at the Guy Thomas Community Center while a student in the program.
- [Student Name \[redacted\]](#) (MPH alumnus, Fall 2018) participated in Flint, Michigan on the development of the report, “Learning from the Flint Water Crisis: Protecting the Public’s Health During a Financial Emergency”, while a student in the program.

The following documentation related to this item is provided in the **F2** folder of the Electronic Resource File:

- HIV-STDs Community Project Summary

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

For **Criterion F2, Student Involvement in Community and Professional Service**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** The Public Health Student Learning Community portal in Canvas provides an asynchronous way for students to share information regarding community and professional service opportunities. On-campus, the Student Association for Public Health (SAPH) provides a way for students to meet in person to discuss community service opportunities while also supporting non-local members during meetings held with web conferencing tools. Finally, students are also encouraged to participate independently in their community’s local events.
- **Weaknesses/Plans for Improvement:** Recognizing the critical need for student involvement in community and professional service going forward, the following plans for improvement are being undertaken:
 - The Workforce Development & Community Outreach Committee will be charged in 2021-2022 with developing a plan for using the Department’s social media channels to showcase its activities locally as well as highlight activities of students outside of the area supporting the work of this committee from their communities.

F3. Assessment of the Community's Professional Development Needs

The program periodically assesses the professional development needs of individuals currently serving public health functions in its self-defined priority community or communities.

- 1) Define the program's professional community or communities of interest and the rationale for this choice.

Faculty and students are involved in the American Public Health Association, as well as relevant state public health associations. Faculty and students are also involved in professional organizations that fit with specific research interests. Finally, the online modality of the program allows students to serve in service activities within the communities where they live.

- 2) Describe how the program periodically assesses the professional development needs of its priority community or communities, and provide summary results of these assessments. Describe how often assessment occurs.

Priority communities in the Northwest Florida area include:

- Current public health practitioners
- Educators in disciplines critical to developing data analysis and visualization skills for case studies related to public health topics (e.g., mathematics and statistics)

The professional development needs of these communities are assessed using a variety of techniques, including:

- The Chair of the Workforce Development & Community Outreach Committee, in consultation with the Chair, uses the MPH Program's Community Partners Distribution List to survey local public health and health services professionals via email. Workforce needs assessment using this list is conducted every 2-3 years, with the most recent usage done in 2018 leading to a data management, analysis and utilization workshop in fall 2018
- As part of departmental updates provided to the UKCOH Advisory Board, the Chair invites members to communicate their workforce development or in-service needs.
- The Chair and faculty follow-up with students currently employed in public health practice after internship defenses if students express an interest in co-facilitating additional training at their place of employment on specific skills emphasized in their internship or within courses in their MPH degree plan.
- Department faculty and the Chair serve on several local health improvement initiatives including:
 - Escambia County Task Force on Infant Mortality (Drs. Damaris Kinyoki and Justice Mbizo) as a means to reach into the priority communities identified by the Department - the Chair invites members of this group to communicate their workforce development or in-service needs. Prior to the COVID-19 pandemic the workgroup met quarterly.
 - The FDOH in Okaloosa "Reducing Infant Mortality CHIP Group" which meets bi-monthly. The workgroup is focused strategies for reducing infant mortality in Okaloosa County.
- Dr. Sutton formed the Public Health Informatics Working Group in 2015 as a means to facilitate multi-college engagement in professional development activities and training opportunities for educators from a range of disciplines also working with the identified priority populations.

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

For **Criterion F3, Assessment of the Community's Professional Development Needs**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** The Chair built and continues to cultivate the MPH Program's community partners distribution list to facilitate the needs assessment activities of the Workforce Development & Community Outreach Committee. Additionally, faculty from the MPH Program engaged with the Public Health Informatics Working Group proactively work with educators across colleges at UWF and with interested MPH students to promote the importance of ongoing professional development in data visualization skills and the relevance of this to case studies related to public health.
- **Weaknesses/Plans for Improvement:** Recognizing that assessment of the community's professional development needs is an ongoing process, the following plans for improvement are being undertaken by the Department:
 - A major area of weakness is the ability of the program to systematically identify workforce development needs. The Workforce Development & Community Outreach Committee will be charged in 2021-2022 with using the MPH Program's Community Partners Distribution List to solicit updated information on community needs for planning activities for the next 2-3 years.
 - The Public Health Informatics Working Group has been charged with increasing the digital communication and outreach of its activities using the Department's social media channels (i.e., Facebook, LinkedIn, Twitter, and YouTube).

F4. 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 described in Criterion F3. Professional development offerings can be for-credit or not-for-credit and can be one-time or sustained offerings.

- 1) Describe the program's process for developing and implementing professional development activities for the workforce and ensuring that these activities align with needs identified in Criterion F3.

Regional public health workforce members working for the Florida Department of Health who desire retooling of their skills are eligible to enroll in MPH courses as non-degree seeking students and register for specific courses targeted to build the competencies they need. Tuition reimbursement for these activities is available through the State of Florida. While this option is not ideal for the regional workforce outside the Florida Department of Health system, it has provided one pathway for the accredited unit to address training needs.

Additionally, the Department of Public Health offers the following two graduate certificates intended to advance professional development needs for the local and regional workforce:

- Emergency Management and Infection Control Certificate
- Environmental and Occupational Health Certificate

Students can complete the graduate certificates either as non-degree seeking students or along the way to earning an MPH degree.

For courses that are part of Certificate programs, the Chair monitors confidential feedback on the **State University System Student Assessment of Instruction Survey** administered at the end of each course. Specifically, the Chair is attentive to the following survey items given the critical need for maintaining clarity and relevancy in the course content for public health practitioners seeking training through our Certificate programs:

- Clarity of Communication of Ideas and Information
- Value of Course Assignments
- This student assessment of instruction form enables me to express the quality of my experience in this course.

Alternatively, for face-to-face workshops held outside UWF or virtual trainings offered online, assessment of the alignment of the identified needs has been limited to feedback received by agencies co-hosting the activity or received via email.

- 2) 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 (ie, individuals who are not faculty or students at the institution that houses the program).

Examples of education/training activities offered by the program in response to community-identified needs in the last three years include:

- Certificates, standalone (students not enrolled in MPH Program):
 - Environmental and Occupational Health Certificate:
 - Fall 2021 (through 30 September): applied 2; enrolled 0; awarded 0
 - Fall 2020-Summer 2021: applied 2; enrolled 0; awarded 0

- Fall 2019-Summer 2020: applied 1; enrolled 0; awarded 0
 - Emergency Management and Infection Control Certificate:
 - Fall 2021 (through 30 September): applied 4; enrolled 1; awarded 0
 - Fall 2020-Summer 2021: applied 9; enrolled 3; awarded 0
 - Fall 2019-Summer 2020: applied 4; enrolled 0; awarded 0
- Workshops:
 - Title: **“How Stress Makes Us Sick and What We Can Do About it: Anthropological, Sociological, and Public Health Perspectives”**
 - Date held: 13 April 2018
 - Host site: Fricker Community Center, Pensacola, FL
 - Number of participants: 12 non-MPH students and non-MPH faculty
 - MPH Faculty coordinating: Drs. Mbizo and Marten
 - Sponsored by: Department of Public Health, Department of Anthropology, and Department of Social Work
 - Rationale/Related needs assessment: Evolved out of discussions from the Escambia County Task Force on Infant Mortality on the role of stress in fueling disproportionate disparities in infant mortality in Escambia County
 - Title: **“Community Engagement For Health Disparities Solutions: Public Health and Anthropological Perspectives”**
 - Date held: 31 October 2018
 - Host site: UWF
 - Number of participants: mixed audience, including UWF faculty and several community members
 - Sponsored by: Department of Public Health and Department of Anthropology
 - MPH Faculty coordinating: Drs. Lee and Marten
 - Rationale/Related needs assessment: Evolved out of discussions amongst MPH faculty with shared research interests
 - Title: **“Native American Month: We are not Just Mascots”**
 - Date held: 7 November 2018
 - Host site: UWF
 - Number of participants: mixed audience, including UWF faculty and several community members
 - MPH Faculty coordinating: Dr. Lee
 - Sponsored by: Office of Equity and Diversity, UWF
 - Rationale/Related needs assessment: Dr. Lee responded to a request from staff at the Office of Equity and Diversity
 - Title: **“Health Equity: Applying the Proper Lens”**
 - Date held: 20 March 2019
 - Host site: UWF
 - Number of participants: 5 non-MPH students and non-MPH faculty
 - MPH Faculty coordinating: Drs. Mbizo and Memiah
 - Sponsored by: Department of Public Health
 - Rationale/Related needs assessment: Evolved out of follow-up discussions between Chair and community partners at Baptist Health Care (following the attendance of an MPH student at a 2018 training)

- Websites:
 - **Workforce Development, UWF** (virtual)
 - Date held: Launched in 2018, this website provides self-paced exploration of various resources, including a YouTube channel providing numerous faculty and student-recorded training videos on using SPSS and Excel on case studies related to public health topics.
 - Host site: UWF, online
 - Number of participants: mixed audience; targeted emails sent to MPH students to offer trainings within their organization to non-MPH faculty and non-MPH students
 - MPH Faculty coordinating: Dr. Sutton
 - Sponsored by: Department of Public Health
 - Rationale/Related needs assessment: Evolved out of discussions with students and faculty at UWF to offer resources digitally for just-in-time needs
- Trainings:
 - Title: **“Data Management Analysis Interpretation and Utilization Training”**
 - Date held: 10-14 September 2018
 - Host site: Jehovah Lutheran Church and School, Pensacola, FL
 - Number of participants: mixed audience, including 7 non-MPH students and non-MPH faculty + 2 MPH students
 - MPH Faculty coordinating: Drs. Mbizo and Memiah
 - Sponsored by: Department of Public Health
 - Rationale/Related needs assessment: Prior to the workshop, needs assessment was conducted via emails sent to regional contacts within the public health workforce using the MPH Program’s Community Partners Distribution List
 - Title: HIV & Ethical Dilemmas: An Equal Opportunity Condition Training Workshop
 - Date held: 22 February 2019
 - Host site: CDAC Behavioral Healthcare, Inc., Pensacola, FL
 - Number of participants: 32, mixed audience, 2 MPH students
 - MPH Faculty coordinating: Dr. Peter Memiah
 - Sponsored by: CDAC Behavioral Healthcare, Inc.
 - Title: **Data Exploration and Engagement Strategies for Just-in-time Tutoring and Promoting Active Learning** (virtual)
 - Date held: Launched in 2020, this WebEx-based training provides detailed steps on how to use Excel 3D Maps on case studies related to public health topics.
 - Host site: UWF, online
 - Number of participants: mixed audience, targeted emails sent to MPH students to offer trainings within their organization to non-MPH faculty and non-MPH students
 - MPH Faculty coordinating: Dr. Sutton
 - Sponsored by: Department of Public Health
 - Rationale/Related needs assessment: Prior to the development of this training, MPH faculty were approached by faculty from UWF’s Department of Mathematics and Statistics to create this training for presentation at the Florida Chapter Annual Meeting of the American Statistical Association. Following the launching of this training, the MPH Program has provided

access to interested MPH students and alumni seeking to similarly cross-train colleagues within their professional networks.

The following documentation related to this item is provided in the **F4** folder of the Electronic Resource File:

- Data Management Analysis Interpretation and Utilization Training (workshop):
 - Schedule
 - Email to attendees
 - Training materials
 - Workforce Development, UWF:
 - Website screenshots
 - Emails promoting new delivery modes
 - YouTube channel (screenshots)
 - Health Equity: Applying the Proper Lens (workshop):
 - Flyer and attendee list
 - How Stress Makes Us Sick and What We Can Do About it: Anthropological, Sociological, and Public Health Perspectives:
 - Flyer and attendee list
- 3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

For **Criterion F4, Delivery of Professional Development Opportunities for the Workforce**, the MPH Program acknowledges the following strengths, weaknesses, and plans for improvement:

- **Strengths:** The MPH Program supports a diverse set of modalities to deliver professional development opportunities for the workforce, including online certificate programs, face-to-face trainings, websites with training resources, and pre-recorded hands-on trainings for specific skills.
- **Weaknesses:** The assessment of the alignment of the identified needs with workforce development activities coordinated by various MPH Program faculty or hosted by the Department of Public Health has been limited to feedback received by agencies co-hosting the activity or received via email. Additionally, recently slower course progression noted within the Certificate programs suggests additional reach-out with the UKCOH Advising Center is needed to coordinate supplemental guidance provided to students seeking professional development using this option.
- **Plans for Improvement:** Recognizing that the MPH Program needs independent feedback from Certificate students and workshop/training participants, as well as from alumni and community members using newer digitally-provided resources, to evaluate that the identified needs were sufficiently addressed going forward, the following plans for improvement have been initiated:
 - The Chair has requested that the MPH Curriculum Committee evaluate the possibility of placing the Graduate Certificates under the Continuing Education unit at UWF to generate more interest.
 - We identified a gap allowing non-degree seeking students to miss out on registration for critical courses in public health. The Department, through the Chair, is now working with the UKCOH Advising Center to include non-degree seeking students in registration campaigns. This has not historically been a practice at the university.

- The Chair will reach out to the Graduate School and to the UKCOH Advising Center to describe the unique population of students enrolled in our Certificate programs as non-degree seeking students.
- The Workforce Development & Community Outreach Committee has been tasked during the 2021-2022 academic year to develop an updated evaluation tool for use at workshops and trainings sponsored by the Department of Public Health going forward.

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.

The MPH Program prioritizes the following under-represented populations in its ongoing plans for diversity and inclusion:

- Students - Within the student group, the MPH Program considers these under-represented populations to be critically important:
 - African-American/Black - The process to define this population is based on students that self-identify as such within their admission application materials. This population is considered important by the MPH program based on the regional demographics in Northwest Florida. Additionally, this population was selected because of the noted history of elevated risk for chronic diseases, living in socially and economically disadvantaged conditions, lack of healthcare access, and geographic displacement resulting in delayed travel time to points of access to care.
 - Hispanic/Latinx - The process to define this population is based on students that self-identify as such within their admission application materials. This population is considered important by the MPH program based on statewide demographics in the State of Florida.
 - Asian - The process to define this population is based on students that self-identify as such within their admission application materials. This population is considered important by the MPH program due to national demographic shifts.
 - Disabled/Physically challenged - The process to define this population is based on students that self-identify as such within their admission application materials (e.g., within their Statement of Intent). This population is considered important by the MPH program because it is one of the most underrepresented among public health and healthcare professionals, leaving them without needed advocates for essential public health services.

- LGBTQ+ - The process to define this population is based on students that self-identify as such within their admission application materials (e.g., within their Statement of Intent). This population is considered important by the MPH program so that future graduates can serve as advocates for this group in a variety of public health settings.
 - Faculty - Within the faculty group, the MPH Program considers these under-represented populations to be critically important:
 - Hispanic/Latinx - The process to define this population is based on faculty that self-identify as such within their job application materials. This population is considered important by the MPH Program based on statewide demographics in the State of Florida and a concern by current faculty to ensure the MPH Program creates a culturally diverse set of instructors for students to interface with.
 - African-American/Black - The process to define this population is based on faculty that self-identify as such within their job application materials. This population is considered important by the MPH program based on current faculty having a research and practice interest in issues affecting one of the most disproportionately impacted population segments.
 - Staff - Within the staff group, the MPH Program considers this under-represented population to be critically important:
 - Native American - The process to define this population is based on staff that self-identify as such within their job application materials. This population is considered important by the MPH Program to ensure the MPH Program creates a culturally diverse set of staff for students to interface with.
- 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.

Goal #5 of the MPH Program is the basis for all initiatives aimed at increasing representation and supporting the persistence and ongoing success of the populations identified above. Evaluation measures and representative indicators key to meeting this goal are summarized in Table G1.a below.

Table G1.a. Evaluation Measures and Indicators Supporting Diversity Goals in Faculty, Staff, and Students

<p>Goal #5 - Diversity: Provide and promote an environment that emphasizes diversity, inclusion, and respect for all persons and communities.</p> <p>Objective 1: Recruit, promote, and retain a diverse faculty who support the mission, goals, and values of the program.</p> <p>Objective 2: Recruit, promote, and retain a diverse staff who support the mission, goals, and values of the program.</p> <p>Objective 3: Recruit, retain, and graduate a diverse student population who support the mission, goals, and values of the program.</p>	
Evaluation Measure	Indicators
<p>Faculty and staff promoting an environment that emphasizes diversity, inclusion, and respect for all persons and communities. [Objectives 1 and 2]</p>	<p>Faculty and staff positions are representative of priority under-represented populations</p> <p>Consistent year-to-year record of diverse faculty and staff composition</p> <p>All faculty searches begin with a candidate pool including representative members of priority under-represented populations</p>

	A diverse pool of candidates is considered for on-campus interviews
Student and graduate diversity, participation in inclusion, and respect for all persons and communities. [Objective 3]	Consistent year-to-year record of diverse students accepting offers of admission

For Objective 1 and associated indicators for faculty diversity, the balance in diversity within our program is currently solid with respect to race/ethnicity and gender. The Department Chair promotes a culture of diversity as an equity principle and also to ensure that students have access to diverse views of thought and teaching philosophies. To attract diverse students, the faculty complement must reflect the national demographics.

Most recently in 2020, the program addressed a weakness in the lack of a Black or African American female faculty member on staff, despite being a program in existence for over 15 years. We have since hired an outstanding researcher (Dr. Damaris Kinyoki) into a tenure-earning line. Dr. Kinyoki brings a global health component into the program, which is critical as the program attracts more students interested in the international nature of public health. This hire was particularly important for the program after the departure of the first Native American female faculty hire who left to continue her career at another institution. Prior to this, twice we were not able to match the start-up packages for two Asian faculty candidates. However, we remain committed to continuing our efforts to create a diverse representative faculty.

In support of the diligence and intention with which the MPH Program addresses Goal #5, Table G1.b summarizes the racial composition of the diverse pool of candidates brought for on-campus interviews during the last five faculty searches.

G1.b. Summary of Diversity Characteristics in Faculty Searches

Search #	Year Conducted	Number of Candidates Invited for Campus Interview	% Female Candidates Invited for Campus Interview	% Candidates from Priority Population	Hired Candidate From Underrepresented Population
Search 5	2019-2020	3	66% [n=2]	100% [n=3]	Yes
Search 4	2018-2019	3	33% [n=1]	66% [n=2]	No
Search 3	2018-2019	3	33% [n=1]	0% [n=0]	No
Search 2	2015-2016	3	0% [n=0]	66% [n=2]	Yes
Search 1	2015-2016	3	33% [n=1]	33% [n=1]	Yes

- 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.

Diverse Student Body: Actions and Strategies to Recruit, Retain, and Graduate

- Recruitment
 - The Department hosts a booth at the annual APHA Annual Expo and collects contact information for a diverse population of students expressing interest in public health.

The contact list is used to create a distribution list to disseminate information about the MPH Program post-conference.

- Developing partnerships with community organizations with mission statements that promote inclusion and diversity.
 - Additionally, the Chair of the Department has generated a contact list of undergraduate advisors for health-related fields in the Southeastern area of the U.S. that are similarly serving members of the targeted priority groups. The MPH Program Coordinator and Chair use this list to similarly disseminate information about the MPH Program.
 - Students are encouraged to participate in their local and statewide public health association affiliates.
 - The Chair establishes Memorandum of Understanding with key agencies that serve diverse populations attentive to the training and future hiring of students from these populations.
 - The MPH Admission Committee pays special attention to applicants from these populations during the student admission process.
 - The Chair instituted a personal strategy in which all graduating students from these high priority groups are tasked with recruiting at least one individual to take their slot when they graduate. As one example of the success of this strategy, it led to 4 students recruited from an initial graduate at the CDC.
- **Retention and Graduation**
 - The MPH Program is a designated program of strategic emphasis by the State University System Board of Governors. This designation elevates the program to a level of priority within the university for student financial support. The MPH Program strategically targets students from these priority populations for support as a retention strategy and to promote progress towards degree completion.
 - Prior to 2018, online MPH students were not eligible for graduate assistantships. The Department lobbied the Graduate School who awards these to reconsider this policy. This opened the door for MPH students to be eligible and for the Department to be able to use these positions to incentivize and retain students from the priority groups.
 - Faculty proactively engage students from these populations in discussions of research, teaching, and outreach activities they may benefit from.
 - The Chair provides incentives for faculty working with these populations where possible (e.g., conference registration, publication costs).

Diverse Faculty: Actions and Strategies to Recruit, Promote, and Retain

- **Recruitment**
 - All faculty recruitment is coordinated through UWF's Human Resources unit which includes the requirement of advertising within minority-friendly channels.
 - The Chair is deeply committed to issues of inclusion and diversity, and thus, every charge to a Search Committee includes an emphasis on giving consideration to qualified candidates from high priority populations.
- **Promotion and Retention**
 - The Chair establishes and regularly engages with members of the Mentorship Committees for every faculty member.
 - To build a strong and representative portfolio for university advancement, the Chair proactively recruits professionals from priority populations to suggest as candidates to serve on program and institutional advisory boards.
 - Upon hire, and when resources permit, the Chair works with faculty members and Academic Affairs to secure immediate start-up funds for launching the faculty member's research program.

Diverse Staff: Actions and Strategies to Recruit, Promote, and Retain

The program has a very small staff compliment, making the diversity efforts in this area a challenge. The program is, however, fortunate to have retained an OPS line filled with a Master's level Native American staff member who serves as the MPH Program Coordinator. With centralized advising and MOU/Affiliation Agreements coordinated at the college level, the program has minimal-to-no input on the recruitment, promotion, and retention processes of staff in those roles.

- Recruitment
 - MPH faculty proactively reach out to professionals that self-identify from these populations during conferences and outreach events when faculty and staff positions open to encourage applying.
 - Promotion and Retention
 - The Chair encourages program level staff participation in professional activities promoting minorities and underserved populations to help build support networks.
- 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.

Creating a diverse, equitable and inclusive climate begins with the hiring of diverse faculty in the unit. The MPH Program's diversity and inclusion initiatives are supported at the institutional level by UWF's campus-wide blueprint for diversity, developed by the Office of Equity and Diversity. A link to this plan is here:

- <https://uwf.edu/academic-engagement-and-student-affairs/departments/equity-and-diversity/resources/diversity-plan/>

As part of this planning, every two years faculty and staff are required to complete a university-wide, "Harassment and Discrimination Prevention" training program. Additionally, all faculty and staff are eligible to complete a non-credit 4-course professional development certificate on cultural competence.

The MPH Program's vision statement guides all activities of the unit to balance diversity within the faculty and staff in ways that communicate commitment to inclusion, diversity and equity. The following strategies have been used within the Department to create and maintain a culturally competent environment:

- Proactively seeking staff, faculty, and adjunct candidate pools during recruitment that is inclusive of gender, race, and ethnic diversity
- Mentoring, retaining, and promoting a diverse faculty to provide our students with different views and perspectives of public health

To facilitate these processes, the Chair works directly with UWF's Human Resources unit to identify advertising venues to help build a diverse pool of applicants with the requisite skills and training in public health when openings are available at the staff, faculty, or adjunct level. Additionally, Search Committees include a minority representative as well as a student representative who provides invaluable feedback in the hiring process and informs the Chair's recommendations in evaluating the strengths and weaknesses of each candidate as a best fit for the program.

Once hired as noted above, the Chair works with each faculty member to assign a Mentorship Committee additionally supportive of inclusivity and with an understanding of expectations for cultural competencies.

Finally, the Chair regularly disseminates to faculty and staff regarding training or community event opportunities that support cultural sensitivity, diversity, and inclusive engagement. The Chair also encourages faculty to be active advocates for the program during these opportunities to serve as a linkage to the community and to provide consultative assistance or guidance to additional UWF-supported activities when possible. Participation in these activities is rewarded as service activities that are accounted for in the faculty annual evaluations.

- 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.

Diverse Faculty

Table G1.c provides a summary of relevant demographic information for the current full-time MPH faculty. Of note is the balance in gender and that 50% of the faculty is from prioritized underrepresented groups.

Table G1.c. Demographics of Current MPH Faculty in the Department of Public Health

Demographic	Total [N=7]	Gender Distribution [N=7]	
	n (%)	Females n (%)	Males n (%)
Hispanic/Latinx	1 (14%)	1 (14%)	0 (0%)
African-American/Black	3 (43%)	1 (14%)	2 (29%)
Native American	0 (0%)	0 (0%)	0 (0%)
White	3 (43%)	1 (14%)	2 (29%)

Source: Department Personnel Database

Diverse Student Body

With respect to building a diverse student body, Table G1.d summarizes our success with two priority populations in terms of increasing percentages (Blacks/African Americans) or maintaining consistency of percentages (Asian) accepting offers of admission.

Table G1.d. Percentage of Priority Under-represented Students (as defined in Criterion G1) Accepting Offers of Admission

Outcome Measure	Target	Year 1 2019-2020	Year 2 2020-2021	Year 3 ^{1,2} 2021-2022
Black/African American	12%	12%	35%	20%
Asian	3%	7%	8%	7%

Source: Tableau Report Registered Students by Department

¹ Partial data as of Fall 2021

² Institutional reporting does not allow separate, specific reporting of Hispanic/Latinx populations w/o Other included

Table G1.e provides a historical and current summary of relevant demographic information for the MPH students, demonstrating our success in recruiting and retaining members from two of the targeted priority populations.

Table G1.e. Demographics of Enrolled¹ MPH Students in each Fall Semester

Demographic	Fall 2019 [N=150]	Fall 2020 [N=162]	Fall 2021 ² [N=179]
Race			
African-American/ Black [priority population]	25	31	40
Asian [priority population]	8	10	10
Indian	1	1	2
White	100	103	105
Pacific Islander	2	1	0
ABIW	0	0	1
APW	1	1	0
BI	0	0	1
BIW	2	1	1
AI	0	0	1
PW	0	0	1
AW	3	1	0
IW	1	1	0
BW	0	1	0
Race Not Reported	7	11	17
Ethnicity			
Not-Hispanic	117	128	138
Hispanic	14	19	23
Hispanic-Not Reported	19	15	18
Gender			
Male	43	48	46
Female	107	114	133

Source: Tableau Report on Enrolled Student Demographics

¹ Enrolled = newly admitted students + continuing students

² Partial data as of Fall 2021

However, one of the challenges we have faced is not being able to accurately identify and track the students with disabilities or physical limitations and LGBTQ+ students using university-supporting reporting tools.

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

Student Perceptions of Program's Climate

Table G1.f provides the results of the **MPH Program Current Students Feedback Survey** administered to students enrolled in courses in Spring and Summer 2021 to gauge their perceptions of the program's climate regarding diversity and cultural competence. We use the Spring timeframe for the deployment of the survey to capture students who have been in the program for at least two semesters and then allow the survey to remain open with several reminders spaced out into the summer.

Table G1.f. Student Perceptions of Program Diversity and Cultural Competence

Question Response values: 1=Strongly Agree, 2=Somewhat Agree, 3=Neutral, 4=Somewhat Disagree, 5=Strongly Disagree	Question #	Mean Ratings [N=212]
		2021 [n=78]
The MPH student body is diverse	Q14_1	1.9
The program promotes diverse extra-curricular activities that integrate differing viewpoints of public health through the Student Virtual Learning Community in Canvas	Q14_2	2.2
Diversity and inclusion are addressed in the required MPH courses	Q14_3	2.2
The program faculty reflect diversity	Q14_4	2.2
I feel comfortable in the program	Q14_5	2.1
I feel respected by my peers and instructors	Q14_6	2.1

Source: MPH Program Current Students Feedback Survey | Administration Date: Spring-Summer 2021

Response Rate: 37%

In addition to ranking their feedback on the items above, students were asked:

- Do you have additional comments for us regarding diversity and cultural competency climate in the program?

Responses to this question included:

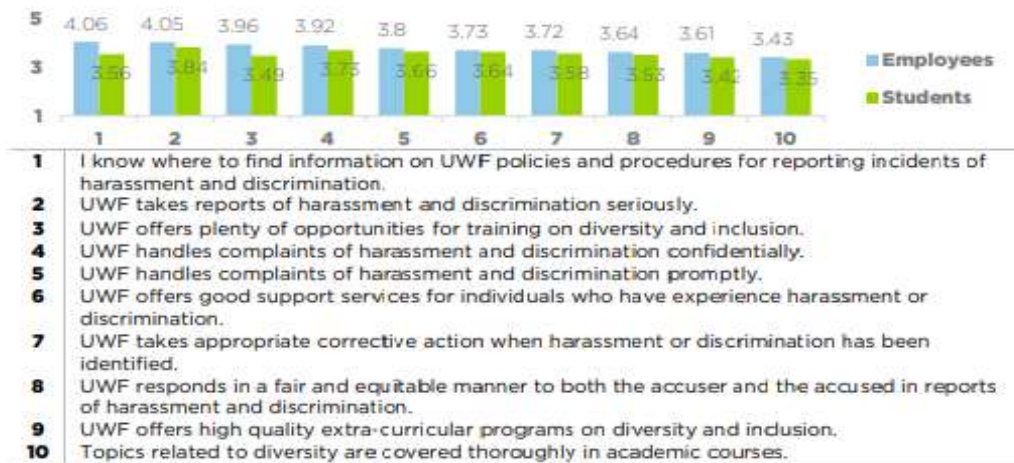
- *“to continue promoting diversity and inclusion in the program.”*
- *“Very diverse”*
- *“I think the program is fairly diverse,”*
- *“The students and staff of this program are very diverse and have many different backgrounds. I do not have any concern for a lack of diversity within this program.”*
- *“The cultural diversity facilitated by this program is the true highlight of this program.”*
- *“I am a food server studying with many higher professionals, little intimidating but enjoying immensely.”*
- *“No, seems the program is diverse among professors and students”*

Faculty Perceptions of Program’s Climate

Given we are a Department with a small number of faculty (n=7) that is meaningfully diverse in terms of race and ethnicity and approximately balanced in terms of gender, we do not conduct an annual department-level climate survey on faculty perceptions of diversity. Alternatively, the Chair does monitor university-wide climate surveys administered by other units on campus (e.g., Office of Equity and Diversity) and stays abreast of developments as UWF begins wrapping up its 2018-2022 Diversity Plan. Results from the previous plan reported in 2017 included the summary provided in Figure G1.a below.

Figure G1.a Results from 2014-2017 Diversity Plan

Institutional Response and Training Opportunities Related to Diversity and Inclusion



Source: Office of Equity and Diversity

The following documentation related to this item is provided in the **G1** folder of the Electronic Resource File:

- UWF Diversity Plan, 2018-022
- Florida Alliance for Health Professions Diversity (flyer)

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

For **Criterion G1, Diversity and Cultural Competence**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** The MPH Program maintains a healthy balance in faculty diversity with respect to gender and race/ethnicity in the areas of Hispanic/Latinx and African-American/Black. Additionally, UWF has an established Office of Equity and Diversity on campus and is a six-time recipient of the Higher Education Excellence in Diversity (HEED) Award from *Insight Into Diversity* magazine. In celebration of this achievement, the Division of Academic Engagement & Student Affairs and Institutional Communications recently announced a plan to advertise open positions in a variety of diverse publications at no cost to Departments from October 1, 2021 to September 30, 2022 for faculty, staff, and OPS postings. Additionally, as part of this celebration, HR is also encouraging departments to invest the money saved to pay for additional diversity advertising or to increase inclusive recruitment and retention efforts within their areas.
- **Weaknesses/Plans for Improvement:** Although the program has maintained consistency with respect to recruiting and retaining some of the underrepresented student populations, more work is in order related to the other priority groups (i.e., disabled/physically challenged and LGBTQ+). Additionally, the results of the most recently administered **MPH Program Current Students Feedback Survey** on student perception of program diversity and cultural competence administered in 2021 provided insights into areas where the

program can make improvements. For example, MPH faculty can monitor the Equity & Diversity Events Calendar and alert current students in their class on pertinent events as a means to continue to communicate the high value the MPH Program places on inclusiveness and respect.

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

At UWF, academic advising is performed by centralized teams of designated staff located outside departmental units. For the MPH Program, the advising staff fall under the direct supervision and purview of the Assistant Dean of the College who also serves as the Director of Advising for the UKCOH Advising Center. Within this Center, one advisor Liaison is designated for each department to work as a channel of communication between the UKCOH Advising Center and Departments regarding that specific student population and curriculum. In addition, the Center assigns specific advisors for specific programs to specialize in addressing student questions on degree planning or reinstatement.

Academic advisors in the UKCOH Advising Center have qualifications consistent with the mission of this unit, which is as follows:

- To provide high quality individual advising to all students within the College to progress to degree in the most efficient and effective manner that fits the student's needs and goals

Typically qualifications include a minimum of a Bachelor's degree and a minimum of 2 years previous experience. A Master's degree in an appropriate field is preferred. The current designated advisor has a Bachelor's degree while the Liaison has an MPH degree.

The UKCOH Advising Center also maintains an extensive online resource site for Advisor On-Boarding to address any specialized advising skills needed with new employees.

Academic advisors assigned to work with MPH students are familiarized with the specific needs of the MPH students using the following process:

- At the time of hire, the new Academic Advisor, the Liaison, and the Department Chair meet to discuss program specific requirements. The Chair reaches out to academic advisors and the Liaison assigned to work with MPH students to proactively address any upcoming course scheduling issues that may impact enrollment or graduation audits. Academic Advisors, the Liaison, the Department Chair, and the MPH Program Coordinator are included in all communication from the UKCOH Advising Center to MPH students, especially regarding curriculum or degree requirements.
- The UKCOH Advising Center also maintains an extensive online resource site for all advisors that includes best practices for email correspondence with students, links to all relevant academic policies and forms, and pertinent information on available student support services to pass along to students when needed (e.g., counseling, psychological, health, financial aid, food pantry, military/veterans affairs, recreation and sports, student accessibility, and student grievance process).

Because the University and UKCOH promote and support this centralized model of academic advising, students do not receive academic advising from full-time MPH faculty.

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

Academic Advisors and Liaisons are hired by UKCOH Advising Center staff. Search committees include current UKCOH advisors, the UKCOH Assistant Director of Advising, the UKCOH Director of Advising, and faculty and/or administrators from the UKCOH and other colleges.

Upon hire, Academic Advisors and Liaisons are oriented to their roles and responsibilities using the following process:

- Academic Advisors and Liaisons attend training courses offered by the Registrar's Office for the technical skills and access credentials to document degree progression and graduation requirement fulfillment.
 - Academic Advisors and Liaisons attend college-wide meetings of the Program Coordinators Workgroup.
 - Academic Advisors and Liaisons meet with the Chairs of each unit with students under their oversight when needed.
 - The Chair of the Department of Public Health invites Academic Advisors and Liaisons serving MPH students to departmental meetings whenever relevant.
- 3) Provide a sample of advising materials and resources, such as student handbooks and plans of study that provide additional guidance to students.

A direct link to campus-wide published policies in this area is as follows:

- UWF Student Handbook
 - Maintained by Dean of Students Office and located here: <https://uwf.edu/go/student-handbook/>

The following documentation related to this item is provided in the **H1** folder of the Electronic Resource File:

- Public Health Student Learning Community in Canvas (screenshot)
 - Student Degree Plans
 - UKCOH Advising Center (copies of emails to student)
- 4) 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 program uses a mix of assessment strategies for academic advising satisfaction. Primarily, the UKCOH Advising Center conducts the assessment each year. A summary of results from their program evaluation procedures is provided in Table H1.a below.

Table H1.a. Student Feedback on UKCOH Advising Center

	Advisor Availability	Provides Accurate Information about Degree Requirements	Helped Evaluate Progress Toward Degree Completion	Overall Satisfaction With
AY-2020 (n=31)	4.6	4.4	4.4	9.4
AY-2019 (n=39)	4.3	4.3	4.2	8.4

Source: UKCOH Advising Center | **Response Rates:** AY-2019: 39/402=10%, AY-2021: 31/170=18%

In 2021, the Program administered the **MPH Program Current Students Feedback Survey**. One of the domains addressed on this survey was academic advising and registration processes. The survey went to all current students in the program as of Spring 2021 and Summer 2021.

Students are asked to rate their advising experience and ease of registration processes on a number of items using 5-item Likert scales as indicated in Table H1.b. The instruments also provide students the opportunity to provide qualitative feedback.

Table H1.b. Student Satisfaction with Academic Advising

Question	Question #	Mean Ratings [N=212]
		2021 [n=78]
How helpful or unhelpful is your academic advisor? Response values: 1=Very unhelpful, 2= Somewhat unhelpful, 3=Neither helpful nor unhelpful, 4= Somewhat helpful, and 5=Very helpful	Q9	4.4
How easy or difficult is it to register for courses at the University of West Florida? Response values: 1=Very difficult, 2= Somewhat difficult, 3=Neither easy nor difficult, 4= Somewhat easy, and 5=Very easy	Q10	4.3

Source: MPH Program Current Students Feedback Survey | **Administration Date:** Spring-Summer 2021

Response Rate: 37%

In addition to ranking their feedback on the items above, students were asked:

- Do you have additional comments for us regarding academic and career advising?

Responses to this question related to academic advising included:

- *“Yes, more support is needed for the practicing requirements. Additionally, students should not be required to meet with an academic advisor each semester to enroll in classes. As graduate students, we should be able to determine what courses we need to take or be able to navigate the system to get help. We do not need advisors to gate keep our enrollment.”*
- *“...Advising is great and Warren Austin does a great job helping me with my classes and registering.”*

Because academic advising is centralized outside the Department of Public Health, prior to 2021, the Department relied on surveying administered at the College level. However, direct feedback from our students, particularly within the comment section of the survey, in 2021 using the MPH Program Current Students Feedback Survey has been helpful in identifying where academic advising can be strengthened.

The following documentation related to this item is provided in the Electronic Resource File:

- MPH Program Current Students Feedback Survey

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

Upon acceptance, the MPH Program Coordinator introduces the student to their Academic Advisor within the UKCOH Advising Center via personal email correspondence. The Department Chair and the MPH Program Coordinator also send emails approximately three times per semester to students regarding advising sessions, with contact information for the assigned Academic Advisor in the UKCOH Advising Center. Finally, academic advising information is also posted in the Department of Public Health Student Learning Community portal in the Canvas learning management system. This level of support for academic advising is the same across all concentrations of the MPH Program.

Upon acceptance, the Academic Advisor sends a welcome message via email correspondence. This email contains information on how to schedule an initial appointment to orient the student to the program requirements and review degree progress, curriculum, and registration processes.

Academic Advisors within the UKCOH Advising Center continue with ongoing communication with the student using an established schedule for email correspondence.

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

For **Criterion H1, Academic Advising**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** Throughout their enrollment at UWF, MPH students have access to a designated Academic Advisor within the UKCOH Advising Center specifically trained in providing assistance for their degree audit. The Academic Advisor works within a unit in the UKCOH where back-up support is provided if the originally assigned advisor is not available.
- **Weakness:** The Academic Advisor assigned to MPH students also advises for other programs, which can experience periods of increased enrollment. The Chair is in ongoing discussions with the UKCOH Dean regarding the need for a dedicated MPH advisor.
- **Plans for Improvement:** Comments from recently enrolled students in the program suggest areas of improvement include clear communication regarding course scheduling options for those students that would like to expedite their advising appointments. For this improvement, we will review the Department website to ensure navigating to this information is straightforward.

H2. Career Advising

The program provides accessible and supportive career advising services for students. Each student, including those who may be currently employed, has access to qualified faculty and/or staff who are actively engaged, knowledgeable about the workforce and sensitive to his or her professional development needs and can provide appropriate career placement advice. 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.

The MPH program's career advising services are promoted through the Public Health Student Learning Community in Canvas, a virtual community students are enrolled into upon acceptance into the MPH Program. Within this portal, students are directed to a module called "Let's Talk Public Health Careers". This module concludes with links to faculty profiles including publications, and provides contact information for current MPH faculty that students can reach out to for additional career advising guidance. The MPH Program Coordinator and Department Chair also regularly post career and professional development opportunities within this portal as announcements. Finally, all MPH faculty are enrolled in this Canvas portal and encouraged to post opportunities.

Outside the Department, current students and MPH alumni have additional on-campus and online support services and resources available to them from the Office of Career Development and Community Engagement (CDCE), including:

- On-campus and online resources to assist students with job searching, resume and cover letter writing, and interviewing
- Student and Alumni Guide to Virtual Employer Engagement - a guide created by CDCE to help students prepare for a job search and for connecting with employers in a virtual environment

CDCE communicates their services to currently enrolled students in the MPH Program as well as alumni using the following strategies:

CDCE communicates through departmental faculty and advisors via:

- The "Career News, You Can Use," monthly newsletter
- Meetings with departments/chairs to share updates and information
- Special email notices to promote upcoming events, relevant to this program's specific population.

CDCE additionally uses these methods to communicate directly to currently enrolled students:

- Biweekly newsletter sent to all students and alumni via Handshake
- Special targeted email notifications via Handshake to promote relevant upcoming events
- Classroom and Student Organization presentations, both in-person and virtual, as well as pre-recorded presentations
- In-class event promotions for relevant events

- On the Go: remote tabling to promote services and events at various locations across campus
- Annual Needs Based Survey emailed to all UWF students to assess student awareness and population specific needs (we decided not to disseminate in 2020 due to Covid-19)
- UWF's Calendar to promote events
- Participation, (tabling or volunteering) at campus events hosted by other departments
- The CDCE Website
- Social Media

CDCE additionally uses these methods to communicate directly to alumni:

- Biweekly newsletter sent to all students and alumni via Handshake (all alumni who graduated 2012 or later have a Handshake account tied to whatever email address they have on file with UWF)
- Special targeted email notifications via Handshake to promote relevant upcoming events
- UWF's Calendar to promote events
- Participation, (tabling or volunteering) at campus events hosted by other departments
- The CDCE Website
- Social Media

Additional details on services and resources provided by CDCE to alumni are available here:

- <https://uwf.edu/academic-engagement-and-student-affairs/departments/career-education/alumni/resources/>

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

MPH faculty provide career advising expertise based on their knowledge of career paths related to their domains of expertise. MPH faculty are oriented to their roles and responsibilities for career advising with the following methods:

- Annual work assignments for MPH faculty in the area of teaching include responsibilities for career advising for students. Faculty are evaluated on these contributions and engagement during their annual evaluations.
- The Chair forwards all information on CDCE-supported services to faculty to share with current students as necessary.
- The Chair and MPH faculty update the MPH Program Coordinator on any new services to be highlighted to students in the Public Health Student Learning Community in Canvas as they relate to career advising.

Staff in the CDCE unit providing on-campus and online career advising support to current MPH students and alumni have qualifications consistent with the mission of this unit, which is as follows:

- To advance UWF's mission, vision, and priorities by educating and empowering UWF Students & Alumni in the career development process and by providing opportunities for experiential learning, civic engagement, service and employment

Staff in the CDCE unit providing on-campus and online career advising support to current MPH students and alumni are hired by CDCE staff, typically, specifically by that position's supervisor. Search committees are comprised of campus partners (both staff and faculty) and CDCE staff, when utilization of a committee is necessary.

Upon hire, CDCE staff are oriented to their roles and responsibilities using the following process:

- CDCE staff attend training courses offered by Office Leadership, UWF Human Resources, Handshake, Big Interview, Focus 2 Career, and the National Association of Colleges & Employers (NACE) for development and training regarding office standards and expectations, student coaching content and strategies, university policies, product/resource utilization, and trends in higher education, career services, and employer/recruitment strategies or priorities.
 - CDCE staff meet with the Chairs of each unit when needed.
 - The Chair of the Department of Public Health invites CDCE staff serving MPH students to departmental meetings whenever relevant.
- 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.

Faculty and the MPH Program Coordinator inform current MPH students and alumni of the services available to them through UWF's Career Development and Community Engagement (CDCE) unit using a variety of methods, including e-mails, announcements in the Student Learning Community Canvas shell, and during verbal recommendations during face-to-face meetings when possible. Promoted services include the following:

- Website of the Office of Career Development & Community Engagement
 - Visit: <https://uwf.edu/academic-engagement-and-student-affairs/departments/career-development-and-community-engagement/>
- Handshake registration - This is the university-wide job posting system for students and alumni to schedule appointments with career coaches and stay up to date with career events.
 - Visit: <https://uwf.edu/academic-engagement-and-student-affairs/departments/career-development-and-community-engagement/handshake-at-uwf/>
- Big Interview training - This on-demand, online system combines written and video-based training covering the entire job search and interview process with practice to help improve student's interview techniques and build their confidence. Tools/strategies recommended to MPH students include:
 - Practice with the mock interview and recording tool
 - Use the mechanism for sharing videos externally/internally for feedback
 - Customize/record questions so they are more closely tied to public health topics
 - Visit: <https://uwf.edu/academic-engagement-and-student-affairs/departments/career-education/students/big-interview/>
- Virtual Drop-in Assistance - This on-demand service is currently offered every Monday through Thursday from 10 a.m. to 4 p.m. (with extended hours until 7:00 p.m. on Tuesdays & Wednesdays), to help students find the answer to career-related questions such as navigating LinkedIn, finding an internship or job, resume and cover-letter questions, and preparing for an interview.
 - Visit: <https://uwf.edu/academic-engagement-and-student-affairs/departments/career-development-and-community-engagement/>

Specific career advising services promoted to current students within courses in the last three years and the number of students targeted are summarized in Table H2.a below.

Table H2.a. Faculty Promotion of CDCE Services in Courses Over Last Three Years

Service	2018-2019	2019-2020	2020-2021
CDCE Resume and cover letter review services	Curtis: PHC6945 (13 students) Ilunga Tshiswaka: PHC6196 (31 students)	Ilunga Tshiswaka: PHC6196 (16 students)	Ilunga Tshiswaka: PHC6196 (19 students)
CDCE Handshake registration	Curtis: PHC6945 (13 students) Ilunga Tshiswaka: PHC6196 (31 students)	Ilunga Tshiswaka: PHC6196 (16 students)	Ilunga Tshiswaka: PHC6196 (19 students)
Alumni services	Sutton: PHC6945 (17 students)	-	-

For the services noted above, the MPH Program Coordinator and faculty also communicate with alumni regarding these support services to let them know that UWF alumni receive free lifetime access to services provided by the CDCE unit. Example career advising services provided to alumni from this unit include:

- Student and Alumni Guide to Virtual Employer Engagement - Helps students prepare for their job search and for connecting with employers in a virtual environment
 - Visit: https://uwf.edu/media/university-of-west-florida/academic-engagement-and-student-affairs/departments/career-development-and-community-engagement/career-education/UWF-Student_Alumni-Guide-to-Virtual-Engagement-with-Employers.pdf
- Career Event invitations - Alumni are automatically notified via Handshake of upcoming events to connect with potential employers
 - Visit: <https://uwf.edu/alumni/about-us/alumni-association/>

Emails sent by the MPH Program Coordinator and faculty often request that students report back with their impressions on the utility of these services. However, return responses from students are only rarely received. In order to monitor utilization, activity reports provided by CDCE are used, as shown in Table H2.b below.

Table H2.b. CDCE Service Utilization for Last Three Years

Service	2018-2019		2019-2020		2020-2021		2021-2022 ¹	
	Current	Alumni	Current	Alumni	Current	Alumni	Current	Alumni
CDCE Resume and cover letter review services^{2, 3}	15 (14)	4 (3)	9 (9)	4 (2)	22 (15)	15 (9)	7	1
CDCE Handshake registration⁴	36	13	17	9	22	3	6	0
CDCE Big Interview training⁵ (or Optimal Resume & Interview)	0	0	0	0	0	0	0	0
CDCE Virtual Drop-in Assistance^{3,6}	11 (10)	3 (2)	9 (9)	7 (4)	23 (16)	16 (9)	7	1
CDCE Career Events⁷	1	0	5	0	3	2	1	0

Source: MPH Student Monthly CDCE Interactions Report, Office of Career Development & Community Engagement

¹ Partial data through September 30, 2021

² 2018-19 is July 1, 2018-June 30, 2019; 2019-20 is July 1, 2019-June 30, 2020; 2020-21 is July 1, 2020-June 30, 2021; 2021-2022 is July 1, 2021-September 30, 2021

³ For each of the past three years, several students and alumni utilized these services multiple times. Therefore, the data provided does include some duplication in terms of number of students assisted for resume and cover letter reviews. The number in parenthesis represents only unique student interactions for that year.

⁴ Registered is defined as account Activation. Due to filter limitations, there is a chance that some individuals classified as alumni may have been degree seeking at that time.

⁵ Big Interview only became available in Fall 2020. Prior to that Optimal Resume & Interview were used. Counts here based on the extent of requesting feedback on a virtual interview recording as there is not a mechanism to track notification of Mock Interviews or training completed.

⁶ CDCE Virtual Drop-in Assistance is defined as all appointments (not just resume and cover letter) classified as a drop-in and includes interactions with students who met with CDCE staff virtually (using Zoom, Google Meet, or Virtual on Handshake) and for Virtual Document reviews. CDCE automatically reviews any resume or cover letter uploaded to Handshake by students and alumni. Some (if not all) of these individuals may have had no direct contact with CDCE staff.

⁷ Includes events such as: All Majors Career & Internship Fair, Part-Time Job Fair, Health and Social Services Career Expo, Argos Suit Up!, and Professional & Graduate School Expo

The following documentation related to this item is provided in the **H2** folder of the Electronic Resource File:

- MPH Student Monthly CDCE Interactions Report (screenshot)
- CDCE Career Services for Public Health (flyer)

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.

In Summer 2021, the Program administered the **MPH Program Current Students Feedback Survey**. One of the domains addressed on this survey was career advising. The survey went to all current students in the program as of Spring 2021 and Summer 2021. Students were asked to rate their level of confidence using a 5-item Likert scale as indicated in Table H2.c, in addition to answering the two other related questions provided below.

Table H2.c. Student Satisfaction with Career Advising

Question	Question #	Mean Ratings [N=212]
		2021 [n=78]
Response values: 1=Not useful at all, 2=Slightly useful, 3=Neither useful or not useful, 4=Moderately useful, and 5=Extremely useful		
How useful are the services provided at UWF's Career Development and Community Engagement center?	Q11	3.6

Source: MPH Program Current Students Feedback Survey | Administration Date: Spring-Summer 2021

Response Rate: 37%

Question	Question #	2021 [n=78]			
		No Response % (n)	Yes % (n)	No % (n)	Do not know about the Public Health's Student Learning Community portal % (n)
I have access to public health career advising resources through the Department of Public Health's Student Learning Community portal in Canvas.	Q13	1% (1)	78% (61)	0% (0)	21% (16)

Source: MPH Program Current Students Feedback Survey | Administration Date: Spring-Summer 2021

Response Rate: 37%

Question	Question #	2021 [n=78]			
		No Response % (n)	Yes % (n)	No % (n)	No, I do not use the UWF e-mail system % (n)
UWF's Career Development and Community Engagement center routinely sends out information about career development opportunities for students in public health and other health fields. Do you currently receive e-mail communications from this unit?	Q12	1% (1)	90% (70)	6% (5)	3% (2)

Source: MPH Program Current Students Feedback Survey | Administration Date: Spring-Summer 2021

Response Rate: 37%

In addition to ranking their feedback on the items above, students were asked:

- Do you have additional comments for us regarding academic and career advising?

Responses to this question related to career advising included:

- *"An academic appointment regarding career goals would have been helpful."*
- *"I filled out the google form to make an appointment with career services over a week ago and still haven't heard anything back from them about an appointment date."*
- *"More opportunities to speak with faculty regarding public health opportunities outside of the traditional avenues such as CDC, LHD and more openings on health communications, marketing etc."*
- *"Reach out/check in more often and include career advising in academic advising sessions."*
- *"The career emails that are sent out focus mainly on the area where UWF is located, but a lot of my classmates including myself do not live near UWF. I think having more opportunities sent out that are located all throughout Florida would be beneficial..."*

Combined, these results suggest that the Department should continue to promote awareness of the Public Health Student Learning Community in Canvas and also take additional steps to encourage follow-up with the emails sent by CDCE staff, particularly as they relate to new services CDCE offers that are currently not utilized by MPH students (e.g., Big Interview).

The following documentation related to this item is provided in the Electronic Resource File:

- MPH Program Current Students Feedback Survey

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

For **Criterion H2, Career Advising**, the MPH Program acknowledges the following strengths, weaknesses, and plans for improvement:

- **Strengths:** Students have access to a suite of opportunities for career advising, ranging from face-to-face and virtual interfacing with faculty, to online, on-demand tools for fine-tuning their interview skills. Following graduation, UWF also stays connected with alumni by offering continued access to resume tools and invitations to career networking events. The Office of Career Development and Community Engagement has excellent data

tracking tools in place, and began providing monthly utilization reports to the Department this semester.

- **Weakness:** Historically, data tracking for career advising services outside the Department has been limited, given students rarely respond back to emails requesting feedback. In addition, previously planned activities for more rigorous tracking and surveying of MPH students engaged in face-to-face activities during 2020-2021 were cancelled due to on-campus restrictions based on the COVID-19 pandemic. Finally, although feedback on student satisfaction with career advising is limited to the most recent academic year, the results provide insights into specific improvements the Department can make to increase awareness of existing services.
- **Plans for Improvement:** A continuity plan for ensuring annual assessment on student satisfaction with career advising has been put on place. Beginning in the 2021-2022 academic year, the Department will also open up discussions with the Alumni Association unit to determine any additional methods they might recommend to track utilization of career-related services offered by their unit to MPH students. In addition, two faculty members will be exploring new ways of promoting the services of CDCE in 2021-2022, as follows:
 - Dr. Ilunga Tshiswaka: In Fall 2021, Dr. Ilunga Tshiswaka promoted a webinar hosted by the Student Association for Public Health (SAPH) with a CDCE representative as one of the guest speakers. This speaker walked through the process of developing a resume and an e-portfolio. Most instructors offered students an extra credit opportunity for attending the event, which turned out to be a success, with 70 students in attendance. Dr. Ilunga Tshiswaka will also be adding a statement about CDCE services in all syllabi of the courses he teaches. The impact of this approach is expected to be 45-75 students per year potentially learning about CDCE services with this method.
 - Dr. Sutton: Dr. Sutton evaluated Big Interview training in 2020-2021 and will be promoting it via discussion forums in the 2021-2022 year in GIS6194, impacting approximately 20 students each year with this method.

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 any formal complaints and/or grievances to program officials, and about how these procedures are publicized.

Upon admission to the program, students are enrolled in a non-credit hour Canvas shell with a series of informational modules, including resources from the Office of Student Rights and Responsibilities and the Student Ombudsperson. This information is provided in the subsection called "Student Complaint Procedures". Students are provided the contact information for the Chair of the Department to confidentially report issues as well as links to the official University processes and channels for complaints and grievances. Finally, students in every course have the opportunity to anonymously evaluate both the course and the instructor using **State University System Student Assessment of Instruction Survey** tool.

Direct links provided to students to published policies in this area are as follows:

- University of West Florida Student Complaint Processes
 - Maintained by Dean of Students Office and located here: <https://uwf.edu/academic-engagement-and-student-affairs/departments/dean-of-students/dean-of-students/student-complaint-processes/>
- Student Grievance Process Policy
 - Maintained by Dean of Students Office and located here: <https://uwf.edu/go/student-handbook/appeals-and-student-grievance-processes/>

The following documentation related to this item is provided in the **H3** folder of the Electronic Resource File:

- Student Grievance Process Policy

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

The process for a student to file a complaint or grievance is dictated by the Dean of Students Office using UWF's approved Student Grievance Process Policy, located here:

- <https://uwf.edu/go/student-handbook/appeals-and-student-grievance-processes/>

A Student Ombudsperson manages the formal grievance process and assists with determining/reviewing situations to ensure a fair and equitable process, as outlined here:

- <https://uwf.edu/academic-engagement-and-student-affairs/departments/student-ombuds-office/>

The levels of review/appeal for student grievances are as follows:

- Level 1: Student submits written complaint to the supervisor of the individual alleged to have caused the complaint or dissatisfaction. For faculty or staff complaints originating in the Department of Public Health, a student would submit a written complaint to the Chair of the Department of Public Health.
- Level 2: Appeal of Step 1 is to the next level supervisor. For complaints originating in the Department of Public Health, the next level supervisor is the Dean of the UKCOH.
- Level 3: Appeal of Step 2 is to the appropriate Vice President (or designee). The decision of the Vice President or designee shall be the final decision of the University.

- 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.

Table H3.a below, summarizes the incidences, nature, and status of formal students complaints in the last three years.

Table H3.a. Formal Student Complaints in last Three Years

Academic Year	Number	Complaint Nature	Resolution
2021-2022	0	NA	NA
2020-2021	1	Student filed a complaint with Chair and Student Ombudsperson regarding perceived unfair treatment by an instructor.	<ol style="list-style-type: none"> 1. This complaint was resolved after the Chair and Student Ombudsperson met with both the student and instructor independently. 2. The student successfully completed the course. 3. The student would not be having any more courses with the instructor.
2019-2020	0	NA	NA
2018-2019	0	NA	NA

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

For **Criterion H3, Student Complaint Procedures**, the MPH Program acknowledges the following strengths and weaknesses/plans for improvement:

- **Strengths:** Students have access to confidential reporting to the Chair and a formal, university-administered grievance procedure to report complaints and concerns.
- **Weakness/Plans for Improvement:** There are no weaknesses or plans for improvement for this criterion.

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 (eg, bachelor's vs. graduate degrees), a description should be provided for each.

All faculty in the MPH Program engage in recruitment activities at the university, within the community, at regional and national public health events. Brochures, websites, flyers, posters, mailings, as well as face-to-face and telephone interviews with prospective students, are utilized in recruiting for the MPH Program.

The Graduate School and UKCOH also promote programs through various activities. For example, the Graduate School attends virtual and in-person Graduate Education Fairs in the region and across the country to promote all graduate programs, including the MPH program.

The following documentation related to this item is provided in the **H4** folder of the Electronic Resource File:

- Social media channels (screenshots of Facebook, Twitter, and Linked)
- Webpages promoting MPH degree (screenshots)
- Graduate School Bulletin
- Why Should I Get a Master's Degree (flyer, Graduate School)
- Postcard (recruiting for program)
- Flyers for MPH Program (Generalist concentration, Health Promotion concentration)

- 2) Provide a statement of admissions policies and procedures. If these differ by degree (eg, bachelor's vs. graduate degrees), a description should be provided for each.

All MPH concentrations use the same admission criteria, as summarized here.

In addition to the University graduate admission requirements described in the Admissions section of the catalog, the department bases decisions for regular admission on a holistic review of credentials in which the following criteria are used to assess the potential success of each applicant:

- Undergraduate degree from a regionally accredited or recognized University
- Applicants must have an undergraduate GPA of 3.0 or above on a 4.0 scale from an accredited U.S. institution or recognized international institution
- Graduate Record Examination (GRE) will be required for students with GPA below 3.20 as follows:
 - GRE minimum scores: Verbal: 150; Quantitative: 146
 - GRE must have been taken in the last five years to be considered for admission.
 - Submission of official GRE test scores (under some circumstances the GMAT will be accepted)
 - For students currently enrolled in a doctoral program in the public health or health professions, the respective admission test scores may be accepted
- A Statement of Purpose: The statement of purpose must convey the applicant's reasons for pursuing graduate study in public health and how admission into the program relates to the applicant's professional aspirations. The Statement of Purpose must include answers to the following questions:¹

- A. What personal and professional goals do you hope to meet through earning a master's degree in public health, and why do you think the UWF MPH concentration you have chosen is a good fit for your goals?
- B. What special knowledge, skills, and experiences would you bring to the chosen concentration, and how are these aligned with the mission of the Master of Public Health program as a whole? If you have had experiences that may have affected your academic performance, please provide an explanatory context.
- C. Be careful to clearly articulate how your skillset and experiences align with the goals of the selected MPH concentration and show how these will impact your career trajectory in public health.

¹ Note: Your responses to the three questions should be one and a half but no more than two double-spaced pages, 12-font size in Times New Roman, and use complete sentences.

- Submission of two letters of recommendation
- Applicants with terminal degrees (Ph.D. or Ed.D.) or advanced professional degrees (M.D., D.D.S., D.V.M., J.D., D.O., M.S., M.A., etc.) from accredited programs and licensed in the United States may request to waive the graduate admission test requirement but must complete the other admission requirements.
- Applicants with an MBBS or equivalent foreign medical degree must submit a course-by-course evaluation report from an acceptable credential evaluation agency to be eligible for the GRE waiver.
- Applicants with insufficient training in statistics or those who have taken a statistics course more than seven years ago may be admitted conditionally pending demonstration of proficiency in statistics within the first year in the program by taking and passing STA2023 Elements of Statistics or equivalent prior to enrolling in PHC5050 Biostatistics for Public Health. This is required for students with no background in statistics (e.g., a student who has never taken a course in statistics at the college level). The credit earned in this course does not count toward the graduate degree.
- If a student is an international applicant whose native language is not English or the student is from a country in which the primary language is not English, he or she must take an acceptable English proficiency test before applying for admission. Applicants to the University of West Florida are considered international students if they are not U.S. Citizens, dual citizens, or permanent residents. All such students should refer to the International Graduate Admission section of the current UWF Graduate Catalog for information pertaining to international applicants, including requirements for completion of, and scores on the English proficiency test. Other criteria may apply.

Review of applications and admissions to the MPH Program is accomplished through the MPH Admission Committee. Records on applicants and their application materials are collected by Graduate Admissions and forwarded to the Department of Public Health for distribution to the MPH Admission Committee. Based on the review, the Department makes a recommendation on either conditional, provisional, full admission, or rejection of applicants to the program. The recommendation is routed to the UKCOH College Dean via the Graduate School. The student is informed of the admission decision via both an email and a postal letter mailed to the applicant. Admission decisions are typically made within 72 hours of receiving a complete application packet from the student. All applications are maintained within a secure portal.

The University awards degrees three times a year (fall, spring, and summer) but holds only commencement ceremonies in fall and spring. One or more MPH faculty attend each of the two commencement ceremonies at which MPH students are scheduled to graduate and “hoods” the graduating students.

The following documentation related to this item is provided in the **H4** folder of the Electronic Resource File:

- Express Admission (flyer)
- 3) Select at least one of the measures that is meaningful to the program and demonstrates its success in enrolling a qualified student body. Provide a target and data from the last three years in the format of Template H4-1. In addition to at least one from the list, the program may add measures that are significant to its own mission and context.

Template H4-1a highlights two quantitative scores the MPH Program has selected for enrolling a qualified student body.

Template H4-1a: Outcome Measures for Quantitative Scores (GPA and GRE) for Newly Matriculating Students				
Outcome Measure (Mean)	Target	Year 1 2019-2020	Year 2 2020-2021	Year 3¹ 2021-2022
Undergraduate mean GPA	3.25	3.5	3.79	3.4
GRE - Quantitative	150	148.6	147.5	137
GRE - Verbal	146	151.1	152	151

Source: Tableau Graduate Department Enrollment - Student Demographics Enrolled | ¹ Partial data as of Fall 2021

Undergraduate mean GPA: As indicated above, the minimum undergraduate mean GPA for admission to the MPH Program is 3.0. However, the minimum undergraduate mean GPA encouraged by the Graduate School for express admission is 3.25. We selected a target mean GPA score of 3.25 to match this standard for selecting qualified students.

GRE - Quantitative and GRE - Verbal: The target values for the GRE quantitative and verbal components noted above were selected to match the minimum requirements for admission to the MPH Program. However, students with an undergraduate GPA higher than 3.20 have this requirement waived. Additionally, we have a significant percentage of students that enter the program with prior graduate degrees who also have the GRE requirement waived. Although the last three years of data do not meet the selected GRE-Quantitative measure target, the Department has selected to maintain this threshold as part of its overall enrollment management strategy.

Template H4-1b highlights one additional measure the MPH Programs tracks as significant to its own mission and context for enrolling a qualified student body.

Template H4-1b: Percentage of Priority Under-represented Students (as defined in Criterion G1) Accepting Offers of Admission¹				
Outcome Measure	Target	Year 1 2019-2020	Year 2 2020-2021	Year 3¹ 2021-2022
Blacks/African Americans	12%	12%	35%	20%
Asian	3%	7%	8%	7%

Source: Tableau Graduate Department Enrollment - Student Demographics Enrolled | ¹ Partial data as of Fall 2021

Note: Institutional reporting does not allow separate reporting of Hispanic/Latinx populations without Other included.

In setting targets for these priority under-represented groups, measures were based on the University's Diversity Report, 2014-2017, relative the proportion of these groups in 2016.

The following documentation related to this item is provided in the **H4** folder of the Electronic Resource File:

- UWF Diversity Report, 2014-2017
- 4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

For **Criterion H4, Student Recruitment and Admissions**, the MPH Program acknowledges the following strengths, weaknesses, and plans for improvement:

- **Strengths:** MPH faculty are engaged with student recruitment processes using a suite of modalities that helps to reach a wide net of potential student applicants within and outside UWF's direct regional area.
- **Weakness:** While the Department recognizes the importance of broad recruiting for the identified priority under-represented groups, it also recognizes the importance of identifying specific venues within the regional community to ensure rural communities in the tri-county region around UWF are targeted for recruitment activities. The program is particularly interested in working to identify pipelines for Hispanic and male applicants.
- **Plans for Improvement:** Given the limits of the interface for institutional reporting for separating out Hispanic/Latinx populations without Other, tracking of this priority under-represented group going forward will be conducted using the MPH Student Tracking Database housed within unit. In addition, given the Department does not currently assess how students learn about our program, this is an area where additional analysis of program application materials is warranted. For example, GIS-based data visualization can be used to help the MPH Program better understand impacts of new recruitment strategies within the tri-county area.

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.

Direct links to these items are as follows:

- Descriptions of all degree programs and concentrations in the unit of accreditation
 - Maintained by Department of Public Health and located here:
<https://uwf.edu/ukcoh/departments/public-health/>
- Academic calendar
 - Maintained by Office of the Registrar and located here:
<https://uwf.edu/offices/registrar/resources/academic-dates-and-deadlines/>
- Admission policies
 - Maintained by Department of Public Health and located here:
<https://onlinedegrees.uwf.edu/online-degrees/mph-masters-public-health/>
- Grading policies
 - Maintained by UWF Board of Trustees and located here:
<https://catalog.uwf.edu/graduate/academicpolicies/grades/>
- Academic integrity standards
 - Maintained by Office of Student Rights and Responsibilities and located here:
<https://uwf.edu/academic-engagement-and-student-affairs/departments/dean-of-students/office-of-student-rights-and-responsibilities/student-code-of-academic-conduct/>
- Degree completion requirements
 - Maintained by the Office of the Registrar and located here:
<https://catalog.uwf.edu/graduate/academicpolicies/degree requirements/>