Accreditation Self-Study

Bachelor of Science in Health Science
Concentration: Community, Worksite, Public Health

Submitted to the Council on Education for Public Health by the Department of Health and Exercise Sciences

March 2, 2022

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Introduction

1. *Describe the institutional environment, which includes the following:*
   a. *year institution was established and its type (e.g., private, public, land-grant, etc.)*

      Truman State University is a public, liberal arts institution. Originally named the Missouri Normal School and Commercial College, the university was established in 1867. In 1870, the university became Missouri's first state-supported institution of higher learning focused on training professionals for public schools. In 1919, the institution was renamed Northeast Missouri State Teachers College, with its primary focus being teacher education. Due to a shift in academic needs and demands, the university was renamed Northeast Missouri State University in 1972. In 1985, Northeast Missouri State University changed its mission becoming a selective, statewide public liberal arts and sciences university; and, in 1996, Northeast Missouri State University was renamed Truman State University.

   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)*

      At Truman State University there are **five schools**: School of Arts and Letters, School of Business, School of Health Sciences and Education, School of Science and Mathematics, and School of Social and Cultural Studies. There are **41 bachelor's degrees offered**: Accounting, Agricultural Science, Art, Art with concentration in Design, Art with concentration in Studio Art, Biochemistry and Molecular Biology, Biology, Business Administration, Chemistry, Classics, Communication, Communication Disorders, Computer Science, Creative Writing, Economics, English, Exercise Science, French-Modern Language Major, German-Modern Language Major, Health Science, History, Interdisciplinary Studies, Justice Systems, Liberal Studies, Linguistics, Mathematics, Modern Language, Music Therapy, Music General, Music Pre-Certification, Music with concentration in Liberal Arts, Music with Emphasis Groups, Nursing, Philosophy and Religion, Physics, Political Science and International Relations, Psychology, Sociology/Anthropology, Spanish-Modern Language, Statistics, and Theater. There are **ten graduate degrees offered**: Accountancy, Athletic Training, Communication Disorders, Counseling, Data Science and Analytic Storytelling, Education, English, Gifted Education, Leadership, and Music. There is **one graduate certificate program offered** in Data Science.

   c. *number of university faculty, staff, and students*

      Currently, Truman State University has 251 full-time faculty, 57 part-time faculty, 356 full-time staff, and 19 part-time staff. Currently, there are 3,890 undergraduate students and 335 graduate students.

d. brief statement of distinguishing university facts and characteristics

A highly-selective public liberal arts and sciences university, Truman offers an affordable public residential education to well-prepared students that is grounded in the liberal arts and sciences.

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

Truman State University has been accredited by the Higher Learning Commission (HLC) of North Central Association of Colleges and Schools since 1914. Additional accrediting agencies for various programs include the following:

- AACSB International - The Association to Advance Collegiate Schools of Business
- American Chemical Society
- American Speech-Language-Hearing Association
- Commission on Accreditation of Athletic Training Education
- Commission on Collegiate Nursing Education
- Council for the Accreditation of Educator Preparation & Missouri Department of Elementary & Secondary Education
- Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) of the American Speech-Language-Hearing Association (ASHA)
- National Association of Schools of Music

f. brief history and evolution of the standalone baccalaureate program (e.g., date founded, educational focus, rationale for offering public health education in unit, etc.)

The Health Science Major [BS degree in Health Science] at Truman State University started with the 1998-99 catalog year (see ERF folder Introduction/Subfolder Introduction 1f: History of SBP). Previously, 'Health' was a 'Concentration Area' under the Exercise Science Major.

With three founding professors, all PhD/CHES®, the original educational focus was preparing students to become Certified Health Education Specialists (CHES®) to meet the health education and health promotion needs of the state of Missouri. At that time, there was grant funding in the state for Community Health Assistance/Assessment Resource Teams. These teams were facilitated by health educators. In response to the need for health educators in the state, the MO Department of Health and Senior Services (MDHSS) conducted outreach to universities to start community/public health programs and to recruit prospective, future employees from in-state colleges. Students from the Truman program attended quarterly Health Education Network (HEN) meetings at the Wildwood Campus of the MDHSS in Jefferson City. Directors from the Health Promotion Division were annual guest speakers in classes, and meetings were held with key administrators from the Department who provided support for our future

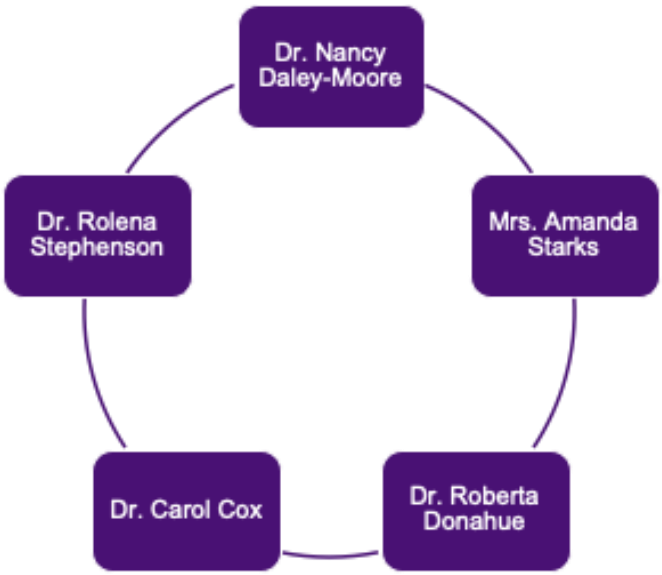
program expansion. During these early years, the program received two national awards for excellence in undergraduate professional preparation. From the beginning of the program, the CHES® Exam was (and still is) required for graduation, and a culminating field experience (now called 'Internship') was a degree requirement. Truman became a National Commission for Health Education/CHES® testing site in 2001, assisting and supporting professional credentialing for our students. Later, the program received SOPHE/AAHE Baccalaureate Program Approval Committee (SABPAC) approval and re-approval lasting until fall 2019.

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

   a. *the program's internal organization, including the reporting lines to the designated leader*

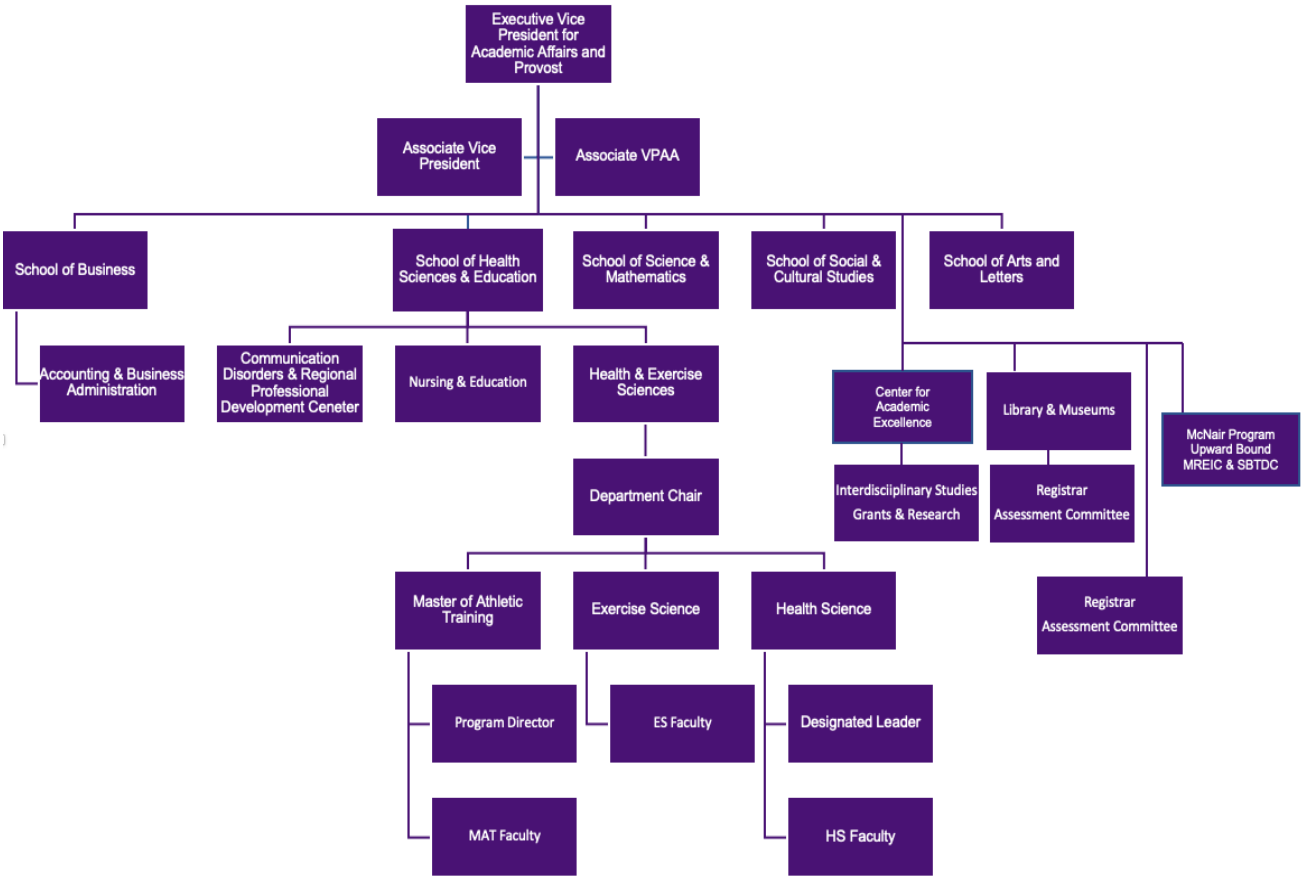
   The Chair, Department of Health and Exercise Sciences, is the direct supervisor of all Health Science faculty members. The program functions as a committee of the whole with the designated leader being the primary conduit for communication between the Department Chair and the other faculty members regarding program-level issues. The below figure can also be found in the ERF (Folder: Introduction; Subfolder: Introduction 2a: SBP Internal Organization).

   Figure 1. The Health Science Program Organizational Chart



   b. *the relationship between program and other institutional components, including departments, schools, colleges and other relevant units. Ensure that the chart depicts all other academic offerings housed in the same organizational unit as the program.*

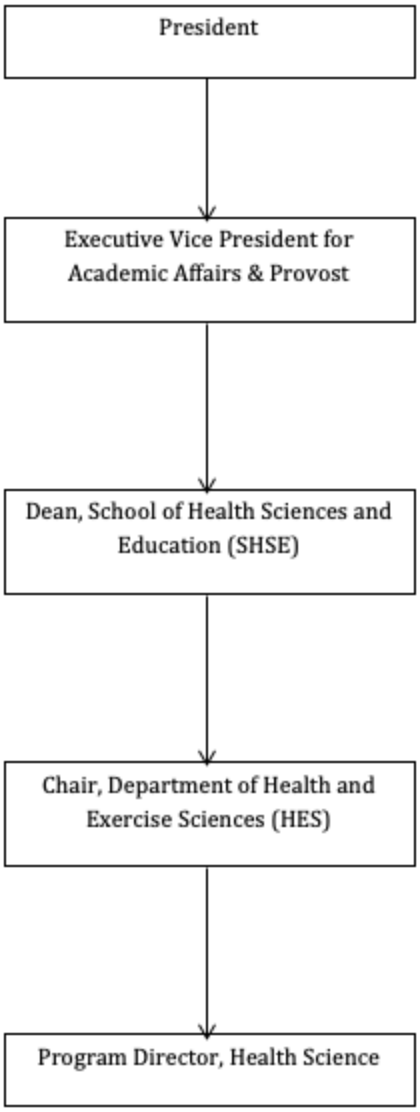
   Figure 2. Truman State University Organizational Chart



This chart was adapted from the Organizational Chart created by the Provost Office, and it can be found in the ERF (Folder: Introduction; Subfolder: Introduction 2b: Institution Organization).

c. *the lines of authority from the program's designated leader to the institution's chief executive officer (president, chancellor, etc.), including intermediate levels*

Figure 3. The lines of authority from the SBP to the President of Truman State University.



3. *The program's mission statement; the mission statements for the department, college, school or other organizational unit(s) that house the program; the mission statement for the institution. The program's (major's) mission statement must be specific to the program (major) and be used to guide its activities. This programmatic (major) mission statement will also be used to guide the accreditation review.*

   The **mission of Truman State University** is as follows: The mission of Truman State University is to offer an exemplary undergraduate education to well-prepared students grounded in the liberal arts and sciences, in the context of a public institution of higher education. To that end, the University offers affordable undergraduate studies in the traditional arts and sciences as well as selected pre-professional, professional, and master's level programs that grow naturally out of the philosophy, values, content, and desired outcomes of a liberal arts education.

   The **mission of the School of Health Sciences and Education** is as follows: The School of Health Sciences and Education at Truman State University is committed to preparing

students to effectively serve as professionals and leaders in their communities and field by providing an exceptional education grounded in the liberal arts and sciences fostering interdisciplinary collaboration, promoting diverse learning experiences, and inspiring the pursuit of continued scholarship and research.

The **mission of the Department of Health and Exercise Sciences** is as follows: The mission of the Health and Exercise Sciences Department is to prepare students of strong academic ability and character to become agents of change for the health and well-being of all people.

4. ***An instructional matrix presenting the program's degree offerings. The matrix should include degree, major and any concentrations or sub-specialties within the major. Present data in the format of Template Intro-1. Non-degree programs, such as certificates or continuing education, should not be included in the matrix.***

Instructional Matrix – Degrees and Concentrations			
Degrees		**Campus-Based**	**Distance-Based**
Concentration	*Degree*		
Community, Worksite, Public Health	BS	X	

A1. Leadership, Management and Governance

The program, through its leaders and/or faculty, demonstrates autonomy that is sufficient to affirm the program's ability to fulfill its mission and goals and to conform to the conditions for accreditation. Autonomy refers to the program's ability, within the instructional context, to make decisions related to the following:

- *allocation of program resources (who allocates resources to program?)*
- *implementation of personnel policies and procedures (any committees)*
- *development and implementation of academic policies and procedures*

As a state institution, Truman State University depends on appropriations from the Missouri General Assembly for a significant share of its financial support. Other sources of income for the educational and general programs of the University include student tuition and fees, endowments, alumni and other gifts, and federal and other grants. The Board of Governors is the policy-making body of the institution and has the authority to adopt bylaws, rules, and regulations for the University and delegates authority to officials, employees, and committees. The President of the University is the chief executive officer and reports to the Board of Governors. The President is assisted in the administration of the University by the Executive Vice President for Academic Affairs/Provost, the Dean of Student Affairs, the Vice President of Administration, Finance, and Planning, the Vice President of University Advancement, and the directors of support/services areas. The Executive Vice President for Academic Affairs/Provost designs and supervises implementation of the academic budget for all academic programs at the University and works closely with faculty governing bodies responsible for the academic policies and procedures. Deans of the Schools make budget requests to the Executive Vice President for Academic Affairs/Provost based on Department Chair budget requests. The Program Director and individual Health Science faculty members make budget requests, including large ticket item requests, to the Chair following an annual Department meeting where input is requested.

The **Faculty Senate** serves as the legislative body for academic policies/procedures and issues. The Senate reviews and approves new majors and minors; programs and courses; curricular issues of university-wide significance such as study abroad courses, interdisciplinary majors, issues that affect more than one academic school; and academic policies and curricular issues of university-wide significance for graduate programs. The Faculty Senate has advisory authority over budgetary issues and discusses university budget with the President of the University at least once each year. The Department has input through a Faculty Senator. A sub-committee of the Faculty Senate, the Personnel Policies Committee, is charged with creation and implementation guidance for personnel policies and procedures, and the Department has input through a Committee representative. Complete information about the Faculty Senate, including constitution, bylaws, meeting minutes, and so on may be found at wp-internal.truman.edu/provost/faculty-senate/.

The **Undergraduate Council (UGC)** is a standing council of the University Faculty Senate and exists to propose, review, and recommend to the Faculty Senate changes to the undergraduate curriculum when such changes affect more than one discipline or are of

university-wide significance. The UGC must approve matters regarding the former Liberal Studies Program (and newly implemented Dialogues Curriculum), the Honors Scholar Program, interdisciplinary minors, and Interdisciplinary Studies major. The Department has input through an Undergraduate Council Representative. Complete information about UGC can be found on the internal website at https://wp-internal.truman.edu/ugc/.

The **Health Science** faculty have autonomy to fulfill program mission/goals. Faculty are responsible for the development and implementation of the curricula. Faculty governance provides oversight for any proposed curricular changes. The Health Science faculty and the Department Chair oversee admission to the Community, Worksite, and Public Health (CWPH) concentration. In order to be eligible for admission to the CWPH concentration, Health Science students must have an overall GPA of 2.5 (or higher), 75 hours completed at the university level, and completed the following courses with a grade of C or better:

- HLTH 255: Introduction to Community and Public Health
- HLTH 270: Health Systems and Consumers
- HLTH 290: Public Health Education Principles
- STAT 190: Basic Statistics (or STAT 290: Statistics)

Decisions about student assessment are made by each individual faculty member, and, at times, in consultation with other Health Science faculty. The assessment decisions are guided in part by the HESPA II CHES® Competencies and Sub-Competencies. In accordance with the University guidelines, the Health Science faculty must produce a five-year review, which includes a self-study, curricular map, and a detailed report. This five-year review is both internally and externally reviewed, and it is reviewed by faculty governance.

1. ***A description of <u>how</u> each of the following functions (items a-n) is accomplished for the program in the format of Template A1-1. Template A1-1 requires the program to indicate who has responsibility for each process and where program faculty have roles in the process. The template also requires the program to cite the relevant supporting document(s) and page(s) (e.g., Faculty Handbook, pp. 12-25; College Bylaws, p. 5).***

TEMPLATE A1-1			
Description of how each of the functions is accomplished for the program as relevant to the program's authority. (Criterion A1)			
Function	**Responsible Party or Parties**	**Brief Summary/Description of Process(es)**	**Relevant Program or Institutional Policies (cite supporting document(s) and page(s) including hyperlinks)**

Determining the amount of resources (financial, personnel and other) that will be allocated to the program	Board of Governors (BOG)	The University depends on appropriations from the Missouri General Assembly for a share of its financial support. The Board of Governors in consultation with the University President and the Executive Vice President of Academic Affairs and Provost determines resource allocation. Our program is not formally nor directly involved in this function.	Faculty Handbook Chapter 3 Board of Governors (BOG) Chapter 9
Distributing resources (financial, personnel, and other)	President, VP/Provost, Dean	The President is the Chief Executive Officer of the University and represents the needs and interests of the University to the Board of Governors. The Executive Vice President of Academic Affairs and Provost has the primary responsibility for the overall administration of the academic programs and operations and designs and supervises implementation of the academic budget. Our program is involved in this function directly through annual budget requests (formal and informal) to the Department Chair who finalizes the Department budget proposal.	Faculty Handbook Chapter 3
Hiring faculty who teach program courses	President, VP/Provost, Dean	All administrators, faculty, and employees are under the direct supervision of the President. The President approves the hiring of faculty. Our program is directly involved in this function through assisting the Department Chair with crafting job descriptions/postings, and all serving in chairpersonship and/or membership on the screening and selection committee.	Faculty Handbook Chapter 3 BOG Chapter 10
Determining teaching assignments for program courses	Program Director, HS Faculty	Our program is directly involved in this function. The Program Director and faculty, collaborating as a committee of the whole, determine assignments based on expertise, interest, and course/room scheduling requirements.	Faculty Handbook Chapter 7
Evaluating the performance of individuals teaching program courses	HS Faculty, HES Department	Annual formative reviews are conducted by the Department Chair to assist the faculty member in continuous improvement. Faculty submit evidence of teaching/advising, scholarship, and university and community service to a department-level peer review committee during their mid-point formative review. This review occurs at the mid-point in the timeline for eligibility to apply for promotion. The peer review committee submits a report and recommendation to the Department Chair, Dean, and Provost. During the formal review process for promotion, peer evaluation includes committee review of service, scholarship, and teaching/advising including: written syllabi, teaching/advising philosophy, varieties of	Faculty Handbook Chapter 7

		instructional formats used, integration of technology, and/or classroom observation; and student evaluations. Our program is directly involved in both midpoint and formal review functions. Faculty serve in chairpersonship and/or membership on all midpoint and formal peer review committees of program faculty members at the department level. They evaluate candidate performance in meeting University standards in the areas of teaching/advising, service, and research/scholarship/creative activity.	
Promoting and/or granting tenure, if applicable, to faculty teaching program courses	Tenure Committee, Chair, Dean, Provost, Board of Governors	Our program is indirectly involved in this function. Formal peer review committee written recommendations for tenure and/or promotion are forwarded to the Department Chair who adds a letter, and then forwards the portfolio to the Dean.	Faculty Handbook Chapter 6 BOG Chapter 6
Re-appointing or terminating program faculty hired by contract, if applicable	Chair, Dean, Provost	Re-appointment or termination of program faculty hired by contract is determined by the academic Dean with consultation from the Department Chair and approval of the Provost. Our program is not directly involved in this function.	Faculty Handbook Chapter 6
Hiring personnel to advise program students	Search Committee, Chair, Provost, President	Academic and career advising in the program is conducted by program faculty. The hiring process for program faculty also includes evaluation of applicant advising experience and/or potential for advising as a criteria. Our program is directly involved in this function through assisting the Department Chair with crafting job descriptions/postings, and all serving in chairpersonship and/or membership on the screening and selection committee.	Faculty Handbook Chapter 6 BOG Chapter 10
Evaluating the performance of individuals advising program students	Peer review committee	Faculty are expected to submit evidence of teaching/advising, scholarship, and service to their peer review committee during mid-point formative reviews and during the formal review process for promotion and tenure. Academic and career advising evaluations are part of this process. Our program is directly involved in both mid-point and formal review functions to evaluate advising. Faculty serve in chairpersonship and/or membership on all mid-point and formal peer review committees of program faculty members at the department level. They evaluate candidate performance in	Faculty Handbook Chapter 7

		meeting University standards in the areas of teaching/advising.	
Developing the program's academic policies governing matters such as academic standing and award of degree	HS Faculty, Faculty Governance, Faculty Senate	Discipline faculty play a key role in developing program academic policies in their own discipline/program. Policies affecting multi-disciplinary programs must be developed in accordance and with approval of the Faculty Senate. Our program is directly involved in this function. Program faculty, as a committee of the whole, meet to propose/draft any necessary policy changes.	Faculty Handbook Chapter 4
Designing the curriculum, including defining the requirements for the major	HS Faculty, Faculty Governance	Our program is directly involved in this function. Program faculty meet, discuss, create, and implement curriculum within the governance structures of the University. Discipline-based curricular change occurs within the department and is approved by the discipline faculty, the Department Chair, the Dean, and the Provost. Curricular changes affecting more than one discipline must be approved by the appropriate council, Faculty Senate, the Provost, and the President.	Faculty Handbook Chapter 4
Developing and reviewing plans for assessing student learning	HS Faculty	Our program is directly involved in this function. Program faculty members are responsible for developing and reviewing plans for assessing student learning in their courses as part of their teaching responsibilities.	Faculty Handbook Chapter 7
Developing and implementing plans for measuring the program's effectiveness	HS Faculty, Faculty Governance	Our program is directly involved in this function. Assessment work is done by program faculty, academic departments, and by committees such as the Provost/Vice President's Advisory Committee on Assessment (the Assessment Committee). Assessment reports are shared through the Assessment Almanac, online at the assessment website, at two annual campus-wide conferences (the University Conference and Strategic Planning and Assessment Workshop), and other appropriate venues. Program reviews are conducted every five years following a rigorous process that concludes with Faculty Senate approval and submission to the Missouri Coordinating Board of Higher Education.	Faculty Handbook Chapter 5

Developing and implementing program-specific recruitment, advertising and admissions practices and strategies	HS Faculty, HES Department, Admissions	Our program is directly involved in this function. Program faculty and the Department Chair coordinate student recruitment activities in close consultation with the Office of Admissions.	Faculty Handbook Chapter 7

A2. Faculty Engagement

Faculty (including full-time and part-time) regularly interact and are engaged in ways that benefit the instructional program (e.g., instructional workshops, curriculum committee).

1. ***A description detailing the interactions and engagement among faculty (full-time and part-time faculty) that benefit the instructional program (e.g., instructional workshops, curriculum committee).***

   The Department of Health and Exercise Sciences meets once a month, which allows for all department faculty members to keep abreast of various curricular changes happening at the university level. Additionally, the Health Science faculty meet each month to address curricular updates/changes, policy implementation, student advising, and student recruitment strategies. All full-time faculty are expected to attend these meetings.

   All Health Science faculty members have access to training provided by the Academic Professional Development Center (APDC). These trainings are offered throughout the fall and spring semesters and include but are not limited to the following instructional topics: ungrading, online and hybrid teaching models, trauma informed teaching, proctoring online exams, advising and mentoring first generation students.

2. ***Supporting documentation (e.g., minutes, attendee lists) that demonstrates regular engagement and interactions among faculty.***

   1. Minutes from Department Meetings
   2. Minutes from Program Meetings

B1. Public Health Curriculum

The requirements for the public health major or concentration provide instruction in the domains. The curriculum addresses these domains through any combination of learning experiences throughout the requirements for the major or concentration coursework (i.e., the program may identify multiple learning experiences that address a domain — the domains do not each require a single designated course).

1. *A list of all required coursework and components for the program's degree(s), including the total number of credits required for degree completion in the format of a one-page summary. Provide hyperlinks to relevant documents if they are available online, or include in the resource file electronic copies of any documents that are not available online.*

   Students in the Community, Worksite, and Public Health (CWPH) Concentration are required to take the following Health Science courses.

   HS Core Courses
   - HLTH 255: Introduction to Community and Public Health
   - HLTH 270: Health Systems and Consumers
   - HLTH 290: Public Health Education Principles
   - HLTH 325: Health Management and Policy
   - HLTH 349: Research Methods in Health Science
   - HLTH 366: Program Assessment and Planning
   - HLTH 410: Health Communication Methods
   - HLTH 440: Capstone: Program Implementation and Evaluation
   - HLTH 400: CHES® Exam Review

   HS Concentration Courses
   - HLTH 405: Global Public Health
   - HLTH 455: School Health Programs
   - HLTH 460: Internship in Health Education
   - HLTH 467: Introduction to Epidemiology
   - HLTH 480: Worksite Health

   Required Support & B.S. Requirements
   - BIOL 325: Human Physiology
   - BIOL 100: Biology **or** BIOL 107: Cells, Molecules, and Genes
   - PSYC 160: General Psychology
   - STAT 190: Basic Statistics **or** STAT 290: Statistics

   Students in the CWPH Concentration are required to take two of the courses listed below. Not every CWPH student takes each of these courses.

   HS Selective Courses (Pick Two)
   - ES 345: Exercise Physiology
   - HLTH 245: Substance Abuse Prevention

- HLTH 260: Human Sexuality
- HLTH 320: Patient Education and Clinical Health Promotion
- HLTH 361: Mental Health
- HLTH 362: Environmental Health

2. *A matrix, in the format of Template B1-1, that indicates the experience(s) that ensure that students are exposed to each of the domains indicated in this criterion.*

CWPH Required Courses

Curriculum aligns with each of the public health domains as defined:

- I = introduces concepts relevant to outcomes and strengthens/emphasizes knowledge and skill development
- C = covers/provides opportunities for knowledge/attitudes/skills integration to master outcomes.

PUBLIC HEALTH DOMAINS	Course Name and Number												
	HLTH 255	HLTH 270	HLTH 290	HLTH 325	HLTH 349	HLTH 366	HLTH 400	HLTH 410	HLTH 440	BIOL 100	BIOL 325	PSYC 166	STAT 190
1. Concepts and applications of basic statistics: Identify and apply the principles of basic statistics													
Concepts of basic statistics	I				C				C				I
Applications of basic statistics					C		C		C				I
2. Foundations of biological and life sciences: Address the foundations of biological and life sciences and the concepts of health and disease													
Foundations of biological and life sciences										I	C		
Concepts of health and disease	I									I	C		
3. Overview of Public Health: Address the history and philosophy of public health as well as its core values, concepts, and functions across the globe and in society													
Public health history	I		C	C									
Public health philosophy	I		C	C									
Core PH values	I		C	C									
Core PH concepts	I		C	C									
Global functions of public health		I	I										
Societal functions of public health	I	I	C			C							

4. Role and Importance of Data in Public Health: Address the basic concepts, methods, and tools of public health data collection, use, and analysis and why evidence-based approaches are an essential part of public health practice													
Basic Concepts of Data Collection	I		I	I	C		C	C	C			I	I
Basic Methods of Data Collection	I		I	I	C		C	C	C			I	I
Basic Tools of Data Collection			I	I	C		C	C	C			I	I
Data Usage	I		I	I	C	C	C	C	C				I
Data Analysis				I	C		C	C	C				I
Evidence-based Approaches	I		I	I	C	C	C	C	C			I	I
5. Identifying and Addressing Population Health Challenges: Address the concepts of population health, and the basic processes, approaches, and interventions that identify and address the major health-related needs and concerns of populations													
Population Health Concepts	I	I	I	I				C					
Introduction to Processes and Approaches to Identify Needs and Concerns of Populations	I	I	I	I		C	C	C	C				
Introduction to Approaches and Interventions to Address Needs and Concerns of Populations	I	I	I	I		C	C	C	C				
6. Human Health: Address the underlying science of human health and disease including opportunities for promoting and protecting health across the life course													
Science of Human Health and Disease	I									I	C		
Health Promotion	I		I				C						
Health Protection	I		I				C						
7. Determinants of Health: Address the socio-economic, behavioral, biological, environmental, and other factors that impact human health and contribute to health disparities													
Socio-economic Impacts on Human Health and Health Disparities	I		I	I		C				I			
Behavioral Factors Impacts on Human	I		I	I		C				I		I	

Health and Health Disparities													
Biological Factors Impacts on Human Health and Health Disparities	I		I	I		C				I			
Environmental Factors Impacts on Human Health and Health Disparities	I		I	I		C				I			
8. Project Implementation: Address the fundamental concepts and features of project implementation, including planning, assessment, and evaluation													
Introduction to Planning Concepts and Features			I	I	C	C	C	C	C				
Introduction to Assessment Concepts and Features			I	I	C	C	C	C	C				
Introduction to Evaluation Concepts and Features			I	I	C		C	C	C				
9. Overview of the Health System: Address the fundamental characteristics and organizational structures of the U.S. health system as well as to the differences in systems in other countries													
Characteristics and Structures of the U.S. Health System	I	C											
Comparative Health Systems		I											
10. Health Policy, Law, Ethics, and Economics: Address the basic concepts of legal, ethical, economic, and regulatory dimensions of health care and public health policy, and the roles, influences and responsibilities of the different agencies and branches of government													
Legal dimensions of health care and public health policy		I	I	C									
Ethical dimensions of health care and public health policy		I	I	I									
Economical dimensions of health care and public health policy		I	I	C									
Regulatory dimensions of		I	I	I									

health care and public health policy													
Governmental Agency Roles in health care and public health policy		I	I	C									
11. Health Communications: Address the basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology													
Technical writing			I		I			C					
Professional writing			I	I	I			C					
Use of Mass Media						I		C	C				
Use of Electronic Technology			I	I	C			C					

CWPH Concentration Courses

Curriculum aligns with each of the public health domains as defined:

- I = introduces concepts relevant to outcomes and strengthens/emphasizes knowledge and skill development
- C = covers/provides opportunities for knowledge/attitudes/skills integration to master outcomes.

PUBLIC HEALTH DOMAINS	Course Name and Number										
	HLTH 405	HLTH 455	HLTH 460	HLTH 467	HLTH 480						
1. Concepts and applications of basic statistics: Identify and apply the principles of basic statistics											
Concepts of basic statistics				C							
Applications of basic statistics				C							
2. Foundations of biological and life sciences: Address the foundations of biological and life sciences and the concepts of health and disease											
Foundations of biological and life sciences											
Concepts of health and disease	C			C							
3. Overview of Public Health: Address the history and philosophy of public health as well as its core values, concepts, and functions across the globe and in society											
Public health history		C		C	C						
Public health philosophy		C		C	C						
Core PH values		C	C	C	C						

Core PH concepts	C	C	C	C	C						
Global functions of public health	C	C			C						
Societal functions of public health	C	C	C	C	C						
4. Role and Importance of Data in Public Health: Address the basic concepts, methods, and tools of public health data collection, use, and analysis and why evidence-based approaches are an essential part of public health practice											
Basic Concepts of Data Collection			C	C							
Basic Methods of Data Collection		C	C	C	C						
Basic Tools of Data Collection		C	C	C	C						
Data Usage		C	C	C	C						
Data Analysis		C	C	C	C						
Evidence-based Approaches	C	C	C	C	C						
5. Identifying and Addressing Population Health Challenges: Address the concepts of population health, and the basic processes, approaches, and interventions that identify and address the major health-related needs and concerns of populations											
Population Health Concepts	C										
Introduction to Processes and Approaches to Identify Needs and Concerns of Populations		C	C		C						
Introduction to Approaches and Interventions to Address Needs and Concerns of Populations		C	C		C						
6. Human Health: Address the underlying science of human health and disease including opportunities for promoting and protecting health across the life course											
Science of Human Health and Disease				C							
Health Promotion		C	C		C						
Health Protection		C			C						
7. Determinants of Health: Address the socio-economic, behavioral, biological, environmental, and other factors that impact human health and contribute to health disparities											
Socio-economic Impacts on Human Health and Health Disparities	C			C							

Behavioral Factors Impacts on Human Health and Health Disparities	C	C		C	C						
Biological Factors Impacts on Human Health and Health Disparities	C			C							
Environmental Factors Impacts on Human Health and Health Disparities	C	C		C	C						
8. Project Implementation: Address the fundamental concepts and features of project implementation, including planning, assessment, and evaluation											
Introduction to Planning Concepts and Features		C			C						
Introduction to Assessment Concepts and Features		C			C						
Introduction to Evaluation Concepts and Features		C			C						
9. Overview of the Health System: Address the fundamental characteristics and organizational structures of the U.S. health system as well as to the differences in systems in other countries											
Characteristics and Structures of the U.S. Health System											
Comparative Health Systems	C										
10. Health Policy, Law, Ethics, and Economics: Address the basic concepts of legal, ethical, economic, and regulatory dimensions of health care and public health policy, and the roles, influences and responsibilities of the different agencies and branches of government											
Legal dimensions of health care and public health policy		C			C						
Ethical dimensions of health care and public health policy		C									
Economical dimensions of health care and public health policy					C						
Regulatory dimensions of health care and public health policy					C						
Governmental Agency Roles in health care and public health policy		C									
11. Health Communications: Address the basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology											

Technical writing			C								
Professional writing			C		C						
Use of Mass Media		C	C								
Use of Electronic Technology			C								

3. *Syllabi for all courses required for the major. Syllabi must contain sufficient detail to allow reviewers to understand the content of each course and any assessment activities. Syllabi must contain sufficient detail to allow reviewers to verify the courses' alignment with the elements presented throughout Criterion B, including assessment of student learning outcomes, public health domains, public health competencies, etc. If the syllabus does not contain sufficient information to support Criterion B, the program should append supplemental information to the syllabus, such as handouts with detailed instructions for required papers, assignments, etc.*

   Please see the syllabi located in the ERF folder Criterion B1 subfolder B1.3 Supporting Documentation. Within the B1.3 Supporting Documentation Subfolder, each required course is listed by abbreviation and course name (e.g., HLTH 255: Introduction to Community and Public Health), which corresponds to the required courses table and concentration courses table in B1.1.

4. *Include examples of student work that relate to assessment of each of the public health domains.*

   Please see the examples of student work located in the ERF folder Criterion B1 subfolder B1.4 Student Samples. Within the B1.4 Student Samples Subfolder, all samples are organized by course (e.g., HLTH 349: Research Methods in Health Science) and by public health domain (e.g., Public Health Domain #1).

B2. Competencies

Students must demonstrate the following foundational competencies:

1. Communicate public health information, in both oral and written forms and through a variety of media, to diverse audiences
2. Locate, use, evaluate and synthesize public health information

In addition, the program defines at least three distinct <u>additional</u> competencies for each concentration area identified in the instructional matrix that define the skills with a student will attain in the public health major. The competencies align with the program's defined mission and the institution's regional accreditation standards and guide 1) the design and implementation of the curriculum and 2) student assessment. These are not re-statements of the public health domains but define skills that the student will be able to demonstrate at the conclusion of the program.

A general public health curriculum (e.g., BA, BS, BSPH in general public health) is also considered a concentration.

These competencies may be established by other bodies, if applicable and relevant to the program's intended outcomes. Specifically, if the program intends to prepare students for a specific credential, then the competencies must address the areas of responsibility required for credential eligibility (e.g., CHES®).

1. *A list of the program's foundational competencies including, at a minimum, the two competencies defined by CEPH.*

    - Communicate public health information, in both oral and written forms and through a variety of media, to diverse audiences.
    - Locate, use, evaluate, and synthesize public health information

2. *A list of the program's concentration competencies, including the relevant competencies addressing the areas of responsibility for credential eligibility, if applicable.*

    - Effectively assess needs, resources, and capacity for health education and promotion
    - Plan effective health education/promotion programs
    - Effectively implement health education/promotion programs
    - Conduct effective evaluation and research related to health education/ promotion
    - Effectively administer and manage health education/promotion programs
    - Serve as an effective health education/ promotion resource person
    - Effectively communicate, promote, and advocate for health, health education/ promotion and the profession
    - Apply CHES® competencies through field experiences and community involvement

3. *A matrix, in the format of Template B2-1, that indicates the assessment activity for each of the competencies defined in documentation requests 1 and 2 above. The template requires the program to identify the required course and the specific assessment and/or evidence within the class for each competency. If the program offers more than one concentration, multiple matrices may be required.*

Foundational Competencies	Course number(s) and name(s)*	Assessment
Public Health Communication		
Communicate public health information, in both oral and written forms and through a variety of media, to diverse audiences.	• HLTH 325: Health Management & Policy • HLTH 410: Health Communication Methods • HLTH 440: Program Implementation and Evaluation • HLTH 455: School Health Programs	• **Grant application or business plan**: Communicate using written application to support sustainability of program intervention (HLTH 325) • **Communication Campaign**: students create a plan and materials for a communication campaign (HLTH 410)

		• **Capstone Project:** Implement & Evaluate a Health Education Program or Health Communication Campaign (HLTH 440) • **Whole-school/child/community (WSCC) Advocacy Kit**: Present created mass media/multi-media campaign to school board to educate/advocate for district WSSC adoption (HLTH 455)
Public Health Information Literacy		
Locate, use, evaluate, and synthesize public health information	• HLTH 325: Health Management & Policy • HLTH 349: Research Methods in Health Science • HLTH 366: Program Assessment & Planning	• **Completed quality improvement plan:** Synthesize assessment data into the change management process (HLTH 325) • **Literature Review Homework:** craft a research question, use keywords to find four peer-reviewed articles, and complete an annotated bibliography (HLTH 349) • **Research Proposal:** identify a research question, conduct a literature review, describe methodology for answering research question, propose analysis plan, and complete an IRB (Institutional Review Board) application (HLTH 349) • **Needs Assessment Worksheet**: students complete a worksheet about examining relevant literature and secondary data (HLTH 366)
Additional Foundational Competencies as Defined by the Program		
Effectively assess needs, resources, and capacity for health education and promotion programs	• HLTH 325: Health Management & Policy • HLTH 366: Program Assessment & Planning HLTH 455: School Health Programs • HLTH 480: Worksite Health	• **Completed secondary needs assessment template:** Conduct community health needs assessment and asset inventory (HLTH 325) • **Capacity Worksheet**: assess community resources for proposed intervention (HLTH 366)

		• **WSCC plan for school district:** Conduct district-wide Health Education Curriculum Analysis Tool and School Health Index (HECAT/SHI) needs assessment of program plan (HLTH 455) • **Worksite health promotion program:** Conduct needs assessment/claims analysis and asset inventory of a worksite health program (HLTH 480)
Plan effective health education/promotion programs	• HLTH 290: Public Health Education Principles • HLTH 325: Health Management & Policy • HLTH 366: Program Assessment & Planning • HLTH 440: Program Implementation and Evaluation • HLTH 455: School Health Programs • HLTH 480: Worksite Health	• **Brief health education and promotion program proposal:** identify planning model, health behavioral theories/models, and effective strategies to address a community health problem (HLTH 290) • **Completed strategic plan document:** Full plan for implementing selected intervention (HLTH 325) • **Planning Worksheet:** students compile a plan for their proposed intervention (HLTH 366) • **Brief Program Proposal:** discuss plan for capstone project, including scope, theory, logic model, and budget (HLTH 440) • **WSCC plan for school district:** Full plan for implementing/ integrating WSCC model into selected school district (HLTH 455) • **Worksite health promotion program plan:** Full operating plan for implementing a worksite health promotion program into selected organization (HLTH 480)
Effectively implement health education/ promotion programs	• HLTH 290: Public Health Education Principles • HLTH 440: Program Implementation and Evaluation	• **Group Project:** gather secondary data baseline for monitoring community health efforts (HLTH 290) • **Capstone Project:** Implement & Evaluate a Health Education Program or Health

		Communication Campaign (HLTH 440)
Conduct effective evaluation and research related to health education/ promotion programs	• HLTH 410: Health Communication Methods • HLTH 440: Program Implementation and Evaluation	• **Pretest Assignment:** Pretest communication materials (HLTH 410) • **Capstone Project:** Implement & Evaluate a Health Education Program or Health Communication Campaign (HLTH 440)
Effectively manage health education/ promotion programs	• HLTH 325: Health Management and Policy	• **Public health strategic design/systems thinking simulation**: Manage multiple, system-wide interventions in an online, simulated environment (HLTH 325)
Serve as an effective health education/ promotion resource person	• HLTH 410: Health Communication Methods • HLTH 455: School Health Programs	• **Communication Campaign**: students create a plan and materials for a communication campaign (HLTH 410) • **Health education materials/curriculum evaluation for school district:** Provide district staff with ratings for effectiveness of use for educational materials and pre-packaged categorical curricula (HLTH 455)
Effectively communicate, promote, and advocate for health, health education/ promotion programs and the profession	• HLTH 325: Health Management and Policy • HLTH 410: Health Communication Methods • HLTH 455: School Health Programs • HLTH 480: Worksite Health	• **Completed health policy analysis and advocacy plan:** Create and follow plan to actively conduct legislative advocacy for selected policy, ordinance, bill to policy makers and stakeholders (HLTH 325) • **Communication Campaign:** present communication materials created in class including print materials and website (HLTH 410) • **WSCC advocacy kit for school district:** Present created kit materials to mock school board (HLTH 455) • **Rationale/advocacy paper for worksite health promotion**

		program to organization **CEO/Board:** Present created paper to organization management (HLTH 480)
Apply CHES® competencies through field experiences and community involvement	• HLTH 290: Public Health Education Principles • HLTH 440: Program Implementation and Evaluation • HLTH 460: Public Health Internship	• Service-learning reflections & Group Program Planning Presentation (HLTH 290) • Capstone Project: Implement & Evaluate a Health Education Program or Health Communication Campaign (HLTH 440) • Artifacts & Reflections (HLTH 460)

4. *Include the most recent syllabus from each course listed in Template B2-1, or written guidelines such as handbook, for any required elements listed in Template B2-1 that do not have a syllabus.*

   Please see the syllabi for each course listed in Template B2-1 located in the ERF folder Criterion B2 subfolder B2.4 Supporting Documentation. Within the B2.4 Supporting Documentation Subfolder, all syllabi are organized by course name (e.g., HLTH 349: Research Methods in Health Science).

B3. Cross-Cutting Concepts and Experiences

The overall undergraduate curriculum and public health major curriculum expose students to concepts and experiences necessary for success in the workplace and further education and life-long learning. Students are exposed to these concepts through any combination of learning experiences and co-curricular experiences.

1. *A brief narrative description, in the format of Template B3-1 of the manner in which the curriculum and co-curricular experiences expose students to the concepts in Criterion B3.*

Concept	Manner in which the curriculum and co-curricular experiences expose students to the concepts
1. Advocacy for protection and promotion of the public's health at all levels of society	• In HLTH 325, Health Management and Policy, students are exposed to legislative advocacy by conducting a health policy analysis and creating and presenting a legislative advocacy campaign to support a community-wide intervention. • In HLTH 410, Health Communication Methods, students are exposed to media advocacy (e.g., Press Conference and Press Kit Assignment) and legislative advocacy (e.g., Advocacy Letter Assignment) • In HLTH 455, School Health Programs, students are exposed to media and legislative advocacy through the creation and presentation of an advocacy kit to support the Whole School,

	Whole Community, Whole Child (WSCC) Model implementation in a chosen school district. • In HLTH 480, Worksite Health, students are exposed to advocacy by presenting a rationale paper/proposal to a CEO/Board of Directors supporting worksite health promotion in a chosen business/industry/organization.
2. Community dynamics	• In HLTH 290, Public Health Education Principles, students review community factors influencing certain health problems and outlining implementation strategies to address the problem. • In HLTH 366, Program Assessment and Planning, students create a planning committee for a proposed health promotion intervention. Students develop a role description and justification for each person.
3. Critical thinking and creativity	• In HLTH 290, Public Health Education Principles, students are introduced to different theories/models and are asked to use critical thinking and creativity to decide what theories/models are best to use in program development to address certain health problems. • In HLTH 325, Health Management and Policy, students are exposed to critical thinking and creativity as they participate in a public health strategic design/systems thinking online simulation. Students also complete the Strategic Skills Training Series: Introduction to Systems Thinking Online Module. • In HLTH 410, Health Communication Methods, creativity is fostered as they develop their own communication materials (e.g., video, podcast, print materials) • In HLTH 455, School Health Programs, students are exposed to critical thinking and creativity as they conduct Health Education Curriculum Analysis Tool (HECAT) and School Health Index (SHI) assessment of a school's health curriculum and create a lesson plan/project to fill an identified health content/MO Grade Level Expectation gap based on the analysis. • In HLTH 480, Worksite Health, students are exposed to critical thinking and creativity as they create an occupational safety/policy manual tailored for a business/industry based on a critical analysis.
4. Cultural contexts in which public health professionals work	• In HLTH 270, Health Systems and Consumers, students identify cultural contexts of communicable and noncommunicable disease intervention programs in countries in all regions of the world. • In HLTH 290, Public Health Education Principles, students are introduced to the importance of cultural sensitivity and competency in program planning and implementation. • In HLTH 405, Global Public Health, students lead discussions relating to cultural contexts for global health professionals. They develop the discussion questions, facilitate the discussion, and ask follow-up questions of their classmates both in-class and on-line.

	• In HLTH 480, Worksite Health, students are exposed to cultural contexts in which public health professionals work by examining a case study of an established, award-winning worksite health promotion program and an occupational safety/health program.
5. Ethical decision making as related to self and society	• In HLTH 270, Health Systems and Consumers, students discuss the decision of the United States to fail to provide Universal Health Coverage despite adequate resources and compare that to a range of other countries. • In HLTH 290, Public Health Education Principles, students are exposed to professional code of ethics and multiple scenarios where health professionals may encounter ethical dilemmas. • In HLTH 325, Health Management and Policy, students are exposed to ethical decision-making by participating in a public health strategic design/systems thinking, decision simulation and disaster preparedness ethical scenarios. • In HLTH 405, Global Public Health, students discuss the role of high-income countries in promoting health in low and middle income countries.
6. Independent work and a personal work ethic	• In HLTH 290, Public Health Education Principles, students choose service-learning projects independently. • In HLTH 325, Health Management and Policy, students choose a MO county/local public health agency. • In HLTH 400, CHES® Exam Review, students prepare for the CHES® Exam using self-paced modules. • In HLTH 440, Capstone: Program Implementation and Evaluation, students plan, implement, and evaluate a health education campaign. • In HLTH 455, School Health Programs, students choose a MO school district. • In HLTH 460, Internship in Health Education, students work independently on their projects. • In HLTH 480 Worksite Health, students choose a business or industry lacking a worksite health promotion program.
7. Networking	• In HLTH 325, Health Management and Policy, program alumni and other professionals in the field visit campus as guest speakers as part of in-class activities and the University's graduate school/career week events. • In HLTH 366, Program Assessment and Planning, health science students and alumni who completed internships (HLTH 460) share a presentation about their experiences and recommendations for future interns. • In HLTH 455, School Health Programs, program alumni and other professionals in the field visit campus as guest speakers as part of in-class activities and the University's graduate school/career week events. • In HLTH 440, Capstone: Program Implementation and Evaluation, students meet and network with various alumni during a zoom alumni panel. The students also meet with the career center who discuss the importance of professionalism

	and networking, and the students polish their resumes and create a LinkedIn page. • In HLTH 480, Worksite Health, program alumni and other professionals in the field visit campus as guest speakers as part of in-class activities and the University's graduate school/career week events.
8. Organizational dynamics	• In HLTH 325, Health Management and Policy, students are exposed to organizational dynamics as they assess organizational culture at their selected agency and create a training and professional development plan for health department/agency staff. • In HLTH 480, Worksite Health, students are exposed to organizational dynamics as they assess corporate culture as part of the worksite health promotion program environmental audit (needs assessment section).
9. Professionalism	• In HLTH 255, Introduction to Community Public Health, students begin building their professional identity. Students are exposed to key organizations, journals, the HESPA II 2020 Areas of Responsibility and accompanying competencies and sub-competencies. • In HLTH 290, Public Health Education Principles, students develop their professional philosophy as health professionals and discuss the role of code of ethics/ethical principles in their future practice. • In HLTH 440, Capstone: Program Implementation and Evaluation, students are exposed to different aspects of professionalism, such as how to conduct oneself in an interview, crafting a resume, and marketing oneself.
10. Research methods	• In HLTH 349, Research Methods in Health Science, students learn about various study designs and methods, and they create a research proposal. • In HLTH 410, Health Communication Methods, evaluation of communication materials is discussed • In HLTH 440, Capstone: Program Implementation and Evaluation, students examine the various types of evaluation and outcome evaluation study designs, and they evaluate their health education interventions. • In HLTH 467, Introduction to Epidemiology, there is a robust discussion of study design data collection methods, sources, and analysis. Students use their knowledge to conduct descriptive epidemiology.
11. Systems thinking	• In HLTH 270, Health Systems and Consumers, instead of studying health care delivery, students consider health care systems by contrasting global health systems. • In HLTH 325, Health Management and Policy, students are exposed to systems thinking by participating in a public health strategic design/systems thinking simulation game as well as complete an online systems thinking educational module.

12. Teamwork and leadership	• In HLTH 290, Public Health Education Principles, students work in their assigned groups to complete multiple course assignments. • In HLTH 325, Health Management and Policy, students are exposed to teamwork and leadership as they create and administer interprofessional health/healthcare teams. • In HLTH 455, School Health Programs, students facilitate school district Wellness Team activities. • In HLTH 480, Worksite Health, students facilitate Worksite Health Promotion Committee activities.

B4. Cumulative and Experiential Activities

Students have opportunities to integrate, synthesize and apply knowledge through cumulative and experiential activities. All students complete a cumulative, integrative, and scholarly or applied experience or inquiry project that serves a capstone to the education experience. These experiences may include, but are not limited to, internships, service-learning projects, senior seminars, portfolio projects, research papers or honor theses. Programs encourage exposure to local-level public health professionals and/or agencies that engage in public health practice.

1. *A matrix, in the format of Template B4-1, that identifies the cumulative and experiential activities through which students have the opportunity to integrate, synthesize and apply knowledge as indicated in this criterion.*

Cumulative and/or Experiential Activity (internships, research papers, service-learning projects, etc.)	Narrative describing how activity provides students the opportunity to integrate, synthesize and apply knowledge.
HLTH 460 Internship Experience	Students in the Community, Worksite, Public Health (CWPH) concentration are required to complete a 240-hour internship. Students are encouraged to seek internships in local public health departments, hospitals (for those interested in hospital administration), and non-profit settings. As part of the internship requirements, students must complete a range of tasks or projects addressing each NCHEC Area of Responsibility. Students document these tasks in the form of artifacts, logs, and a final internship reflection.
HLTH 440 Capstone Experience	Students are required to complete a 20-hour minimum capstone experience. The 20-hours encapsulates all activities relating to implementation and evaluation. To prepare for implementing and evaluating students prepare a brief proposal, which includes establishing program need (primary, secondary, or tertiary data), selecting a theory, developing a logic model, estimating a budget,

	and creating a Gantt chart.

2. *A brief description of the means through which the program implements the cumulative experience and field exposure requirements.*

HLTH 460: Internship in Health Education (6 credits)

Catalog Entry

This course is designed for Health Science majors to apply the responsibilities and competencies of the entry-level health educator in an internship setting, typically off-campus, for a minimum of 240 clock hours. Using academic advisor guidance, the student is responsible for securing an appropriate placement in a community, worksite, or public health setting during the semester prior to registering for this course.

During the internship, the student submits artifacts, logs, and other assignments to verify practical experience(s) in the seven Areas of Responsibility of the Certified Health Education Specialist (CHES®). To receive permission to enroll in the internship, the student must have declared a Health Science Concentration and complete and submit the required documentation prior to the specified semester deadlines.

Prerequisites: Grade of C or better in HLTH 410 - Health Communication Methods, mandatory attendance at one spring informational session if completing a summer internship, junior or senior status, consent of his or her academic advisor and HES Department Chair, minimum 2.0 cumulative GPA, and minimum 2.5 major GPA.

Overview

During this internship experience students will create an artifact demonstrating proficiency in seven of the eight HESPA II Areas of Responsibility. The artifacts include three parts: 1) identifying which HESPA II CHES® Competency and Sub-Competency to which the project corresponds, 2) discussion of their role in the project, and 3) evidence (photograph, PowerPoint) of proficiency in the Sub-Competency/ Competency. Students will develop a plan for professional growth, update their resume, participate in a mock interview, and create a final reflection PowerPoint. Students are evaluated by their supervisors at midterm and at the end of their internship experience.

HLTH 440: Capstone: Program Implementation & Evaluation (3 credits)

Catalog Entry

This course is designed to develop a more complete understanding and application of the skills and abilities needed by future health educators for program implementation and evaluation. A wide variety of learning activities and discussions focusing on the core competencies for entry-level health educators are employed in this capstone course. Topics presented emphasize a theoretical basis for planning, implementation, evaluation, and re-planning as an ongoing process. This course includes a planned culminating capstone project in which the student demonstrates skills and knowledge developed from

his or her experiences within the Health Science program through an integrated service learning component. Students complete their Truman Portfolio in this course. Prerequisites: Grade of C or better in HLTH 410 - Health Communication Methods or instructor permission.

Overview
Each capstone project must total a minimum of 20 hours (per group member if working in a group). There are different options for how one can accomplish this capstone experience (see options below). Regardless of the option chosen, each capstone group will need to prepare a brief project proposal, which includes an overview of the project, theoretical model, implementation plan (what is being done, logic model, & Gantt chart), and budget. At the end of the semester, students will provide a final report (a final version of the proposal with results).

Program Implementation & Evaluation Project

Students will plan, implement, and evaluate a wellness program on campus (or virtually). Capstone students will be responsible for procuring funding (if necessary), conducting three in-person educational presentations or events (e.g., MH first Aid, Residence Hall Presentations), one tabling event, implementing one training session for volunteers, and developing evaluation tools.

Health Communication Project
Students will plan, implement, and evaluate a health communication campaign on campus (or virtually). The campaign must consist of a minimum of three different communication vehicles (e.g., website, social media, posters, etc.). Capstone students will be responsible for procuring funding (if necessary), conducting two tabling events to help advertise campaign, implement one training session for tabling volunteers, and developing evaluation tools.

3. ***Handbooks, websites, forms and other documentation relating to the cumulative experience and field exposure. Provide hyperlinks to documents if they are available online, or include in the resource file electronic copies of any documents that are available online.***

   Please see the handbooks, websites, forms, and other documentation relating to the cumulative experience located in the ERF folder Criterion B4 subfolder B4.3 Cumulative Experience & Field Exposure. Within the B4.3 Cumulative Experience & Field Exposure Subfolder, all syllabi, handbooks, and documentation are organized by course abbreviation (e.g., HLTH 440: Capstone).

4. ***Samples of student work that relate to the cumulative and experiential activities. The program must include samples from at least 10% of the number of degrees granted in the most recent year or five samples, whichever is greater.***

   Please see the samples of student work for both HLTH 440 and HLTH 460 located in the ERF folder Criterion B4 subfolder B4.4 Student Samples. Within the B4.4 Student Samples

Subfolder, the samples are organized by course abbreviation (e.g., HLTH 460 - Sample Work).

C1. Summary Data on Student Competency Attainment

The program collects and analyzes aggregate data on student competency attainment, using the competencies defined in Criterion B2 as a framework. Data collection allows the program to track trends in student learning and adjust curricula and assessment activities as needed.

1. ***A brief summary of the results of data collected on student competency attainment listed in Criterion B2 for the last three years.***

   Every Health Science major (except for spring 2020) is required to take the CHES® exam. The foundational competencies align with the CHES® Areas of Responsibility (see the table below).

Foundational Competencies	Corresponding CHES® Areas of Responsibility
Communicate public health information, in both oral and written forms and through a variety of media, to diverse audiences.	Area VII: Communicate, Promote, and Advocate for Health, Health Education/Promotion, and the Profession
Locate, use, evaluate, and synthesize public health information	Area VI: Serve as a Health Education/Promotion Resource Person
Effectively assess needs, resources, and capacity for health education and promotion programs	Area I: Assess Needs, Resources and Capacity for Health Education/Promotion
Plan effective health education/promotion programs	Area II: Plan Health Education/Promotion
Effectively implement health education/ promotion programs	Area III: Implement Health Education/Promotion
Conduct effective evaluation and research related to health education/ promotion programs	Area IV: Conduct evaluation and research related to Health Education/Promotion
Effectively manage health education/ promotion programs	Area V: Administer and Manage Health Education/Promotion
Serve as an effective health education/ promotion resource person	Area VI: Serve as a Health Education/Promotion Resource Person
Effectively communicate, promote, and advocate for health, health education/ promotion programs and the profession	Area VII: Communicate, Promote, and Advocate for Health, Health Education/Promotion, and the Profession

CHES® Exam & HLTH 400: CHES® Exam Review

In the HLTH 400: CHES® Exam Review, students are required to report to the Instructor of Record whether they provisionally passed or provisionally failed. Passing or failing the CHES® Exam could lead to a change in the grade assigned. At the beginning of the semester, the Designated Leader requests a summary report from the Instructor of Record for HLTH 400: CHES® Exam Review. The Truman pass rate among Community, Worksite, Public Health students (n=13) for the fall 2020, spring 2021, and fall 2021 semesters was 100%, which is far above the national pass rate (67.67% in October 2020).

HLTH 440: Capstone: Program Implementation and Evaluation

Starting in the fall 2020 semester, Health Science students taking the HLTH 440 course, were asked to complete a worksheet and rate and discuss how their capstone projects embodied critical thinking skills and addressed the various course objectives, including the different NCHEC Areas of Responsibility. These worksheets are mandatory to complete and required artifacts submitted to the Truman's Senior Portfolio, which is a graduation requirement.

Regarding their ability to critically assess the issue and interpreting evidence, all capstone students reported either developing or mastering this skill. Similarly, all students reported developing or mastering the skill of using evidence to support their public health issues. This evidence included consulting the literature and analyzing data. However, students answers regarding their ability to draw conclusions and identify and consider context, theory, and previous work in the field ranged from growing to mastering this skill. These answers coincide with observations from class. Students tend to struggle with identifying theory, incorporating theory into their work, and drawing conclusions.

Students were asked how their project aligned with the course objectives for HLTH 440. All students felt their projects aligned with most of the course objectives, and all felt they gained professional health education experiences.

2. *Evidence and documentation of the program's regular review of data related to student attainment of the competencies defined in Criterion B2. Evidence may include reports, committee meeting minutes or other sources. For each piece of evidence provided, list the relevant document(s) and page(s) (e.g., Faculty meeting minutes, May 12, 2012, pp. 3-4).*

Documentation	Description	Location in the ERF
Summary Reports	Report contains summary statistics and qualitative data for the assessment collected in HLTH 400, HLTH 440, and HLTH 460.	ERF Folder Location: Folder Criterion C1, Subfolder C1.2

3. *A description of the ways in which the program uses data to make improvements and at least three examples of recent changes based on data.*

1. *Added a prerequisite for HLTH 460*: Internship in Health Education - Based on the conversations and observations of supervisors and Health Science faculty members, HLTH 410 (Health Communication Methods) was added as a prerequisite for the HLTH 460 internship experience. It was noted through these observations and conversations that students who had taken HLTH 410 prior to their internship experiences were better prepared for their internship tasks and produced better quality materials.
2. *Created an additional course*: HLTH 400 was instituted in fall 2017, revising the curriculum for first year students. This change was instituted because students in the HLTH 440 Capstone course struggled to grasp all of the information being taught. In this one course, students were expected to complete their capstone project, learn new material, and review for the CHES® exam. This was not a feasible expectation of the students or the instructor of that course. Thus, the CHES® review information was removed from the HLTH 440 Capstone course and integrated into a new required 1-credit course. In this course, students completed a self-paced CHES® review, consisting of students completing a pre-test practice exam, a series of quizzes covering competencies spanning each Area of Responsibility, and completing a post-test practice exam. Spring 2021 represents the first cohort of students who were affected by this change. CHES® exam data is being examined to note whether further changes need to be made to this existing course.
3. *Created an assignment*: In HLTH 460, students were scoring poorly on their artifacts. The artifacts are meant to help students demonstrate how they are proficient in a specific CHES® Sub-Competency. An all or nothing grading system is implemented with the artifacts. Students not following the directions or meeting the requirements received a grade of zero. Students would frequently miss one of the artifacts. Given the students' scores and the conversations among Health Science faculty, an assignment called the Artifact Plan was implemented to help give students an opportunity to draft their artifacts and receive feedback from a faculty member prior to submitting. In this plan, students are required to consult the CHES® study guide and provide specifics about the sub-competency, artifact, and their role in performing the action they are documenting. This change has led to an improvement in artifact scores and made it easier for students to meet expectations.

C2. Graduation Rates

The program demonstrates that at least 70% students for whom data are available graduate within six years or the maximum time to graduation as defined by the institution, whichever is longer.

For the purpose of calculating graduation rates the program should only include students who declared the major and have at least 75 credit hours.

If the program cannot demonstrate that it meets this threshold, the program must 1) document that its rates comparable to similar baccalaureate programs in the home unit (typically a school or college) and 2) provide a detailed analysis of factors contributing to the reduced rate and a specific plan for future improvement that is based on this analysis.

The program defines a plan, including data sources and methodologies, for collecting this information. The program identifies limitations and continually works to address data limitations and improve data accuracy. The program does not rely exclusively on institution – or unit-collected data, unless those data are sufficiently detailed and descriptive.

1. Graduation rates in the form of Template C2-1.

	Cohort of Students	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22
2015-16	*# Students entered*	21						
	# Students withdrew, dropped, etc.	0						
	# Students graduated	7						
	Cumulative graduation rate	33.3%						
2016-17	*# Students continuing at beginning of this school year (or # entering for newest cohort)*	14	13					
	# Students withdrew, dropped, etc.	2	0					
	# Students graduated	11	7					
	Cumulative graduation rate	85.7%	53.8%					
2017-18	*# Students continuing at beginning of this school year (or # entering for newest cohort)*	1	6	7				
	# Students withdrew, dropped, etc.	0	0	0				

	# Students graduated	1	3	2				
	Cumulative graduation rate	90.5%	76.9%	28.6%				
2018-19	*# Students continuing at beginning of this school year (or # entering for newest cohort)*	0	3	5	11			
	# Students withdrew, dropped, etc.		0	0	0			
	# Students graduated		3	5	5			
	Cumulative graduation rate		100%	100%	45.5%			
2019-20	*# Students continuing at beginning of this school year (or # entering for newest cohort)*	0	0	0	6	17		
	# Students withdrew, dropped, etc.				0	1		
	# Students graduated				5	7		
	Cumulative graduation rate				90.9%	41.1%		

2020-21	*# Students continuing at beginning of this school year (or # entering for newest cohort)*	0	0	0	1	9	8	
	# Students withdrew, dropped, etc.					0	1	
	# Students graduated				1	9	2	
	Cumulative graduation rate				100%	94.1%	25%	
2021-22	*# Students continuing at beginning of this school year (or # entering for newest cohort)*	0	0	0	0	0	5	11
	# Students withdrew, dropped, etc.						0	0
	# Students graduated						2	0
	Cumulative graduation rate							50%

2. *A brief narrative description of how the program collects and analyzes data to calculate its graduation rates.*

   A report by name and student identification number of all enrolled Community, Worksite, Public Health (CWPH) students who have earned at least 75 credit hours is generated from the banner administrative data system after the census date every fall semester. The census date occurs in the fifth week of the semester. A Health Science faculty member maintains a document of each CWPH cohort and identifies any changes to any cohort by student name. She identifies the reason for the change (i.e., withdrew, dropped, etc.) and makes note of the change in the cohort document. At the conclusion of the fall, spring, and summer semesters, after degrees are awarded, the faculty member updates each cohort's graduation data with information provided by the Registrar's Office.

3. *If applicable, a discussion of limitations of the current data on graduation rate data.*

Given the small number of students, there are few known limitations on identifying the enrollment and graduation status of students by both name and banner identification number. Health Science faculty members serve as academic advisors to the CWPH students and can access their academic records throughout their academic careers. Prior to having a CWPH application process (see #4 below), it might have been possible for a student to declare the CWPH concentration after the census date in the fall semester, and potentially graduate prior to the start of the next academic year without ever being counted as a CWPH student.

4. *If applicable, a description of plans to improve the accuracy of graduation rate data.*

   To facilitate capturing data on CWPH students with 75 credit hours or more throughout the academic year, we proposed having students apply to the major. This will eliminate the possible limitation identified in #3. Students can apply to the major if the student meets the following criteria:

   - 75 credit hours
   - Overall GPA of 2.5
   - Completed HLTH 255, HLTH 270, HLTH 290, and STAT 190 with a grade of C or better.

   To apply to the major, students fill out a survey, and the HS faculty review the brief application to the major.

   This proposed change to the major was submitted in January 2020 and approved by faculty governance. It was implemented during the 2020-2021 academic school year.

   See catalog description.

5. *If data do not indicate that 70% or more of students graduate within the maximum time to allowable time AND this shortfall is not solely attributable to concerns with data collection methods, evidence that the program's response rates are comparable to similar baccalaureate programs in the same institution.*

   N/A

6. *If data do not indicate that 70% or more students graduate within the maximum time allowable time AND this shortfall is not solely attributable to concerns with data collection methods, a detailed analysis of factors contributing to the reduced rate and a specific plan for improvement that is based on analysis.*

   N/A

C3. Post-Graduation Outcomes

The program demonstrates that at least 80% of graduates from the major have secured employment or enrolled in further education within one year of graduation. This rate is calculated based on the number of students for whom outcomes are known.

If the program cannot demonstrate that it meets this threshold, the program must 1) document that its rates are comparable to similar baccalaureate programs in the home unit (typically a school or college) and 2) provide a detailed analysis of factors contributing to the reduced rate and a specific plan for future improvement that is based on the analysis.

The program collects and analyzes the data on the types of employment and further education graduates pursue.

The program defines a plan, including data sources and methodologies, for collecting information on post-graduation outcomes. Data collection methods for graduates' destinations are sufficient to ensure that data are available for at least 30% of graduates each year.

The program identifies limitations and continually works to improve data accuracy. Multiple methods, both quantitative and qualitative, may be required, and multiple data collection points may be required. The program does not rely exclusively on institution- or unit-collected data, unless those data are sufficiently detailed and descriptive.

1. *Job placement and further education rates for the last three classes of students who would have been expected to report destinations at one year post-graduation. Present information in the format of Template C3-1.*

Destination of Graduates by Employment Type	Job Placement/Further Education Rate by Graduating Class		
	Year 1 (2018-19)	Year 2 (2019-20)	Year 3 (2020-21)
Employed (Full Time)	7	9	4
Continuing education/training (not employed)	3	3	6
Actively seeking employment	3		
Not seeking employment (not employed and not continuing education/training, by choice)			
Unknown	0	0	2
Total	13	12	12

2. *Qualitative and/or quantitative information on the types of employment and further education graduates pursue.*

   Students in the Community, Worksite, and Public Health Concentration (CWPH) obtain careers in a variety of places. For example, some are employed as contact tracers, as public health professionals at local public health departments, and as behavioral technicians. Some are employed with AmeriCorps or the Peace Corps. Some graduates have pursued the following graduate programs: Master of Arts in Leadership (Truman State University), Master of Public Health (multiple universities), and Doctor of Law (Case Western).

3. *A brief narrative description of how the program collects data on post-graduation outcomes.*

   Data is collected using multiple data points. The Designated Leader requests data from Truman's Career Center. This data set provides data for all the Health Science majors, including students with the Community, Worksite, and Public Health Concentration. This data set is used as a starting point. To track post-graduate outcomes more specifically, all graduating seniors are given a survey about their post-graduation plans, and they are required to create a LinkedIn profile and "friend" the Designated Leader as part of an assignment in their HLTH 440: Capstone: Program Implementation and Evaluation course. The Designated Leader views profiles and records employment and graduate school outcomes. If a student does not update their LinkedIn profile, the Designated Leader reaches out to that alumnus via social media or email to identify the needed information.

4. *If applicable, a discussion of limitations of the current data that are based on data collection.*

   N/A

5. *If applicable, a description of specific plans (with timelines) to improve the accuracy of data.*

   N/A

6. *If data do not indicate that 80% or more of graduates from the public health major secure employment or enroll in additional education within one year of graduation AND this shortfall is not solely attributable to concerns with data collection methods, evidence that the program's rates are comparable to similar baccalaureate program in the same institution.*

   N/A

7. *If data do not indicate that 80% or more graduates from the public health major secure employment or enroll in additional education within one year of graduation AND this shortfall is not solely attributable to concerns with data collection methods, a detailed analysis of factors contributing to the reduced rate and a specified plan for future improvement that is based on this analysis.*

N/A

C4. Stakeholder Feedback

The program collects information about the following through surveys or other data collection (e.g., focus groups, documented key informant interviews):

- *alignment of the curriculum with workforce needs*
- *preparation of graduates for the workforce*
- *alumni perceptions of readiness and preparation for the workforce and/or further education*

The program must collect this information from BOTH of the following stakeholder groups:

- *Alumni*
- *relevant community stakeholders (e.g., practitioners who teach in the program, service learning community partners, internship preceptors, employers of graduates, etc.)*

The program establishes a schedule for reviewing data and uses data on student outcomes and program effectiveness to improve student learning and the program.

1. A list of tools used to collect data from each of the following groups:

There are three tools the Health Science Program uses to collect data from both alumni and community stakeholders. These three tools are the 1) Internship Evaluation Form, 2) CEPH Survey of Alumni, 3) Minutes documenting conversations with the Advisory Board.

Intern Evaluation Form
This form surveys the Internship Agency Site Supervisors. These supervisors are public health professionals and healthcare administrators, and some are alumni and relevant community stakeholders. The form seeks the internship supervisor's feedback and ratings on the intern's key performance areas of Personal and Professional Characteristics, Communications and Professional Relations, and Knowledge and Skills. The data collected on these forms is reviewed by the Health Science faculty at the time of submission and collectively each year.

CEPH Survey of Program Alumni
This survey seeks program alumni perceptions and input on the following topics: current health needs, pertinent program coursework, health communications technology, graduate skills, use of competencies and competency attainment of graduates, opinions and ratings of any graduates as interns or employed, as well as any service-learning opportunities available. This survey is reviewed annually by the Designated Leader and conveyed to the Health Science Faculty.

Advisory Board Meetings

The Advisory Board Members consist of both alumni and relevant community stakeholders. Below is a list of the members and the sectors in which they work. These meetings are led by a member of the Health Science faculty and reviewed by that faculty member two times per year. Any relevant info is conveyed to the entire Health Science faculty.

Current Member	Sector
Troy Shelangoski	Healthcare/Hospital
Laura Dunn	Government/USDOT
Dan Williams	Government/CDC
Elizabeth Griffiths	Government/City
Jason Studley	Healthcare/Health System
Brad Bender	Healthcare/Health System
Donna Allen	Business/Public Health Consultant
Amy Thompson	Higher Education
Shane Lorimer	Business/Worksite Health Promotion
Justin McDermott	Healthcare/Behavioral Health System
Daniel Mattheis	Government/County Health Department
Sara Amini-Rad	Medical Education
Brandi Mantz	Private/Community Coalition
Lisa Dworak	Government/City Wellness

These meetings occur two times per year via email, program updates are presented, and members are asked to address a variety of questions about diverse topics including current public health and healthcare issues that may affect program focus/curriculum/students, their perceptions of student needs regarding experiential preparation for the field, employment trends in their industries, and workforce development concerns.

2. *For each tool identified in documentation request 1, include a copy of the instrument and the most recent year of data.*

Tool	What is in the ERF?	Location in ERF
Internship Evaluation	● Internship Evaluation Form ● Data from AY 2020-2021	Folder: Criterion C4 Subfolder: C4.2 Subfolder: Internship Evaluation Form
CEPH Survey of Program Alumni	● Survey ● Aggregate Results ● Individual Responses	Folder: Criterion C4 Subfolder: C4.2 Subfolder: Alumni Survey
Advisory Board	● Questions asked and summary of minutes from 2021	

3. A description of the ways in which the program uses data to make improvements and at least three examples of recent changes based on data.

Evaluations and recommendations from those currently working in the field allow the program to adapt curriculum and classes to the ever-changing role/skill set/educational needs of the Health Education Specialist. The data help to answer the question "What do Health Education Specialists need to know and be able to do?"

1. The program used the most recent Intern Evaluation Form data to start a qualitative analysis of themes focused on supervisor constructive critique. Based on analysis, changes in assignments and/or student pre-internship preparation may be made. From the last two years of internship evaluation data, an additional prerequisite (HLTH 410: Health Communication Methods) was added to strengthen student communication skills.

2. The program used the most recent CEPH Survey of Program Alumni data to include a data interpretation opportunity for students. This opportunity would help students be more critical consumers of research studies and evidence-based application of data in practical practice. This assignment was implemented in HLTH 366: Program Assessment and Planning, and it involved having the students analyze data collected from the MACH-B (Missouri Assessment of College Health Behaviors). Students used their analysis to create a rationale for their project.

3. The program used the most recent Truman State University Health Science/Health Education Advisory Board data to make changes to the disaster preparation unit of HLTH 325 Health Management and Policy. After consultation with Board members and their provision of MO hospital data describing concerns with surge capacity for facilities in the state and MO local public health agency disaster preparedness level as compared nationally, an additional class activity was conducted. A hospital surge capacity simulation assignment and local public health agency preparedness

assessment activity was added to the unit plan to address these important skills that health education specialists need to know and be able to do in the field

D1. Designated Leader

The program has a qualified designated leader with ALL of the following characteristics:

- *is a full-time faculty member at the home institution*
- *dedicates at least 0.5 FTE effort to the program, including instruction, advising, administrative responsibilities, etc.*
- *has educational qualifications and professional experience in a public health discipline. Preference is for the designated program leader to have formal doctoral-level training (e.g., PhD, DrPH) in a public health discipline or a terminal academic or professional degree (e.g., MD, JD) in another discipline or profession and an MPH*
    - *if the designated program leader does not have educational qualifications and professional experience in a public health discipline, the program documents that it has sufficient public health educational qualifications, national professional certifications, and professional experience in its primary faculty members*
    - *is fully engaged with decision making about the following:*
        - *curricular requirements*
        - *competency development*
            - *teaching assignments*
            - *resource needs*
            - *program evaluation*
            - *student assessment*

1. *The name of and relevant information about the designated leader, in the format of Template D1-1. Template D1-1 also requires a concise statement of the institution or unit's formula for calculating FTE.*

Name of Designated Leader	FTE effort to the program*	Graduate degrees earned	Institution where degrees were earned	Relevant professional experience	FTE definition^
Nancy Daley-Moore	1.0	MPH, PhD CHES®, CPH	University of Georgia	See below table.	See sheet in ERF located in Folder: Criterion D1, Subfolder: D1.1

Position	Year	Location	Description of Duties
Project Director	August 2014 – May 2015	University of Georgia, Department of Health Promotion & Behavior	• Coordinated and managed researchers and graduate assistants from five different UGA departments to implement a physical activity and academic enrichment after-school program at two elementary schools in Athens-Clarke County. • Planned and implemented program activities. • Conducted process evaluation and coordinated with external evaluators to conduct the outcome evaluation.
Project Coordinator	May 2014 – July 2015	University of Georgia, Department of Health Promotion & Behavior	• Managed American Heart Association grant. • Trained and coordinated research assistants • Assisted in collecting and managing the data • Assisted in writing the progress reports submitted to the American Heart Association
Assistant Health Educator	June 2011 – February 2012	Walton Wellness, Monroe, GA	• Assisted the Director in creating educational materials and programming • Analyzed data collected from the regional health department to develop a heart disease and diabetes screening program protocol • Established partnerships with community stakeholders to implement the screening program

2. ***A concise statement of the designated leader's public health qualifications. If the designated leader does not have public health training and experience, a narrative statement, with names identified, of how the faculty complement, as a whole, demonstrates relevant public health qualifications.***

   Dr. Nancy Daley-Moore is a full time Associate Professor in the Department of Health and Exercise Sciences. She has been a member of the department since August 2015. Dr. Daley-Moore received a B.S. in Biology from Mercer University in 2008, a M.P.H with a concentration in Epidemiology from the University of Georgia in 2011, and Ph.D. with a focus in Health Promotion and Behavior from the University of Georgia in 2015.

3. ***A list of the designated leader's duties associated with the program, including teaching, supervision of faculty and/or staff, advising, coordination of evaluation/assessment, administrative duties, etc. Include a job description in the electronic resource file, if available.***

As the Designated Leader, Dr. Nancy Daley-Moore leads accreditation efforts and works with the Health Science faculty to align each course to the CEPH accreditation standards. Additionally, Dr. Daley-Moore teaches four courses each semester, and these courses (see below) are either required or serve as electives for the Community, Worksite, and Public Health (CWPH) concentration:

- *HLTH 255: Introduction to Community and Public Health (required - 3 credits)*
- *HLTH 260: Human Sexuality (elective - 3 credits)*
- *HLTH 349: Research Methods in Health Science (required - 3 credits)*
- *HLTH 315: Contemporary Issues in Women's Health (elective - 3 credits)*
- *HLTH 467: Introduction to Epidemiology (required - 3 credits)*
- *HLTH 440: Capstone: Program Implementation and Evaluation (required - 3 credits)*

She advises all Health Science students, including CWPH students, and she conducts research with all interested CWPH students and non-CWPH students.

D2. Faculty Resources

The program has sufficient faculty resources to accomplish its mission, to teach the required curriculum, to provide student advising, and to achieve expected student outcomes. The following elements, taken together, relate to determining whether the program has sufficient faculty resources.

- *In addition to the designated leader, the program is supported by AT LEAST an additional 2.0 FTE of qualified faculty effort each semester, trimester, quarter, etc.*
- *The program's student-faculty ratios (SFR) are sufficient to ensure appropriate instruction, assessment, and advising. The program's SFR are comparable to the SFR of other baccalaureate degree programs in the institution with similar degree objectives and methods of instruction.*
- *The mix of full-time and part-time faculty is sufficient to accomplish the mission and to achieve expected student outcomes. The program relies primarily on faculty who are full-time institution employees.*

1. *A list of all faculty providing program instruction or educational supervision for the last two years in the format of Template D2-1. For the purpose of defining the semesters of required reporting, the program should consider the semester during which the final self-study is due, or the most recent semester for which full information is available, to be semester four and should include information on the three preceding semesters.*

Name	Title/Academic rank	FT/PT	FTE to HS	Graduate degree(s) earned	Institution(s) from which degree(s) were earned	Disciplines in which degrees were earned	Relevant professional experience outside of academia	Credentials/ certification, registration, and/or licensure, if applicable	Courses taught
Abayomi, Oluremi	Assistant Professor of Statistics and Data Science	FT	0.25	MA PhD	Central Michigan University	Statistics			STAT 190
Beregovska, Tetyana	Assistant Professor, Statistics	FT	0.25	MA PhD	University of Missouri	Economics			STAT 190

Bergey, Margaret	Instructor, Biology	FT	0.25	MS	Northeast Missouri State University	Biology			BIOL 100
Berke, Sarah	Assistant Professor, Biology	FT	0.25	PhD	University of Iowa	Neuroscience			BIOL 100
Cox, Carol	Professor, Health Science	FT	1	PhD	The Pennsylvania State University	Health Education	Worksite Health, School Health	MCHES®, Instructional I, Specialist I	HLTH 325, HLTH 460, HLTH 455, HLTH 480, HLTH 400
Dahal, Keshab	Assistant Professor, Statistics	FT	0.25	MS PhD	Tribhuvan University Central Michigan University	Statistics			STAT 190
Daley-Moore, Nancy	Assistant Professor, Health Science	FT	1	MPH PhD	The University of Georgia	Health Promotion & Behavior, Epidemiology	Health Education	CPH, CHES®	HLTH 255, HLTH 349, HLTH 440, HLTH 467, HLTH 400, HLTH 460
DeCock, Dean	Professor, Statistics	FT	0.25	MS PhD	University of Iowa Iowa State University	Statistics & Industrial Engineering			STAT 190
Donahue, Roberta	Professor, Health Science	FT	1	MEd PhD	Northwestern State University of Louisiana The University of Alabama	Health Education, Health Promotion	Health Administration	MCHES®	HLTH 255, HLTH 270, HLTH 366, HLTH 405, HLTH 460

Fielden-Rechav, Laura	Professor, Biology	FT	0.25	PhD	University of Natal	Biology			BIOL 100
Ferguson, Yuna	Associate Professor, Psychology	FT	0.25	MA, PhD	University of Missouri	Psychology, Social/ Personality Psychology			PSYC 166
Garth, Angelita	Instructor in Statistics	FT	0.25	MS	Iowa State University	Statistics	Statistics Consulting		STAT 190
Hatala, Mark	Professor, Psychology	FT	0.25	MS, PhD	Ohio University	Experimental Psychology			PSYC 166
Judd, Katie	Assistant Professor, Psychology	FT	0.25	MA, PhD	University of Missouri - St. Louis	Clinical Psychology			PSYC 166
Lee, Jeonghwa	Assistant Professor, Statistics	FT	0.25	MA PhD	Ewha Women's University Michigan State University	Statistics			STAT 190
Lv, Shanshan	Assistant Professor, Statistics	FT	0.25	MS PhD	Southeast Missouri State University University of Louisiana at Lafayette	Statistics			STAT 190
Ma, Zhong	Professor, Biology	FT	0.25	PhD	The Pennsylvania State University	Biology			BIOL 100

Mitchell, Jeanne	Instructor, Biology	FT	0.25	MS, MAE	Northeast Missouri State University Truman State University	Biology Education			BIOL 325
Ostrowski, Daniela	Assistant Professor, Biology	FT	0.25	MS PhD	Georg-August University of Gottingen	Biology			BIOL 100
Pareja, Enrique	Assistant Professor, STEM Education	FT	0.25	MA PhD	University of Bath University of Missouri - Columbia	Science Education			BIOL 100
Ramsey, Ashley	Assistant Professor, Psychology	FT	0.25	MA, PhD	University of Missouri - Columbia	Psychological Sciences			PSYC 166
Shaffer, Fred	Professor, Psychology	FT	0.25	MS, PhD	Oklahoma State University	Clinical Psychology & Social - Personality Psychology			PSYC 166
Starks, Amanda	Instructor, Health & Exercise Sciences	FT	0.5	MA	University of Nebraska Omaha	Health, Physical Ed, & Rec.	Worksite Wellness & Health Education	CHES®	HLTH 255, HLTH 400, HLTH 460
Stephenson, Rolena	Assistant Professor, Health Science	FT	1	MHA, DHEd, MPH	A. T. Still University of Health Sciences	Health Education, Health Administratio n	Worksite Health, School Health, & Community Health	MCHES®	HLTH 290, HLTH 349, HLTH 410
Thatcher, Carol	Professor, Statistics	FT	0.25	MS, PhD,	University of Virginia	Statistics			STAT 190

Thatcher, Scott	Associate Professor, Statistics	FT	0.25	MS, PhD	Northwestern University	Mathematics			STAT 190
Tigner, Robert	Professor, Psychology	FT	0.25	MA, PhD	Ohio State University	Experimental Psychology			PSYC 166
Vittengl, Karen	Professor, Psychology	FT	0.25	MA, PhD	University of Nebraska - Lincoln	Psychology			PSYC 166

2. *CVs for all individuals listed in Template D2-1.*

   The CVs for the faculty listed in Template D2-1 are located in the ERF Folder: Criterion D2, Subfolder: D2.2

3. *A description of the administrative unit's workload policy and expected workload for program faculty. If multiple categories of faculty support the program, address each category. Following the description, cite the relevant supporting document(s) and page(s) (e.g., Faculty Handbook, pp. 12-25; College Bylaws, p. 5). Provide hyperlinks to documents if they are available online, or include in the resource file electronic copies of any documents that are not available online.*

   According to the Faculty Handbook, the standard workload for full-time faculty is 12 credit hours or an equivalent load. Faculty workload/assignments are determined by the Department Chair in consultation with the Dean. The assignment is ultimately approved by the Executive Vice President for Academic Affairs and Provost (VPAA). Depending on the school and program, at times other variables, such as credit hour generation, contact hours, and lab hours are taken into account when determining the equivalent load. Additionally, faculty are expected to maintain ten office hours per week (Faculty Handbook Chapter VII).

   In the Department of Health and Exercise Sciences, all faculty regardless of rank are expected to teach 12 credit hours. For Health Science faculty, this workload typically manifests as a 4/4 teaching load. Instead of the ten required office hours, the Department of Health and Exercise Sciences requires five weekly office hours, and the rest may be completed by appointment.

4. *A table showing the SFR and average class size for program-specific classes for the last two years in the format of Template D2-2. For the purpose of defining the semesters of required reporting, the program should consider the semester during which the final self-study is due, or the most recent semester for which full information is available, to be semester four and should include information on the three preceding semesters.*

Semester	SBP (HS) SFR	Explanation of the data and method used	SBP (HS) Average Class Size	Explanation of the data and method used
Semester 1: FA 2020	9.6	Enrollment was sourced from Portal using the core HS courses. The SFR was computed from the University formula provided by the Assessment Committee.	20.1	Enrollment was sourced from Portal using the core HS courses.
Semester 2: SP 2021	9.4		24.3	
Semester 3: FA 2021	7.7		16.4	
Semester 4: SP 2022	7.1		18.6	

Semester	Comparable Program (ES) SFR	Explanation of the data and method used	Comparable Program (ES) Average Class Size	Explanation of the data and method used
Semester 1: FA 2020	8.9	Enrollment was sourced from Portal using the core HS courses. The SFR was computed from the University formula provided by the Assessment Committee.	20.1	Enrollment was sourced from Portal using the core ES courses.
Semester 2: SP 2021	6.9		19.7	
Semester 3: FA 2021	6.9		19.9	
Semester 4: SP 2022	6.0		19.8	

Comparable Baccalaureate Program in the Institution	Narrative explanation of the choice of the comparable program. Include degree objectives and methods of instruction as well as rationale for the choice.
B.S. in Exercise Science	• Along with the Health Science major, the Exercise Science major is housed in the Department of Health and Exercise Sciences, and both degree programs are part of the School of Health Sciences and Education. • Although the Exercise Science program does not prepare their students to practice in public health, it does prepare its students to enter careers pertaining to wellness and fitness. • Similar to the Health Science program, the Exercise Science major offers an internship experience. • For the senior exam, the Exercise Science Program requires students to take a national certification (Exercise Physiologist Certification - EP-C) • The Exercise Science major requires a capstone course (similar to the Health Science major). • There are similar requirements across majors, such as requiring students to take PSYC 166, STAT 190, and BIOL 325.

5. *A table showing the average advising load for the last two years in the format of Template D2-3. For the purpose of defining the semesters of required reporting, the program should consider the semester during which the final self-study is due, or the most recent semester for which full information is available, to be semester four and should include information on the three preceding semesters.*

At Truman, all first-year students are advised by the Center for Academic Excellence. At the end of the second semester of their first year, students are assigned by the Chair and Administrative Assistant to their respective faculty advisors. All Community, Worksite Public Health students are assigned to Professors/Instructors who have the CHES® credential. The Chair and Administrative Assistant assign advisees equally among the Health Science Faculty, while taking into consideration each faculty's current number of advisees and the number of graduating students. The goal for the advisee assignment is to ensure all Health Science faculty have a similar number of advisees.

The Exercise Science program housed within the same department as Health Science was chosen as the comparable program because advisees are assigned in a similar manner. The average advising load is slightly higher for Health Science faculty during the fall 2020 and spring 2021 semesters due to the transition in faculty we had in fall 2019. We had a new faculty

hire, and two faculty members resigned. This transition increases the average advising load because new tenure-track faculty hires do not advise during their first year.

Semester	SBP Average Advising Load*	Explanation of the data and method used	Comparable Baccalaureate Program Average Advising Load (ES)*	Narrative explanation of the choice of the comparable program
Fall 2019	25	See narrative description below.	29	See narrative description below.
Spring 2020	36		30	
Fall 2020	33		26	
Spring 2021	32		29	
Fall 2021	24		25	
Spring 2022	22		22	

*These averages are rounded to the nearest number and reflect all concentrations (CWPH, Pre-Med, Individualized, & Pre-OT)

6. *Three examples of how the program has used enrollment data to gauge resource adequacy (e.g., course sequencing, teaching assistants, advising loads, etc.)*

The program uses enrollment data to project the required number of seats and sections for courses in the major. In addition, students enrolled in some classes are sometimes surveyed to determine their intentions for enrollment in subsequent courses. This allows the program to allocate resources appropriately and shift resources as needed

Enrollment data is a key factor in determining whether additional faculty are needed to meet the needs of the program. The justification to replace a faculty member who resigns or retires includes enrollment data as part of the rationale for a temporary or tenure-track hire. Faculty are typically expected to teach four courses specific to the program each semester. If enrollment increased to the point that every program faculty member teaching 4 courses specific to the program is insufficient to meet the seat demand, a rationale for additional faculty resources would be developed.

In terms of advising, the first year students are typically assigned to a Health Science advisor during the summer before the start of their second year. The new students are distributed based on the existing advising load to keep a fairly equitable distribution. The Department Chair, Designated Leader, and the department Administrative Assistant run advising reports at the beginning of each academic year to determine new advising assignments. Focusing on first year enrollment data allows the program to establish an optimal plan to distribute students appropriately prior to the end of the spring semester.

D3. Student Enrollment

To adequately gauge resource needs, the program defines accurate and useful means to track student enrollment, including tracking the number of majors in the program. Given the complexity of defining "enrollment" in an undergraduate major or baccalaureate degree program, the program uses consistent, appropriate quantitative measures to track student enrollment at specific, regular intervals.

1. *A table showing student headcount and student FTE for the last two years in the format of Template D3-1. For the purpose of defining the semesters of required reporting, the program should consider the semester during which the final self-study is due, or the most recent semester for which full information is available, to be semester four and should include information on the three preceding semesters.*

Semester	Student headcount	Student FTE	Narrative explanation of the specific method and source of student enrollment data
Semester 1: Fall 2020	163	43.0	Student FTE: Portal Open Course List for Core Health Science Courses & Calculating FTE Faculty/FTE Student Resource from the Assessment Committee
Semester 2: Spring 2021	153	42.3	Portal Open Course List for Core Health Science Courses & Calculating FTE Faculty/FTE Student Resource from the Assessment Committee
Semester 3: Fall 2021	129	34.7	Portal Open Course List for Core Health Science Courses & Calculating FTE Faculty/FTE Student Resource from the Assessment Committee
Semester 4: Spring 2022	Not Available Yet	32.1	Portal Open Course List for Core Health Science Courses & Calculating FTE Faculty/FTE Student Resource from the Assessment Committee

*Student FTE and student headcount reflect the numbers from all concentrations (CWPH, Pre-Med, Individualized, & Pre-OT). The Student Headcount reflects the number of students enrolled at the beginning of each semester.

E1. Doctoral Training

Faculty are trained at the doctoral-level in most cases. A faculty member trained at the master's level may be appropriate in certain circumstances, but the program must document exceptional professional experience and teaching ability.

1. *If applicable, a brief description of the professional experience and teaching ability of any faculty member listed in Template D2-1 who is trained at the master's level without a doctoral or other terminal degree (e.g., JD, MD).*

   Amanda Starks has completed a Master of Arts degree with a concentration in Health Promotion. She obtained her CHES® in 2018 while working at Truman State University to be qualified to teach in the core classes of the program.

E2. Faculty Experience in Areas of Teaching

N/A

E3. Informed and Current Faculty

All faculty members are informed and current in their discipline or area of public health teaching. Activities that may demonstrate that faculty members are informed and current may include publishing peer-reviewed scholarship, presenting at peer-reviewed conferences, attending relevant conferences and seminars, etc. This list is not intended to be exhaustive.

1. *A description of the activities and methods through which all faculty members remain informed and current in their discipline (e.g., completed professional development opportunities) in the form of Template E3-1. The description must address both full-time and part-time faculty.*

Faculty name	Area of instruction	Explanation of currency
Cox, Carol	Health Science, CWPH	• Reviewer for professional journals and educational materials and conference Abstracts • Doctoral Dissertation Committees • Academic Honorary Memberships • Conferences attended and presentations: International Conference on Youth Health Risks, Society for Public Health Education, American School Health Association, Health Education Advocacy Summit, MO/ Society for Health and Physical Education, MO Coordinated School Health; Scholarly publications/ Journals: Journal of School Health, American Journal of Health Studies,

		The Health Educator, Pedagogy in Health Promotion, Journal Interprofessional Care, Journal of Interprofessional Education and Practice, Health and Interprofessional Practice, Nursing Education in Practice, Journal of Nursing Education and Scholarship.
Daley-Moore, Nancy	Health Science, CWPH	• APHA 2019/2020 (attend) • SOPHE 2019/2020 • Present APHA 2021 • Present SOPHE 2021, 2022 • Present NSEC 2019 • Publication in TQR (2019) • Doctoral Dissertation Committee (March 2020)
Donahue, Roberta	Health Science, CWPH	• Mindful Resilience Training 2020 • SOPHE Webinar 2020 • Higher Education Center Conference 2019 (including presentation) • Meeting of the Minds 2018 & 2019 (2020, including presentation was canceled) • ASHA 2017
Starks, Amanda	Health Science, CWPH	• Missouri Public Health Conference 2019 • SOPHE 2020 • SparkPro Diabetes Prevention Program Lifestyle Coach Training
Stephenson, Rolena	Health Science, CWPH	• American Public Health Association Annual Meeting 2019 • Walden University, Continuing Competency for CHES® & MCHES® 2019 • American Public Health Association, Becoming Free of Opioids: The Recovery Journey and Peer Support 2018 • Health Education Partners, Public Health Approach and Evidence-Based Strategies: Prevent Gun Violence 2018 • Health Education Partners, Using Social Marketing for Health Promotion and Health Education Programs 2018

E4. Practitioner Involvement

Practitioners are involved in instruction through a variety of methods (e.g., guest lectures, service learning, internships and/or research opportunities). Use of practitioners as

instructors in the program, when appropriate, is encouraged, as is use of practitioners as occasional guest lecturers.

1. *A list of the activities and methods through which practitioners are involved in instruction in the format of Template E4-1*

Practitioner name	Credentials	Title	Employer	Course(s) taught/ Instructional activities provided
Breedlove, Scott	BS	Assistant Director	Missouri Credentialing Board	HLTH 255, Opioid Crisis in Missouri
Cianciola, Heather	PhD	TRIO McNair Project Director & Assistant Professor of English	Truman State University	HLTH 255, First Generation Guest Speaker
Fuentes, Axel	BA	Executive Director	Rural Community Workers Alliance	HLTH 255, Immigrant Labor Rights, Guest Speaker
Haarberg, Sasha	PharmD	Clinical Oncology Pharmacist	Washington University School of Medicine	HLTH 255, Clinical Trials
Lochbaum, Julie	PhD	Professor of Education, MAE Foundations & Disability Studies Minor	Truman State University	HLTH 255, Disability Laws and History Guest Lecture
McMahan, Morgan	MPH	Epidemiologist	Knox County Health Department	HLTH 467, What do Epidemiologists Do Guest Lecture
Moore, Nicholas	MPH	Business Owner	Self-Employed	HLTH 255, Environmental Health
Rice, Saint	EdD	Director of Center for Diversity and Inclusion	Truman State University	HLTH 255, Anti-racist training & Resources, Guest Speaker
Staebell, Sarah	BS, CHES®	Environmental Specialist	STL County Dept of Health	HLTH 455 School Health/HLTH 480 Worksite Health
Stines, Kelsey	MS, CHES®	Worksite health manager/Chief of Staff	Cerner Corporation/Vibrant Health	HLTH 455 School Health/HLTH 480

				Worksite Health
Various	MS	Worksite health promotion specialist/ manager; Senior health/fitness specialist	Medifit/EXOS Corporation, Kansas City, MO	HLTH 455 School Health/HLTH 480 Worksite Health
Wallace, Laura	BS, CHES®	Health Educator	NEMO AHEC	HLTH 366 Program Planning and Assessment; Explanation of HRSA AHEC Scholar Grant and networking and internship opportunities
Schwander, Kelsey	PharmD	Owner/Consultant Pharmacist	BHealth Consulting	HLTH 255, Medical Marijuana in Missouri

E5. Graduate Students

N/A

F1. Financial Resources

The program has access to financial resources that are adequate to fulfill its stated mission. Financial support is adequate to sustain all core functions, including offering the required curriculum and other elements necessary to support the program's ongoing operations.

1. *A letter, signed by the administrator(s) responsible for the program at the dean's level or above, indicating the institutional commitment to the program and to providing the resources required to accomplish the mission, to teach the required curriculum, and to achieve expected student outcomes.*

   The letter of support written by Dean Lance Ratcliff is found in the ERF folder: Criterion F1, Subfolder: F1.1.

2. *A budget table delineating fiscal resources for the program indicating all funding sources to the extent possible in the format of Template F1-1.*

Sources of Funds by Major Category, FY 2015 to 2019 including personnel costs					
Note: These funds are for the **Department of Health & Exercise Sciences (HES)**; funds are not divided by program					
	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
Source of Funds					
University Funds for HES Personnel	$1,928,607	$1,824,596	$1,543,384	$1,380,376	$1,388,524
University Funds for HES Operating Expenses	$46,154	$49,654	$49,654	$49,654	$49,654
Other (HES foundation)	$5,000	$4,248	$4,248	$4,248	$4,248
Total	$1,901,692	$1,977,761	$1,877,250	$1,597,286	$1,434,278

3. *A narrative explanation of the data in Template F1-1 and a discussion of any recent or planned future changes in fiscal resources.*

All funds for program administration and operations come through Academic Affairs to the School of Health Sciences and Education and then to the Department of Health and Exercise Sciences. The numbers regarding personnel encompass both salaries and benefits for individuals in HES.

There are some differences in the fiscal resources. Starting in FY 2019, an extra $3,500 was allotted to the HES Operating expenses to account for accreditation. There was a decrease in the University Funds for HES personnel because two individuals from the department

retired/resigned and were not replaced. Additionally, the coaching staff salaries used to be supplemented from HES funds. However, that changed in this five-year funding synopsis.

F2. Physical Resources

The program has access to physical resources that are adequate to fulfill its stated mission. Physical resources are adequate to sustain all core functions, including offering the required curriculum and other elements necessary to support the program's ongoing operations.

1. *A description of the physical space available for faculty offices, program classrooms, and student meetings or study groups.*

   All Health Science faculty are located in the Department of Health and Exercise Science (HES) suite in Pershing Building. Each faculty member has an office and computer equipped with necessary technology (Zoom, Microsoft, SPSS) to support student learning. Faculty can choose to meet with students in the faculty member's office, or the faculty member can reserve via the Administrative Assistant another location. There is a conference room in Pershing Building that is used frequently for meetings. It is shared with another department (Communication Disorders) and with Athletics. Most of the Health Science program courses are taught in Pershing Building. However, some courses are taught in other buildings across campus due to the need to access a computer lab or the need for more space in the room. Students have the ability to reserve any room across campus for student meetings or study groups. Regarding studying, students can opt to meet at tables outside the HES Office Suite, or they can choose to meet in Pickler Memorial Library.

F3. Academic and Career Support Resources

The academic support services available to the program are sufficient to accomplish the mission and to achieve expected student outcomes. Academic support services include, at a minimum, the following:

- *computing and technology services*
- *library services*
- *distance education support, if applicable*
- *career services*
- *other student support services (e.g., writing center, disability support services), if they are particularly relevant to the public health program*

1. *A description of the program's academic support resources, including each of the following areas. Focus the discussion on the resources that are intended for and/or supportive of the program and its students in particular and indicate who is responsible for each service (e.g., the institution, the college, the program, etc.). Present the response in the format of Template F3-1.*

Academic Support Resource	Responsible Party	Description
Computing and Technology services	The institution: Information Technology Services	Information Technology Services provides technology services for students including Walk-in technical support, Truman wireless configuration, laptop checkout and reservations, password reset and user account configuration, and student personal computer support (network connectivity, mapping network drives and printers). A client web portal is provided for faculty/staff to report and track technology issues.
Library Services	The institution: Pickler Memorial Library	Pickler Memorial Library supports teaching, study, and research activities of the Truman community. Services for students include requesting and borrowing materials (reserve, renew, inter-library request), research help (how-to guides, research/subject librarians, citation tools), technology (computers, multi-media, instructional technology), and studying (collaborative workstations, study spaces, writing center).
Distance education support, if applicable	The institution: Learning Technologies	Also housed under Information Technology is Learning Technologies. Learning Technologies support program classroom instruction in instructor use of educational media through tutorials and presentations. It also supports student health communication project creation with resources such as One Button Studio, Light Board Studio software, and tutorials and workshops. It is a resource to expand and explore pedagogical of new as well as tried-and-true instructional technologies to aid the rich environment of Truman's classes.
Career Services	The institution: Career Center	The Career Center offers a full range of career-related services to help students and alumni explore possibilities, develop skills, and connect with opportunities. The Center provides comprehensive internship, career, and professional school services and resources for students, alumni, employers, and community. The Center supports the program as a liaison to alumni that visit class as guest presenters, provides fall and spring Career and Grad School Week/Expo for student job and internship interviews, offers mock interview days, and organizes resources for job and graduate school preparation. Students will also find campus and local employment information and additional resources for diverse students. Faculty can also request specific presentations and other services for their classes by using the web portal.

Other Student Support Services (e.g., writing center, disability support services), if they are particularly relevant to the public health program	**The institution: Writing Center, Student Access and Disability Services**	The Writing Center helps writers at any level of proficiency to improve their writing skills for any reason and at any stage. For program student papers, especially in the program writing-enhanced course, Center writing consultants suggest revisions, discuss content, provide feedback, and inform about citations/formatting. For faculty, the Center provides resources, workshops, and facilitations to help respond to student writing and encourage Writing Center use. Student Access and Disability Services provides support services to students with disabilities to achieve their academic goals while ensuring compliance with federal and state laws that mandate equitable treatment and access to programs and activities at Truman. Supporting program students, services provided include: note-takers, test prep, assistive technology, and apps, tips, resources, and links for academic support. Campus access, emotional support animals, and housing accommodations are also under this office. Accessibility resources to assist faculty with working with students with disabilities are also offered.

G1. Academic Advising

Students are advised by program faculty (as defined in Criterion D) or qualified program staff beginning no later than the semester (quarter, trimester, term, etc.) during which students begin coursework in the major and continuing through program completion.

1. ***A narrative description of the institution's system for undergraduate academic advising.***

   The Center for Academic Excellence (CAE) is responsible for advising students during their first year at Truman. The CAE assists first-year students to develop academic strategies to be successful and connects them with helpful campus resources. The CAE also provides free tutoring and one-on-one academic mentoring. The expectation for CAE advisors and Health Science faculty advisors is to meet with students a minimum of one time each semester and formally be cleared for registration.

2. ***A description of the program's provision of academic advising, including the following:***
   a. ***Assignment of Advisors***

   Students are first advised by the Center for Academic Excellence. From the beginning of their sophomore year until the student graduates, students are advised by one of the Health Science faculty. All Health Science faculty obtaining a CHES®/MCHES® certification advise the Community, Worksite Public Health Students.

   During the summer before their sophomore year, students are assigned to one of the Health Science faculty members. First year students are assigned a Health Science faculty advisor by the Chair and Administrative Assistant in consultation with the Designated Leader. The new students are distributed based on existing advising loads to keep a fairly equitable distribution.

   b. ***Training and Responsibilities of Advisors***

   According to the Faculty Handbook, the primary role of the Academic Advisor is to clear students for registration. However, in the Department of Health and Exercise Sciences and in the program, it is expected that we discuss/mentor students regarding their course plans and career goals - serving as both academic and career advisors. In addition to discussing course plans and career goals, academic advisors assist with the coordinating the paperwork for the HLTH 460: Internship in Health Education Experience, credit/no credit options, and substitutions. Academic advisors serve as resources regarding the procedures involved with withdrawal (medical or a single course), filing complaints and grievances, and obtaining credit overloads.

   Training as an advisor occurs in several ways. The New Faculty Orientation hosted by the Academic Professional Development Center (APDC), contains workshops providing an overview of the advising process, including an overview of Truman's advising system (Degreeworks). This training provides an overview of tools for registration planning with students including Degreeworks, 4-year planning forms, and video tutorials provided by

the Center for Academic Excellence. Within the Department, mentor faculty members are responsible for training their new faculty mentee assigned to them regarding advising. This training involves allowing the newer faculty member to observe the mentor's advising sessions.

c. Policies and Procedures Related to Advising

Truman State University embraces the Teacher Scholar Model. It is expected every faculty member embrace this model and demonstrate how they are incorporating this model in their work at the University. According to this model, advising is considered part of every faculty member's teaching load at Truman State University (p. 1, para. 4). Further, as outlined in the Faculty Handbook, advising is an expectation for faculty members. Specifically for tenure-track and tenured faculty, advising effectiveness is an evaluation criteria in the annual review, third year review, and promotional review (See Annual Review and Tenure and Promotion Review Guidelines in ERF Folder: G1, Subfolder: G1.2).

Procedurally, students are responsible for setting up appointments with their faculty advisor to review course schedules, career paths, and address any questions the student might have. Students are formally cleared for registration after meeting with their academic advisor. Without this clearance, students are unable to register for courses.

d. Process for Changing Advisors

A student may request to change an advisor by simply asking another Health Science faculty member to be their advisor and emailing the Administrative Assistant to formally make the change in the system.

e. Rules for Frequency of Contact with Advisors

The expectation in the Faculty Handbook is that students meet with their major advisors prior to registration each semester. Faculty members can meet more frequently with their advisees if needed.

G2. Faculty Involvement in Public Health Career Advising

Students are advised by program faculty (as defined in Criterion D) about public health-specific career options beginning no later than the semester (quarter, trimester, term, etc.) during which students begin coursework in the major and continuing through program completion.

1. A description of the program's provision of career advising, including the following:
a. Assignment of Advisors

Students are first advised by the Center for Academic Excellence. From the beginning of their sophomore year until the student graduates, students are advised by one of the Health Science faculty. All Health Science faculty obtaining a CHES®/MCHES® certification advise the Community, Worksite Public Health Students.

During the summer before their sophomore year, students are assigned to one of the Health Science faculty members. First year students are assigned a Health Science faculty advisor by the Chair and Administrative Assistant in consultation with the Designated Leader. The new students are distributed based on existing advising load to keep a fairly equitable distribution.

b. Training and Responsibilities of Advisors

Training as an advisor occurs in several ways. The New Faculty Orientation hosted by the Academic Professional Development Center (APDC), contains workshops providing an overview of the advising process, including an overview of Truman's advising system (Degreeworks). This training provides an overview of tools for registration planning with students including Degreeworks, 4-year planning forms, and video tutorials provided by the Center for Academic Excellence. Within the Department, mentor faculty members are responsible for training their new faculty mentee assigned to them regarding advising. This training involves allowing the newer faculty member to observe the mentor's advising sessions.

Students are required to formally meet with the Health Science faculty advisor each semester to discuss academic plans and post-graduate plans or options. Academic advisors seek career advising training in several ways. All Health Science faculty advisors are supported through departmental funding ($1500/each faculty member) to seek out professional development opportunities (e.g., conferences and webinars). As needed during the monthly Health Science meetings, career advising issues and resources are shared with all Health Science faculty members, including Career Center and Writing Center resources. It is expected each Health Science faculty member be familiar with the resources provided by both the Writing Center and Career Center.

c. Policies and Procedures Related to Advising

Career advising occurs during the individual meeting between student and faculty. Each advisor is responsible for asking each advisee about their respective career paths. Depending on the student's path, advisors provide the appropriate resources. Some resources provided by advisors are links to CEPH-accredited graduate programs, the Career Center mock interview registration link, connections and contact information for potential internship supervisors or alumni working in the field.

Career advising is formally incorporated into three of the courses all Community, Worksite Public Health students take. The Health Science faculty member teaching this course would be responsible for the career advising occurring during this course.

- In HLTH 290: Public Health Education Principles, students create a resume. The students are given guidance by the Instructor of Record for the course and resources from the Career Center to help craft their resumes.
- In HLTH 440: Capstone: Program Implementation and Evaluation, the Career Center does two workshops: Resume/Cover Letter Workshop and Acing the Interview Workshop. Additionally, in this course students complete a worksheet detailing their professional goals for the semester, they create a LinkedIn profile

and a professional website portfolio, and there is an Alumni Panel for students to ask questions about careers.

- In HLTH 460: Internship in Health Education, in addition to other internship requirements, students must update their resume and draft a personal plan for professional growth. In this personal plan, students research two professional organizations, complete a mock interview with their internship supervisor, and review job procedures and job announcements through the MO Department of Health and Senior Services.

d. Process for Changing Advisors

A student may request to change an advisor by simply asking another Health Science faculty member to be their advisor and emailing the Administrative Assistant to formally make the change in the system.

e. Rules for Frequency of Contact with Advisors

The expectation in the Faculty Handbook is that students meet with their major advisors prior to registration each semester. Faculty members can meet more frequently with their advisees if needed or desired.

G3. Student Satisfaction with Advising

The program regularly tracks and regularly reviews quantitative and qualitative data on student satisfaction with advising

The program uses methods that produce specific, actionable data; for example, data must sufficiently differentiate between faculty and staff advising roles, if applicable. The program does not rely exclusively on institution- or unit-collected data, unless those data are sufficiently detailed and descriptive.

1. A brief narrative summary and presentation of summary statistics on student satisfaction with advising for the last three years.

All students are required to complete the Graduating Student Questionnaire (GSQ). In the GSQ, students are asked about how many faculty they knew in the program, their satisfaction with advising, and their access to instructors/professors.

GSQ Data (all Health Science majors)
"How satisfied were you with the academic advising by your faculty advisor in the major?

	2019 N(%)	2020 N(%)	2021 N(%)
Very Dissatisfied (1)	0	2 (2.9%)	3 (5.5%)
Dissatisfied (2)	4 (5.2%)	4 (5.7%)	8(14.6%)
Satisfied (3)	33 (42.9%)	30 (42.9%)	14 (25.5%)
Very Satisfied (4)	40 (52.0%)	34 (48.6%)	30 (54.6%)

A survey of the Community, Worksite, Public Health (CWPH) students with 75 or more credit hours enrolled in HLTH 366 Program Planning and Assessment was conducted by the instructor.

	2020 N(%)	2021 N(%)	2022 N(%)
Satisfied	3 (100%)	8 (100%)	3 (100%)
Not Satisfied	0	0	0

As expected, the number of CWPH students enrolled was quite small, but all 14 CWPH students in all three years reported they were satisfied with their Health Science advisor. The comments were overwhelmingly positive; review of their comments by the Health Science faculty did not reveal any systematic issues that needed to be addressed. Students expressed that their advisors were helpful, knowledgeable, responsive, and motivating. Weaknesses identified included a lack of information about other majors and minors, and a lack of guidance about navigating enrolling in business classes and the business administration minor process.

Summary comments from the CWPH survey included:

- "All our advisors are fantastic in their own ways and have given great advice for not only health science but school in general." - CWPH Student #1
- "The health science professors are awesome, and they care so much about us. They go out of their way to help us with school and even potential careers." - CWPH Student #2
- "Overall, I would say that the Health Science academic advisors are doing a really good job with keeping their students on track with classes and ensuring that most students will graduate after 4 years." - CWPH Student #3

There were no negative summary comments submitted. To view the summary report conveying Advising Satisfaction Data go to the ERF Folder: Criterion G3, Subfolder: G3.1.

Health Science faculty interpret the higher level of satisfaction among CWPH students than Health Science majors overall to the expertise of Health Science faculty in public health. Other Health Science majors aspire to careers such as medicine, physical and occupational therapy,

and nursing, and Health Science faculty may be less capable of effectively and efficiently guiding students toward those career paths.

2. *A description of the methods used for collecting and analyzing data on student satisfaction with advising. The description must identify the parties responsible for collecting and analyzing data. If applicable, a discussion of limitations of the current data that are based on data collection methodology.*

   Data is collected at the university level via the GSQ. The assessment committee at Truman is responsible for managing the data collected through this survey. The data is analyzed by the Health Science program annually and incorporated into the university program review every five years.

   The CWPH student survey is conducted through blackboard, the learning management system, in HLTH 366 Program Planning and Assessment. The instructor is responsible for collecting and analyzing the data which is then summarized and shared with the other Health Science faculty members. One limitation of the data is the small number of CWPH students in HLTH 366 each semester. The confidentiality of the survey is limited by the small number of students. The instructor of the course does not reveal the names of the individual students who participated in the survey when she presents the summary data and comments.

3. If applicable, a description of specific plans (with timelines) to improve the accuracy of data.

   N/A

4. If applicable, specific plans for improvement in provision of advising, based on the data collected.

   While the CWPH data did not indicate a specific need for improvement, the Health Science faculty decided to create a guide for *Advising Health Science Community, Worksite and Public Health (CWPH) Concentration Students* (ERF Folder: Criterion G.3, Subfolder G3.4) to maintain our high quality standards and ensure accurate information was being shared. This was particularly useful to newer faculty members with less advising experience. The document was created and reviewed by students and faculty in the fall of 2020. It was revised based on feedback and finalized in January 2021. This document is available for use by Health Science faculty and CWPH students.

H1. Diversity and Inclusion

The program demonstrates a commitment to diversity and inclusion.

1. *A narrative description of the ways in which the program ensures that students have skills for recognizing and adapting to cultural differences in the public health context. The description must address the following:*

a. *assurance that students are exposed to faculty, staff, preceptors, guest lecturers and community agencies reflective of the diversity in their communities*

Diversity in the Program

Current initiatives on campus are working towards increasing diversity at the university and within each program. The Health Science program, which includes students in all concentrations,

Table H1.1. Distribution of all Health Science majors for the 2021-2022 Academic Year (n=144).

Gender		
	HS	Truman[1]
Female	75%	60%
Male	25%	40%
Race*		
	HS	Truman[2]
Asian	2.1%	2.7%
Black	4.2%	3.7%
Hispanic	5.6%	2.8%
International	4.2%	6.3%
Multiracial	8.4%	3.3%
White	75.5%	87%
First Generation Status		
First Generation	26%	
Not First Generation	74%	

Numbers for Truman do not equal 100% due to some races being reported at Truman and not being represented in the HS program.

[1]Truman State University. (n.d.). At a glance. Retrieved https://www.truman.edu/about/facts-about-truman/at-a-glance/.
[2]Center for Diversity and Inclusion. (n.d.). FAQs. Retrieved https://diversity.truman.edu/about-us/faqs/.

Diversity in the Required Courses

HLTH 255: Introduction to Community and Public Health

In HLTH 255, students are introduced to the social determinants of health. A speaker series was implemented in the spring 2021 semester to expose students to a variety of on campus organizations and resources and community organizations working towards diversity, equity, and inclusion. The speakers guest lecture and address a variety of content including: allyship, structural oppression, the history of disability, immigrant experiences, labor rights, and first generation student experiences. Students write a reflection upon completion of the speaker series pertaining to what they learned, what social determinants of health were present in the speakers' discussions, and how the students foresee these social determinants of health impacting health outcomes in the populations discussed.

HLTH 455: School Health Programs

In HLTH 455, the local rural, low-SES school district wellness team chair speaks via guest or recorded lecture (depending on planning period availability) as students assist the wellness team with their annual district health needs assessment data collection as an in-class assignment. Rural areas of high poverty tend to have lower-achieving schools with students at high risk for stress and trauma as well as low levels of school readiness. Students are exposed to a school health teacher/wellness chair who shares with students the skills needed to address the health needs of rural youth at the school site. This district possesses an increasing number of students experiencing trauma, recent increases in migrant students of high poverty, median county household income lower than the state average, proportion of children in poverty higher than the state rate (trending upwards), percentage of grandparents responsible for grandchildren higher than the state rate, and over half of students are eligible for free/reduced lunch. The percentage of sub-group (minority, low income, those with disabilities) elementary students scoring proficient in English/Language Arts and Math is below the state rate.

HLTH 460: Internship in Health Education

The CWPH program requires all students to participate in an internship experience and work within various public health settings and with a variety of populations. During this experience, students are given the opportunity to develop the skills needed for an entry-level public health position. These internship experiences are located in both rural and urban communities containing individuals with different economic backgrounds and gender, racial, and ethnic identities. These internship sites include the following settings:

- NEMO Area Health Education Center
- A. T. Still Area Health Education Center
- Knox County Health Department
- Clay County Public Health Center

- Alzheimer's Association
- Millipore Sigma
- Putnam County Health Department
- Schuyler County Health Department
- Saint Louis Public Health Department
- Miller County Health Department
- Adair County Family YMCA
- Preferred Family Healthcare
- United Healthcare

In addition to working in diverse settings, all CWPH students registering for a summer internship experience are required to attend an in-person training. This in-person training is conducted by the Director of the Center for Diversity and Inclusion, Dr. Saint Rice, and this training gives students information about how to handle and report microaggressions they encounter in internship settings.

Diversity in the Selective Courses (Not taken by all CWPH students)

HLTH 260: Human Sexuality

In HLTH 260, 2-4 class periods are dedicated to discussing different gender identities and sexual orientations. Additionally, students watch two documentaries: one focusing on trans+ experiences and the other addressing the history of the Stonewall Riots.

HLTH 320: Patient Education and Clinical Health Promotion

In HLTH 320, a selective not all students choose; students are exposed to local rural senior citizens with multiple chronic health conditions in the assisted living, skilled nursing, senior living, and in-home settings. Students, in interprofessional healthcare teams, make three home-visits to the senior citizens to conduct comprehensive physical and psycho-social health assessments. Rural seniors as a whole display a lower level of income, education, healthy behaviors, and access to health care services, which in turn leads to decreases in health status and life expectancy.

b. Research and/or Community Engagement

Rural Community Workers Alliance

Two to three health science students work with and support the Rural Workers Community Alliance in several ways such as assistance with the website, social media, translation of documents into English and ESL assistance. A recent project the students completed (along with Dr. Nancy Daley-Moore) was to create a vaccine awareness campaign for the individuals living in Milan, MO.

HLTH 245: Substance Abuse Prevention

HLTH 245 is a selective course that not all students choose. In this course, students conduct a secondary prevention needs assessment for a rural, low-SES MO county [Service Area 1, 13,

and 14: a 27-county area] designated by the regional prevention resource center as 'high-risk'.

HLTH 366: Program Assessment and Planning

Students in HLTH 366, a required course, are required to watch a webinar from the National Association of County and City Health Officials (NACCHO) entitled "Including People with Disabilities in the MAPP Process." Students are required to consider how they would apply what they learned from this webinar into their program plan.

Research with Students

Although not all students participated in these extra-curricular research and community engagement projects, two community health needs assessments were conducted for rural, low-SES areas in our region. Students were exposed to the lived experiences and rural health disparities of our local communities through primary and secondary data collection. 1. Mercer County Health Needs Assessment. Report Commissioned by: Mercer County Health Department; Gina Finney, Administrator/Kimberly Oakes, Environmental Public Health Specialist. 2. Grundy County Health Needs Assessment. Report Commissioned by E. Gibson, Administrator of the Grundy County Health Department.

c. Any other Relevant Elements of the Program

N/A

2. *Supporting documents for each listed item and/or component of the description above. For each item, list the supporting document(s) and page(s), if applicable. Provide hyperlinks to documents if they are available online or include in the resource file electronic copies of any documents that are not available online.*

Course Name	Documents	Location in ERF
HLTH 245: Substance Abuse Prevention	• Needs Assessment Location	Folder: Criterion H1 Subfolder: H1.2 Subfolder: HLTH 245
HLTH 255: Introduction to Community and Public Health	• HLTH 255 Syllabus • DEI Reflection Rubric • DEI Reflection Student Samples	Folder: Criterion H1 Subfolder: H1.2 Subfolder: HLTH 255
HLTH 260: Human Sexuality	• HLTH 260 Syllabus • Documentary Links • PowerPoints/Lectures	Folder: Criterion H1 Subfolder: H1.2 Subfolder: HLTH 260
HLTH 320: Patient Education	• Assignment Description & IPE Link	Folder: Criterion H1 Subfolder: H1.2

		Subfolder: HLTH 320
HLTH 366: Program Assessment and Planning	• NACCHO Webinar and Reflection Prompt	Folder: Criterion H1 Subfolder: H1.2 Subfolder: HLTH 366
HLTH 455: School Health Programs	• Assignment Description • Minutes from Meeting	Folder: Criterion H1 Subfolder: H1.2 Subfolder: HLTH 455
HLTH 460: Internship in Health Education	• Internship Sites • Training Outline	Folder: Criterion H1 Subfolder: H1.2 Subfolder: HLTH 460
Research with Students	• Copies of the front page of the final needs assessment	Folder: Criterion H1 Subfolder: H1.2 Subfolder: Research with Students
Rural Community Workers Alliance	• Website Links	Folder: Criterion H1 Subfolder: H1.2 Subfolder: Rural Community Workers Alliance

H2. Cultural Competence

The program prepares students by developing, reviewing, and maintaining curricula and other opportunities (e.g., service learning) that address and build competency in diversity and cultural considerations.

Programs can accomplish these aims through a variety of practices including the following: incorporation of cultural competency considerations in the curriculum; recruitment/retention of faculty, staff, and students; and reflection in the types of research and/or community engagement conducted.

1. **A narrative description of the ways in which the program ensures that students have skills for recognizing and adapting to cultural differences in the public health context. The description must address the program's curriculum.**

   HLTH 245: Substance Abuse Prevention

   In HLTH 245, a selective course that not all students choose, students complete a CADCA Primer assignment and accompanying video as part of the Cultural Competency cross-cutting principle that should be integrated into each of the Strategic Prevention Framework steps.

HLTH 270: Health Systems and Consumers

HLTH 270 is part of the International Studies Minor. It is a required course in the major. This course compares health systems around the globe. Students develop a greater knowledge and appreciation of cultural diversity through the study of other cultures, as well as their own. They explore the ethics of failing to provide healthcare in resource-poor countries.

HLTH 325: Health Management and Policy

In HLTH 325, a required course, students review the social determinants of health through an interactive role-play, view and list learnings about people with disabilities and public health during an online module and engage diverse organizations and constituencies in addressing community issues when forming community coalitions.

HLTH 405: Global Public Health

HLTH 405 is part of the International Studies Minor. It is a required course in the major. Students in HLTH 405 study multiple geographic regions and cultures to better understand health disparities, poverty, policy, and health systems. They investigate the complexity of global health to include the influence of the economy, trade, and diplomacy. Students are responsible for teaching global health units to their peers, as well as leading class discussions on assignment readings. This course focuses on low- and middle-income countries (LMICs).

HLTH 410: Health Communication Methods

In HLTH 410, a required course, assignments simulate as if students have been hired as health educators at a county health department where they have been asked to plan, implement, and evaluate a health communication campaign. Students consider the role of culture in health communication in planning (i.e., assessment and segmentation of their primary audience) developing messages, and carrying out health communication interventions (i.e., identification of channels). Students develop health communication materials including a creative brief, poster, infographic, factsheet, newsletter, brochures, video, podcast, and website using culturally sensitive methods and techniques. Cultural competence is incorporated into their health communication campaign.

HLTH 455: School Health Programs

In HLTH 455, a required course, students use the School Health Index to recognize all the differences in policies and practices most likely to be effective in reducing youth health risk behaviors in their selected MO school districts.

HLTH 480: Worksite Health

In HLTH 480, a required course, students assess corporate culture, an organization's shared beliefs and values, as no two organizational cultures are the same.

2. *Supporting documents for each listed item and/or component of the description above. For each item, list the supporting document(s) and page(s), if applicable. Provide hyperlinks to documents if they are available online or include in the resource file electronic copies of any documents that are not available online.*

Course Name	Documents	Location in ERF
HLTH 245: Substance Abuse Prevention	• Substance abuse prevention assignment: CADCA Primer and accompanying video	Folder: Criterion H2 Subfolder: H2.2 Subfolder: HLTH 245
HLTH 270: Health Systems and Consumers	• Unit Exam 1 • Journal article activity	Folder: Criterion H2 Subfolder: H2.2 Subfolder: HLTH 270
HLTH 325: Health Management and Policy	• Social Determinants of Health Game • Including People with Disabilities Learning Modules • Coalition Building using CCAT Theory	Folder: Criterion H2 Subfolder: H2.2 Subfolder: HLTH 325
HLTH 405: Global Public Health	• Student presentations on the global economy, trade, and diplomacy in global health	Folder: Criterion H2 Subfolder: H2.2 Subfolder: HLTH 405
HLTH 410: Health Communication Methods	• Creative Brief Rubric • Resources for Communication Materials	Folder: Criterion H2 Subfolder: H2.2 Subfolder: HLTH 410
HLTH 455: School Health Programs	• School Health Index Assignment	Folder: Criterion H2 Subfolder: H2.2 Subfolder: HLTH 455
HLTH 480: Worksite Health	• Corporate Culture Assignment	Folder: Criterion H2 Subfolder: H2.2 Subfolder: HLTH 480

I1. Program Offering

The distance-based program offering a) is consistent with the mission of the program and within the program's established areas of expertise; b) is guided by clearly articulated competencies that are rigorously evaluated; c) is subject to the same quality control processes as other degree programs in the university; and d) provides planned and evaluated learning experiences that take into consideration and are responsive to the characteristics and needs of online learners.

N/A

I2. Student Interaction

The program assures regular and substantive interaction between and among students and the instructor either synchronously and/or asynchronously.

N/A

I3. Program Support

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

N/A

I4. Program Effectiveness

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 competencies and of the learning model are especially important in institutions that offer distance learning but do not offer a comparable in-residence program.

N/A

I5. Student Identity

The program has processes in place through which it establishes that the student who registers in a distance-based program or a course within a distance-based program is the same student who participates in and completes the course or degree and receives the academic credit. Student identity may be verified by using, at the option of the institution, methods such as a secure login and pass code; proctored examinations; and new or other technologies and practices that are effective in verifying student identity. These processes may be administered through the university. The university notifies students in writing that it uses processes that protect student privacy and alerts students to any projected additional

student charges associated with the verification of student identity at the time of registration or enrollment.

N/A

J1. Information Accuracy

Catalogs and bulletins used by the program, whether produced by the program, department, college, or the institution, to describe its educational offerings accurately describe its academic calendar, admission 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, contains accurate information.

1. ***A description of the manner in which catalogs and bulletins used by the program are updated to accurately describe its educational offerings, academic calendar, admissions policies, grading policies, academic integrity standards, and degree completion requirements.***

   Catalogs are updated every year and changes are effective starting each fall. Regulations, policies, fees, curricula, courses, and other matters contained herein are subject to change at any time during the period the catalog is in effect. Curricular changes must follow standard procedures for review and approval; and the Curriculum Forms Calendar is set every year with specific deadlines for submitting curricular changes.

   Any proposed change must be submitted to the Undergraduate Council, Graduate Council, and Faculty Senate in fall of the academic year to be included in the Board of Governor (BOG) agenda in December and reach the Coordinating Board of Higher Education (CBHE) for approval at the February meeting. Catalog proofs are distributed to the deans and department chairs toward the end of October each year. Any proposed change must be received by the Office of the Executive Vice President of Academic Affairs (VPAA) in January. Final editorial changes to the catalog must be submitted to the Registrar's Office by March 1st. The Undergraduate Council, the Graduate Council, and the Faculty Senate in the month of March consider any course updates, new course proposals, and program updates that require governance approval to be considered by the VPAA's Office. In April, all changes are incorporated into the catalog and the process of previewing/reviewing the catalog occurs. Any final editorial correction to the catalog must be submitted to the Registrar's Office by mid-April. The new catalog becomes available to all users and becomes effective for the fall of the same year.

2. ***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.***

   2021-2022 Academic Calendar https://www.truman.edu/majors-programs/academic-resources/academic-calendar-schedules/academic-calendar/2021-22-academic-calendar/

   2021-2022 General/Graduate Catalog - http://catalog.truman.edu/

2021-2022 Catalog Description of Health Science Major - http://catalog.truman.edu/preview_program.php?catoid=20&poid=3802&returnto=1183

Departmental Website for Health Science Major - https://www.truman.edu/majors-programs/majors-minors/health-science-major/

Departmental Website 4-year Plan for the Health Science Major Community, Worksite, Public Health Concentration - https://www.truman.edu/majors-programs/majors-minors/health-science-major/health-science-major-sample-4-year-plans/sample-4-year-plan-cwph/

J2. Student Complaint Processes

The program maintains clear, publicly available policies on student grievances or complaints and maintains records on the aggregate number of complaints received for the last three years.

1. ***A description of the manner in which student grievances and complaints are addressed, including the number of grievances and complaints filed for each of the last three years.***

Grievances are filed for the following issues:

1. Grade Appeals
2. Discrimination & Title IX Violations

Grade Appeals

Students questioning a course grade must first address their concerns with the Instructor no later than 14 days after the beginning of the subsequent semester. If the Instructor agrees with the student's concern, the Instructor would submit a Change of Grade Request, pending approval by both the Department Chair and Dean.

If the Instructor and student do not reach an agreement, the student can submit a Grade Appeal Form to the Department Chair no later than 14 days following the Instructor's written decision. The Grade Appeal Form (provided in Folder J2 in ERF) requests students provide reasoning and documentation of evidence for the grade change.

If the Department Chair and student do not reach an agreement, the student could then appeal to the Dean, who is head of the School in which the faculty member serves. The appeal to the Dean must be initiated by the student 14 days after the student receives written notice of the Department Chair's decision. If the student wants to appeal the Dean's decision, the student must submit an appeal to the Executive Vice President for Academic Affairs (VPAA) within 14 days of receiving the notification from the Dean. The VPAA has the final authority regarding grade changes ("2021-2022 Catalog: Academic Policies & Procedures: Grade Appeals Policy).

At the program-level, one grade appeal was filed to the Department Chair in the past five years.

Discrimination & Title IX Violations

The University's Antidiscrimination Policies include the "University Non-Discrimination Policy," the "University Sexual Harassment Policy," the "Non-Discriminatory Complaint Reporting and Resolution Procedure," and the "Accommodations for Persons and Disabilities" policy. The Grievance Procedure and the Complaint Reporting & Resolution Procedure are posted in the Student Handbook Section 5: Student Guidelines. Courses syllabi also include summaries, link to policies/procedures, complaint form, and who students can contact to file a complaint/grievance.

Students who have complaints must file formal complaints with the Administrative Officer (AO) in person, by mail, by email, or through the online portal. The AO is a trained administrator designated by the President or designee to coordinate efforts to enforce and University's Antidiscrimination Policies. The AO or designee will conduct an initial assessment of the reported conduct/complaint; may initiate an inquiry to gather information; and may consult with other University offices for further action before determining whether to accept or dismiss a formal complaint.

The AO has the discretion to initiate the Grievance Procedure when failing to do so would be deliberately indifferent to the University's obligation to maintain a safe and discrimination-free living, learning, and work environment. The AO may dismiss the formal complaint and must provide the complainant and respondent written Notice of Dismissal and reason(s) for dismissal. Either party may submit a written appeal, within five days of delivery of the Notice of Dismissal. The Appellate Officer will review the request for an appeal; and if an appeal of a dismissal is granted, the formal complaint will proceed consistent with the Grievance Procedure. If the request for appeal is rejected, the decision is final.

More detailed information on resolution, investigation, adjudication, remedies and sanctions, and appeal of determination procedures and processes can be found on the Office of Institutional Compliance website.

Non-discrimination and Title IX violations are not tracked at the program-level since students report directly to the Office of Institutional Compliance. If a formal complaint were filed, the Institutional Compliance Officer would notify the Department of pertinent information. In the past five years, the Health Science program has not been notified of a student complaint.

2. ***Supporting documents relating to grievance and complaint procedures and recordkeeping. For each piece of evidence provided, list the relevant document(s) and page(s) (e.g., Faculty meeting minutes, May 12, 2012, pp. 3-4). Provide hyperlinks to documents if they are available online or include in the resource file electronic copies of any documents that are not available online.***

   Grade Appeals Policy
   http://catalog.truman.edu/content.php?catoid=20&navoid=1191#Grades_and_Grade_Point_Average

The Office of Institutional Compliance
Submit claims can be submitted through their office - https://titleix.truman.edu/

Grievance and complaint procedures can be found at https://titleix.truman.edu/complaint-reporting-resolution-procedure/.