REVIEW FOR ACCREDITATION

OF THE

MPH PROGRAM

AT

A.T. STILL UNIVERSITY
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Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the MPH Program at A.T. Still University (ATSU). The report assesses the program's compliance with the *Accreditation Criteria for Public Health Programs, amended June 2011*. This accreditation review included the conduct of a self-study process by program constituents, the preparation of a document describing the program and its features in relation to the criteria for accreditation, and a visit in October 2014 by a team of external peer reviewers. During the visit, the team had an opportunity to interview program and university officials, administrators, teaching faculty, students, alumni and community representatives and to verify information in the self-study document by reviewing materials provided in a resource file. The team was afforded full cooperation in its efforts to assess the program and verify the self-study document.

ATSU’s current organization has evolved through a number of different structures over approximately 125 years. The university was founded in 1892 as an osteopathic medical school. It was established as the Kirksville College of Osteopathic Medicine in 1971. During 1995 through 1999, college leaders opened new campuses and degree programs in Phoenix and Mesa, Arizona. The college added master's degrees in public health, geriatric health and health administration to its Kirksville campus in 1999. Also in 1999, the college altered its organizational structure and began to transition to a university model, a process involving organizational changes and strategic planning over a three-year period. The institution assumed its current name in 2002.

Currently, the university has six organizational units, which collectively enroll over 3,000 students: two osteopathic medical schools (one in Missouri and one in Arizona); two dental schools (in the same locations as the medical schools); a health sciences school offering on-site training in allied health fields; and the College of Graduate Health Studies (CGHS), which houses the MPH program and all of the university’s other online degree programs. The CGHS arose as a new university unit in 2014. The CGHS' physical “home” is on the Missouri campus.

The MPH program, offered in a solely online format, has two concentrations: generalist and dental public health. The program offers joint degrees that combine the MPH with the university's medical and dental degrees. This is the program’s first review for accreditation.
Characteristics of a Public Health Program

To be considered eligible for accreditation review by CEPH, a public health program shall demonstrate the following characteristics:

a. The program shall be a part of an institution of higher education that is accredited by a regional accrediting body recognized by the US Department of Education or its equivalent in other countries.

b. The program and its faculty and students shall have the same rights, privileges and status as other professional preparation programs that are components of its parent institution.

c. The program shall function as a collaboration of disciplines, addressing the health of populations and the community through instruction, research and service. Using an ecological perspective, the public health program should provide a special learning environment that supports interdisciplinary communication, promotes a broad intellectual framework for problem solving and fosters the development of professional public health values.

d. The public health program shall maintain an organizational culture that embraces the vision, goals and values common to public health. The program shall maintain this organizational culture through leadership, institutional rewards and dedication of resources in order to infuse public health values and goals into all aspects of the program's activities.

e. The program shall have faculty and other human, physical, financial and learning resources to provide both breadth and depth of educational opportunity in the areas of knowledge basic to public health. At a minimum, the program shall offer the Master of Public Health (MPH) degree, or an equivalent professional degree.

f. The program shall plan, develop and evaluate its instructional, research and service activities in ways that assure sensitivity to the perceptions and needs of its students and that combines educational excellence with applicability to the world of public health practice.

These characteristics are evident in the MPH program at ATSU. The university holds regional accreditation, and the MPH program’s faculty and students have the same rights, privileges and status as other professional preparation programs at the university. The program has assembled a multi-disciplinary faculty complement, and, despite the fact that the faculty complement is geographically dispersed, the program has created a culture of collaboration and cooperation that focuses on ensuring that the curriculum maintains a focus on public health values and skills. The university has invested in assembling the resources necessary to support a fully online MPH program, including hiring qualified instructional design and professional staff. Although the program has been challenged to develop approaches to research and service that fit its delivery model, faculty and program leaders have begun the work of institutionalizing a culture that combines curricular elements with public health practice applications.
1.0 THE PUBLIC HEALTH PROGRAM.

1.1 Mission.

The program shall have a clearly formulated and publicly stated mission with supporting goals, objectives and values.

This criterion is met with commentary. The MPH program’s mission is as follows: “to prepare public health professionals for leadership to advance public health, promote individual and community health and well-being, and decrease health disparities locally, nationally, and globally.” The mission is an extension of, and is consistent with, both the A.T. Still University and the College of Graduate Health Studies mission statements. In addition, the program has adopted the college’s values statement.

In May of 2011 the CEPH Committee met to review and revise the program’s existing mission statement, which had been developed prior to the program’s entry into the accreditation process. The CEPH Committee consisted of faculty members, administrators, staff and a community health representative, though the community representative was not present at the meeting in which the mission was revised. The draft of the revised mission statement was discussed with peer groups of faculty and staff and finalized in July 2011. At the same May 2011 meeting, the committee also drafted six program goals and SMART objectives with quantifiable indicators for each goal. The CEPH Committee approved the goals and objectives in September 2011. The goals focus on a diverse student body, a challenging learning environment, quality instruction to meet the needs of the public health workforce, a diverse and quality faculty and staff, scholarly research to advance public health and service to the community.

The commentary pertains to the process of developing the latest set of guiding statements. There was minimal participation by individuals or groups outside the college in their development and review. The mission, values, and goal/objectives set the direction for the program, and all activities flow from these statements. CEPH accreditation criteria have an expectation that stakeholder groups will be involved in the development process. Future processes to review and update the mission, values and goals/objectives will provide opportunities for greater stakeholder involvement, review and input.

The mission statement, values, goals, and objectives are reviewed annually by program leaders for publication in the MPH Program Guide and are posted on the college portion of the ATSU website.

1.2 Evaluation and Planning.

The program shall have an explicit process for monitoring and evaluating its overall efforts against its mission, goals and objectives; for assessing the program’s effectiveness in serving its various constituencies; and for using evaluation results in ongoing planning and decision making to achieve its mission. As part of the evaluation process, the program must conduct an analytical self-study that analyzes performance against the accreditation criteria.
This criterion is met with commentary. The self-study presents a detailed process for evaluating the program’s progress in carrying out the mission and achieving goals and objectives in its strategic plan. According to the self-study, the goals and objectives were established based on an aspirational framework, without the benefit of historical data on which to draw. As a result, some targets have been greatly exceeded and others have been extremely difficult to track. Program leaders and faculty plan to revisit the objectives once the accreditation process is complete.

In the interim, the program is refining data collection for evaluation of progress toward objectives. Important areas being developed now include methods to assess alumni preparation and success and augmenting the post-practicum survey to capture elements related to curricular delivery methods, format and material and to allow for additional student competency self-assessment.

The department chair leads the review of evaluation data, assuring attention to the findings. The chair shares responsibility with the college’s associate dean of academic success & assessment and with MPH faculty for monitoring student success and curricular matters; with the associate director of admissions on student recruitment and diversity; and with the CGHS administration and the MPH faculty for monitoring faculty diversity and professional objectives. The chair reviews a number of objectives related to faculty performance with individual faculty members at annual reviews.

The program’s evaluation and planning processes are closely linked with CGHS’s processes. Academic advising and instructional design are CGHS functions, rather than program functions, and staff from these programs support the MPH planning and evaluation process. The relevant staff participate in Self-Study and Curriculum Committee meetings.

The curriculum receives continuous attention through student evaluations. The MPH Curriculum Committee reviews evaluation data, suggestions, comments and concerns from faculty, students, alumni, employers and preceptors. The instructional design team is an important resource for the faculty and the Curriculum Committee, so their participation in program curricular meetings provides value.

The self-study contains evidence that the Self-Study Committee assessed the quality of the data for planning. The CGHS and the program have made changes in how data is collected and displayed since the 2011-12 academic year in order to make data more available for strategic purposes. The Self-Study Committee determined that revisiting the goals and objectives themselves should be completed after the site visit. Three years of data have been accumulated, and the data collection system is stable.

Constituent involvement in evaluation and planning comes through surveys and occasionally through specific comments. The minutes show that Curriculum Committee has one student and one alumnus as
members, though actual student participation appears low. The Self-Study Committee has addressed issues raised by constituents, although it has placed some issues on hold until after the site visit.

The self-study process involved faculty members from CGHS and the program, an instructional designer, an academic advisor, the department chair and a CGHS administrator. It grew from nine to 18 members over the course of the process and included one student and one community member. The self-study was circulated online and by email to program constituents, including public health officials involved in a partnership with the program, and to the ATSU community, though the self-study indicates that no comments were received.

The self-study and additional resources are well-organized. Across the four years of self-study development, the documentation shows substantial development of the curriculum, efforts to improve data collection and integration of data into the evaluation process.

The commentary is related to methods of gathering data and using constituents’ input. Program leaders acknowledge that data collection remains weak for some objectives. The planned process to revise and update objectives with input from all constituencies will provide opportunities to examine potential data collection methods alongside the process of prioritizing data needs. In the interim, enhancing the data collection process to ensure greater stakeholder input will be important in strengthening the quality of the existing data collection system. Anecdotal information provided during the site visit meetings was useful, and it revealed more interest and activities than have been captured by the program’s current systems.

1.3 Institutional Environment.

The program shall be an integral part of an accredited institution of higher education.

This criterion is met. The university is accredited by the North Central Association Higher Learning Commission (HLC). Its last accreditation review was in 2010 and resulted in a 10-year accreditation term. The university also holds specialized and professional accreditation in fields including athletic training, audiology, occupational therapy, physical therapy, osteopathic medicine, dentistry and physician assistant studies.

The university’s current organization has evolved through a number of different structures over approximately 125 years. The university was founded in 1892 as an osteopathic medical school. It was established as the Kirksville College of Osteopathic Medicine in 1971 and received its initial HLC accreditation in 1994. During 1995 through 1999, college leaders opened new campuses and degree programs in Phoenix and Mesa, Arizona. The college added master’s degrees in public health, geriatric health and health administration to its Kirksville campus in 1999. Also in 1999, as a result of an HLC review, the college altered its organizational structure and began to transition to a university model, a
process involving organizational changes and strategic planning over a three-year period. The institution assumed its current name in 2002.

Currently, the university has six organizational units, which collectively enroll over 3,000 students: two osteopathic medical schools (one in Missouri and one in Arizona); two dental schools (in the same locations as the medical schools); a health sciences school offering on-site training in allied health fields; and the CGHS, which houses the MPH program and all of the university’s other online degree programs. The CGHS arose as a new university unit in 2014.

In addition to public health, the college includes departments offering the following online degrees: Master of Health Administration and Doctor of Health Administration; Master of Science in Health Education and Doctor of Health Education; Doctor of Health Sciences; and Master of Science in Kinesiology. Each of these program areas is headed by a chair, as is the MPH program.

All program faculty members report to the MPH chair and to the CGHS dean, except for one core faculty member who has a shared appointment with the Arizona dental school. The program also relies on staff members, including academic success coordinators and instructional designers, for key components of program design and delivery. These staff members report directly to the CGHS’ associate dean of academic success and assessment, since their administrative homes are in units that serve all CGHS programs but they work closely with the MPH chair and all faculty members. The MPH program is currently headed by the CGHS dean while the college conducts a search for a new MPH chair.

Tuition provides the main source of revenue for the MPH program, and the CGHS dean makes the program’s budget requests, after consulting with the MPH chair. The chair screens all applicants for faculty positions, interviews candidates and makes hiring recommendations to the CGHS dean. The chair also evaluates faculty members’ performance and recommends advancement, when appropriate, to the dean. The program’s Curriculum Committee is fully responsible for the curriculum, with no subsequent levels of approval required to make changes to the program’s curriculum.

During the site visit, the ATSU president was very in positive in his comments regarding the importance of the MPH program for the university’s mission. He praised the quality of the MPH education and the future role of its graduates in serving the underserved and promoting public health as critically important to the university’s future plans.

1.4 Organization and Administration.

The program shall provide an organizational setting conducive to public health learning, research and service. The organizational setting shall facilitate interdisciplinary communication, cooperation and collaboration that contribute to achieving the program’s public health mission. The organizational structure shall effectively support the work of the program’s constituents.
This criterion is met. The program’s faculty complement functions as the primary means of assuring an interdisciplinary perspective. During the site visit, faculty provided numerous examples of ways in which they collaborate and draw on one another’s varied expertise to strengthen the program’s curricular offerings, as well as the program’s growing efforts in research and service. Faculty note that their varied training in areas including biostatistics, ethics, clinical psychology and epidemiology has brought a richness to their discussions, and provides perspectives and ideas that are especially important to the program’s current efforts to build a culture of research, almost from the ground up.

Faculty members also spoke of the ways in which they collaborate with community contacts, both to match students to practicum sites and job opportunities, and to enrich the curriculum that they deliver, through guest lectures and through assigning applied projects that structure students’ assignments around community agencies’ and organizations’ needs and involve collaboration with agency/organization leaders and staff. Faculty identified the program’s geographic dispersion and distance-based delivery as a strength in fostering a wide variety of interdisciplinary ties, since the model gives students and other faculties ready access to communities across the nation and, increasingly, across the globe.

1.5 Governance.

The program administration and faculty shall have clearly defined rights and responsibilities concerning program governance and academic policies. Students shall, where appropriate, have participatory roles in the conduct of program evaluation procedures, policy setting and decision making.

This criterion is met. The MPH program has four standing committees: Curriculum Committee, Admissions Committee, Research Committee and CEPH Committee. The program has also convened an ad hoc Competency Subcommittee, which is scheduled to meet every three years or as needed to review the relevance of the program’s competencies and their alignment with the curriculum. During the 2014-2015 academic year, the program was in the process of implementing additional committees to focus on the practicum experience and on service. Committee meetings are generally conducted by conference call and/or using online videoconferencing tools. The committees all make a point to conduct in-person meetings during graduation week at the Kirksville campus, when nearly all faculty are physically present.

All full-time faculty, including the department chair, serve on the Curriculum Committee, along with two academic success coordinators, two instructional designers, a representative from the registrar’s office, the CGHS associate dean, a student representative and an alumni representative. This committee has met at differing intervals over the last three years. The program had only two meetings between January and the end of September, 2014, but at other times in recent years, the committee has met monthly or bi-monthly. Faculty explained that they also work on curricular issues via e-mail. The Curriculum Committee is responsible for reviewing all proposed modifications for courses and for discussing and developing
policy and practices to improve the program’s curriculum. The committee reviews all program courses for quality and relevance on a rolling three-year basis.

The Research Committee meets monthly and provides recommendations to the dean about planning, implementing and assessing the program’s faculty and student research. This committee was formed in response to a need, identified during the self-study process, for strategic support to build a culture of research in the MPH program, since there has historically been low research activity. Its members include eight full-time faculty, one staff member and one student representative.

The CEPH Committee prepared the self-study and is responsible for ongoing data collection and analysis. Members include all full-time faculty, including the chair, several CGHS staff members, the CGHS associate dean, two alumni, a community member and a current student.

The Competency Subcommittee included six full-time faculty, including the chair.

The Admissions Committee involves two groups of three faculty members. One makes recommendations for admissions to each track of the MPH program. Members use a standard rubric to evaluate applications, and the chair totals rubrics and determines which students will be granted admissions.

Though not considered to be a committee, the MPH faculty have monthly calls and/or online conferences to discuss program operations, curricular issues and questions or problems. During the site visit, the faculty group’s energy and facility at collaborating via technology was evident. Only two of the 11 faculty members were present with site visitors. The discussions were rich and vibrant, with faculty members interacting with ease.

The chair, in consultation with SGHS leaders, is primarily responsible for developing and implementing program policies, while responsibility for program planning and evaluation is shared among meetings of the MPH faculty and the Curriculum Committee. The Curriculum Committee has full authority over the MPH curriculum.

Additionally, the CGHS Faculty Council plays a role in the program’s governance, since it is the primary voice for faculty issues. The Faculty Council includes seven voting members elected from the body of full-time faculty members at the rank of instructor and above who do not hold administrative appointments. This group acts as a liaison with CGHS leaders and assists in formulating policies relating to promotion and tenure and faculty grievances, among other issues. This body also works with school administrators to develop expectations relating to faculty research and service. Currently, two of the seven members are MPH faculty.
For university-level committees, the dean makes all appointments, and all members serve one year terms. Seven full-time faculty members served on university-wide committees at the time of the self-study’s preparation. Committees include the Faculty Senate, Faculty Evaluation Committee and the Research and Strategic Planning Steering Committee.

The program has recently formalized its process for appointing student representatives to program committees. The chair, with advice from the academic success coordinators, identifies potential candidates and invites these students individually to hold a committee appointment. To date, students have served on the Curriculum Committee, Research Committee and CEPH Committee. MPH students are also invited to participate in university-wide student organizations. Although the program admits that it seeks to increase student engagement and participation, site visitors noted that the level of student participation in program committees appears to be consistently meeting or exceeding its minimum expectations. Site visitors spoke to several students and alumni who currently serve or have served on program committees, and they indicated that the other members clearly valued their opinions and they felt that participation had been worthwhile and substantive. All students who spoke with site visitors noted that they were aware of opportunities to participate in governance, and some cited time and other responsibilities as the only barriers to participation. Reviewers also learned that the program has been engaged in a planning process to undertake a more comprehensive approach to engaging its online student body. The main platform will be a Facebook page, and faculty intend to participate actively, beyond simply creating a page and encouraging students to join. They hope to use this as a platform for students and faculty to share research and service opportunities and to connect across shared experiences. Faculty indicated that they plan to begin implementation in fall 2015.

1.6 Fiscal Resources.

The program shall have financial resources adequate to fulfill its stated mission and goals, and its instructional, research and service objectives.

This criterion is met. The MPH program is funded through tuition, fees, university appropriations and grants and contracts. Since ATSU is a private university, there are no legislative appropriations. Ultimately, the university expects the program to be self-supporting from the various non-university-based revenue sources. Although the program’s budget process does not include an allocation of “taxes” or fees to the university, approximately 30% of all revenue is directed to support non-revenue-generating university support departments, including units that provide instructional design and advising for program students. A percentage of any university unit’s positive budget variance, currently set at 5%, can be placed into a designated account for use in non-personnel related expenses at the college dean’s discretion.
In developing an annual budget, faculty and staff project revenue based on estimated tuition collections. This, in turn, is based on student enrollment goals for the fiscal year. The current annual enrollment goals are 160 students for the MPH generalist concentration and 40 students for the MPH dental concentration. Budgeting also aligns with the college’s strategic plan to meet the goal of (1) a 1:10 faculty-to-student ratio in each classroom and (2) a 1:150 academic advisor-to-enrolled student ratio. The current budgeted expense for faculty/staff benefits is 36%. The program’s budget includes travel expenses to allow full-time faculty and staff to meet on the Kirksville campus at least annually for meetings and professional development.

Table 1 presents the program’s budget for academic years 2009-10 to 2013-14. The revenue and expenditures do not balance in the program’s budget statement because the revenue figures presented in the table do not reflect the approximately 30% of revenue directed back to the university to support non-revenue producing departments. The program is expected to be self-supporting; however, the budget statement presents continued revenue from “university funds” that equals the operations and student support expenditures. A significant revenue decrease occurred in the 2011-12 academic year, with only a slight increase in the last two academic years. In the last three academic years, the actual enrollment has been below the target set for fiscal resources.

<table>
<thead>
<tr>
<th>Table 1. Sources of Funds and Expenditures by Major Category</th>
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<tr>
<td><strong>Source of Funds</strong></td>
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<tr>
<td>Tuition &amp; Fees</td>
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<tr>
<td>University Funds</td>
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<td>Grants/Contracts</td>
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<td><strong>Total</strong></td>
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<tr>
<th><strong>Expenditures</strong></th>
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<td>2009-10</td>
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<tr>
<td>Faculty Salaries &amp; Benefits</td>
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<tr>
<td>Staff Salaries &amp; Benefits</td>
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<td>Operations</td>
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<td>Travel</td>
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<td>Student Support</td>
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<td><strong>Total</strong></td>
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During the site visit, the CGHS dean provided additional information indicating that the school, as a whole, is not generating sufficient revenue to be self-supporting, however the MPH program is generating tuition revenue that exceeds its operations and student support expenditures and is a self-supported program.
The program is aware that student enrollment must increase in order to sustain its self-supporting status. Program and college leaders and planning more effective marketing methods, and the ATSU finance department is scheduled to refine cost codes to specifically track MPH program revenues and expenditures.

1.7 Faculty and Other Resources.

The program shall have personnel and other resources adequate to fulfill its stated mission and goals, and its instructional, research and service objectives.

This criterion is met. The program currently includes six core faculty for the generalist concentration and four core faculty for the dental concentration. The generalist concentration is supported by an additional 18 other faculty (2.1 FTE), and the dental concentration is supported by an additional 26 other faculty (4.9FTE). The student/faculty ratio (SFR) for the program, as a whole, for the last three years was respectively 9.5, 8.3, and 8.6.

The program has 12 staff (6.25 FTEs) to provide administrative and student support. The positions include administrative assistants, academic advisors, instructional designers, a distance support librarian and career services staff. The program is offered in a totally online format and does not require laboratory space.

The program requires students and faculty to provide their own computer access and internet services. Administrators and staff are supported with necessary computer equipment and internet access through the university. The university also provides a 24/7 IT Helpdesk to support students with IT issues, the Blackboard learning management system and e-mail.

The program is supported by two branches of the A.T. Still Library, physically located in Kirksville and Mesa. The library provides online access to more than 19,000 e-journals and 150,000 e-books. Both libraries also provide document delivery services for articles or other material not available online. In 2012, the college hired designated staff to provide library support to the college’s students and faculty. The program has established links on course syllabi and the student resources page of its website to directly link students and faculty with university support in research guidance, writing support, document review and web access.

1.8 Diversity.

The program shall demonstrate a commitment to diversity and shall evidence an ongoing practice of cultural competence in learning, research and service practices.

This criterion is met with commentary. The MPH program has selected to focus its diversity objectives on gender and non-Caucasian race.
For racial diversity, the program set goals that 40% of students, 30% of faculty, and 15% of staff members will be of a race other than Caucasian. For gender diversity, the program set goals that 60% of students, 50% of faculty, and 75% of staff members will be female. In recent years, the percentage of non-Caucasian students has ranged from 31 to 40. The percentage of non-Caucasian faculty has ranged from 20-27, and the percentage of non-Caucasian staff has ranged from 11 to 18. Females are underrepresented, based on the program’s targets, among the faculty. They are overrepresented among the staff; and the program met its target for female students.

The rationale for these objectives is that an online program has the ability to recruit a more diverse student population, that the multiple locations of faculty also facilitate the recruitment of a culturally-diverse and gender-balanced faculty, but that the local labor pool in northeast Missouri limits the ability of the program to develop staff diversity.

The program follows university and CGHS policies and procedures. The self-study notes that recruitment of males for staff positions in Kirksville has been challenging and “efforts to recruit males to fill staff positions are needed,” but the program has not yet defined a specific strategy to address this issue. Hiring of faculty emphasizes that while “the most qualified individuals for open positions are hired, the Human Resources Department makes every effort to recruit a diverse candidate pool.” The university’s General Order for Recruitment, Hiring, and Placement of Faculty describes limited placement of advertisements and allows personal contacts with documentation but does not address specific outreach to institutions that have more diverse faculties and fellowship programs. Targeted outreach in faculty and staff recruitment is largely determined at the program level, and the MPH program has had limited experience with such targeted recruitment. The program has not fully determined whether it is possible to draw on the diversity of its Maricopa County location. Program leaders expressed confidence in existing policies to retain staff and faculty.

The university’s diversity initiative began in 2011 and it supports introduction of diversity issues and cultural competence into the curriculum, an especially important component in the MPH curriculum. Sharing of personal and community diversity experiences is a part of assignments throughout the curriculum.

At the site visit, faculty and others noted the value of the online environment in fostering openness to an economically and culturally diverse student body and faculty. The online offerings are accessible to blind and deaf students and to those with physical disabilities in ways that on-site classrooms cannot match, and the online format is especially useful to working students in rural environments.
At the site visit, the university president described the importance of knowing what the graduates of all the ATSU students do to meet the mission of serving the underserved. Since overall student retention and graduation rates have been challenging for the MPH program, more data about distribution of gender, race, income and other diversities among successful and unsuccessful MPH students and alumni may also be helpful in developing support for student success and to guide student recruitment.

Faculty members have been actively promoting a safe, accepting and receptive campus culture on both physical campuses using the “SafeZone for All” program.

The commentary relates to the inability to meet most targets for racial and gender diversity, inexperience with targeted recruiting and the need to enhance planning to attain stated goals.

### 2.0 INSTRUCTIONAL PROGRAMS.

#### 2.1 Degree Offerings.

The program shall offer instructional programs reflecting its stated mission and goals, leading to the Master of Public Health (MPH) or equivalent professional master's degree. The program may offer a generalist MPH degree and/or an MPH with areas of specialization. The program, depending on how it defines the unit of accreditation, may offer other degrees, if consistent with its mission and resources.

This criterion is met. Table 2 presents the program’s degree offerings. The program offers an MPH with two concentrations: generalist and dental public health. In addition to the standalone MPH degree, the program offers joint degrees with the university’s medical and dental schools in Arizona. The program is offered fully online with no on-campus offerings.

In addition to coursework in the five core public health knowledge areas, the generalist concentration requires coursework in research methods, policy and politics, informatics, and public health biology, among other courses. The dental concentration includes coursework in dental public health, dental research design, professionalism and ethics and financing dental care, among other courses. In the generalist program, students must complete two elective courses. Dental concentration students complete one elective course. Criterion 2.11 describes the curricula for joint degree students.

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<th>Table 2. Degrees Offered</th>
<th>Academic</th>
<th>Professional</th>
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<tr>
<td><strong>Master's Degree</strong></td>
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<tr>
<td>Generalist</td>
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<td>Dental Public Health</td>
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<td><strong>Joint Degrees</strong></td>
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<tr>
<td>Osteopathic Medicine</td>
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<td>MPH-DO</td>
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<td>Dentistry</td>
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<td>MPH-DMD</td>
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2.2 Program Length.

An MPH degree program or equivalent professional public health master’s degree must be at least 42 semester-credit units in length.

This criterion is met. The program requires 64 quarter-credit hours for completion. Except for the practicum, all MPH courses are four quarter-credits each. The university expects students to spend 10-15 hours weekly on each four-credit course. The university offered an MPH for 60 quarter-credit hours until 2011. Three students remain enrolled in the pre-2011 program, and faculty and staff are working with these students to ensure that they graduate in a timely fashion.

2.3 Public Health Core Knowledge.

All graduate professional public health degree students must complete sufficient coursework to attain depth and breadth in the five core areas of public health knowledge.

This criterion is met. The MPH program requires all students to take five core courses. The syllabi show that the courses are complementary and prepare students for both subsequent public health courses at the advanced level and for practice. There is no provision for waiving the core courses.

The core courses differ for the two concentrations; the dental concentration uses the same competencies for the core knowledge areas but uses oral health examples and assignments to integrate the student’s knowledge and skills in both fields.

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<tr>
<th>Core Knowledge Area</th>
<th>Course Number &amp; Title</th>
<th>Credits</th>
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<tr>
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<tr>
<td>Epidemiology</td>
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<tr>
<td>Health Services Administration</td>
<td>MHAD 6200: Administration of Health Care Organizations</td>
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<tr>
<td>Social &amp; Behavioral Sciences</td>
<td>HLTH 6500: Health Education Concepts</td>
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<tr>
<td>Environmental Health Sciences</td>
<td>ENVH 6200: Environmental Health</td>
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<tr>
<td>Environmental Health Sciences</td>
<td>ENVH 6200: Environmental Health</td>
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2.4 Practical Skills.

All graduate professional public health degree students must develop skills in basic public health concepts and demonstrate the application of these concepts through a practice experience that is relevant to students’ areas of specialization.

This criterion is met. The practicum is structured using an individual Memorandum of Agreement between ATSU and the selected agency, negotiated by the practicum coordinator in consultation with the student and the selected preceptor. The normal term of the agreement is one academic year.

Students bear responsibility for identifying potential sites within their geographic area, but the practicum coordinator and the faculty advisor assist, often by suggesting types of agencies and organizations or drawing on their personal networks when possible.

A student may complete a practicum at a place of current employment. In that situation, the project cannot entail work that is within current job responsibilities, the current supervisor cannot be the student’s regular supervisor and the work cannot be performed within the student’s regular paid employment time.

A proposed preceptor’s qualifications and availability to supervise the proposed practicum are evaluated by the faculty advisor and the practicum coordinator. Preceptors are required to have master’s level education in public health or a closely related field and to be employed in work that is appropriate for the proposed goals and competencies addressed in the practicum. The program requires monthly communication among the parties (including the student) during the negotiation and throughout the practicum.

In addition to the MOA, the student, preceptor, faculty advisor and practicum coordinator all participate in defining a separate agreement on the scope of work for the student’s project. This plan is memorialized by a Practicum Proposal Approval Form, stating the student’s name and the project’s title and including the preceptor’s description of the work to be done and the products to result from it. The preceptor and faculty advisor sign the form. The student may not count hours s/he worked prior to the completion of the signed agreement toward fulfillment of the 240-hour obligation.

The practicum coordinator is responsible for maintaining all relevant documents.

Site visitors learned that all full-time faculty are involved in recruiting practicum sites and advising students on selecting an appropriate site. Site visitors confirmed that the practicum coordinator reviews preceptors’ qualifications and makes individual contact with preceptors. Faculty noted that the development of the student’s practicum is an iterative process that assures that the preceptor knows the competencies the student is expected to gain through the practicum.
The Student Guide for the Practicum is complete and clear. The Preceptor Guide is equally clear and provides information on ATSU’s expectations of both the student and the preceptor. There are a number of forms, but each one is simple and straightforward. At the site visit, faculty explained that students are introduced to the practicum requirement early and receive a more detailed introduction in a specific class. Individual interactions continue to build on the introduction and urge the student to develop plans early.

Practicum waivers are not permitted. An extension of time for completion is available. It is intended for those with extenuating circumstances and is limited to one additional quarter.

2.5 Culminating Experience.

All graduate professional degree programs identified in the instructional matrix shall assure that each student demonstrates skills and integration of knowledge through a culminating experience.

This criterion is met. The program has structured its practical skills requirement to be closely linked to the culminating experience.

The accreditation criteria for the culminating experience specifically require that the student “synthesize and integrate knowledge acquired in coursework and other learning experiences and to apply theory and principles in a situation that approximates some aspect of professional experience.” The culminating experience can be closely linked to the practice experience if it is planned and implemented to assure that the student applies skills from across the curriculum and demonstrates synthesis and integration of knowledge. The final work product that is developed as part of the practical experience is considered to be the student’s culminating experience. Products may include program design, program evaluation, policy analysis and other related tasks, and all final products include literature reviews.

During the site visit the practicum coordinator and faculty advisors provided additional information about how they review practicum proposals to assure the synthesis and integration of knowledge. They described an iterative, rigorous process in which students often must submit several drafts, as faculty work with students to 1) define a project with an appropriate scope and 2) ensure that the project truly is tailored to ensure demonstration of multiple competencies. Faculty use a standardized rubric to assess the culminating experience, and the rubric addresses both competency demonstration and writing skills. Students also must complete an oral presentation, either online or in person at one of the campuses, and the student’s presentation and response to questions is a component of the final evaluation.

Site visitors reviewed samples of students’ culminating experience documents and found them to be of appropriately high quality and rigor. Documentation clearly demonstrates the link between projects and competencies.
2.6 Required Competencies.

For each degree program and area of specialization within each program identified in the instructional matrix, there shall be clearly stated competencies that guide the development of degree programs. The program must identify competencies for graduate professional, academic and baccalaureate public health degree programs. Additionally, the program must identify competencies for specializations within the degree program at all levels (bachelor’s, master’s and doctoral).

This criterion is met. The program identifies 14 core competencies for all MPH students, eight additional competencies for generalist students and 11 additional competencies for dental public health students. Some of the competencies are double- and triple-barreled (“Evaluate, interpret and communicate results of descriptive and inferential statistical analyses of public health data for a variety of audiences.”), but faculty and students are clearly comfortable with the competencies, despite their complexity. Faculty have been attentive to this complexity in their mapping, ensuring that no pieces are inadvertently “dropped” and have worked with students to ensure that practicum competencies fully address the competencies that they reference.

The program has mapped each competency set to the required courses associated with each concentration. The current mapping project, conducted in 2012, shortly after the competency set’s development, indicates no gaps in competency coverage, though the self-study indicates that faculty hope to continue to bolster competency coverage, as some competencies are only addressed in a single course.

The current competency set draws on existing competency documents, including those published by the Association of Schools and Programs in Public Health and the American Board of Dental Public Health. The program publishes competencies on all syllabi and on Blackboard sites for each discussion and assignment. This presentation makes the competencies extremely clear to students. Students indicate that they appreciated the manner in which each activity was linked to one or more of the competencies—this approach kept the competencies constantly in view and helped them focus on the purpose of assignments and on the cumulative set of skills that they could be confident they had demonstrated.

The program has not yet undertaken a comprehensive review of the competencies, since the first three-year review is scheduled for 2015. The program plans to use its Curriculum Committee, which includes community, student and alumni representatives, as the committee for competency review.
2.7 Assessment Procedures.

There shall be procedures for assessing and documenting the extent to which each student has demonstrated achievement of the competencies defined for his or her degree program and area of concentration.

This criterion is partially met. The program has mapped coursework to competencies, so successful completion of coursework serves as one measure of competency attainment. All students are required to maintain a 3.0 GPA. Academic advisors (a centralized staff position) monitor the grades of students assigned to them and work with individual faculty members and the chair to identify and address students with lower grades. The program has a structured process for placing students on probation for low grades, and the process includes increased monitoring and support.

The program has also instituted competency self-assessments. Students complete a checklist after completing the practicum that asks them to measure their perceived abilities to perform the competencies. The program also intends for the practicum experience to serve as an opportunity for preceptors and faculty members to assess students' competency attainment. The self-study indicates that the oral examination that accompanies the presentation of the practicum final report provides an opportunity for faculty assessment of students, as does the evaluation form that preceptors complete once the student’s work is complete.

Faculty review the data annually, along with data from preceptor evaluations. Faculty who met with site visitors were able to discuss several specific instances in which they had identified downward trends or lower scores on a given competency and then responded by making alteration in courses or assignments.

The first area of concern relates to the program’s graduation rates. The highest graduation rate reported in the self-study, for the 2008-2009 cohort, is 66%. Cumulative graduation rates for other cohorts who have reached the maximum time to graduation are 51%, 59% and 53%. Since the program is designed for part-time completion, graduation rates at two and three years are low—10% after two years and 49% after three years for recent cohorts. All cohorts have significant attrition, particularly in the first year. Recent entering classes have had 10% - 30% attrition in the first year and steady attrition continuing through each year of the program. The program attributes the 30% attrition (in 2011-2012) to the fact that the program increased expectations and instituted the practicum requirement in that academic year.

The program is well-aware of its issues with completion, and the self-study discusses possible reasons as well as supports that the program has implemented to attempt to reduce attrition. The self-study discussion focuses primarily on the academic literature surrounding online students and degree attainment. The program also has data collected from its internal tracking system, which asks departing students to categorize the reason for their departures from the program, choosing among options such as
work related, personal, medical, military and financial. These data have not been particularly informative, since many students simply choose “personal,” without further elaboration.

The program also identifies several flaws in its internal tracking systems and notes that up to 5% of the attrition in each entering class may be due to students who withdraw during the first week of classes and obtain a 100% refund. The program plans to improve its data systems to attempt to arrive at more accurate numbers, since, in some cases, correcting this error might bring the program’s rates into compliance.

The self-study reports information on the destination of 205 graduates, including 161 generalist graduates and 44 dental public health graduates. None of the graduates reported that they were still seeking employment. Nearly all reported employment, and a limited number (<5%) reported enrollment in additional education.

The second area of concern relates to the program’s methodology for collecting and reporting post-graduation employment outcomes. The program extracted the data for the self-study from a study conducted by the college (though 2/3 of the college’s respondents were from the MPH program). The survey was administered to all graduates for whom contact information was available. This criterion seeks data on outcomes for students within one year of graduation, and the one-year outcomes are impossible to obtain from the existing data. A number of initiatives that the program has currently planned should enable the program to begin collecting specific data on each graduating group of MPH students to allow the program to present data that is responsive to this criterion. The strong anecdotal evidence available during the site visit suggests that problems with graduates’ employment appears to be highly unlikely. Site visitors met with employers, some of whom have hired graduates directly from their practicum experiences, and faculty discussed instances in which they had facilitated connections or networking that led graduates to new jobs after graduation.

The third area of concern relates to the program’s lack of meaningful alumni or employer data on graduates’ abilities to perform the competencies in a practice setting. The program electronically collects employer data for students who report employment at the time of entering the MPH, and the program has used this as the pool for soliciting information from employers. This methodology is inherently limited, since it only captures information from employers who already employed the student when he or she entered the program. Also, though the program solicited information from 155 employers, it received responses from only eight. All eight answered “yes” to a question about whether the program’s competencies prepared employees with necessary skills. The surveys also yielded five narrative responses, most of which focused on additional skills that the program might consider covering. The self-study also reports that information from preceptor evaluations may be useful in identifying employer
perspectives, but the only data available relate to a single, generalized question on the student's preparation and do not address specific knowledge or skills. The program has not collected alumni data, per se, though the self-study reports data from students' post-practicum competency assessments. These assessments indicate high levels of self-reported attainment, with the lowest score associated with the following competency: “Develop and translate different measurement scales and data distributions to determine statistical methodology.”

2.8 Bachelor’s Degrees in Public Health.

If the program offers baccalaureate public health degrees, they shall include the following elements:

Required Coursework in Public Health Core Knowledge: students must complete courses that provide a basic understanding of the five core public health knowledge areas defined in Criterion 2.1, including one course that focuses on epidemiology. Collectively, this coursework should be at least the equivalent of 12 semester-credit hours.

Elective Public Health Coursework: in addition to the required public health core knowledge courses, students must complete additional public health-related courses.

Public health-related courses may include those addressing social, economic, quantitative, geographic, educational and other issues that impact the health of populations and health disparities within and across populations.

Capstone Experience: students must complete an experience that provides opportunities to apply public health principles outside of a typical classroom setting and builds on public health coursework. This experience should be at least equivalent to three semester-credit hours or sufficient to satisfy the typical capstone requirement for a bachelor’s degree at the parent university. The experience may be tailored to students’ expected post-baccalaureate goals (eg, graduate and/or professional school, entry-level employment), and a variety of experiences that meet university requirements may be appropriate. Acceptable capstone experiences might include one or more of the following: internship, service-learning project, senior seminar, portfolio project, research paper or honors thesis.

The required public health core coursework and capstone experience must be taught (in the case of coursework) and supervised (in the case of capstone experiences) by faculty documented in Criteria 4.1.a and 4.1.b.

This criterion is not applicable.

2.9 Academic Degrees.

If the program also offers curricula for graduate academic degrees, students pursuing them shall obtain a broad introduction to public health, as well as an understanding about how their discipline-based specialization contributes to achieving the goals of public health.

This criterion is not applicable.

2.10 Doctoral Degrees.

The program may offer doctoral degree programs, if consistent with its mission and resources.

This criterion is not applicable.
2.11 Joint Degrees.

If the program offers joint degree programs, the required curriculum for the professional public health degree shall be equivalent to that required for a separate public health degree.

This criterion is met with commentary. The program has clearly defined the credit sharing for each of the joint degree programs to ensure that the depth of public health knowledge is equivalent to that associated with the standalone MPH program.

All dental students, whether enrolled in the joint MPH program or not, complete three public health classes which were designed by public health faculty for the MPH program. The courses address planning and implementing community programs and ethics, including a specific focus on population health ethics. Thus, these three courses count toward both degree programs for dual degree students. The course titles in the dental school are not fully representative of the alignment. DOH 613: Dentistry in the Community I fulfills the same competencies as the public health program’s Community-Based Programs: Development course and DOH 622: Dentistry in the Community Ib fulfills the same competencies as the public health course on program implementation and evaluation. Site visitors verified the alignment by reviewing course syllabi, and the alignment was extremely clear.

In the medical joint degree program, all students complete the generalist concentration. The program has identified coursework in the medical curriculum that addresses the competencies covered in the program’s core courses in epidemiology and biostatistics, as well as the competencies in public health biology. The CGHS dean (a public health-trained MPH faculty member) and a medical school faculty member with graduate training in public health led the process of determining competency alignment. Because of the DO program’s inherent population-based perspective, achieving alignment of competencies was not a great challenge. The program has also defined a similar equivalence in the medical school curriculum for the public health biology class. The final piece of credit sharing for MPH-DO students relates to elective credits. Some DO joint degree students complete one elective by designing a one-month intensive independent study course, which relates to specific program competencies and is approved and assessed by a designated faculty member in the SOMA.

The commentary relates to the medical joint degree program, which has been in place for less than three years. The program has not yet had a chance to fully implement and examine all aspects of the model, since no students have completed the program. Some of the shared elements, such as the practicum, which will be coordinated by an MPH faculty member and a medical faculty member with public health training, will require particular attention to ensure that they meet the needs of both degree programs. Also, it will be important for the program to monitor these joint degree students’ perceived competencies.
in the areas of coursework substitutions to ensure that students are receiving the equivalent training, as intended. The first medical joint degree students are scheduled to graduate in 2015.

Site visitors reviewed syllabi for all of the medical school coursework that addresses the shared competencies, and site visitors reviewed sample work product from the independent-study elective. For the main medical school course designated to cover biostatistics and epidemiology competencies, the number of modules dedicated to biostatistics is lower than the number of modules completed by students in the standalone MPH program. Site visitors discussed the process that faculty had undertaken to validate competency attainment across the curriculum, however, and were satisfied by the rigor of the process and the consideration of the totality of the medical school curriculum.

2.12 Distance Education or Executive Degree Programs.

If the program offers degree programs using formats or methods other than students attending regular on-site course sessions spread over a standard term, these degree programs must a) be consistent with the mission of the program and within the program’s established areas of expertise; b) be guided by clearly articulated student learning outcomes that are rigorously evaluated; c) be subject to the same quality control processes that other degree programs in the university are; and d) provide planned and evaluated learning experiences that take into consideration and are responsive to the characteristics and needs of adult learners. If the program offers distance education or executive degree programs, it must provide needed support for these programs, including administrative, travel, communication and student services. The program must have an ongoing program to evaluate the academic effectiveness of the format, to assess learning methods and to systematically use this information to stimulate program improvements. The program must have processes in place through which it establishes that the student who registers in a distance education or correspondence education course or degree is the same student who participates in and completes the course and degree and receives academic credit.

This criterion is met. The program is delivered in a totally online, asynchronous format and is geared toward working individuals who access the curriculum without leaving employment or relocating to the campus. As a result, the program attracts students from around the United States and from other countries. This feature also allows for culturally diverse learning opportunities. Because the program’s design and format are fully online, the program has built and tailored its evaluation and student assessment plans to respond to the online environment.

The program provides IT support through the ATSU Help Desk, which is available 24/7. The program’s academic advisors provide ongoing support to assist students with any academic issues, monitor their progress during the course of a semester and contact students who are at risk of poor academic performance or who are not engaging in course activities. An online university writing center is available to students and there is the support of a distance librarian. Faculty are assisted in both course development and delivery by the program’s instructional specialists. During the site visit, faculty described the high-quality support provided for adapting course modules to respond to emerging issues and mid-
semester alterations to the curriculum (eg, adding a discussion on Ebola, or changing an exercise to increase understanding of the effects of the ACA on rural health services).

Courses are divided into 10 one week modules. Each module generally contains a didactic session, reading assignments and a required discussion forum in which students respond to an instructor’s question and other student comments. Courses may include quizzes, papers, blogs, presentations and group assignments. Students are evaluated based on their formal assignments and engagement in the discussion forums. The program has started providing some synchronous lectures, which are recorded for students who cannot attend the live session.

The program uses a secure ID login and password for students’ access to courses on Blackboard, library services, and email. The University’s IT Department was evaluating additional authentication software at the time of the site visit.

3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE.

3.1 Research.

The program shall pursue an active research program, consistent with its mission, through which its faculty and students contribute to the knowledge base of the public health disciplines, including research directed at improving the practice of public health.

This criterion is met with commentary. ATSU has a complete set of policies and procedures to guide faculty research. The policies and procedures address grant and research reinvestment, copyrights, intellectual property, misconduct in science and financial conflicts of interest in research.

ATSU has established several intramural funding programs to support faculty research. The Warner/Fermaturo and ATSU Board of Trustees Research Fund provides initial or interim funding support for full time faculty to engage in pilot research projects or to provide short-term support for project continuation. The ATSU Strategic Research Fund supports clinical research for whole person health care-related research. A new funding opportunity specific to public health was initiated in 2014. The ATSU Community Health Research Grant provides initial or interim support for promising faculty research projects directed toward community health. The grant requires that a member of the MPH faculty be part of the grant project. Two primary faculty members are initial recipients and are using funding to examine the association between community factors and low birth weight and prenatal care in rural vs. urban areas of Kansas.

Students are dispersed geographically, which creates barriers to engagement in faculty research, but several dental MPH students who are located near the Mesa campus are working on a faculty-led research study focusing on oral cancer related continuing education for dentists.
The program’s self-assessment acknowledges its historically modest research output, with very little external grant funding. The self-study indicates that the primary focus is teaching. During the site visit, faculty confirmed their need to develop and expand relationships with external partners for both funding and collaborations for research.

During the site visit faculty provided additional information on their collaborative efforts to increase research efforts. The faculty is demonstrating impressive teamwork with creative partnerships, such as an MOU with the South Carolina Rural Health Research Center. In addition to a formal MPH Research Committee, the faculty communicates in monthly “Brown Bag” conference calls to discuss potential research projects. Protected time to engage in research is being addressed and the recent recruitment of new faculty has enhanced the faculty team’s competitiveness in seeking external grant funds. Conversation during the site visit indicated a high level of activity, much of it occurring in the months and weeks immediately before the site visit. Though many of these efforts are in preliminary phases, reviewers noted evidence of steady momentum, and faculty members’ enthusiasm for the rapidly-growing research program was evident. At the time of the site visit, five faculty members had active intramural grants on three distinct projects, and one faculty member had research funding from the Arizona Department of Health. Recent faculty hires have focused on individuals with interest and skills in research, and the program was actively negotiating with both state and local health departments near the Kirksville campus to finalize cooperative research agreements.

The commentary pertains to the current level of output of research conducted by program faculty. Although many of the barriers are actively being addressed to expand the research component of the program, this effort must be sustained and enhanced in order increase research output.

3.2 Service.

The program shall pursue active service activities, consistent with its mission, through which faculty and students contribute to the advancement of public health practice.

This criterion is met with commentary. The program’s service mission is focused on the full-time faculty based at the Kirksville campus, with community volunteer activities among adjunct faculty and students at the Mesa campus as a supplement. The self-study describes the program’s effort to define a productive service mission that engages the faculty and meets local needs and discusses the particular challenges of engaging students in the online classroom. The program has developed a relationship with the Northeast Missouri County Healthcare Network and concluded a Memorandum of Understanding (MOU) among the parties to further the Kirksville-based mission. The two-party MOU was signed in November, 2013. It is somewhat general in nature, addressing communication and confidentiality and calling for an annual implementation plan to be developed between the parties.
The initial product of this agreement has been a community health needs assessment using the County Health Rankings data for 16 rural Missouri counties referred to as “the network.” A memorandum dated January, 2014 describes plans for a service project addressing bullying, to be undertaken jointly by ATSU faculty, with a primary faculty member in the lead, and the network, with Shelby County in the lead. The evolving plan in the self-study describes a project running into the fall of 2015 and indicates that the topic was identified by the network partners as an area of need.

Service to the community and service to the profession are considered in faculty promotion decisions.

The program encourages students to volunteer for service activities in their local areas and collects data from students about their participation in community services. Dental MPH students have more opportunities for community health service, especially through organized dental outreach programs. Program leaders also indicated that they believe that the self-study under-reports the actual level of student service. The self-study data indicate that service activity is low and has been declining. The program has responded by creating a simpler form for reporting by students, and by asking faculty to remind students of the importance of submitting this information.

The commentary relates to the limited system for encouraging and tracking service activities of faculty and students. During the site visit, the faculty reported significant service activity, particularly through involvement with public health professional organizations, which were not captured in the self-study. The MOU with the Northern Missouri County Healthcare Network has significant potential to foster strong relationships with local public health entities and to provide faculty and Missouri-based students with service opportunities. Progress on full implementation of the program’s service agenda was slowed by the death of a key faculty member in the months preceding the site visit, but on-site conversations indicate that progress has resumed. The service component of the MOU includes consultation with local health officials, assistance in developing interventions at the local level and assessing community health needs.

At the site visit, faculty described a culture of serving one’s own community. The program is in the process of using the online environment to develop a virtual student association on Facebook, which can be used to promote a service culture by informing students of opportunities and highlighting student activities in their own communities. The self-study also presents data on the program’s self-defined outcome measures for service. The program has exceeded its target of 50% for faculty with leadership positions on public health or related boards and organizations, but it has not met its target of having 100% of faculty involved (even if not in a leadership role) in such organizations. The program also falls short of its target of 30% of students reporting engagement in professional or community service: the highest rate reported is 17%, and the 2013-14 year shows only 4% of students reporting such activity. As noted previously, the program attributes the low rates in part to underreporting.
3.3 Workforce Development.

The program shall engage in activities other than its offering of degree programs that support the professional development of the public health workforce.

This criterion is met with commentary. The cornerstone of the workforce development activity at ATSU MPH Program is the partnership with the North Missouri County Health Network, initiated in 2013. The partnership grew from a request by one local health department administrator who was seeking assistance in developing an educational program for staff. Other health departments in the area expressed interest in conducting a needs assessment for the region and pursuing staff training goals. One of the program's primary faculty members initiated a community needs assessment, which identified the need for an intervention to address bullying, as noted in Criterion 3.2. Additional needs have been prioritized, and the partners are working collaboratively to develop a realistic plan that addresses the health departments' priorities. The agreement includes a commitment to complete an assessment of health department workforce training needs annually.

In the absence of the implementation of this more formal structure, faculty have provided targeted workforce development to employees at network partners’ departments on an as-needed basis. During the site visit, community partners praised faculty's responsiveness and willingness to develop timely, customized trainings as needs arise.

Two HRSA-funded projects are aimed at educating clinicians in public health. One centered on the dental field and led to the implementation of the dental joint degree program. The other resulted in development and delivery of public health coursework at the Kirksville campus for medical students who are not enrolled in a public health degree program addressing patient safety, oral health and quality improvement in family medicine. The program also identifies and addresses needs for continuing education among non-public health CGHS faculty. The program offers public health-focused faculty development sessions during the annual faculty meetings on the Kirksville campus. The program also provides a webinar series on public health research and practice and in-person continuing education credits for DOs and MDs the Kirksville area.

The position of the college's director of the Continuing Education Advisory Committee is vacant, but the program continues to work to incorporate more public health content into the university's continuing education offerings for clinicians. Fifty people participated in a public-health focused continuing education offering in June 2014.

The program offers a public health certificate to dental students at the Mesa campus. This is a five course block including Introduction to Dental Public Health, Behavioral Sciences and educational Concepts,
Dental Epidemiology, Global Health Issues and Financing Dental Care. It is being extended to the Kirksville campus during the 2014-2015 academic year. An average of 70 students enrolled in each of the last three years, and an average of 65 completed the certificate course in each year.

The commentary relates to early stage of the workforce development efforts through the MOU with the Northern Missouri Healthcare Network. This collaboration is addressing workforce development needs in the region around its Kirksville campus. However, progress has been hampered by faculty and administrative vacancies and by limited attention to student involvement. During the site visit, faculty and the dean reported renewed forward movement on fulfilling the MOU, with a meeting scheduled for October 3rd between senior faculty and network members.

4.0 FACULTY, STAFF AND STUDENTS.

4.1 Faculty Qualifications.

The program shall have a clearly defined faculty which, by virtue of its distribution, multidisciplinary nature, educational preparation, practice experience and research and instructional competence, is able to fully support the program’s mission, goals and objectives.

This criterion is met. The program employs 10 primary faculty members. All faculty in the program are required to possess a terminal degree. Eight out of ten of the primary faculty members have either MPH or DrPH degrees, or both, and they also possess very diverse area of research interests. Faculty also have experience working in the field of public health including working in community health centers, tribal health, emergency preparedness and global health settings.

An additional 26 other faculty support the program; six are full-time faculty members in other ATSU programs and twenty have adjunct status. All but two have terminal degrees, though only eight have formal public health training. The other faculty members that support the MPH program come with a wide range of experience including working in local and state health departments, the military, healthcare settings and global health initiatives.

The program has met or exceeded the outcome measures and targets for the primary faculty in the number of professional presentations by MPH faculty (16), number of submissions for peer-reviewed publications (nine) and number of grant applications (six). The target to have all primary faculty possessing doctoral degrees is at 90.9% but will be at 100% in the 2014-15 academic year.

4.2 Faculty Policies and Procedures.

The program shall have well-defined policies and procedures to recruit, appoint and promote qualified faculty, to evaluate competence and performance of faculty, and to support the professional development and advancement of faculty.
This criterion is met. The ATSU Policies Manual and the CGHS Faculty Handbook provide information on all university policies. These two documents provide all information on faculty appointments, promotion criteria, annual evaluation and professional development opportunities. The college does not have tenured positions.

The criteria for the appointment of instructors includes possessing a master’s degree and as least 12 semester hours of graduated coursework in the area the individual will be teaching. Qualifications also include prior teaching experience and/or experience in the field of study. Candidates for appointment to the rank of assistant professor must possess a doctoral-level degree or a professional degree and have at least two years of post-doctoral experience or professional experience. Promotion to the rank of associate professor is available to assistant professors who have met the expectations of assistant professors for five or more years. Candidates must also provide evidence of sustained activity in teaching, scholarly activity and professional or community service and be rated superior in at least two of these areas. Promotion to the rank of professor is available to associate professors who have meet the expectations associated with that rank for at least five years, have demonstrated sustained and meritorious performance in areas of teaching, scholarly activity and service and provided evidence of excellence in at least two of these areas.

Full-time faculty members are evaluated annually by the department chair using 13 separate performance criteria. Faculty rated as “Doesn’t Meet Expectations” in any of the criteria have a developmental improvement plan drafted and monitored. The department chair evaluates adjunct faculty primarily on engagement of students in the discussion forums, prompt submission of grades and submitting At-Risk Student Reports in a timely manner.

In addition, all courses require a formal course evaluation. Student course evaluations are conducted both at the mid-term of a semester and at the end of the semester. Completion of the end of semester course evaluation is mandatory. Evaluation responses are summarized for each course and are provided to both the instructor and the department chair. Evaluations examine teaching effectiveness, the pace of the course, course content and the ability of the instructor to add value to the course.

Faculty members are required to complete an annual Faculty Development Plan and discuss this with the department chair. Opportunities for professional development are available to full-time faculty, including a $1,500 stipend to spend on travel, educational materials or taking course at other institutions or opportunities to engage in networking activities.
4.3 Student Recruitment and Admissions.

The program shall have 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.

This criterion is met with commentary. The college’s online catalog sets out the admission requirements for all master’s and doctoral programs. It states that applicants “are reviewed for academic performance, extracurricular and co-curricular activities, work and life experience, recommendations, and interest in…public health.” Students who are enrolled in other ATSU degree programs (dentistry and medicine) are considered for admission to the MPH Program based on their current cumulative GPA at ATSU.

Applicants to the program are required to have documented the following:

- earned a bachelor’s degree or higher from an accredited university,
- achieved a minimum cumulative GPA of 3.0 (4.0 scale),
- completed a background check with ASTU’s vendor, and
- achieved a minimum score of 213 on the computerized TOEFL if English is a second language, with minimums of 22 in reading and 26 in writing, or the equivalent scoring on other versions of the test and
- verified the availability of compatible technology in order to participate fully in the coursework.

The GRE is not required, but essays and recommendation letters are.

The policies provide a path for otherwise qualified students whose GPA is less than 3.0 to complete an essay explaining the poor academic record and describing her/his plan for success. This is especially important in attracting mid-career students. The Admissions Committee may admit students through several processes; such a student may be “provisionally approved” and “placed on Phase II probation.” Phase II Academic Probation Requirements include a limit of two courses per block and earning a GPA of 3.0 or higher. If a student meets the requirements of the probationary period and demonstrates satisfactory academic progress, she or he attains full academic standing.

The program moved to a more stringent GPA standard in 2010 and saw its applicant pool contract. During the site visit, faculty commented that the quality of student work improved, leading them to work to increase the pool of qualified applicants, rather than lower standards.

The number of enrolled students is not yet meeting objectives. This is compounded by student attrition, especially in the first week of the program, since students who withdraw within that period receive a full tuition refund. The faculty, students and alumni all expressed opinions that these early withdrawals relate to the discovery that an online curriculum places substantial weight on the student to complete the work on time, an expectation that recruitment materials could address more clearly. Later attrition is more often temporary, and students are more likely to complete the program. This is an area where more data on
students who succeed and those who do not would guide policy. The “reapplication” process for those who take more than six months off was cited by some as a deterrent to completing the program.

The commentary relates to the fact that recruitment has historically been a university function, with significant effort dedicated to web-based recruitment. Program faculty have ideas for more targeted recruitment, and faculty have begun to use various conferences strategically for recruitment of qualified applicants. More data on the yield of various recruitment efforts would help the program tailor its efforts, but these are not currently available. Fifteen to twenty percent of accepted students do not enroll, a loss that the program would like to reduce.

4.4 Advising and Career Counseling.

There shall be available a clearly explained and accessible academic advising system for students, as well as readily available career and placement advice.

This criterion is met. Academic advising is provided on two levels: academic advisers from the CGHS advise students on study habits, academic services and communication skills, help resolve technical problems and address personal issues. Faculty members monitor progress in courses they teach and identify students who are not succeeding for follow-up by the academic advisers. Mentoring of students by faculty may be initiated by a student or a faculty member, and the program describes this as primarily career advising or advising on developing a practicum experience.

Career services are available to students and alumni through the CGHS. In addition to advice on job search strategies, applications and interviewing, the CGHS has an active system for tracking and disseminating information about job openings. The satisfaction survey data provided in the self-study is difficult to interpret, since only three MPH students answered the relevant questions. Students and alumni at the site visit were enthusiastic about value of these services. The role of faculty advisors in pointing them toward practica and projects that helped them build careers was mentioned by several, and site visitors noted the consistent praise for the program’s personalized interaction.
Thursday, October 2, 2014

8:30 am  Site Visit Team Request for Additional Documents  
Katherine Adler, DHA – Associate Dean, Academic Success and Assessment  
Sue McDaniel – Instructional Designer

8:45 am  Team Resource File Review

9:15 am  Online Course Demonstration

9:45 am  Break

10:00 am  Meeting with Program Administration  
Dr. Don Altman, Professor and Dean, CGHS  
Dr. Kathy Adler, Associate Dean of Academic Success and Assessment

11:00 am  Break

11:15 am  Meeting with Faculty Related to Curriculum and Degree Programs  
David Denali, PhD, MPH, LMSW – Associate Professor, f/t  
Lihua Dishman, MBA – Assistant Professor, f/t (50% MPH)  
SD Shantinath, PhD, DDS, MPH – Associate Professor, f/t  
Greg Loeben, PhD, MA – Associate Professor, f/t  
James Guillory, DO, MPH, MA - Professor, f/t  
Mary-Katherine Smith, DrPh, MPH – Associate Professor, f/t  
Jeffrey Chaffin, DDS, MPH, MBA, MHA – Assistant Professor, f/t  
Jaana Gold, DDS, PhD – Associate Professor, f/t  
Ashley Love, DrPH, MPH, MS – Associate Professor, f/t  
Jeanine Tucker, DMD, MPH – adjunct professor  
Margaret Evans, PhD – Adjunct professor

12:15 pm  Break

12:30 pm  Lunch with Students (via conference call)  
Kenyatta Badgett - MPH  
Sheryl Gifford - MPH  
Richard Nussle – MPH – in person  
Marsha Presley - MPH  
Barbara Stone – MPH – in person  
Julie Hermann - MPH  
Preeti Kamat – MPH  
Amy Troung – MPH  
Sheila Othman – MPH  
Sanjay Nand – MPH

1:30 pm  Break

1:45 pm  Meeting with Faculty Related to Research, Service, Workforce Development, Faculty Issues  
David Denali, PhD, MPH, LMSW – Associate Professor, f/t  
Lihua Dishman, MBA – Assistant Professor, f/t (50% MPH)  
SD Shantinath, PhD, DDS, MPH – Associate Professor, f/t  
Greg Loeben, PhD, MA – Associate Professor, f/t  
James Guillory, DO, MPH, MA - Professor, f/t  
Mary-Katherine Smith, DrPh, MPH – Associate Professor, f/t  
Jeffrey Chaffin, DDS, MPH, MBA, MHA – Assistant Professor, f/t  
Jaana Gold, DDS, PhD – Associate Professor, f/t  
Ashley Love, DrPH, MPH, MS – Associate Professor, f/t

2:45 pm  Break

3:00 pm  Resource File Review and Executive Session
4:00 pm  Meeting with Alumni, Community Representatives, Preceptors  
Sarah Spencer – MPH alumni  
Bernie Fellner – MPH alumni  
Shiva Mumtazi – MPH alumni  
Rochelle Mascarenas – MPHD alumni  
Tim Griffin – MPH Alumni  
Richard Kurz – Preceptor  
Doris Fountain – employer  
Amy Thoreson - employer  
Tedi Fladhammer – Community representative  

5:00 pm  Adjourn/ Return to Hotel  

Friday, October 3, 2014  

8:30 am  Meeting with Institutional Academic Leadership/ University Officials  
Dr. Craig Phelps - President  
Dr. Norman Gevitz, Senior V.P. Academic Affairs  

9:15 am  Break  

9:30 am  Executive Session and Report Preparation  

12:30 pm  Exit Interview