



**LENOIR-RHYNE UNIVERSITY  
MASTER OF PUBLIC HEALTH  
CEPH ACCREDITATION  
FINAL SELF-STUDY**

**October 2016**

Submitted by:

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**TABLE OF CONTENTS**

I.	Criterion 1.0 The Public Health Program	
	Criterion 1.1 The Mission.....	1
	Criterion 1.2 Evaluation and Planning.....	8
	Criterion 1.3 Institutional Environment.....	20
	Criterion 1.4 Organization and Administration.....	30
	Criterion 1.5 Governance.....	33
	Criterion 1.6 Fiscal Resources.....	41
	Criterion 1.7 Faculty and Other Resources.....	45
	Criterion 1.8 Diversity.....	54
II.	Criterion 2.0 Instructional Programs	
	Criterion 2.1 Degree Offerings.....	64
	Criterion 2.2 Program Length.....	68
	Criterion 2.3 Public Health Core Knowledge.....	70
	Criterion 2.4 Practical Skills.....	72
	Criterion 2.5 Culminating Experience.....	79
	Criterion 2.6 Required Competencies.....	82
	Criterion 2.7 Assessment Procedures.....	88
	Criterion 2.8 Bachelor’s Degrees in Public Health.....	100
	Criterion 2.9 Academic Degrees.....	101
	Criterion 2.10 Doctoral Degrees.....	102
	Criterion 2.11 Joint Degrees.....	103
	Criterion 2.12 Distance Education or Executive Degree Programs.....	106
III.	Criterion 3.0 Creation, Application and Advancement of Knowledge	
	Criterion 3.1 Research.....	111
	Criterion 3.2 Service.....	121
	Criterion 3.3 Workforce Development.....	132
IV.	Criterion 4.0 Faculty, Staff and Students	
	Criterion 4.1 Faculty Qualifications.....	136
	Criterion 4.2 Faculty Policies and Procedures.....	145
	Criterion 4.3 Student Recruitment and Admissions.....	153
	Criterion 4.4 Advising and Career Counseling.....	159

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Table of Abbreviations

AHEC	Area Health Education Centers
AY	Academic Year
CHS	College of Health Sciences
CTL	Center for Teaching and Learning
CVMC	Catawba Valley Medical Center
DI	Dietetic Internship
FAR	Faculty Activities Report
HESS	Health, Exercise and Sport Science
LR	Lenoir-Rhyne
MAHEC	Mountain Area Health Education Center
PA	Physician's Assistant
SOURCE	Symposium on University Research and Creative Expression

**Criterion 1.1 The Mission. The program shall have a clearly formulated and publicly stated mission with supporting goals, objectives and values.**

**1.1a. A clear and concise mission statement for the program as a whole.**

The mission of the MPH program is to provide a well-rounded professional education that offers instruction through open-minded inquiry and assessment, research opportunities with real community benefit, and service learning in diverse settings that enrich the development of public health professionals.

**1.1b. A statement of values that guides the program.**

The MPH program shares the values of Lenoir-Rhyne University as depicted in Lenoir-Rhyne University's Statement of Values. Constant and consistent attention to these core values will cultivate the continuous improvement of our institution and program as well as assist us in the achievement of our mission.

- Excellence – We will strive for excellence in everything we do. We will continuously cultivate our intellectual, physical, and spiritual growth. We will develop our talents and abilities to their fullest extents
- Integrity – We will act with integrity at all times. We will respect and be honest with each other. We will take personal responsibility for our words and our actions.
- Care – We will care about others in our learning and working relationships. We will be responsible stewards of our resources. We will support each other and work together toward the common good.
- Curiosity - We will learn from our community, past and present. We will confront important issues with humility and open minds. We will embrace the gains attained from the diversity of people and perspectives.

The University's Statement of Values are appropriate to guide the program because the values encompass all that the program strives to develop in each student and public health professional. They fit with our mission statement and the principles of the public health profession.

**1.1c. One or more goal statements for each major function through which the program intends to attain its mission, including at a minimum, instruction, research and service.**

MPH program goals in relation to the major functions are in the following table (Table 1.1c: MPH Program Goals in Relation to Program Functions).

Table 1.1c: MPH Program Goals in Relation to Program Functions	
MPH Function	MPH Goal
Instruction	To prepare health professionals for public health practice by incorporating interdisciplinary, pragmatic perspectives into coursework, field experiences and applied research that promote public health competencies.
Scholarship	To engage faculty and students in conducting, disseminating and connecting public health scholarship to public health practice.
Service	To engage faculty and students in implementing public health initiatives on the university campus and in the community.

**1.1d. A set of measurable objectives with quantifiable indicators related to each goal statement as provided in Criterion 1.1.c. In some cases, qualitative indicators may be used as appropriate.**

The MPH Program goals are associated with measureable objectives specific to each major function and are in alignment for those of the University. These goals, objectives, and measures are in the following tables (Table 1.1d1: Instructional Goal, Objectives and Measures; Table 1.1d2: Research Goal, Objectives and Measures; Table 1.1d3: Service Goal, Objectives and Measures).

Table 1.1d1: Instructional Goal, Objectives and Measures

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Instructional Goal:

To prepare health professionals for public health practice by incorporating interdisciplinary, practical perspectives into coursework, field experiences and applied research that promote public health competencies.

Objective 1: Infuse the curriculum with practical perspectives to prepare students to transition from academics to practice

Measure 1: At least 80% of the courses in the core and concentration will include practical application.

Measure: Review course syllabi for “real-world” perspectives – defined as having at least one assignment with practical application.

Measure 2: At least 75% of applied research completed will be community-based, practical research.

Measure: MPH 613 Applied Research Abstracts document.

Objective 2: Prepare students to achieve competence in the 10 identified

core program competencies by translating knowledge into public health practice

Measure 1: Each core course in the MPH Program will cover 4 or more core competencies.

Measure: Course syllabi – specific links to core competencies

Measure 2: At the completion of the program, at least 70% of students will self-report a proficient level of competency (4 on a scale of 5) on each of the core competencies.

Measure: Degree Completion Exit Survey.

Measure 3: At the completion of the Applied Research project, faculty will rate at least 70% of students as having achieved a proficient level of competency (4 on a scale of 5) for each of the core competencies on the final written report and oral presentation.

Measure: Applied Research Rubric.

Measure 4: Internship Preceptors will rate at least 70% of students as proficient (4 on a scale of 5) in each of the core competencies that apply.

Measure: Preceptor Final Evaluation

Objective 3: Prepare students to achieve competence in the 5 identified concentration program competencies by translating knowledge into public health practice

Measure 1: Each concentration course in the MPH Program will cover 4 or more concentration competencies.

Measure: Course syllabi – specific links to concentration competencies

Measure 2: At the completion of the program, at least 70% of students will self-report a proficient level of competency (4 on a scale of 5) in each of the concentration competencies.

Measure: Degree Completion Exit Survey.

Measure 3: At the completion of the Applied Research project, faculty will rate at least 70% of students as having achieved a proficient level of competency (4 on a scale of 5) for each of the concentration competencies on the final written report and oral presentation.

Measure: Applied Research Rubric.

Measure 4: Internship Preceptors will rate at least 70% of students

as proficient (4 on a scale of 5) in each of the concentration competencies that apply.

Measure: Preceptor Final Evaluation

Objective 4: Time to degree – students will complete the program within University guidelines, graduating within appropriate timeframe in order to maintain current practical knowledge.

Measure 1: At least 80% of students will complete the program within 6 years.

Measure: University Registrar graduation data

Table 1.1d2: Scholarship Goal, Objectives and Measures

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Scholarship Goal:

To engage faculty and students in conducting, disseminating and connecting public health scholarship to public health practice.

Objective 1: Primary faculty will be active in scholarship to enhance their teaching by linking scholarship to public health practice.

Measure 1: 100% of primary faculty will attend 1 professional conference every academic year.

Measure: Annual Faculty Activity Report.

Measure 2: At least 80% of primary faculty will have 1 professional presentation every year.

Measure: Annual Faculty Activity Report

Measure 3: At least 80% of primary faculty will publish 1 research article every 5 years.

Measure: Annual Faculty Activity Report

Objective 2: Faculty will engage with students in conducting applied research projects and disseminating the information

Measure 1: At least 75% of students completing their Applied Research project will submit an abstract for professional presentation every academic year.

Measure: Annual Faculty Activity Report and MPH 613 Applied Research Abstracts document.

Measure 2: At least 25% of students completing their Applied Research project will submit an abstract for publication every academic year.

Measure: Annual Faculty Activity Report and MPH 613 Applied

Research Abstracts document.  
Measure 3: At least 25% of students completing their Applied Research project will present or publish in collaboration with faculty every academic year.  
Measure: Annual Faculty Activity Report and MPH 613 Applied Research Abstracts document.

Table 1.1d3: Service Goal, Objectives and Measures

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Service Goal:

To engage faculty and students in implementing public health initiatives on the university campus and in the community.

Objective 1: Faculty will be involved in public health related activities at the university level and in the community (local, national and/or international)

Measure 1: 100% of primary faculty will be engaged in community service at the local, state, national and/or international level every academic year.

Measure: Annual Faculty Activity Report.

Measure 2: 75% of primary faculty will be engaged in professional service at the local, state, national and/or international level every academic year.

Measure: Annual Faculty Activity Report.

Objective 2: Students will engage in service opportunities on the university campus and in the community (local, national and/or international) as part of their field experience, applied research or volunteer.

Measure 1: At least 70% of students will participate in service opportunities within the university and/or in the community (local, state, national and/or international) at the completion of the program.

Measure: Degree Completion Exit Survey

Measure 2: At least 50% of students will participate in primary faculty led service opportunities within the university and/or in the community (local, state, national and/or international) at the completion of the program.

Measure: Degree Completion Exit Survey



**1.1e. Description of the manner through which the mission, values, goals and objectives were developed, including a description of how various specific stakeholder groups were involved in their development.**

In the fall of 2014, the Program Coordinator initiated the process of developing the mission, values, goals and objectives for the program. These were then presented to the primary faculty in the spring of 2015 for their review and revisions. The mission statement and goals were agreed upon quickly. Much discussion took place about the objectives and measures, especially the appropriate target percentages and time frames. With consensus from the primary faculty, the initial draft was provided to the Advisory Board, MPH students and School Chair for their review prior to the consultation visit in July 2015. After the consultation visit the primary faculty again met to discuss the feedback from all constituents. Corrections were made and the draft was presented to the students at the MPH program meeting and the Advisory Board in the fall of 2015. The Program Coordinator reviewed all comments and made further revisions. Late in the fall of 2015 the final draft of the mission, values, goals and objectives was distributed to all stakeholder groups (primary faculty, Advisory Board, MPH students, School Chair) via email for final approval.

**1.1f. Description of how the mission, values, goals and objectives are made available to the program's constituent groups, including the general public, and how they are routinely reviewed and revised to ensure relevance.**

The mission, values, goals and objectives are available to the program's constituent groups via email, at program meetings, Advisory Board meetings, school meetings, the MPH Handbook, MPH internal program site and MPH program website. These statements will be reviewed at the beginning of every academic year with primary faculty and MPH students during the Annual Fall MPH Program meeting. Revisions will be made as necessary to ensure relevance.

**1.1g. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

This criterion is met.

**Strengths:**

The process of developing the mission, values, goals and objectives provided every stakeholder group the opportunity for input. Due to this input Lenoir-Rhyne University's

MPH program has a clearly defined mission statement and values with goals, objectives and measures that are succinct and provide guidance for the program.

**Weaknesses:**

Student involvement in this process was low due to attendance at the program meetings.

**Plans:**

The mission, values, goals, objectives and measures will be reviewed on an annual basis. By creating a culture of inclusion in the accreditation process, development of program statements and reminders about the importance of participation it is predicted that student involvement will increase.

**Criterion 1.2 Evaluation.** The program shall have an explicit process for monitoring and evaluating its overall efforts against its mission, goals and objectives; for assessing the program's effectiveness in serving its various constituencies; and for using evaluation results in ongoing planning and decision making to achieve its mission. As part of the evaluation process, the program must conduct an analytical self-study that analyzes performance against the accreditation criteria defined in this document.

**1.2a. Description of the evaluation processes used to monitor progress against objectives defined in Criterion 1.1.d, including identification of the data systems and responsible parties associated with each objective and with the evaluation process as a whole. If these are common across all objectives, they need be described only once. If systems and responsible parties vary by objective or topic area, sufficient information must be provided to identify the systems and responsible party for each.**

We have developed evaluation methods to assess the MPH program designed to measure students' outcome performance and faculty engagement in research and service using the resources available. Table 1.2a presents the instruments used, responsible parties and timing of the evaluation associated with each objective.

Instrument	Responsible party	Timing	Objective
Course syllabi	School Chair and MPH Coordinator	After the start of every semester	IO1.M1 IO2.M1 IO3.M1
Applied Research Abstracts	Research Chair and MPH Coordinator	Upon Completion of Applied Research presentation	IO1.M2 RO2.M1 RO2.M2 RO2.M3
Degree Completion Exit Survey	Research Chair and MPH Coordinator	Upon Completion of Applied Research presentation	IO2.M2 IO3.M2 SO2.M1 SO2.M2
Applied Research Rubric	Research Committee, Research Chair and MPH Coordinator	Upon Completion of Applied Research presentation	IO2.M3 IO3.M3
Preceptor Final Evaluation	Preceptor and Faculty Advisor	Completion of Field Experience	IO2.M4 IO3.M4
Degree Candidacy Form	Registrar's Office and Faculty Advisor	Semester prior to graduation	IO4.M1

Instrument	Responsible party	Timing	Objective
Faculty Activities Reports	MPH Coordinator and MPH primary faculty	Annually	RO1.M1 RO1.M2 RO1.M3 RO2.M1 RO2.M2 RO2.M3 SO1.M1 SO2.M2

Assessment data are managed by the MPH Program Coordinator and presented to the Advisory Board during the fall semester meeting.

See Criterion 1.3c for an explanation of faculty and staff roles/functions.

**1.2b. Description of how the results of the evaluation processes described in Criterion 1.2.a are monitored, analyzed, communicated and regularly used by managers responsible for enhancing the quality of programs and activities.**

Monitoring competencies. The University requires that all syllabi are turned into the School Chairs no later than two weeks after the start of each semester. MPH faculty will also send their syllabi to the Program Coordinator. After the two week time period, the MPH Coordinator and School Chair meet to review all MPH course syllabi to confirm that the specified instructional objectives are being met.

Analysis and communication of data. The Program Coordinator is responsible for compiling all of the data for review and discussion. The Program Coordinator inputs all of the data into an excel database that calculates all of the percentages for the objectives. These percentages are then analyzed to see if the objective has been met and for trends. An overview of these results are shared during the fall MPH program meeting, with the primary faculty during MPH faculty meetings throughout the semester and with the Advisory Board at each of meetings during the academic year. Additionally, each of these meetings covers all aspects of the MPH program. (See ERF – Governance Documents).

Further communication of evaluation. In addition to the meetings, faculty can discuss results from any of the evaluation tools at any time during the semester and take action to solicit further information as needed. Faculty advisors, research chairs, preceptors, alumni and students do not need to wait for the data to be compiled or a scheduled meeting to discuss possible issues. The faculty invites input from stakeholders,

particularly preceptors, the Advisory Board, alumni and students on an as needed basis at any time.

**1.2c. Data regarding the program’s performance on each measurable objective described in Criterion 1.1.d must be provided for each of the last three years. To the extent that these data duplicate those required under other criteria (eg, 1.6, 2.7, 3.1, 3.2, 3.3, 4.1, 4.3, or 4.4), the program should parenthetically identify the criteria where the data also appear. See CEPH Outcome Measures Template.**

Instructional Goal: To prepare health professionals for public health practice by incorporating interdisciplinary, practical perspectives into coursework, field experiences and applied research that promote public health competencies.

Table 1.2c1. Outcome Measures for Instructional Objective 1: Infuse the curriculum with practical perspectives to prepare students to transition from academics to practice				
Outcome Measure	Target	AY 2013-14	AY 2014-15	AY 2015-16
At least 80% of the courses in the curriculum will include a practical application	80% of all courses	62.5%	66.7%	89.9%
At least 75% of applied research completed will be community-based, practical research.	75%	0.0%*	77.8%	80%

\* Did not have any graduates

Table 1.2c2. Outcome Measures for Instructional Objective 2: Prepare students to achieve competence in the five core areas by translating knowledge into public health practice				
Outcome Measure	Target	AY 2013-14	AY 2014-15	AY 2015-16
Each core course in the MPH Program will cover 4 or more specific core competencies.	100%	No data*	80%	100%
At the completion of the program, at least 70% of students will self-report a proficient level of competency (4 on a scale of 5) in each of the five core areas.	70%	No data*	77.8%	93.3%
At the completion of the Applied Research project, faculty will rate at least 70% of students as having achieved a proficient level of competency (4 on a scale of 5) for each of the core competencies on the final written report and oral presentation	70%	No data*	77.8%	53.3% <sup>†</sup>
Internship Preceptors will rate at least 70% of students as proficient (4 on a scale of 5) in each of the core competency areas that applies.	70%	No data*	71.43%	83.3%

\*Program competencies were not established until AY 2014-15

<sup>†</sup> This graduating class specifically struggled with the concept of effectively communicating Biostatistics, Epidemiology and Health Policy and Management in their applied research. Corrections were made in their writing, and this percentage reflects the *initial* evaluation. Additionally, the curriculum was reviewed to better focus on dissemination of information.

Table 1.2c3. Outcome Measures for Instructional Objective 3: Prepare students to achieve competence in the concentration area by translating knowledge into public health practice				
Outcome Measure	Target	AY 2013-14	AY 2014-15	AY 2015-16
Each concentration course in the MPH Program will cover 4 or more specific concentration competencies.	100%	No data*	50%	100%
At the completion of the program, at least 70% of students will self-report a proficient level of competency (4 on a scale of 5) in each of the concentration competency areas.	70%	No data*	77.8%	86.7%
At the completion of the Applied Research project, faculty will rate at least 70% of students as having achieved a proficient level of competency (4 on a scale of 5) for each of the concentration competencies on the final written report and oral presentation.	70%	No data*	77.8%	80%
Internship Preceptors will rate at least 70% of students as proficient (4 on a scale of 5) in each of the concentration competency areas that applies.	70%	No data*	85.7%	91.7%

\*Program competencies were not established until AY 2014-15

Table 1.2c4. Outcome Measures for Instructional Objective 4: Time to degree – students will complete the program within University guidelines, graduating within the appropriate timeframe in order to maintain current practical knowledge

Outcome Measure	Target	AY 2013-14	AY 2014-15	AY 2015-16
At least 80% of students will complete the program within 6 years.	80%	0.0%*	100%	100%

\* Did not have any graduates

Scholarship Goal: To engage faculty and students in conducting, disseminating and connecting public health scholarship to public health practice.

Table 1.2c5. Outcome Measures for Scholarship Objective 1: Primary faculty will be active in scholarship to enhance their teaching by linking scholarship to public health practice.

Outcome Measure	Target	AY 2013-14	AY 2014-15	AY 2015-16
100% of primary faculty will attend one professional conference every academic year	100%	100%	100%	100%
At least 80% of primary faculty will have 1 professional presentation every academic year*	80%	100%	66.67%	33.33%
At least 80% of primary faculty will publish 1 original research article every 5 years*	80%	100%	33.33%	66.67%

\*There was and still is much discussion between faculty, Advisory Board and with student about what to set the target percentages with only 3 primary faculty and LRU's emphasis on teaching and guidelines on scholarship. It was determined to set the percentage at 80% for these two outcomes because setting it at 66% seems too low but 100% did not seem attainable and for possible future expansion of faculty



Table 1.2c6. Outcome Measures for Scholarship Objective 2: Faculty will engage with students in conducting applied research projects and disseminating the information				
Outcome Measure	Target	AY 2013-14	AY 2014-15	AY 2015-16
At least 75% of students will submit an abstract for professional presentation every academic year	75%	0%*	11.11% !	20% †
At least 25% of students completing their Applied Research project will submit an abstract for publication every academic year	25%	0%*	0% †	0% †
At least 25% of students completing their Applied Research project will present or publish in collaboration with faculty every academic year	25%	0%*	0% †	6.67% †

\* Did not have any graduates

† These outcome measures are stretch outcomes; the University does not have set presentation or publication requirements for faculty. Additionally the majority of our students work full-time as all of the courses the program is offered in the evening or online. It is difficult to get students involved in faculty led research due to them not being available during weekdays and many of our graduates move out of the area or go work for organizations in which presentations or publications are as not valued. The faculty are working to change the culture by requiring presentation at least at the University level starting during the 2016-17 AY and strongly encouraging professional presentations to further develop professional skills and networks.

Service Goal: To engage faculty and students in implementing public health initiatives on the university campus and in the community.

Table 1.2c7. Outcome Measures for Service Objective 1: Faculty will be involved in public health related activities at the university level and in the community (local, national and/or international)				
Outcome Measure	Target	AY 2013-14	AY 2014-15	AY 2015-16
100% of primary faculty will be engaged in community service at the local, state, national and/or international level every academic year.	100%	100%	100%	100%
75% of primary faculty will be engaged in professional service at the local, state, national and/or international level every academic year.	75%	100%	100%	100%

Table 1.2c8. Outcome Measures for Service Objective 2: Students will engage in service opportunities on the university campus and in the community (local, national and/or international) as part of their field experience, applied research or volunteer.

Outcome Measure	Target	AY 2013-14	AY 2014-15	AY 2015-16
At least 70% of students will participate in service opportunities within the university and/or in the community (local, state, national and/or international) at the completion of the program.	70%	0%*	55.56% !	73.3%
At least 50% of students will participate in primary faculty led service opportunities with the university and/or in the community (local, state, national and/or international) at the completion of the program	50%	0%*	22.22% !	20% !

\* Did not have any graduates

! Majority of our students work full-time, as all of the courses the program is offered in the evening or online. It is difficult to get students involved in service projects due to them not being available during weekdays. The faculty need to do a better job at defining what “counts” as service so students can properly assess these outcomes.

**1.2d. Description of the manner in which the self-study document was developed, including effective opportunities for input by important program constituents, including institutional officers, administrative staff, faculty, students, alumni and representatives of the public health community.**

CEPH accepted our application for pursuit of accreditation in June 2014. The MPH Program Coordinator reviewed the accreditation procedures and criteria and attended the orientation workshop in July of that year. Upon returning from the workshop and informing the School Chair about the process, the Program Coordinator developed a timeline for conducting the self-study.

In the fall of 2014 all primary faculty and School Chair were assigned criterion to start to complete. The College Dean, Registrar and Office of Institutional Research were contacted to assist in the collection of the necessary data. The first MPH program meeting was held in August of 2014 and discussed the changes in the curriculum, handbook and accreditation. Students were allowed to review and provide feedback on the curriculum, competencies and outcomes measures during the annual program meeting. Next, the Advisory Board was created and met for the first time in October of 2014 to discuss the accreditation process, and review the program mission, goals, objectives, outcomes and competencies that had been created by the primary faculty. All the feedback was reviewed by the primary faculty and incorporated as appropriate.

In the spring of 2015 work continued on the assigned criterion. Primary faculty met periodically to discuss progress and to develop evaluation instruments. In March of 2015 the Advisory Board met again to discuss processes and procedures for preceptor approval, waiver of field experience, field experience assessments and student, exit and employer/preceptor surveys. Again, all the feedback was reviewed by the primary faculty and incorporated as appropriate. Prior to the CEPH consultation visit in June of 2015, the consultant, Ms. Mollie Mulvanity, was provided a 109 page preliminary draft of the self-study to review and provide feedback. During her visit she met with the Dean of the Graduate School, Dean of the College, School Chair and primary faculty. The entire document was reviewed with the primary faculty during this visit which provided need clarity and direction.

In the fall of 2015 the primary faculty incorporated Ms. Mulvanity's feedback and further developed the assigned criterion. A program meeting was held in August to get student feedback on the competencies, mission, goals, objectives, outcome measures and measurement tools. In November the Advisory Board met to be updated on the progress of the self-study and again provide feedback on the mission statement, competencies, goals, objective, outcome measures and measurement tools. The primary faculty started

meeting monthly to discuss program issue and accreditation progress. Each MPH faculty member was assigned a criterion in which to work on prior to the next meeting. At the next monthly meeting criterion were rotated to another MPH faculty member until all three members reviewed each section. At the end of the semester the entire document was revamped based upon the work completed.

In the spring of 2016 primary faculty were asked to work on specific components each month (January – Criterion 1; February – Criterion 2; March Criterion 3 and ERF; April – entire document and ERF). At the end of the month that criterion was submitted to a CEPH consultant for review. The primary faculty along with the College Dean and School Chair worked to complete the entire document and electronic resource file to be presented to the Advisory Board in May for their input on the final preliminary draft that was due to CEPH the first of June. After receiving feedback from the Advisory Board, recommended corrections were made as appropriate and the preliminary self-study was submitted.

**1.2e. Assessment of the extent to which this criterion is met, and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

This criterion is met with commentary

**Strengths:**

Direct, indirect, subjective and objectives measure are used to evaluate performance from different perspectives. Goals and objectives have been extensively reviewed by all program constituents and fruitful discussions occurred during these reviews. Stretch outcomes being set will continue to push the program to achieve greater accomplishments.

**Weaknesses:**

A number of weaknesses were discovered during this self-study. Only one was a unexpected (instructional objective 2, measure 3); the others (scholarship objective 1, measures 2 and 3; scholarship objective 2, measures 1,2,3; and service objective 2, measure 2) were developed with the knowledge that these were areas that need to be greatly improved.

**Plans:**

Continued focus on competencies throughout the curriculum by explicitly connecting lectures and assignments to competencies. The following changes were made to the requirements for the first credit hour (MPH 611) of Applied Research starting in the fall of 2016: 1) Requiring a research proposal to the student's research committee.

Previously only the research chair approved the research. 2) Students must identify competencies that will be met through the research process during the proposal. In the past this was addressed near the end of the process. 3) Full committee review of introduction, background and methodology sections and 4) required attendance of at least one MPH student's applied research presentation.

Emphasize the benefits of disseminating research throughout the program, destigmatize the research process, encourage students to assist each other and faculty and consider requiring abstract submission and/or professional presentation. Starting the fall of 2016 it is now a requirement for students to complete a University presentation at either SOURCE or another University venue. Professional presentation can be substituted for that requirement.

Ensure that faculty invite students to participate in faculty led service opportunities and clarify those opportunities as separate from other opportunities. Revisit the evaluation tool for these outcome measures.

Continue to monitor and evaluate the outcomes and methods used to collect data. Build upon this foundation and incorporate necessary changes as we become aware of them.

**Criterion 1.3 The program shall be an integral part of an accredited institution of higher education**

**1.3a. A brief description of the institution in which the program is located, and the names of accrediting bodies (other than CEPH) to which the institution responds.**

Lenoir-Rhyne University (LRU), founded in 1891, is a co-educational liberal arts institution of higher learning affiliated with the North Carolina Synod of the Evangelical Lutheran Church in America (ELCA). The University has had a series of name changes over its 125 year history including the most recent change to Lenoir-Rhyne University in 2008. The University has grown to encompass two additional instructional sites, one located in Asheville, NC (The Center for Graduate Studies of Asheville) and the other in Columbia, SC (Lutheran Theological Southern Seminary (LTSS) and The Center for Graduate Studies of Columbia). The University's main campus is located in northeast Hickory, NC. The MPH program is offered both in Hickory and Asheville.

Enrollment for the fall semester of 2015 at LRU was 2303 (1587 undergraduate, 716 graduate (includes non-traditional adult learner)) students. Out of the 1726 full-time students, 77 percent are from the state of North Carolina, 23 percent are minority, 3percent are international students, and 59 percent are female. One-hundred and ten of the 126 (87 percent) of full time LRU faculty holds Doctoral or terminal degrees. The average student faculty ratio is 12:1.

Graduate programs are administered by the series of four Colleges (College of Health Sciences, College of Professional and Mathematical Studies, College of Arts and Sciences and the College of Education and Human Services), each representing programs and schools with similar backgrounds and areas of interest. The MPH program is in the College of Health Sciences (CHS) in the School of Health, Exercise and Sport Science (HESS). LRU currently has 21 Master degree programs, 5 programs are located on the Hickory campus only: Athletic Training, Liberal Studies, Leadership, Physician Assistant Studies and Occupational Therapy (expanding to Columbia, SC in 2017) . Two are only in Asheville, Writing and Sustainability Studies and two are located both in Hickory and Asheville, Business Administration and Public Health. Clinical Mental Health and School Counseling are offered on all three campuses and there are six fully online programs: Community College Administration, Exercise Science, Teaching Secondary Education, Online Teaching and Instructional Design, Human Services, and Nursing. LTSS offers four programs exclusively consisting of: Christian Ministry, Divinity, Religion, and Sacred Theology

A Board of Trustees comprised of 29 members elected to three year rotating terms from among clergy, business and civic leaders as well as the President of the University and Bishop of the Synod is the governing body. At least six clergy from the ELCA must serve on the Board of Trustees. The majority of the board must be members in congregations of the ELCA.

The Southern Association of Colleges and Schools Commission on Colleges accredits Lenoir-Rhyne University as a whole. The other organizations that accredit specialized programs are shown in Table 1.3a.

Program	Accrediting Organization
Institution	The Southern Association of Colleges and Schools Commission on Colleges
Education	The National Council for Accreditation of Teacher Education
Occupational Therapy	The Accreditation Council for Occupational Therapy Education
Business	Accreditation Council for Business Schools and Programs
Nursing	Commission of Collegiate Nursing Education
Dietetic Internship	Accreditation Council for Education in Nutrition and Dietetics
Athletic Training	Commission on Accreditation of Athletic Training Education
Counseling	Council for Accreditation of Counseling and Related Educational Programs
Physician's Assistant	Accreditation Review Commission on Education for the Physician Assistant



**1.3b. One or more organizational charts of the university indicating the program’s relationship to the other components of the institution, including reporting lines and clearly depicting how the program reports to or is supervised by other components of the institution.**

Chart 1.3b1. Organizational Chart – Academic Affairs – General

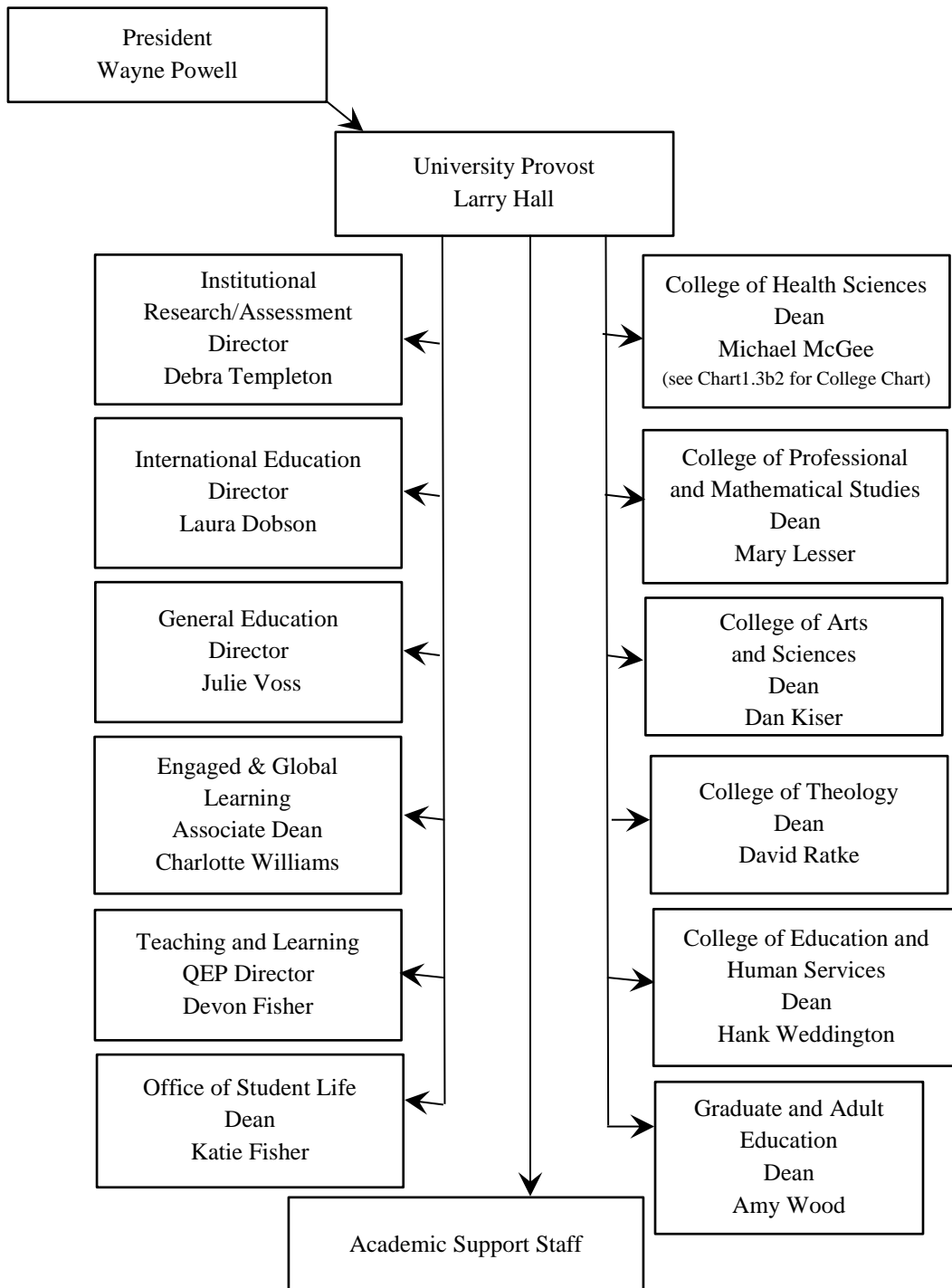


Chart 1.3b2. Organizational Chart – Schools within the College of Health Sciences

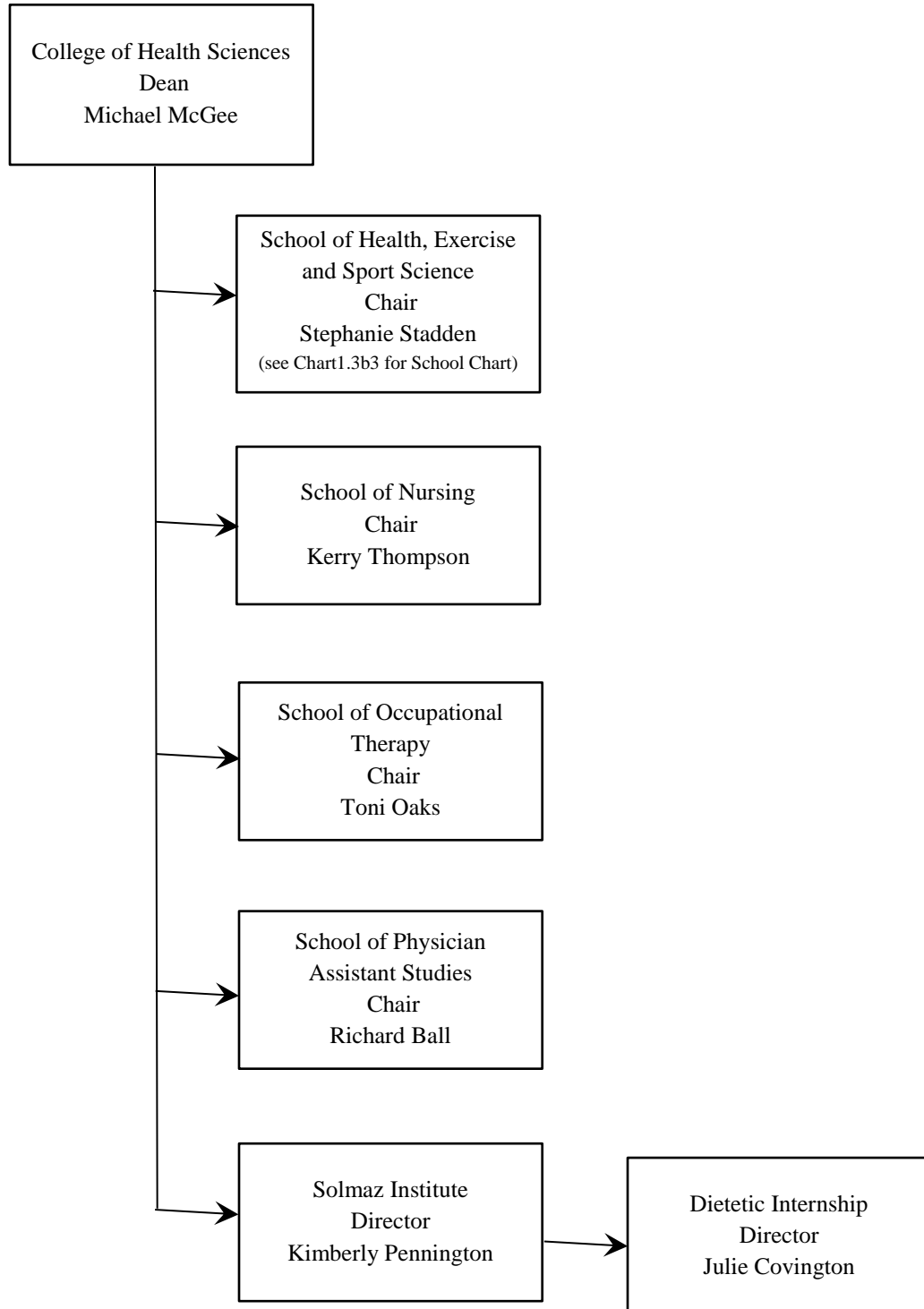
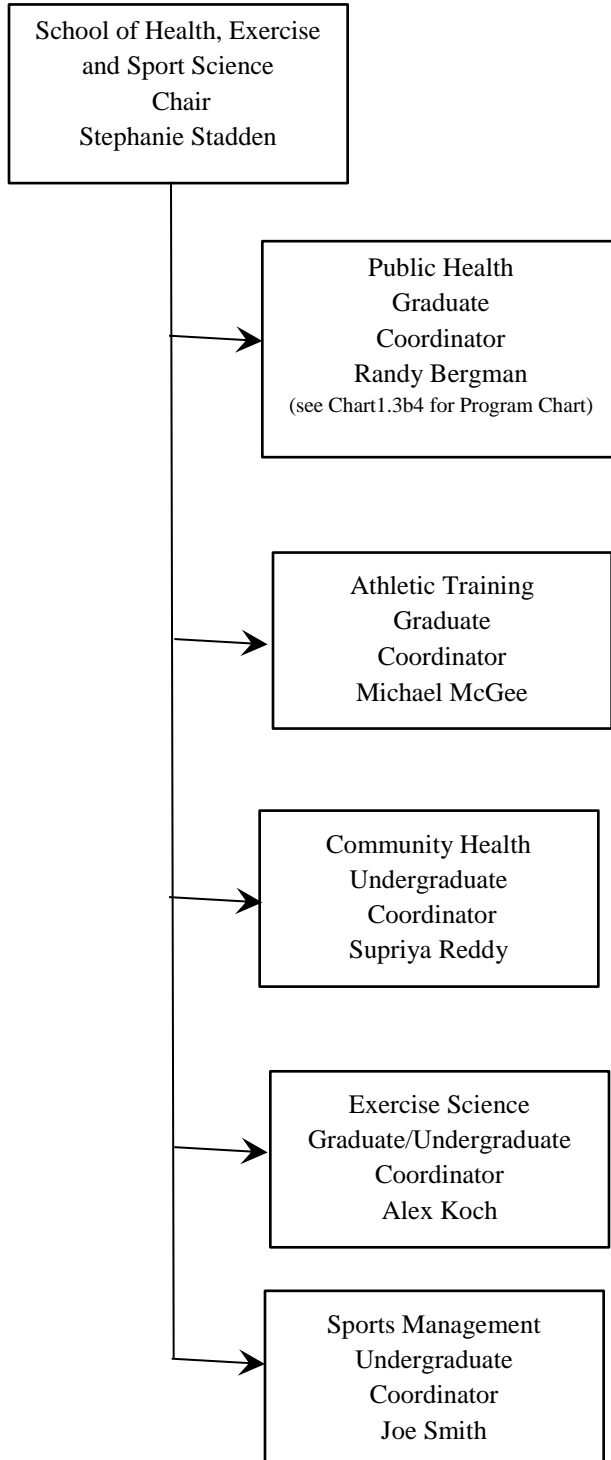


Chart 1.3b3. Organizational Chart – School of Health, Exercise and Sport Science



**1.3c. Description of the program's involvement and role in the following:**

**– budgeting and resource allocation, including budget negotiations, indirect cost recoveries, distribution of tuition and fees and support for fund-raising**

Budgetary control is the responsibility of the Vice President for Administration and Finance (VPAF). The VPAF establishes an institutional budget for a given fiscal year with input from the University Institutional Budget Committee. Once the Board of Trustees approves the institutional budget, appropriate unit budgets are established and distributed to cost center managers. Monthly budget reports are also generated and distributed to cost center managers. The University Provost prepares and prioritizes adjustments and/or new requests for funds in the annual budget planning process, authorizes general budgetary allocations each year, authorizes all specific goods and services/capital expenditures greater than \$1,000, generally oversees budget expenditures to promote efficient use of resources and avoid deficit spending and authorizes any reimbursements to Deans.

The MPH Program Coordinator consults with the MPH faculty to identify priorities for academic and related program resources. The Coordinator submits request to the Chair of the School of HESS for consideration. The MPH program does not have a specific budget, rather the School of HESS serves as the primary cost center for the MPH program along with the other programs housed in the school: MS in Athletic Training, MS in Exercise Science, BA in Sports Management, BS in Community Health, and BS in Exercise Science. Requests for academic resources (education supplies, reference texts, computer programs, AV supplies and office supplies) are made through the School of HESS and must be approved by the School Chair and College of Health Sciences Dean. The College Dean oversees budgetary management, authorizes expenditures in the goods and services/capital budgets received from School Chairs, prioritizes and makes recommendations to the Office for Academic Affairs regarding adjustments and/or new requests for funds in the annual budget planning process and authorizes any reimbursements to School Chairs.

The School Chair oversees monthly goods and services expenditures in the school (and related) budgets, consults with various programs and faculty about use of budgeted funds, authorizes specific expenditures in the school budgets and related cost centers and makes annual requests and/or recommendations in the annual budget planning to the Dean. There is no set amount allotted per degree program, instead, the School Chair is charged with managing the budget and allocating funds as needed and available. The School of HESS operates with a flexible line-item budget where funds can be transferred from line to line as needed, as long as the bottom line balances.

Each year, the School of HESS is allowed to make capital requests for large ticket items (greater than \$2500.00). Academic capital requests are considered by the Provost's Council and prioritized. The institutional budget committee then considers all capital requests (academic and non-academic) to determine which items are funded for the following year.

MPH students can request support for research and presentations through the School of HESS as well as through the Graduate Student Organization. Graduate students apply for assistantships throughout the University.

The MPH Program Coordinator does not make decisions related to distribution of indirect cost recoveries and distribution of tuition and fees. All tuition and fees are collected by the University and applied to the overall University budget. These funds are not applied to School or Program budgets. This is consistent with all academic Schools and Programs. The MPH program does not have indirect cost recoveries at this time.

**– personnel recruitment, selection and advancement, including faculty and staff**

Selection of faculty to teach in the MPH program follows the same process as any faculty search at Lenoir-Rhyne University in that they are allocated at the university level. In consultation with the Office for Academic Affairs, college deans will work with their School Chairs to project faculty needs for their educational programs. Projections must result from thorough and careful study. Individually, the college deans will provide prioritized requests for faculty positions (position vacancies and new positions) to the University Provost near the beginning of fall semester each year. Collectively, these same deans will review these requests and recommend position priorities to the Provost. The Provost will share these prioritized requests with the Academic Program Committee (APC) for additional advice and/or recommendations. The Provost will make final decisions on positions based upon available budgetary resources. Any faculty lines requiring additional new expenditures will be forwarded to the University Institutional Budget Committee for review and recommendation.

Faculty searches at LRU seek to enhance qualified and diverse applicant pools, to provide thorough and thoughtful assessment of candidates, and to make appointments that maximize the quality of the educational experience on our campus. The search for a new full-time faculty member will commence only with the written approval of the Provost, who will appoint the Search Committee in consultation with the College Dean. A search committee normally will consist of three to five faculty members; usually, but not necessarily, the School Chair will be on the committee and, as appropriate, may also serve as its Chair. One member of the committee will be appointed from outside the

school. Graduate faculty must have earned the terminal degree or have exceptional expertise in their fields. They must have undertaken formal advanced study or demonstrated competence through independent scholarly activities in each field of specialization that they teach. A program who wishes to have a non-terminally qualified instructor teach a graduate-level course must seek and receive approval from the Provost.

Evaluation of faculty who teach and advise in the MPH program follows the same process as any faculty evaluation at Lenoir-Rhyne University. The Annual Performance Evaluation Plan is designed to encourage continuing innovation and improvement and to align individual professional development (short-term and long-term) of faculty members with the strategic and educational emphases of our University and its programs. The annual report is submitted directly to the College Dean at the beginning of the spring semester. Additionally, second-year and fourth-year continuation packets are submitted to the College Dean, the University's Professional Review Committee and Provost for a more in-depth evaluation of the faculty member and the progress toward promotion and/or tenure.

The School Chair receives and reviews all student course evaluations. As necessary the Chair will discuss evaluations with instructors and make the Program Coordinator aware of possible issues. After the School Chair brings the issue to the Program Coordinator's attention, the Program Coordinator can request to view the student course evaluations to determine if a course or instructor change is needed. The MPH Program Coordinator does not review or make decisions related to continuation, promotion and tenure of faculty. Annual faculty reports and promotion and tenure applications are submitted directly to the Dean.

The MPH Program Coordinator has the authority to address all course issues. The MPH Program Coordinator assigns MPH courses to specific faculty members after discussing with the MPH faculty the courses that will be offered in the upcoming term. The School Chair and college dean approve these assignments prior to setting the final course schedule. In the case that a part-time or adjunct instructor is needed a job posting is announced on the University's Human Resource website. It is the responsibility of the MPH Program Coordinator to review all applications, interview potential candidates and recommend to the School Chair the individual to be hired for this position. While the MPH Program Coordinator works closely with the School Chair, all main functions are distinct.

**– academic standards and policies, including establishment and oversight of curricula**

Lenoir-Rhyme University's shared governance structure gives the faculty direct input in academic policies and structures, including the establishment and oversight of curricula. On the graduate level, programs develop and approve all proposals for new programs or significant changes to the curriculum and then submit it to the School of HESS for approval. After HESS approval the proposal is forwarded onto the Graduate Studies Council (GSC) for review and approval. The GSC is comprised of all graduate Program Coordinators, School Chairs and the Dean of Graduate Studies. Upon GSC approval the proposal is sent on to the University's Academic Program Committee (APC). The APC is chaired by the University Provost (non-voting), five Ex Officio, non-voting members (Registrar, library, honors, core, and a student), and eleven faculty representatives (elected through a vote of full-time faculty to a three year term) representing the four colleges and LTSS. On approval the proposal is sent to the faculty to be voted upon during the monthly University wide faculty meetings for final approval or rejection.

**1.3d. If a collaborative program, descriptions of all participating institutions and delineation of their relationships to the program.**

Not applicable

**1.3e. If a collaborative program, a copy of the formal written agreement that establishes the rights and obligations of the participating universities in regard to the program's operation.**

Not applicable

**1.3f. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

This criterion is met.

**Strengths:**

The MPH Program is an integral part of an accredited university, housed in an appropriate College, and reports directly to the School Chair as do heads of all other programs in the School. The University has clear processes and relationships in place for budgeting, personnel actions, and approval of curricula. These enable the MPH Program to secure the resources it needs to fulfill its mission.

Weaknesses:

The MPH program does not have a separate budget but rather the School has a pool of money to distribute equally, based upon need, to all the programs in the School.

Plans:

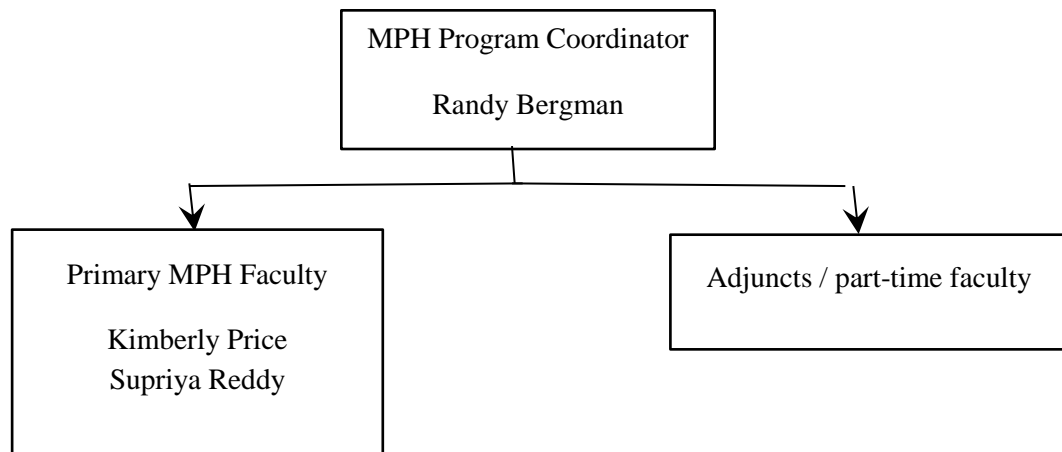
Further discussions with the School Chair and Dean of the College about the development of a program specific budget are being planned.



**Criterion 1.4 Organization and Administration.** The program shall provide an organizational setting conducive to public health learning, research and service. The organizational setting shall facilitate interdisciplinary communication, cooperation and collaboration that contribute to achieving the program’s public health mission. The organizational structure shall effectively support the work of the program’s constituents.

**1.4a. One or more organizational charts delineating the administrative organization of the program, indicating relationships among its internal components.**

Chart 1.4a. Organizational Chart – MPH Program



**1.4b. Description of the manner in which interdisciplinary coordination, cooperation and collaboration occur and support public health learning, research and service.**

The Community Health undergraduate degree operates separately from the MPH program with the exception of the Bridges to Dreams option (explained in Criteria 2.11). At the completion of the curriculum students are eligible for the Certified Health Education Specialist exam.

The MPH Program Coordinator is responsible for the day-to-day operation of the program and works closely with the school and college leadership. The university leadership is committed to the MPH program and encourages and supports any collaborative efforts in teaching, scholarship and service. The university recognizes the

importance of collaborative efforts to use resources efficiently, reduce overlap of services and expand knowledge bases outside of an individual's discipline. Evidence of collaborative efforts include:

1. Grand Rounds. Annually, students participate in an interdisciplinary presentation of a case study through the continuation of care. Disciplines represented include: community health; public health, athletic training, physician's assistant, nursing, occupational therapy, dietetics, exercise science and counseling.
2. Dietetic Internship. Students in the Dietetic Internship (DI) have the opportunity to matriculate into the MPH program upon completing of the DI program.
3. COU 535 – Diversity for Helping Professionals course. Required course for both MPH and Counseling students.
4. Physician's Assistant Program. MPH faculty teaching courses in the PA program.
5. MPH 530 – Research for the Health Professionals. Required option for graduate Exercise Science students.
6. Elective course options. MPH students have the option to take pre-approved elective courses in Education, Business or Counseling.
7. Rainbow In My Tummy. An early childhood nutrition program designed by early education professionals to improve the quality of food served to young children in childcare settings. Faculty have ongoing research and service programs and engage students in those activities.
8. AAP Visiting Lecture Program. Program covering the risk of secondhand and thirdhand smoke co-sponsored by the LR's CHS and Cabarrus Health Alliance. Presented at Levine Children's Hospital in Charlotte, NC and all CHS students.

**1.4c. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

This criterion is met.

**Strengths:**

Lenoir-Rhyne University has a longstanding history of fostering an environment conducive to teaching, research and service. Public health, by its nature, is an interdisciplinary field of study and is an integral part of a School and College that

facilitates interdisciplinary communication, cooperation and collaboration both internally and externally.

Weaknesses:

None determined.

Plans:

The MPH program plans to continue to provide its students with as many collaborative opportunities. Additionally, dual degree programs are in the developmental stage with MBA, MSN and PA.

**Criterion 1.5 Governance. The program administration and faculty shall have clearly defined rights and responsibilities concerning program governance and academic policies. Students shall, where appropriate, have participatory roles in the conduct of program evaluation procedures, policy setting and decision making.**

**1.5a. A list of standing and important ad hoc committees, with a statement of charge, composition and current membership for each.**

The primary MPH faculty is involved in all aspects of the program and operates as a Committee of the Whole. The MPH faculty started meeting monthly in the fall of 2016 (See ERF Governance Documents/Faculty)

The MPH Advisory Board is composed of 18-25 members (7 will be LR faculty members (CHS Dean; School of HESS Chair; DI Program Coordinator; Asheville faculty member and 3 MPH faculty)) and meets two times an academic year, once in the fall and once in the spring. This Board has the potential to be made up of: first-year MPH students; continuing MPH students; program alumni; LR faculty and professional members. Students will be asked to serve two-year terms, should they graduate within their term they may continue to serve as alumni. Professional members, alumni and Asheville faculty member will be asked to serve three-year terms. The CHS Dean, HESS Chair, DI Program Coordinator and MPH faculty will not have term limits. The Board is charged with promoting the program among various constituencies and providing recommendations to the program's faculty regarding curriculum and capstone experiences to assure that programming is current to meet the needs of a public health professional.

The Board's current membership is as follows:

Name	Relationship	Year of Service
Michael McGee	CHS Dean / LR faculty	3
Stephanie Stadden	HESS Chair / LR faculty	2
Julie Covington	DI Program Coordinator	3
Randy Bergman	MPH Program Coordinator	3
Kimberly Price	MPH faculty	2
Supriya Reddy	MPH faculty	3
Myra Jordan	Counseling faculty, Asheville	2
Emma Sellers	LR Multicultural Affairs Director	1
Vickie Bradley	Alumni	3
Brittany Dobbins	Alumni	3

Name	Relationship	Year of Service
Abby Smith	Alumni	3
Sandi Rice	Alumni	2
Adrienne Gilbert	Professional member w/ MPH	3
Jaime Lang	Professional member w/ MPH	3
Amy McCauley	Professional member	3
Zack King	Professional member w/ MPH	2
Leeanne Whisnant	Professional member	2
Emily Killian	3 <sup>rd</sup> year student	2
Nitin Joshi	2 <sup>nd</sup> year student	2
Julia Agawu	2 <sup>nd</sup> year student	2
McKenzie Benson	2 <sup>nd</sup> year student	2
Megan Blanco	2 <sup>nd</sup> year student	2
Ashlyn Hartsoe	1 <sup>st</sup> year student	1
Courtney Brown	1 <sup>st</sup> year student	1
Kimberly Leach	1 <sup>st</sup> year student	1
Kendall Smith	1 <sup>st</sup> year student	1

See ERF Governance Documents /Advisory Board

**1.5b. Identification of how the following functions are addressed within the program's committees and organizational structure:**

**– general program policy development**

The MPH Program Coordinator conducts faculty meetings prior to the start and near the end of every semester. The purpose of these meetings is (a) to review and discuss questions and concerns within the programs, student progress and concerns, curricular issues, overall concerns that need to be addressed in the faculty or student handbook, policies and (b) to review progress on the self-study for CEPH accreditation. Decisions regarding the program are made and put into effect as appropriate or sent to the college and/or provost if additional approval is needed at those levels.

**– planning and evaluation**

During program meetings discussion on evaluation issues related to the CEPH self-study. We are always looking for new and innovative ways of assessing student performance and competencies. We discuss proposed changes in evaluation tools and implementation. The Program Coordinator will make changes to the handbook, notify students, and implement changes with the start of the next semester or the following academic year, depending on the nature of the change. Faculty engage students about proposed changes to evaluation methods by inviting them to program meetings, having them on our Advisory Board and asking them during regularly scheduled courses.

**– budget and resource allocation**

The Program Coordinator solicits input from the faculty about budget and resource requests on an annual basis. Requests for academic resources (education supplies, reference texts, computer programs, AV supplies and office supplies) are made through the School of HESS and must be approved by the School Chair and College of Health Sciences Dean. Additionally, MPH faculty members can make a request anytime during the AY directly to the School Chair.

There is no set amount allotted per degree program, instead, the School Chair is charged with managing the budget and allocating funds as needed and available. The MPH program receives consistent allocations for professional membership, student travel and meeting supplies. To date no variations in budgetary needs have been identified. The School of HESS operates with a flexible line-item budget where funds can be transferred from line to line as needed, as long as the bottom line balances. If there is a need for an adjunct to cover a course or to serve as a co-instructor, the MPH Program Coordinator makes that request to the School Chair the semester prior to the course being offered. The Chair seeks approval from the College Dean; all adjuncts must be approved by the College Dean prior to employment. This process would be followed for any personnel request. These positions would be paid out University funds and not school funds.

**– student recruitment, admission and award of degrees**

Promotional materials and recruiting materials for the MPH are primarily covered by Graduate Studies and Enrollment Management. There have been occasions where the School of HESS has contributed funds for recruitment tables at local conferences and conference sponsorship. Faculty travel between campuses is also reimbursed using both the Graduate Studies and School of HESS cost centers.

The University's Enrollment Management (EM) staff and the MPH Program Coordinator are in regular communication about student recruitment and open houses for the program. Student recruitment is an ongoing process that is led by our enrollment management team. The Program Coordinator and other school faculty are active participants in the recruitment process by attending open house events, working vendor booths at community events and professional conferences, writing personal letters to inquiring students and scheduling meetings with local organizations and businesses who employ individuals in related fields. The primary faculty member in Asheville coordinates student recruitment for the Asheville Campus.

The Program Coordinator is charged with developing program-level admission standards that meet or exceed the minimum standards set forth by the Graduate School. Admission

standards must be approved by the School Chair and College Dean, and then submitted for approval by the Graduate Studies Council. Based upon these standards the University's Enrollment Management office is charged with making admissions decisions with the verification of the Program Coordinator. The university uses the Recruit admissions management system to streamline this process. The Program Coordinator, Asheville faculty and all Enrollment Management staff have access to Recruit to enter applicants, review files and documents communications with potential students. With rolling admissions an applicant is informed within a two-week period if they have been accepted (ERF Governance Documents/Admissions).

Students file a degree completion form with the Registrar's Office prior to their final semester. The Registrar's Office staff review each student's transcript to assure that the student has completed all requirements for the MPH degree. Questions regarding student status are referred to the MPH Program Coordinator. When all degree requirements have been satisfied and final grades are posted, the student is eligible for graduation and awarded the MPH degree.

**– faculty recruitment, retention, promotion and tenure**

The MPH Program Coordinator does not review or make decisions related to continuation, promotion and tenure of faculty. Annual faculty reports and promotion and tenure applications are submitted directly to the Dean as outlined in the Faculty Handbook. Indirectly, the annual activity reports reflect teaching, service and scholarship production over the past calendar year. This report becomes part of the faculty member's file and is used in the Promotion and Tenure Review Process. The College Dean and School Chair review the annual reports and may use the annual reports to confer with tenure-track faculty members to review progress toward promotion and/or tenure. Additionally, second-year and fourth-year continuation packets are submitted to the College Dean, the University's Professional Review Committee and Provost for a more in-depth evaluation of the faculty member and the progress toward promotion and/or tenure. Due to the CEPH self-study, MPH faculty are now asked to submit their annual faculty reports to the Program Coordinator to collect the information necessary for outcomes measures.

**– academic standards and policies, including curriculum development**

The MPH faculty have the ability to set program academic standards and policies as they deem necessary as long as they do not conflict with or set a lower standard than set forth by the Graduate School. Changes to admission, probation and dismissal standards must be approved by the Chair, Dean and graduate school. All standards and policies are

documented in the MPH Handbook as well as the Graduate School section of the university catalog.

The MPH faculty meets prior to the start and near the end of every semester specifically to review standards, policies and courses from the previous or upcoming semester. Suggestions from the Advisory Board, students and comments noted on the Preceptor/Employer, current student and exit surveys are discussed. Decisions on updating policies, standards, courses and/or propose new courses to develop are made during these meetings.

**– research and service expectations and policies**

The School Chair reviews each faculty member's annual report and after discussing each with the College Dean, meets with each Primary Faculty member to review research and service productivity. Any perceived deficiencies for achieving promotion and/or tenure are discussed at this time. Lenoir-Rhyne follows Boyer's Model for Scholarship and does not have set publication requirements for faculty. All research and service expectations are outlined in the Faculty Handbook.

The Program Coordinator discusses research and service expectations, including reporting policies, with all new faculty hires. The Program Coordinator also reviews each faculty member's annual report and meets with each faculty member to review research and service productivity as related to program specific expectations. If there are any identified deficiencies, an action plan will be developed for the faculty member. If the action plan is not being adhered to by the faculty member, a meeting will be set up with the School Chair, possible adjustments to the action plan will be made and will be noted in the annual evaluation.

**1.5c. A copy of the bylaws or other policy document that determines the rights and obligations of administrators, faculty and students in governance of the program, if applicable.**

Not applicable

**1.5d. Identification of program faculty who hold membership on university committees, through which faculty contribute to the activities of the university.**



Table 1.5d. MPH Program Faculty University Committee Service		
Faculty Member	Academic Year	University Committee
Randy Bergman	2015 – present	Preliminary Assessment Team – Doctor of Health Science
	2015 – present	Tobacco Policy Task Force, chair
	2014 – present	MPH Committee of the Whole
	2014 – present	Academic Policies Committee
	2014 - 2015	AAP Visiting Lecture Program Committee, chair
	2013 – present	Environmental Stewardship Committee
	2013 – present	Waste Reduction and Recycling sub-committee, chair
	2013 – present	Faculty and Staff Wellness Committee
	2012 – present	Graduate Studies Council
	2013 – present	Graduate Student Services Task group, chair
	2012 – present	Graduate Student Organization, advisor
	2013 – present	Dietetic Internship Advisory Board
	2013-2015	CHS Research Committee, chair
2013-2014	Technology Task Force	
2013-2014	Dual degree ad-hoc committee, chair #	
Kimberly Price*	2016 - present	Judicial Review Committee
	2015 - present	Grand Rounds Committee
	2015 - present	Advisory Board, Center for Teaching and Learning
	2014 - present	MPH Committee of the Whole
	2014 - present	Recruiter for MPH in Asheville
Supriya Reddy	2016 - present	Instructional and Student Life Committee
	2015 - present	Engaged Scholars Program
	2014 - 2015	Grand Rounds Committee, chair
	2014 – 2015	AAP Visiting Lecture Program Committee
	2014 – present	MPH Committee of the Whole
	2014 – present	Healthcare Symposium Planning Committee
	2013 – present	Campus Crusade for Christ, advisor
	2013 – 2016	Convocation Committee
	2013 - 2016	Grand Rounds Committee

# Committee of the Graduate Studies Council, not a MPH program committee

\*First year faculty member AY 2014-2015

**1.5e. Description of student roles in governance, including any formal student organizations.**

In 2012 University graduate students formed the Graduate Student Organization (GSO) to serve as their official organization under the Student Government Association umbrella. Students collectively created the GSO Constitution (ERF Governance Documents/Graduate Student Organization) and executive board members are selected annually. GSO members participate in the orientation of new graduate students and are encouraged to actively engage in planning awareness and educational activities for the Lenoir-Rhyne campus and surrounding community.

MPH students are engaged for program feedback in four main ways: invited to be members of the Advisory Board (up to 10 first year and continuing students); annual program meetings; current student survey; and in regularly scheduled courses. Each of these mechanisms provide the students with the opportunity to participate in the decision making process regarding competencies, evaluation procedures and curricula (ERF Governance Documents/Program).

**1.5f. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

This criterion is met.

**Strengths:**

Lenoir-Rhyne University is committed to the MPH program as demonstrated by the recruitment of students through EM, student services, faculty recruitment, retention and development, including a formal mentoring program for junior faculty.

The MPH program governance structure is appropriate for the number of faculty and size of the program. MPH faculty contributes to the university service at the level appropriate to their rank, years of services at the university and other responsibilities.

**Weaknesses:**

The MPH Advisory Board has played a limited role in governance.

Primary faculty have heavy responsibilities for governance at the program level given their teaching, research and service responsibilities.

Currently there is no MPH specific student organization.

Plans:

The MPH program plans to continue to involve both the Advisory Board and MPH students in annual activities. Additionally, we are looking into the possibility of developing a Health Sciences student organization.

**Criterion 1.6 Fiscal Resources. The program shall have financial resources adequate to fulfill its stated mission and goals, and its instructional, research and service objectives.**

**1.6a. Description of the budgetary and allocation processes, including all sources of funding supportive of the instruction, research and service activities. This description should include, as appropriate, discussion about legislative appropriations, formula for funds distribution, tuition generation and retention, gifts, grants and contracts, indirect cost recovery, taxes or levies imposed by the university or other entity within the university, and other policies that impact the fiscal resources available to the program.**

Academics are divided into six categories of cost centers: College of Arts and Sciences; College of Professional and Mathematical Studies; College of Health Sciences; College of Education and Human Services; General Academics and Institutes; and Office for Academic Affairs. Expenditure requests will require the signed approval of both the cost center manager and the administrator responsible for the cost category (normally the college dean or Provost).

All requisitions for materials, equipment, and services must be channeled through cost center managers (normally Chairs and/or directors) and college deans and/or the Provosts.

All purchases for \$2,500 or more require three written bids to be submitted, along with the signed purchase requisition, to the purchasing department of the business office.

Each year, the School of HESS is allowed to make capital requests for large ticket items (greater than \$2500.00). Academic capital requests are considered by the Provost's council and prioritized. The institutional budget committee then considers all capital requests (academic and non-academic) to determine which items are funded for the following year.

All Lenoir-Rhyne faculty members are allotted professional development funds annually. All requests are submitted to the School Chair for approval and forwarded to the Provost for final approval and allocation. If a faculty member requires funds over the annual allotment, general funds are available upon request and approval from the School Chair and Provost.

The program currently does not have any indirect cost recovery because grants do not offset faculty salaries.

- 1.6b. A clearly formulated program budget statement, showing sources of all available funds and expenditures by major categories, since the last accreditation visit or for the last five years, whichever is longer. If the program does not have a separate budget, it must present an estimate of available funds and expenditures by major category and explain the basis of the estimate. This information must be presented in a table format as appropriate to the program. See CEPH Data Template 1.6.1.**

Fiscal Year	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016
<b>Source of Funds</b>					
Cost per Credit Hour <sup>1</sup>	\$415	\$450	\$475	\$500	\$520
Tuition & Fees <sup>2</sup>	\$53,535	\$151,200	\$187,150	\$195,000	\$238,160
University Funds <sup>3</sup>	\$2000	\$2000	\$2000	\$2000	\$2000
Other (travel funds) <sup>4</sup>	\$950	\$950	\$1900	\$2850	\$2850
Student Travel <sup>5</sup>	\$150.00	\$150.00	\$150.00	\$150.00	\$150.00
<b>Total</b>	\$56,635	\$154,300	\$191,200	\$200,000	\$243,160
<b>Total (-) Tuition and Fees</b>	\$3100.00	\$3100.00	\$4050.00	\$5000.00	\$5000.00
<b>Expenditures</b>					
FT Faculty Salaries & Benefits <sup>6</sup>	\$54,940	\$69,850	\$105,030	\$146,688	\$151,393
Adjunct Faculty Salaries <sup>7</sup>	\$8,550.00	\$8,550.00	\$17,100.00	\$5,700.00	\$4,000.00
<b>Total</b>	\$63,490	\$78,400	\$122,130	\$152,388	\$155,393

Note: 100% of funding for the MPH comes directly from University Funds. The Provost's Academic Budget covers all salary and benefits for faculty, staff and adjunct instructors. The School of HESS budget covers instructional supplies for the various programs in the School. There is no separate MPH budget. The faculty of the MPH program can request funds from the total School budget. The reported salary and benefit numbers included in the table reflect only the percentage of faculty and adjunct load devoted to the MPH program, not the full salary and benefits of the various instructors.

<sup>1</sup> Cost per Graduate Credit Hour

<sup>2</sup> Tuition and Fees generated by MPH courses (fundable credit hour x cost per credit hour); Hours per academic year: 11-12: 129; 12-13: 336; 13-14: 394; 14-15: 390; 15-16: 458. (Note: Tuition and Fees are not deposited into MPH or School of HESS Budget, all tuition and fees support the University Budget)

<sup>3</sup> University Funds: The MPH program is housed in the School of Health, Exercise and Sport Science with a shared budget. The amount presented is a percentage of the School budget since the MPH program does not have a separate account. There is no set amount designated for the MPH program.

<sup>4</sup> Other: Travel Funds represents the total amount allotted for MPH Program faculty (\$950.00/faculty member annually; 2011-2013 1 faculty, 2013-2014 2 faculty, 2014-present 3 faculty)

<sup>5</sup> Student Travel-The School of HESS has consistently provided travel funds for van rentals in various HESS programs including the MPH program. The amount varies each trip but averages @ \$150.00 per trip.

<sup>6</sup> Faculty Salaries & Benefits: Amount is modified to only reflect the percentage of faculty salary/benefits from MPH workload. Each faculty member also teaches in other areas.

<sup>7</sup> Adjunct Faculty Salaries: From 2011 - Spring 2015 Adjunct Faculty received \$950.00 per credit hour; Beginning in the Fall of 2015, Adjunct Faculty received \$1000.00 per credit hour.

**1.6c. If the program is a collaborative one sponsored by two or more universities, the budget statement must make clear the financial contributions of each sponsoring university to the overall program budget. This should be accompanied by a description of how tuition and other income is shared, including indirect cost returns for research generated by public health program faculty who may have their primary appointment elsewhere.**

Not applicable

**1.6d. Identification of measurable objectives by which the program assesses the adequacy of its fiscal resources, along with data regarding the program’s performance against those measures for each of the last three years. See CEPH Outcome Measures Template.**

Table 1.6d. Outcome Measures for Fiscal Resources				
Outcome Measure	Target	2013-14	2014-15	2015-16
All MPH faculty will use the annual personal allotment for professional development from the University	100%	100%	100%	100%
All MPH faculty will use the annual personal allotment for professional membership dues from the School	100%	0%	100%	100%
Students travel by van to one NC-based professional conferences will be used	100%	100%	100%	100%
Funding for program marketing at one NC-based conference will be used.	100%	100%	100%	100%

**1.6e. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

This criterion is met

**Strengths:**

The MPH program has had funding to support faculty travel, adequate marketing materials and student travel.

**Weaknesses:**

None identified

**Plans:**

Continue to provide necessary financial support.

**Criterion 1.7 Faculty and Other Resources. The program shall have personnel and other resources adequate to fulfill its stated mission and goals, and its instructional, research and service objectives.**

**1.7a. A concise statement or chart defining the number (headcount) of primary faculty employed by the program for each of the last three years, organized by concentration. See CEPH Data Template 1.7.1.**

The MPH in Community Health currently has three full-time primary faculty members that serve the MPH program. Due to the course sequence in the MPH program, the faculty have also taught courses in the undergraduate Community Health and Exercise Science programs. The number considered primary faculty ( $\geq 0.50$ FTE) increased from two to three from 2014-2015. The headcount below reflects the faculty members hired to teach in the MPH program. In 2013-2014, Dr. Bergman served as the MPH Program Coordinator and Dr. Supriya Reddy, although hired as the Program Coordinator for the BS in Community Health, taught in the MPH program. Beginning in 2014-2015, Dr. Kimberly Price joined the MPH program. Primary assignments for Dr. Bergman and Dr. Price are to the MPH Program. The primary assignment for Dr. Reddy is with the BS in Community Health with the goal of serving 0.5 FTE in the MPH program.

Table 1.7a. Headcount of Primary Faculty				
	AY 13-14	AY 14-15	AY 15-16	AY 16-17
MPH in Community Health	2	3	3	3



- 1.7b. A table delineating the number of faculty, students and SFRs, organized by concentration, for each of the last three years (calendar years or academic years) prior to the site visit. Data must be presented in a table format (see CEPH Data Template 1.7.2) and include at least the following information: a) headcount of primary faculty, b) FTE conversion of faculty based on % time devoted to public health instruction, research and service, c) headcount of other faculty involved in the program (adjunct, part-time, secondary appointments, etc.), d) FTE conversion of other faculty based on estimate of % time commitment, e) total headcount of primary faculty plus other (non-primary) faculty, f) total FTE of primary and other (non-primary) faculty, g) headcount of students by department or program area, h) FTE conversion of students, based on definition of full-time as nine or more credits per semester, i) student FTE divided by primary faculty FTE and j) student FTE divided by total faculty FTE, including other faculty. All programs must provide data for a), b) and i) and may provide data for c), d) and j) depending on whether the program intends to include the contributions of other faculty in its FTE calculations.**

**Note: CEPH does not specify the manner in which FTE faculty must be calculated, so the program should explain its method in a footnote to this table. In addition, FTE data in this table must match FTE data presented in Criteria 4.1.a. (Template 4.1.1) and 4.1.b (Template 4.2.2).**

LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Table 1.7b. Faculty, Students and Student/Faculty Ratios by Specialty Area										
MPH in Community Health  AY	HC Primary Faculty	FTE Primary Faculty <sup>1</sup>	HC Other Faculty	FTE Other Faculty <sup>2</sup>	HC Total Faculty	FTE Total Faculty	HC Students <sup>3</sup>	FTE Students <sup>4</sup>	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
2013-2014	2	1.21	8	1.0	10	2.21	69	29.75	23.8	7
2014-2015	3	2.125	2	0.33	5	2.455	64	24.625	10.94	8.43
2015-2016	3	2.33	2	0.33	5	2.66	77	25.5	11.33	9.88
2016-17*	3	0.925	0	0	3	0.925	35	23	24.86	24.86

<sup>1</sup> FTE Primary Faculty – 1 FTE = Based on credit hours taught in the MPH program divided by 18 (100% FTE for graduate teaching load).

<sup>2</sup> FTE Other Faculty – 1 FTE = 100% of time devoted to MPH program. One adjunct (18 hours) = 1 FTE

<sup>3</sup> HC Students – Fall +Spring; AY 2015-2016 – Fall + Spring projected

<sup>4</sup> FTE Students – 1 FTE = 1 student taking 9 or more semester hours; Fall + Spring / 2

\*Fall only

**Key:**

HC = Head Count

Primary = Full-time faculty who support the teaching programs

FTE = Full-time-equivalent

Other = Adjunct, part-time and secondary faculty

Total = Primary + Other

SFR = Student/Faculty Ratio

**1.7c. A concise statement or chart concerning the headcount and FTE of non-faculty, non-student personnel (administration and staff) who support the program.**

Table 1.7c. Headcount and FTE of Non-faculty, Non-student personnel				
Program	AY 13-14 HC (FTE)	AY 14-15 HC (FTE)	AY 15-16 HC (FTE)	AY 16-17 HC (FTE)
MPH in Community Health	1 (.25 FTE)*	1 (.25 FTE)*	1 (.25 FTE)*	1 (.25 FTE)*

\*shared position between programs

The non-faculty, non-student program support is a shared position with the Occupational Therapy program.

1. Document Handling/Organization of Office Materials/File Maintenance:
2. Assisting Internship Coordinators:
3. Maintain OT Website
4. Budget, Management of Instructional Supplies/Equipment/Computer Assistance:
5. Office Supply Inventory/Office Machine Maintenance:
6. Supervision of Work Study Students/Graduate Assistants:
7. Other duties as needed

**1.7d. Description of the space available to the program for various purposes (offices, classrooms, common space for student use, etc.), by location.**

The MPH Program is housed in the McCrorie Center in Hickory and at the Center for Graduate Studies in Asheville. The McCrorie Center has two classrooms (30-40 seat capacity), one lecture hall (75 seat capacity), two seminar rooms, an anatomy/assessment lab, nursing simulation lab, and a computer lab. One of the classrooms is outfitted for streaming courses via WebEx. All learning spaces are equipped with a multimedia cart and Wi-Fi is available throughout campus. The two primary MPH faculty in Hickory have offices in the McCrorie center. The MPH program is the only evening program that is in the McCrorie Center, therefore the classrooms and both seminar rooms are often available for students. Additionally the student union (Cromer Center) is located across the street and has a common space for student called the Bear's Lair and Carl A. Rudisill Library has numerous study locations.

The Center for Graduate Studies in Asheville has seven classrooms (14-36 seat capacity) and a computer lab (6 computer stations plus digital library resources). The two classrooms used by the MPH faculty are outfitted with 50-60 inch HD monitors and multiple cameras for streaming courses via WebEx. Multimedia and Wi-Fi are available

throughout the campus. The one primary MPH faculty in Asheville has an office in the suite of faculty offices, and there are common spaces (lounge area as well as break room) available for graduate students.

**1.7e. A concise description of the laboratory space and description of the kind, quantity and special features or special equipment.**

The McCrorie Center in Hickory has:

1. Solmaz Institute is available for Nutrition Assessment and Client Counseling. The laboratory space in the Institute has an observation window to observe students working with clients.
2. Exercise Science Lab allows for health/fitness assessment, body composition analysis and human movement studies. The equipment includes cardiac monitoring systems (ECG, Treadmills, Gas analysis); bioelectric impedance and hydrostatic tank for body comp; force plate and functional movement screening tools.
3. Occupational Therapy Rehabilitation Lab allows for functional assessments and provides the instruments necessary to help individuals achieve independence.
4. Nursing Lab allows for hands-on clinical assessment and treatment using medical manikins to simulate real-life scenarios

The Graduate Center in Asheville has:

1. Client Counseling room is available for students to practice counseling services

**1.7f. A concise statement concerning the amount, location and types of computer facilities and resources for students, faculty, administration and staff.**

Computer facilities are readily available for students in the MPH program. McCrorie, Cromer and Rudisill library on the Hickory campus all have computer labs and in Asheville the Center of Graduate Studies as a computer lab.

There are 4 classrooms and 2 conference rooms on the Hickory campus set up for video conferencing. All of the necessary computer equipment is provided on the multimedia carts in the classroom. Tablets are provided and supported upon request by any faculty member who uses WebEx for classroom teaching. IT has student workers available in the evenings in the event of technological trouble.

At the Center for Graduate Studies in Asheville, two classrooms and the conference room are fully equipped for video conferencing. IT support is provided by the Office of Information Technology (<http://it.lr.edu>) for faculty and students at each campus.

All faculty are provided with computers (laptops) with a video camera and speakers and are provided WebEx access. WebEx can be accessed anywhere there is an internet connection. Administration, faculty, staff and students all have technical support 24x7x365 through the LR IT Hotline.

**1.7g. A concise description of library/information resources available for program use, including a description of library capacity to provide digital (electronic) content, access mechanisms, training opportunities and document-delivery services.**

The Carl A. Rudisill Library was built in 1943, with major additions in 1967 and 1985. It contains more than 145,000 volumes and 270,000 e-books, subscriptions to over 70 periodicals and newspapers, and access to over 27,000 online journals through its 100-plus databases. There are also over 6,000 audiovisuals and 45,000 streaming audio and video items. The library affords students the opportunity to augment classroom experience with independent learning and encourages students to reach information through the internet as a means of expanding learning. The library is a member of the Appalachian College Association (ACA), the North Carolina Independent Colleges and Universities, and the Carolina Consortium, among other organizations, all of which increase the options for supporting resources used by faculty and students.

The library has three full-time librarians and two part-time librarians serving its Hickory campus, two part-time librarians serving the Asheville Center campus, and one full-time and one part-time librarian serving the Columbia Center and LTSS campus. These librarians work with faculty to provide in-classroom, online, and individual instruction to their students, and serve as liaisons to programs to provide research and collection management support to faculty.

Students have electronic access to over 5000 medical and allied health journals through Rudisill Library's many online databases (<http://library.lr.edu/databases/alpha>). Though the R2 Digital Library as well as Rudisill Library's web catalog (<http://library.acaweb.org/search~S26>), students will have access to a comprehensive selection of medical, nursing, and allied health ebooks. The library supports faculty and students in teaching/learning and research and provides access to NCLIVE, MEDLINE, CINAHL, PsycINFO, PsycARTICLES, JSTOR, PROJECT MUSE, ProQuest Health, Medical Complete and additional databases. All faculty have access to these major databases within their offices and students have access via the campus network. Off-campus access is available via password. Additionally, the interlibrary loan office can

access most articles and books for faculty and students with a quick response time, providing a major resource for expanding educational materials as well as up to date research articles not available online. Assistance from a professional librarian is available to students through the real-time chat reference service, Ask a Librarian, on Rudisill Library's website. More information about the Carl A. Rudisill Library is available at <http://library.lr.edu>.

#### North Carolina Area Health Education Centers (AHEC)

The mission of the NC AHEC program is to "meet the state's health and health workforce needs by providing educational programs in partnership with academic institutions, healthcare agencies and other organizations committed to improving the health of the people of North Carolina" (<http://northwestahec.wfubmc.edu/>). One rich resource is the NC AHEC library system, with which Rudisill Library contracts for specialized services. The NC AHEC digital library (ADL), a statewide network of resources and services, is designed to be the first choice portal to the internet for all healthcare professionals in order to support clinical and educational needs. The ADL provides access to e-journals, e-books and other evidence-based resources for practicing healthcare professional and students.

The main branch of the NC Northwest AHEC is located at Wake Forest University Medical Center with a convenient satellite center at Catawba Valley Medical Center (CVMC) in Hickory. Students and faculty have 24 hour a day, seven day a week access to over 100 health, medical, and nursing journal titles, over 120 textbooks, as well as over 1000 videos. At the Northwest AHEC located on the CVMC campus, students may receive assistance in accessing a wide array of databases. Other features resources include evidence-based tools, drug information, patient education materials in English and Spanish, and Centers for Excellence including nursing, minority health, complementary and alternative medicine, and health administration.

NC Northwest Library Network membership includes availability for literature searches, onsite training for groups of students, current awareness updates for faculty, and Ask-a-Librarian reference services. The potential for online ordering is available for videos, Spanish resources, books, and journals. Additional information about NC AHEC system can be found at <http://www.med.unc.edu/ahec>.

**1.7h. A concise statement of any other resources not mentioned above, if applicable.**

Not applicable

**1.7i. Identification of measurable objectives through which the program assesses the adequacy of its resources, along with data regarding the program’s performance against those measures for each of the last three years.**

1. The MPH program will consistently have a minimum of three faculty who have 50% of their time dedicated to the program.
2. The MPH student to faculty ratio will be equal to or less than 15:1 each academic year.
3. The MPH program will have regular access to teaching and learning spaces that are equipped for streaming between campuses.
4. The MPH program will have adjunct and other faculty available to consistently deliver the curriculum and electives as long as FT meet load requirements

Table 1.7i. Outcome Measures for Resources				
Outcome Measure	Target	2013-14	2014-15	2015-16
Minimum faculty per concentration	At least 3 per concentration	Met - 2 faculty – no specific concentration offered	Met - 3 Faculty	Met - 3 Faculty
Student to Primary Faculty Ratios	Equal to or less than 15:1	Did not meet-23.8	Met-10.94	Met 11.33
Teaching and Learning Spaces Equipped for Streaming	At least 1 space in Hickory and 1 space in Asheville	Met	Met	Met
Other Faculty Available for Consistent Delivery of Curriculum and Elective Courses	At least 1 Elective Course Offered Annually;	Met	Met	Met
	At least 2 Adjunct or Other Faculty Annually	Met	Met	Met

**1.7j. Assessment of the extent to which this criterion is met and an analysis of the program’s strengths, weaknesses and plans relating to this criterion.**

This criterion is met

**Strengths:**

The University's commitment to the MPH program through hiring the necessary number of primary faculty to meet accreditation standards for a small program and investing in the technology necessary to conduct the program

**Weaknesses:**

The lack of using of adjuncts due to having to meet faculty loads. Difficulty making it clear how faculty are making load requirements using the using the current system and research committee responsibilities are only counted toward load if the faculty is chairing the committee.

**Plans:**

Continue to explore how to involve public health professionals and content experts in the program and expand the use of adjuncts. At the start of the 2016-17 AY the University changed undergraduate faculty load from 24 credits/AY to 21. This adjustment will be evaluated over the AY to see how it will affect faculty loads for both the graduate and undergraduate faculty in the CHS. After this evaluation is it possible that more opportunities for adjuncts will be available.

Additionally, we are working on a way to measure research committee responsibilities for MPH faculty who are not chairing the committee but are serving on the committee. This along with the load changes above should make it more clear regarding faculty loads.



**Criterion 1.8 Diversity. The program shall demonstrate a commitment to diversity and shall evidence an ongoing practice of cultural competence in learning, research and service practices.**

**1.8a. A written plan and/or policies demonstrating systematic incorporation of diversity within the program. Required elements include the following:**

**i. Description of the program's under-represented populations, including a rationale for the designation.**

The Lenoir-Rhyne MPH program seeks to foster a learning environment that values inclusiveness and respect for all. Enrolled students, as well as faculty members, represent a variety of backgrounds—by race/ethnicity, country of origin, age, gender, and prior public health experience. This diversity enriches and enhances the classroom learning experiences and allows our students to adopt a global perspective.

The MPH Program identifies racial/ethnic minorities as underrepresented based on the overall statistics of racial/ethnic minorities at Lenoir-Rhyne University. The ethnic groups considered to be underrepresented are African-Americans, Asians, American Indians, and Hispanics. Males are also considered underrepresented in the program.

**ii. A list of goals for achieving diversity and cultural competence within the program, and a description of how diversity-related goals are consistent with the university's mission, strategic plan and other initiatives on diversity, as applicable.**

The MPH faculty are committed to achieving diversity and cultural competence. Three diversity goals have been developed by the MPH faculty. These goals are consistent with LR's Statement of Values and the Goals and Objectives of the University's Strategic Plan.

The goals for achieving diversity and cultural competence within the program are:

1. To increase or maintain the proportion of students from underrepresented racial/ethnic groups, from admittance through graduation.
2. To have all full time faculty participate in trainings, seminars, and campus events that foster ethnic/racial cultural competence.
3. To ensure representation of diversity on Advisory Board (with faculty, students, and community members).

### Lenoir-Rhyne University Statement of Values

Lenoir-Rhyne University espouses a set of values designed to inform us, as members of this educational community, in our personal development and our interactions with others. These values establish our principles of operation as an organization. They furnish guidance and assurance to each member of our community, and they help us to see how everyone's contributions improve the life of our university. These principles are made manifest through our daily actions, and they are fully realized only when embraced by everyone in our community. Constant and consistent attention to these core values will cultivate the continuous improvement of our institution, will assist us in the achievement of our mission, and will direct us toward realizing our vision as a university.

Excellence... We will strive for excellence in everything we do. We will continuously cultivate our intellectual, physical, and spiritual growth. We will develop our talents and abilities to their fullest extents. Integrity... We will act with integrity at all times. We will respect and be honest with each other. We will take personal responsibility for our words and our actions. Care... We will care about others in our learning and working relationships. We will be responsible stewards of our resources. We will support each other and work together toward the common good. Curiosity... We will learn from our community, past and present. We will confront important issues with humility and open minds. We will embrace the gains attained from the diversity of people and perspectives.

### Lenoir-Rhyne University 2013-2018 Strategic Plan

#### PROMOTING DIVERSITY AND GLOBAL EDUCATION

1. Foster a campus learning environment that promotes, encourages, and produces an appreciation for all that diversity offers.
  - Implement mechanisms that cultivate hiring diversity among faculty and staff.
  - Establish programs to promote recruitment, retention, and success of minority students.
  - Cultivate greater attention to issues of diversity in student life (e.g., student organizations, convocations, resident hall programs).
  - Build greater partnerships with community organizations related to diverse populations.
  - Enhance services and programming for non-traditional student populations.

- Assess and integrate diversity issues into the general education and academic program curriculums.
2. Seek, promote, and offer opportunities and experiences that expand global citizenship.
- Continue to promote and incentivize students' study abroad/away.
  - Establish recruitment systems, academic programs, and support structures designed to grow international student populations.
  - Assess and integrate global issues into the general education and academic program curriculums.
  - Promote programming that furnishes and encourages faculty and students interaction with diverse populations in the Hickory area.
  - Promote and support use of faculty exchanges to promote global/multicultural education.
  - Cultivate greater attention to global issues in student life (e.g., student organizations, convocations, resident hall programs).

**iii. Policies that support a climate free of harassment and discrimination and that value the contributions of all forms of diversity; the program should also document its commitment to maintaining/using these policies.**

Notice of Non-Discrimination and Equal Opportunity Statement:

Lenoir-Rhyne University does not discriminate on the basis race, color, national origin, religion, age, sex, sexual orientation, gender, gender expression, gender identity, non-conformity with gender stereotypes, physical or mental disability, and veteran status, in any educational programs and activities, or in its employment and admissions decisions. Lenoir-Rhyne University's policy of non-discrimination and equal opportunity extends to all aspects of employment, including, but not limited to, recruitment, hiring, training, promotion, transfer, reassignment, demotion, discipline, discharge, performance evaluation, compensation and benefits. In addition, the University adheres to this non-discrimination and equal opportunity philosophy in its admissions policies and practices. Lenoir-Rhyne University is providing an environment for learning,

working and living that promotes equal opportunity, inclusion, and non-discrimination for its faculty, staff, students, contractors, and visitors.

**iv. Policies that support a climate for working and learning in a diverse setting.**

In addition to the Non-Discrimination and Equal Opportunity Statement (above), the University established the Office of Multicultural Affairs to develop and coordinate internal and external programs which promote multicultural education for the campus community. The Director reports directly to the President of the University, demonstrating the University's commitment to working with all students, staff, and faculty to enhance the appreciation of multicultural issues and experiences.

The following is from the Freedom from Harassment Policy at Lenoir-Rhyne, and further supports a climate for working and learning in a diverse setting.

Title: Freedom From Harassment Policy

Purpose The basic purpose of this policy statement is to foster a positive community environment at Lenoir-Rhyne University. The particular intention of this policy is to prevent the occurrence of any form of intimidation or harassment by expressing the University's strong disapproval of such action, by providing a means for community members to report all incidents of intimidation or harassment should they occur, by setting forth procedures for handling all allegations, by enforcing appropriate sanctions against those who intimidate or harass others, and by informing community members of their rights to raise the issue of intimidation or harassment and the procedures to be followed in doing so. This policy seeks to protect the rights of the accuser and the accused.

Policy Opening Statement Lenoir-Rhyne University is a community that respects the dignity of all its members. The University condemns any form of intimidation or harassment as conduct incompatible with its values. The University will act on all complaints of intimidation or harassment in accordance with this policy. The University will seek to maintain confidentiality in carrying out the terms of this policy. In addition, the University condemns retaliation against any person who, acting in good faith, makes a complaint under this policy. Any form of intimidating or harassing behavior of employees, students, or visitors could subject the employee to immediate disciplinary action up to and including immediate termination of employment.

**v. Policies and plans to develop, review and maintain curricula and other opportunities including service learning that address and build competency in diversity and cultural considerations.**

The curricula of the MPH program are developed and reviewed by the MPH faculty. Students gain the opportunity to address and build competency in cultural diversity in the following required courses: Epidemiology (MPH 521), Program Planning for Health Behavior Change (MPH 535), Health Administration and Policy (MPH 542), Diversity Issues for the Helping Professionals (COU 535), and Program Implementation and Evaluation (MPH 540). Diversity and cultural considerations are also addressed in Global Health and Ethics (MPH 578). Opportunities for service learning that address and build competency in cultural diversity are provided in Applied Research (MPH 611-613) and Field Experience (MPH 610-603). Students are encouraged to undertake internships and volunteer activities with diverse populations, and current sites include Maya Angelou Center for Health Equity, AIDS Leadership Foothills-area Alliance, Eastern Band of Cherokee Indians, as well as other non-profit health agencies that provide indigent care. These sites provide services for populations disproportionately affected by health issues due to socioeconomic status or ethnicity/race.

MPH faculty discuss and review the curricula at the MPH faculty meetings (held at least twice per semester). Any recommended revisions are reviewed by the MPH Advisory Board. To ensure diversity and cultural considerations are being made in the development and maintenance of the curricula, the MPH faculty plan to review the syllabi from all courses in the curriculum every three years, examining the inclusion of materials/assignments related to diversity. If additional preparation is deemed necessary (as measured by student outcomes and course evaluations), revisions will be made and reviewed by the MPH Advisory Board.

**vi. Policies and plans to recruit, develop, promote and retain a diverse faculty.**

Lenoir-Rhyne University's statements on nondiscrimination are embedded within the EEO policy and the functions of the Office of Multicultural Affairs. Policies regarding the recruitment, development, promotion, and retention of faculty are found in the faculty handbook (<http://facstaff.intranet.lr.edu/faculty-handbook>). The College Dean and University Provost establish a search committee to oversee faculty hires. The search committee includes at least one MPH faculty member to contribute to the process. If application pool or faculty membership fails to meet current diverse representation or goals, the plan is to have the search committee chair identify recruitment channels for seeking diverse academic applicants, such as advertising in periodicals that make special efforts to reach out to minority graduate students.

**vii. Policies and plans to recruit, develop, promote and retain a diverse staff.**

Policies regarding the recruitment, development, promotion, and retention of staff are found in the employee handbook (<http://hr.lr.edu/handbook/1>). Currently, the one staff

member is shared with other programs in the College of Health Sciences. The MPH Program Coordinator serves as the liaison between the Program and the College for the selection of this staff member and designation of his/her duties.

**viii. Policies and plans to recruit, admit, retain and graduate a diverse student body.**

The MPH faculty work closely with Enrollment Management and participate in recruitment activities. The program has seen success in recruiting and admitting students from underrepresented populations by evaluating applicants holistically (considering resume, recommendation letters, work experience, etc.). This holistic approach can be a better indicator of minority student performance in graduate school than undergraduate GPA and GRE test scores. Faculty represent diverse backgrounds, and serve as the “face” of the program in recruitment activities, such as career and college fairs. This approach demonstrates to prospective students that the program is committed to diversity at various levels in the University.

Once admitted to the program, all students receive advising, regular communication through MPH group emails, and are encouraged to participate in community and campus activities with other MPH students. These efforts, along with a smaller student population and direct accessibility to faculty as mentors and supportive advisors, provide a sense of belonging and engagement. The presence of diverse faculty contributes to a climate of inclusion for students.

**ix. Regular evaluation of the effectiveness of the above-listed measures.**

The program collects data annually to assess the progress on meeting and maintaining diversity objectives. This data is collected through student survey, annual Faculty Activity Reports, and review of Advisory Board makeup. Policies and plans regarding curriculum, hiring, and student enrollment will be reviewed by the MPH faculty at the MPH faculty meetings as needed (and at least annually at year’s end). All courses in the curricula will be thoroughly evaluated by the MPH faculty every three years by review of student outcomes and course evaluations. Syllabi will be assessed for assignments, competencies, and lecture topics with a focus on diversity, equity, multiculturalism, and inclusion.

**1.8b. Evidence that shows that the plan or policies are being implemented. Examples may include mission/goals/objectives that reference diversity or cultural competence, syllabi and other course materials, lists of student experiences demonstrating diverse settings, records and statistics on faculty, staff and student recruitment, admission and retention.**

Evidence of implementation of these plans may be found in our mission statement and course syllabi. Our mission includes “open-minded inquiry” and “service learning in diverse settings” and one of our ten core competencies is Cultural Competency Skills. It states “Evaluates the role of diversity, in all of its forms (cultural, economic, social, behavioral, etc.), in determining the appropriate method of delivering public health services.” This core competency is integrated into all of our core courses, as well as most of the concentration courses. Students are also required to take and pass the “Diversity Issues for Health Professionals” course. Students are encouraged to seek internships, capstone projects, and volunteer activities with diverse populations. Evidence of implementation of these plans may also be found in the lists of Field Experience and Applied Research sites and records on faculty and student recruitment and retention.

**1.8c. Description of how the diversity plan or policies were developed, including an explanation of the constituent groups involved.**

Diversity plans were developed by the MPH faculty, with consultation with the Director of Multicultural Affairs and advice from the MPH Advisory Board. The MPH faculty drafted the goals to work seamlessly with the mission of the University, adopted curricula that align with cultural and diversity competencies, and examined the current status of underrepresented groups to determine recruitment needs.

To promote cultural competence of faculty members, all full-time MPH faculty are required to participate in trainings, seminars, and campus events that foster ethnic/racial cultural competence. This plan was developed to foster sensitivity and a healthy racial climate, as well as to demonstrate our values of inclusiveness and respect for all. These events are conducted by leaders in the field of diversity, including LR’s Director of Multicultural Affairs and civic and community presenters with an expertise in health equity. To fulfill participation requirements, faculty members are to attend at least one event each year. Faculty have the option of participating in the events sponsored on campus during Faculty Development days or Convocation programs, and/or events hosted at professional conferences and community workshops/trainings. Topics have included: social justice and minority health; health equity; strategies for support and engagement for students of color. Participation in these events are documented in the annual Faculty Activities Report.

Other than the plans described above, there are no formal diversity-specific policies for the MPH program. We have been successful in maintaining a diverse faculty and student body, and the primary MPH faculty will continue to review the need for specific policies by evaluating the current statistics annually.

**1.8d. Description of how the plan or policies are monitored, how the plan is used by the program and how often the plan is reviewed.**

The primary MPH faculty are committed to promoting cultural competency and diversity, demonstrated by annually evaluating enrollment and graduation statistics. We have four evaluation tools to monitor the diversity plans. They include: Enrollment and Graduation Statistics (obtained from student survey and Registrar's office); Faculty Activity Report (documenting diversity trainings); MPH Advisory Board self-report; and course syllabi (documenting inclusion of diversity competency activities). At the year-end faculty meetings, the primary MPH faculty members plan to assess the proportion of underrepresented groups amongst its faculty and student body. In order to increase or maintain current proportions, faculty will work closely with the MPH Advisory Board and LR's Enrollment Management for ideas and feedback on how to recruit a larger pool of candidates. To ensure diversity and cultural considerations are being made in the development and maintenance of the curricula, the MPH faculty plans to review the syllabi from all courses in the curriculum every three years, examining the inclusion of materials/assignments related to diversity.

**1.8e. Identification of measurable objectives by which the program may evaluate its success in achieving a diverse complement of faculty, staff and students, along with data regarding the performance of the program against those measures for each of the last three years. See CEPH Data Template 1.8.1. At a minimum, the program must include four objectives, at least two of which relate to race/ethnicity. For non-US-based institutions of higher education, matters regarding the feasibility of race/ethnicity reporting will be handled on a case-by-case basis. Measurable objectives must align with the program's definition of underrepresented populations in Criterion 1.8.a.**



LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Table 1.8e Summary Data for Faculty and Students						
Category/ Definition	Method of Collection	Data Source	Target	AY 2013-14	AY 2014-15	AY 2015-16
<b>Primary Faculty</b>						
<b>Race/Ethnicity</b>	Self-report	HR	30% from underrepresented groups *	50% from underrepresented groups	67% from underrepresented groups	67% from underrepresented groups
<b>Gender</b>	Self-report	HR	30% male	50% male	33% Male	33% Male
<b>Cultural Comp. Trainings</b>	Self-Report	Faculty Activity Report	100% complete one event annually	50% completed	100% completed	100% completed
<b>New Students</b>						
<b>Race/Ethnicity</b>	Self-report	student survey	30% from underrepresented groups *	38.9%	36.4%	34.8%
<b>Gender</b>	Self-report	student survey	30% male	27.8% male	9.1%	26.1%
<b>International</b>	Self-report	student survey	10%	16.7% international	0%	13%
<b>Degree completion rate of race/ethnic underrepresented students**</b>	Registrar and Institutional Research	Registrar	80% within 6 years	No Data	100%	100%
<b>Advisory Board</b>						
<b>Race/ethnicity</b>	Self-report	Survey	20% from underrepresented groups *	No Data	No Data	28.6%

\* African-American, Asian, American Indian and Hispanic

\*\*Degree completion rates determined by # of underrepresented students graduating in that AY within 6 years of starting the program divided by the total # of underrepresented students graduating in that AY

**1.8f. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

This criterion is partially met.

**Strengths:**

The faculty and student populations demonstrate an achievement of diversity regarding race/ethnicity and gender, and the student population demonstrates diversity in international status. Underrepresented groups graduate within 6 years of starting the program at the same rate as the overall student population. Plans established in 2016 will be evaluated annually by the MPH faculty, and faculty demonstrate their commitment to diversity and inclusion by participating in trainings and workshops.

**Weaknesses:**

Other than the University's Statement of Values, its commitment to promote diversity and global education as part of its Strategic Plan, and its policy on Non-Discrimination and Equal Opportunity, there are no other formally established policies regarding diversity for the MPH program. In the formative years of this program, assessments are being conducted to ascertain the gaps in addressing diversity issues (in curriculum and in faculty and student recruitment/retention). Plans are still being trialed as courses are developed and overall enrollment fluctuates.

**Plans:**

The MPH program plans to establish clear plans and policies regarding diversity to ensure the sustainability of our diverse faculty and student populations, such as demonstrating inclusion in our recruitment materials, increasing the visibility of our program, and developing policies to improve graduation rates. For 2016-17 AY, including the Director of Multicultural Affairs on the MPH Advisory Board, working with Enrollment Management on recruitment activities for diverse audiences, and continually assessing the program's progress will all contribute to meeting the diversity goals of the program.

**Criterion 2.1 Degree Offerings.** The program shall offer instructional programs reflecting its stated mission and goals, leading to the Master of Public Health (MPH) or equivalent professional master’s degree. The program may offer a generalist MPH degree and/or an MPH with areas of specialization. The program, depending on how it defines the unit of accreditation, may offer other degrees, if consistent with its mission and resources.

**2.1a.** An instructional matrix presenting all of the program’s degree programs and areas of specialization, including bachelor’s, master’s and doctoral degrees, as appropriate. If multiple areas of specialization are available, these should be included. The matrix should distinguish between professional and academic degrees for all graduate degrees offered and should identify any programs that are offered in distance learning or other formats. Non-degree programs, such as certificates or continuing education, should not be included in the matrix. See CEPH Data Template 2.1.1.

The Lenoir-Rhyne University Public Health Program offers a single professional degree, the MPH with a concentration in Community Health. The newly established Bridge program is a degree program that offers the BS and MPH degrees to students. This highly selective program allows motivated and outstanding undergraduate students pursuing their BS in Community Health to enroll in MPH course offerings. This will potentially allow the Bridge students to finish the MPH program in about a year and a half.

The MPH graduate degree is offered at both the Lenoir-Rhyne main campus in Hickory, NC, and at the Lenoir-Rhyne Graduate Center in Asheville, NC. The MPH program offers classes primarily as an on-site program over 15-week semesters in Fall and Spring terms, and 9-week (full term) Summer semesters. As discussed in 2.12, students take courses at either campus via video-streaming. Classes are video-streamed live between the two campuses. Selected core (Environmental Health and Diversity Issues for the Helping Professionals) and other courses offered outside of the MPH program (electives) are offered fully online.

Table 2.1a. Instructional Matrix – Degrees & Specializations		
	Academic	Professional
<b>Master’s Degrees</b>		
Specialization/Concentration/Focus Area: Community Health		MPH: Community Health
<b>Dual Program</b>		
Bridge for BS to MPH	BS	MPH

**2.1b. The bulletin or other official publication, which describes all degree programs listed in the instructional matrix, including a list of required courses and their course descriptions. The bulletin or other official publication may be online, with appropriate links noted.**

The MPH Program information is included in Lenoir-Rhyne University MPH Program Handbook, which describes the MPH program requirements offered through the University. The handbook, which is updated regularly, is accessible to all MPH students through the Canvas Learning Management System. A description of the program, including information regarding the curriculum and course descriptions can be accessed online through the following link:

<http://hes.lr.edu/academics/public-health>

(ERF Other/MPH handbook)

Following is a list of required core and concentration courses:

MPH Core Courses—15 credit hours

- MPH 515 Biostatistics
- MPH 521 Epidemiology
- MPH 535 Program Planning for Health Behavior Change
- MPH 542 Health Administration and Policy
- MPH 560 Environmental Health

MPH Community Health Concentration—12 credit hours

- MPH 530 Research Methods for Health Professionals
- MPH 540 Program Implementation and Evaluation
- MPH 555 Health Communication and Informatics
- COU 535 Diversity Issues for the Helping Professionals

MPH Elective Courses—9 credit hours (3 courses selected from the following)

- ACC 505 Accounting and Finance for Healthcare Administration
- BUS 513 Marketing Strategy
- BUS 515 HR Management for Healthcare Administration
- BUS 518 Operations Management for Healthcare Administration
- BUS 522 Ethical and Legal Issues for Healthcare Administration
- EDU 506 Child, Individual and Family Development
- MPH 575 Nutrition Concepts
- MPH 576 Drug Use and Abuse

- MPH 577 Human Sexuality
- MPH 578 Global Health and Ethics
- MPH 579 Application of Theories
- MPH 583 Special Topics
- NTR 525 Principles of Dietetic Practice\*
- NTR 551 Practicum I\*
- NTR 570 Dietetics Capstone\*

\*only students in the Dietetic Internship can enroll in these courses

MPH Practical and Capstone Experience—6 credits

- MPH 601-603 Field Experience
- MPH 611-613 Applied Research

**2.1c. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

This criterion has been met.

**Strengths:**

The MPH program offers a focused professional degree with well-defined mission, goals, and objectives. The practical and research experiences culminate with a capstone project and formal oral presentation. With the Community Health concentration, the program emphasizes strategies for working with diverse communities, locally and globally. The coursework and its sequence allows for recapitulation of practical application of community efforts for the improvement of individuals' and populations' quality of life. Small class sizes, students with diverse backgrounds (ethnically and professionally), and having an array of options to take courses (face-to-face, online, and streamed), allows the program to be tailored to meet the needs of the adult learner. The MPH program works with the Dietetic Internship program to give students a broad public health perspective across other health professions. While the field of public health continues to evolve, a focus on skills needed to collaborate with communities will be a far-reaching asset.

**Weaknesses:**

As the MPH program seeks to grow and incorporate improvements for meeting MPH competencies, requirements are continuously updated. Coordination of these efforts and the impact on the current students require additional administrative responsibilities for the MPH coordinator and faculty.

Plans:

In keeping with the recommendations of the Institute of Medicine to offer public health education across the health professions, the MPH program seeks linkages to other graduate programs, such as Business Administration, Nursing, and Physician's Assistant.

**Criterion 2.2 Program Length. An MPH degree program or equivalent professional master's degree must be at least 42 semester-credit units in length.**

**2.2a. Definition of a credit with regard to classroom/contact hours.**

The MPH Program is a 42 semester-credit degree. The program follows a semester system academic year with courses offered Fall, Spring and Summer. All Fall and Spring, three-credit courses are taught over a 15 week semester with classes meeting for 2 ½ hours once per week for a total of 37.5 contact hours. Full term summer three-credit courses (selected community health concentration courses and electives) are accelerated and offered over a nine week term, requiring four hours of class meetings per week for a total of 36 contact hours. Students taking Field Experience and/or Applied Research credits are offered a three course sequence with each course being one credit hour. For each Field Experience credit hour, 100 service hours are required (for a total of 300 hours).

**2.2b. Information about the minimum degree requirements for all professional public health master's degree curricula shown in the instructional matrix. If the program or university uses a unit of academic credit or an academic term different from the standard semester or quarter, this difference should be explained and an equivalency presented in a table or narrative.**

The MPH Program offers the standard semester unit and credit hours described above in criterion 2.2a.

**2.2c. Information about the number of professional public health master's degrees awarded for fewer than 42 semester credit units, or equivalent, over each of the last three years. A summary of the reasons should be included.**

None

**2.2d. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

This criterion is met.

**Strengths:**

The MPH Program requires 42 semester hours of credit, and includes field experience, research, and a capstone project that integrates students' public health knowledge in the

five core disciplines. Graduates will be prepared and equipped with skills to work as health program planners and educators, with knowledge that can be applied in a variety of community settings.

Weaknesses:

None identified.

Plans:

Input will be recruited from faculty and students regarding new and evolving areas related to competencies. Review of existing curriculum and incorporation of additional learning experiences without further expansion in the number of credits required will be assessed.



**Criterion 2.3 Public Health Core Knowledge. All graduate professional public health degree students must complete sufficient coursework to attain depth and breadth in the five core areas of public health knowledge.**

**2.3a. Identification of the means by which the program assures that all graduate professional public health degree students have fundamental competence in the areas of knowledge basic to public health. If this means is common across the program, it need be described only once. If it varies by degree or specialty area, sufficient information must be provided to assess compliance by each. (Template 2.3.1.)**

All MPH students are required to complete the core courses shown in 2.3.1. Additional competency in these core areas are developed through electives, field experience, applied research, and the capstone project. These courses have been reviewed by the faculty to determine the means and extent to which graduates have obtained fundamental competence.

Table 2.3a. Required Courses Addressing Public Health Core Knowledge Areas for MPH Degree		
Core Knowledge Area	Course Number & Title	Credits
Biostatistics	MPH 515 Biostatistics	3
Epidemiology	MPH 521 Epidemiology	3
Environmental Health Sciences	MPH 560 Environmental Health	3
Social & Behavioral Sciences	MPH 535 Program Planning for Health Behavior Change (an overview of behavioral studies in health promotion planning activities)	3
Health Services Administration	MPH 542 Health Administration and Policy	3

**2.3b. Assessment of the extent to which this criterion is met and an analysis of the program’s strengths, weaknesses and plans relating to this criterion.**

The criterion is met.

**Strengths:**

Required courses in the five core areas of public health are offered on a regular basis. Students are required to have completed a basic statistics course prior to enrolling in Biostatistics, and to have completed Biostatistics (graduate level) and Anatomy &

Physiology (undergraduate or graduate level) prior to enrolling in Epidemiology, to strengthen their basic knowledge. The public health faculty approves the final list of competencies for the core courses, and provides an array of learning opportunities for students to apply theory and practice.

**Weaknesses:**

As a small program, only one required course in each core discipline is offered.

**Plans:**

The learning experiences and class assignments for the courses in these five core areas of public health will continue to be reviewed and assessed to ensure that graduates have obtained the necessary breadth and depth of knowledge and training for successful public health careers. Faculty will collaborate on course changes in order to reinforce core competency material.

**Criterion 2.4 Practical Skills. All graduate professional public health degree students must develop skills in basic public health concepts and demonstrate the application of these concepts through a practice experience that is relevant to students' areas of specialization.**

**2.4a. Description of the program's policies and procedures regarding practice placements, including the following:**

Field experience allows students to gain advanced-level public health experience and proficiency in the professional field through 300-hours of field work/practice experience. Through these experiences, students demonstrate applications of their coursework in practice and an understanding and ability to apply the core competencies for public health professionals. This is completed in a series of courses, MPH 601-603, each course is one-credit hour and requires 100-hours of experience along with one professional reading assignment. Students can take this series of 3, 1-credit courses in whichever combination (one per semester to all in one semester) best fits their schedule as well as that of their placement site.

**Selection of Site**

Students are responsible for finding their own field experience placement, but sites may be either student- or faculty-identified, or community agency-initiated. Placement sites must be approved by the student's MPH faculty advisor prior to the student starting the experience. A signed MPH Affiliate Contract must be submitted prior to any service hours completed.

**Methods for approving preceptors**

Preceptors must be approved by the MPH faculty advisor prior to the student starting the experience. Site supervisors must be qualified to oversee the student's' experience. Students submit the Preceptor Approval Form (ERF Other/Field Experience) to the MPH faculty advisor outlining the preceptors qualifications. Qualification can be in the form of educational achievement or work experience and must be provided in documentation (resume, transcript, diploma). The minimum required qualifications are a MPH or Master's degree in a health related field with a minimum of 3 years work experiences in the public health profession or a Bachelor degree in a health related field with a minimum of 6 years of work experience in public health. Because our MPH program is committed to providing a quality experience for our students The preceptor must be willing to work collaboratively with the student and faculty advisor to meet the student's selected competencies, learning goals, and objectives for the experience.

### **Opportunities for orientation and support for preceptors**

Initial meeting between Preceptor and MPH faculty advisor PRIOR to the start of the student's field experience is required. Site visits, conference calls, etc. may be used. Potential new sites and preceptors are provided with an overview of the program and the needs/expectations of preceptors. Preceptors are given the faculty advisor's contact information for any questions that may arise via phone, email, or in person. The faculty advisor also acts as a liaison for the program, assessing student progress, and answering questions as needed.

### **Approaches for faculty supervision of students**

The student will develop a field experience plan which describes the student's overall goals, objectives, and actions steps for his or her field work. Goals and objectives must reflect at least 4-5 MPH program competencies; a visual depiction of the plan (e.g., a logic model) is to accompany the plan. This plan needs to be discussed and finalized with site preceptor prior to completing 25 hours.

Before completing 50 hours of his/ her field work, the student must set up an appointment to discuss the field experience with the faculty advisor; this meeting is to discuss the nature of the field work and interaction with and feedback from the site preceptor. Future meetings will be planned on as-needed basis.

At the end of the experience an exit meeting is scheduled between the student and faculty advisor to review the final assessments and revisit the Scope of Work plan.

### **Means of evaluating student performance**

#### Quarter reports

The student is responsible for writing quarterly reports documenting his or her experience. If the student is only completing MPH 601 for 100 hours then a report is due every 25 hours completed; MPH 602, every 50 hours completed; and for MPH 603, every 75 hours completed. At the end of each entry, the total hours for the field experience are required to be documented. These reports are uploaded to Canvas (the University's learning management system) under Quarter report 1, 2, 3 or 4 as appropriate.

The report should not be a regurgitation of the field experience and should be the appropriate length for hours completed. These reports should be a reflection of how the experience advances public health, relates to the MPH program competencies or the student's field experience plan. In other words, it should be a reflection rather than a summary of the student's experience.

#### Preceptor Midpoint Performance Evaluation of Student

Preceptors are asked to complete a Midpoint Assessment of Practicum Student's Performance (form provided by the student). This evaluation is to be discussed with the student and then submitted to the faculty advisor via email by the preceptor. It is the responsibility of the student to ensure that the preceptor has completed and submitted the performance evaluation. This assessment is used to make sure that the student is acting in an acceptable manner based upon specified professional standards (attendance, availability, communication, dependability, initiative, professionalism). This gives the preceptor and faculty advisor the opportunity to address the student to make the necessary corrections or provide positive feedback midway through the experience. To date all preceptors have completed this midpoint evaluation in a timely manner. The student is to remind the preceptor of this expectation as outlined in the MPH preceptor expectation document. The faculty advisor will contact the preceptor if the assessment is not completed in a timely manner after the student has remind the preceptor. The student will not be penalized if the preceptor fails to complete the assessment.

#### Preceptor Midpoint Consultation with Faculty Advisor

Discuss the student's progress with the faculty advisor at least once during the field experience. Site visits, conference calls, etc. may be used. It is the student's responsibility to schedule the midpoint consultation.

#### Student Midpoint Self-Evaluation and Assessment of Placement Site

A self-evaluation by the student will be completed along with an assessment of the placement site. The Placement Site assessment will not be shared.

#### Preceptor Final Performance Evaluation of Student

Preceptor is asked to complete a Final Assessment of Student's Performance (form provided by the student). This evaluation is to be discussed with the student and then submitted to the faculty advisor via email. It is the responsibility of the student to ensure that the preceptor has completed and submitted the performance evaluation.

#### Student Final Self-Evaluation and Assessment of Placement Site

A self-evaluation by the student will be completed along with an assessment of the placement site. The Placement Site assessment will not be shared.

#### Exit Meeting

The faculty advisor reviews the final assessments with the student, revisits the Scope of Work plan to confirm what was completed and then compiles the data and provides it to the MPH coordinator.

ERF Other/Field Experience

ERF Evaluation Instruments and Results/Preceptor Evaluation

EFR Evaluation Instruments and Results/Student Self-evaluation

**Means of evaluating practice placement sites and preceptor qualifications**

Approval of the placement site and preceptor starts with the student completing the Preceptor Approval Form. Then there is an initial meeting between preceptor and MPH faculty advisor prior to the start of the student's field experience. This meeting is used to insure the preceptor is aware of the requirements, establish an open line of communication and answer any questions. This meeting can be completed as a site visit, conference call or video conference. It is the student's responsibility to schedule this meeting.

The student meets with the faculty advisor prior to completing 50 hours at the placement site to confirm everything is proceeding appropriately. At the midpoint and end of the field experience, the student is required to complete a self-evaluation and placement site assessment. The midpoint assessment is discussed with the student as necessary. The final assessment is discussed with the student during the exit meeting. Results are discussed with the preceptor if warranted.

At any time during the field experience, the student or the preceptor may contact the faculty advisor in the event that there is communication, performance, or other issues. Resolving the conflict will be done on a case-by-case basis, with the faculty advisor acting as a facilitator and liaison between parties. If no resolution can be found, the student may need to be placed at another site; fortunately to date, this has not occurred with any of the field experience students.

Feedback provided by the students about the quality and appropriateness of preceptors and sites is noted in the Students, Sites and Preceptors excel file and used to guide future field experience placements.

(ERF Program Evaluation Instruments and Results/Field Experience)

**Criteria for waiving, altering or reducing the experience, if applicable**

Individual waivers from field experience are reviewed on a case-by-case basis. The possession of a prior professional degree in another field or prior work experience that is not closely related to the academic objectives of the MPH program are not sufficient reason for waiving the field experience requirement. The student must prove they have met the requirements of the field experience by demonstrating competency in at least five of the MPH competencies by providing sufficient documentation of how those competencies were met and completing the exit meeting with their faculty advisor.

If determined an exit meeting is not warranted, the faculty advisor will inform the student prior to the last day of the semester of application. During this meeting the student will need to present in written documentation and oral communication that he/she is competent in at least five of the MPH competencies. Additionally, documentation is required to be provided validating that the project completed was comparable to the project required for the field experience. Lastly, a letter of recommendation from an individual who meets the MPH preceptor qualifications is required. The faculty advisor will decide if the waiver will be accepted based upon the documents presented and oral communication no later than three days after the exit meeting. No waivers have been granted to date. (ERF Waivers/Field Experience)

**2.4b. Identification of agencies and preceptors used for practice experiences for students, by specialty area, for the last two academic years.**

2016-17 Academic Year

Placement Site	Preceptor	Academic Credential(s)
Catawba Valley Medical Center – Health First Center	Honey Estrada	MPH

2015-16 Academic Year

Placement Site	Preceptor	Academic Credential(s)
McDowell Hospital	Elizabeth Burpee	MD
MANNA Food Bank	Emily Roberts	MPH
Hospice and Palliative Care	Paula Byrd	BSN, MPH
PMG Research	Hunter Davis	MPH
Church Health Center	Randy Kostiuk	MS
Maya Angelou Center for Health Equity	Ronny Bell	PhD
AIDS Leadership Foothills-area Alliance	Annie Earl	MPH
Alexander County Health Department	Leeanne Whisnant	BSN; MS - Health Admin.
Catawba Valley Medical Center - Infection Prevention	Michelle Mace	BSN, MSN
Catawba Valley Medical Center - Maternity Services	Patricia Hickling Beckman	MPH
YMCA of Greater Charlotte	Jennifer Dodson	MS

2014-15 Academic Year

Placement Site	Preceptor	Academic Credential(s)
Maya Angelou Center for Health Equity	Ronny Bell	PhD
North Carolina Parent Teachers Association	Marianne Weant	MSPH
AIDS Leadership Foothills-area Alliance	Annie Earle	MPH
Buncombe County Health Department	Adrienne Gilbert	MPH
Alexander County Health Department	Leeanne Whisnant	BSN; MS - Health Admin.
Novant Health	David Cook	MD
Catawba Valley Medical Center - Maternity Services	Patricia Hickling Beckman	MPH
Catawba Valley Medical Center - Lactation Services	Carla Patton	BSN, MSN
Catawba Valley Medical Center - Infection Prevention	Michelle Mace	BSN, MSN

**2.4c. Data on the number of students receiving a waiver of the practice experience for each of the last three years.**

None

**2.4d. Data on the number of preventive medicine, occupational medicine, aerospace medicine and general preventive medicine and public health residents completing the academic program for each of the last three years, along with information on their practicum rotations.**

Not applicable.

**2.4e. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

The criterion is met.

**Strengths:**

The MPH Program provides practice experiences that are planned, supervised, and evaluated. Students apply the knowledge and skills learned in their coursework and aligned with program competencies. The Field Experience takes place over two to three successive semesters towards the end of a student's matriculation in the program, and



policies and procedures are in place regarding expectations. For students currently working full-time, job-site field assignments are made on a case-by-case basis; the assignment must extend beyond or be something other than his or her regular work duties and allow application of the knowledge and skills being learned.

Weaknesses:

The MPH faculty advisor lack of direct observation of the student limits the assessment of the quality of the actual practice experience.

Plans:

Expanded opportunities for students at new practice sites are being sought by students, faculty, and community agencies. Although criteria and policies for waiving the practice experience have been established, no waivers for students have been granted. Review of evaluation measures for practice experiences continue to be updated based on student and preceptor evaluations.

**Criterion 2.5 Culminating Experience. All graduate professional degree programs identified in the instructional matrix shall assure that each student demonstrates skills and integration of knowledge through a culminating experience.**

**2.5a. Identification of the culminating experience required for each professional public health degree program. If this is common across the program's professional degree programs, it need be described only once. If it varies by degree or specialty area, sufficient information must be provided to assess compliance by each.**

The culminating experience for all MPH students is the Capstone Project. The Capstone Project is the final assignment for students taking the Applied Research sequence MPH 611-613. After completing all core courses and required community health concentration courses, students develop an independent research project (that may or may not be related to their Field Experience). This project should include specific research aims which connect to many of the core competencies for health professionals. This research is designed by the students based on their particular interests, but is guided by their faculty advisor. (ERF Examples of Student Work/Capstone Research Papers)

The student is responsible for assembling a research committee to review their research design and written work prior to Institutional Review Board (IRB) submission. The committee is composed of at least three professionals, a selected Chairperson (an MPH faculty member who will advise and guide the student through the process), one other LR faculty member, and one other faculty member or community professional. Students select their chairperson but to ensure equitable distribution of the workload, a faculty member who is serving on several committees at one time may decline chairing a committee and shift the load to another MPH faculty member. All research proposals must undergo the IRB approval process to ensure ethical treatment of participants and confidentiality of data. Following appropriate research protocol, students are to complete their independent research project and write a formal paper of publishable quality. The capstone project consists of both a formally written research paper and a formal oral presentation of student's research. The capstone project allows students the opportunity to develop expertise in a specific content area and to contribute original and independent observations and analysis.

Students can present their capstone projects at any time during the semester, once their research chair has given approval. The capstone project is evaluated by the student's three member research committee, chosen by the student. After reviewing the student's written work and at the conclusion of the student's presentation, the members of the research committee complete the Applied Research rubric. The Applied Research rubric

(ERF Evaluation Instruments and Results/Applied Research) is used to evaluate the student's written work, demonstration of the identified core and concentration competencies for the project, demonstration of how and where all of the program competencies were met, and evaluation of the oral presentation. Other school and college faculty and students are invited to observe presentations. The research committee then meets without the student to discuss the results of their paper reviews and evaluation of the presentation. Each member of the research committee provides their completed Applied Research rubric to the research chair and the research chair compiles the data by averaging the scores in each of the four sections of the rubric (paper, core, concentration, presentation). If one of those section averages is below a 4, then additional work in that area is required. The committee will then determine the requirements necessary for successful completion of that area. During this time the student is provided a laptop to complete the online degree completion survey. The committee then meets with the student to inform them of the committee decision and provides feedback on the paper and presentation. If changes to the paper are necessary the student has five days to submit a final project with all of the requested changes to the research chair for final approval. If the student does not receive final approval upon that submission, they are allowed two further submissions to complete the written paper requirements. If the student does not successfully complete the core, concentration or oral presentation portion of the capstone the committee can: 1) request the student meet with the committee and answer specific questions about areas of concern and/or 2) request another oral presentation. In the case that the student still does not successfully complete the requirements upon the second attempt they will fail to graduate from the program. If either any of these requirements are completed in the following semester, the student is required to enroll in MPH 613 for continuation. A student can only enroll in MPH 613 for continuation for 2 consecutive semesters before they fail to graduate.

The research chair will provide the compiled data to the MPH Coordinator. The research chair will also share with the MPH coordinator the student's final paper and if the student submits their work for presentation or publication. The MPH coordinator reviews this data at the end of each semester. Starting in AY 2016-17 all students who successfully pass the capstone project during the spring semester are required to present their research as part of the College of Health Sciences Poster Symposium. Summer and fall graduates will be required to present a poster presentation at another university function to be determined.

**2.5b. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

This criterion is met with commentary.

**Strengths:**

This culminating project is designed to help students integrate knowledge and demonstrate the achievement of defined public health competencies. The Capstone Project requires the student to put forth significant effort, think independently, and develop a challenging project to complete. MPH faculty members serve as faculty advisors. Students attain communication skills by presenting their projects.

**Weaknesses:**

Students taking Applied Research may underestimate how much time and effort it takes to design, implement, analyze, and present their research. In order to demonstrate understanding and achievement of public health competencies, it may take a full academic year to complete the Capstone Project. Also, the Capstone Project does not include a final, comprehensive examination to further assure students' competency in the specific content areas.

**Plans:**

Analysis of the pros/cons of including an objective, comprehensive examination to demonstrate mastery of the program competencies is to be conducted. MPH faculty will continue to consider this option and present this idea to the MPH Advisory Board when appropriate. Starting in the AY 2016-17, students will be required to have a proposal presentation with the research committee.

**Criterion 2.6 Required Competencies.** For each degree program and area of specialization within each program identified in the instructional matrix, there shall be clearly stated competencies that guide the development of degree programs. The program must identify competencies for graduate professional, academic and baccalaureate public health degree programs. Additionally, the program must identify competencies for specializations within the degree programs at all levels (bachelor’s, master’s and doctoral).

**2.6a. Identification of a set of competencies that all graduate professional public health degree students and baccalaureate public health degree students, regardless of concentration, major or specialty area, must attain. There should be one set for each graduate professional public health degree and baccalaureate public health degree offered by the program (eg, one set each for BSPH, MPH and DrPH).**

MPH Program Core Competencies

Biostatistics
1. Develops written and oral presentations based on statistical analyses for multiple audiences
2. Applies descriptive and inferential techniques to appropriately evaluate public health data
Epidemiology
3. Communicates epidemiologic information efficiently and effectively to multiple audiences
4. Delineates patterns of disease and utilize epidemiologic concepts to assist with health problems
Social and Behavioral
5. Specifies multiple targets and levels of interventions for public health programs and policies
6. Utilizes evidence-based practice for implementing public health program and policies
Environmental
7. Identifies approaches for assessing and preventing environmental hazards that pose risk to human population health
Health Policy and Management
8. Identifies appropriate tactics to confront health needs of a target population
9. Communicates health policy and management ideas and issues using appropriate strategies
Cultural Competency Skills
10. Evaluates the role of diversity, in all of its forms (cultural, economic, social, behavioral, etc.), in determining the appropriate method of delivering public health services

**2.6b. Identification of a set of competencies for each concentration, major or specialization (depending on the terminology used by the program) identified in the instructional matrix, including professional and academic graduate degree curricula and baccalaureate public health degree curricula.**

MPH Program Community Health Concentration Competencies

Programming Skills
11. Assesses the feasibility and outcomes of proposed public health policies and services
12. Conveys the significance of evaluations and applies different evaluation methods for the improvement of public health programs and services
Communication Skills
13. Communicates health information efficiently and effectively to multiple audiences
Community Dimensions of Practice Skills
14. Collaborates with community partners to identify community assets and resources for the planning, implementing and evaluation of public health programs and policies
Leadership and Systems Thinking Skills
15. Examines dynamic interactions among social systems and recognizes factors that facilitate or inhibit healthy behaviors

**2.6c. A matrix that identifies the learning experiences (eg, specific course or activity within a course, practicum, culminating experience or other degree requirement) by which the competencies defined in Criteria 2.6.a and 2.6.b are met. If these are common across the program, a single matrix for each degree will suffice. If they vary, sufficient information must be provided to assess compliance by each degree or specialty area. (Template 2.6.1.)**

Learning experiences by which the core public health competencies are met within the MPH Program are presented in the five courses (15 credit hours) constituting the core curriculum.

Table 2.6c1. Courses and other learning experiences by which the Core competencies are met					
Core Competencies	MPH 515 Biostatistics	MPH 520 Epidemiology	MPH 535 Program Planning for Health Behavior Change	MPH 542 Health Administration and Policy	MPH 560 Environmental Health
1 Present on statistical analysis	P	R			
2 Apply descriptive and inferential techniques	P	R	P		
3 Communicates epidemiology info	P	P	P		
4 Delineates patterns and epidemiologic concepts		P			
5 Specifies interventions		R	P	P	R
6 Evidence-based implementation			P		
7 Assess and prevent environmental hazards		P			P
Core Competencies	MPH 515 Biostatistics	MPH 520 Epidemiology	MPH 535 Program Planning for Health Behavior Change	MPH 542 Health Administration and Policy	MPH 560 Environmental Health
8 Identify tactics	P			P	
9 Communicate policy				P	
10 Evaluate role of diversity		P	P	P	

P=Primary, R=Reinforcing

Learning experiences by which the Community Health concentration competencies are met within the MPH Program are presented in the six courses (18 credit hours) constituting the concentration curriculum.

Table 2.6c2. Courses and other learning experiences by which the Community Health concentration competencies are met						
Concentration Competencies	MPH 530 Research Methods for the Health Professional	MPH 540 Program Implementation and Evaluation	MPH 555 Health Communication and Informatics	COU 535 Diversity Issues for the Helping Professionals	MPH 601-603 Field Experience	MPH 611-613 Applied Research
11 Assess program policies and services		P			R	R
12 Significance of program evaluation		P			R	R
13 Communicate to multiple audiences	R	P	P	R	R	R
14 Collaborate with community partners		P			R	R
15 Examine social systems	P			R	R	R

Indicate which competencies are primarily gained (P) or reinforced (R) in each course or other learning experience (eg, practicum placement, culminating experience, service learning requirement, lecture series), as applicable.

See ERF Other/ Elective Courses/ Competencies - for matrix that identifies the competencies for elective course options.

**2.6d. Analysis of the completed matrix included in Criterion 2.6.c. If changes have been made in the curricula as a result of the observations and analysis, such changes should be described.**

No changes were made to the curriculum as a result of completing the matrix. Courses and competencies will be constantly evaluated to determine if changes are necessary.



**2.6e. Description of the manner in which competencies are developed, used and made available to students.**

In the AY 2013-14, the MPH Program Coordinator developed a list of possible program competencies. These competencies were constructed after referencing a number of different sources such as: Association of Schools and Programs of Public Health, Council of Linkages, University of North Carolina at Greensboro's MPH program, Arcadia University's MPH program, CEPH staff, public health professionals and current students. The Advisory Board was then asked to systematically review the core and community health concentration competencies for the program. After the competencies were established, specific revisions were made to the curriculum to better prior to the 2014-15 AY.

The developed competencies guide course development, content delivery, and learning outcomes. They provide guidance to the MPH faculty in the ongoing review of the curriculum and are instrumental in assisting students to understand the areas of knowledge and skills needed to graduate. Competencies are used by having each student conduct a self-assessment and evaluation of courses taken. During the capstone experience, students and faculty reflect on the student's' breadth and depth of the competencies gained during the program.

During the annual (required) MPH program orientation at the beginning of the academic year, expectations regarding skill/competency development are communicated. Competencies are made available to students in multiple formats, including the MPH Student Handbook. Competencies are also integrated into the courses and communicated in the syllabus that is available to students in the Canvas Learning Management System.

**2.6f. Description of the manner in which the program periodically assesses changing practice or research needs and uses this information to establish the competencies for its educational programs.**

All of the MPH faculty are responsible for assessing the changing needs of public health practices. Through research, literature reviews, preceptor/employer survey, alumni survey and professional interactions at conferences, faculty gain knowledge of the changing needs and adjust competencies (which then demand course changes) to prepare students for relevancy in the workforce. During MPH faculty meetings, relevant information is reported and discussed, in order to provide recommendations for changes to course content and competencies. These possible changes are then discussed with advisory board at the next scheduled meetings.

**2.6g. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

Criterion is met with commentary.

**Strengths:**

The MPH program is practitioner-oriented and emphasizes mastery of a set of competencies that are viewed as most central for MPH graduates in community health. By examining the competencies recommended by the American Schools of Public Health (ASPH), the faculty adopted a set of 15 competencies that were interwoven into the syllabi of the core, concentration, and elective courses. Instructors proposing new courses must include competencies in their course proposal.

**Weaknesses:**

We are still in the early stages of assessing how well the students achieve these competencies for the overall program, and faculty continue to adjust the assessment tools.

**Plans:**

These competencies guide the development of the curriculum. Additional MPH courses offered as electives may be developed to reinforce learning of competencies. New concentrations, such as Nutrition, may be developed and must adequately address competencies.

**Criterion 2.7 Assessment Procedures. There shall be procedures for assessing and documenting the extent to which each student has demonstrated achievement of the competencies defined for his or her degree program and area of concentration.**

**2.7a. Description of the procedures used for monitoring and evaluating student progress in achieving the expected competencies, including procedures for identifying competency attainment in practice and culminating experiences.**

We have six evaluation instruments designed to measure students' level of attainment of the program competencies. These include:

1. Student survey: Current MPH students self-report their level of competency on the 15 program competencies.
2. Preceptor evaluation: At the completion of the field experience, preceptors evaluate the student on the competency areas demonstrated during the internship.
3. Student self-evaluation: At the completion of the field experience, students evaluate themselves on the competency areas demonstrated during the internship.
4. Applied Research evaluation: After completion of the Applied Research project and presentation, the student's research committee evaluates the student's work using a rubric to grade the project as well as the program competencies demonstrated during the research process.
5. Degree Completion Exit survey: After completion of the Applied Research presentation, students complete an exit survey in which they self-report their level of competency on each of the program competencies. Students also assess the program overall and give faculty feedback regarding the strengths and weaknesses of the MPH program. Faculty do not see the Exit Survey data until after graduation.
6. Alumni survey: Annually alumni are asked to complete our alumni survey. This survey provides information on employment, value of degree, demographics and self-assessment of their ability to perform MPH competencies in the work setting.

These evaluations instruments are reviewed by the MPH faculty at the end of each AY. The MPH coordinator is responsible for compiling all of the data from these evaluations to be presented at MPH faculty meetings during the summer.

See ERF Evaluation Instruments and Results

**2.7b. Identification of outcomes that serve as measures by which the program will evaluate student achievement in each program, and presentation of data assessing the program's performance against those measures for each of the last three years. Outcome measures must include degree completion and job placement rates for all degrees included in the unit of accreditation (including bachelor's, master's and doctoral degrees) for each of the last three years. See CEPH Data Templates 2.7.1 and 2.7.2. If degree completion rates in the maximum time period allowed for degree completion are less than the thresholds defined in this criterion's interpretive language, an explanation must be provided. If job placement (including pursuit of additional education), within 12 months following award of the degree, includes fewer than 80% of graduates at any level who can be located, an explanation must be provided. See CEPH Outcome Measures Template.**

Outcome Measure	Target	AY 2013-14	AY 2014-15	AY 2015-16
MPH in Community Health – Degree Completion Rates – 6 year max**	80% within 6 years	0%*	100%	100%
Job Placement Rates	85% with jobs	0%*	88.9%	62.5%
Applied Research projects submitted for presentation and/or publication	At least 75% of students will submit an abstract for professional presentation every academic year	0%*	11.11%	20%
MPH student competency level in Applied Research	At least 70% of students as having achieved a proficient level of competency (4 on a scale of 5) for each of the core competencies on the final written report and oral presentation	No data#	77.8%	53.3%

LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Outcome Measure	Target	AY 2013-14	AY 2014-15	AY 2015-16
MPH student competency level in Applied Research	At least 70% of students as having achieved a proficient level of competency (4 on a scale of 5) for each of the concentration competencies on the final written report and oral presentation.	No data#	77.8%	80%
MPH student competency level on final preceptor evaluation	At least 70% of students having achieved proficiency (4 out of 5) on each program competency applied	No data#	78.57%	87.5%
MPH student competency level – self-report	At least 70% of students will self-report a proficient level of competency (4 on a scale of 5) in each of the five core areas.	No data#	77.8%	93.3%
	At least 70% of students will self-report a proficient level of competency (4 on a scale of 5) in each of the concentration competency areas	No data#	77.8%	86.7%

\* Did not have any graduates

# Program competencies were not established until AY 2014-15

\*\*Degree completion rates determined by # of students graduating in that AY within 6 years of starting the program divided by the total # of students graduating in that AY

Not all outcomes met set targets. At the time of graduation during the 2015-16 AY, only 62.5% of students reported having employment. This is most likely due to using the Degree Completion Exit Survey data which collected job placement information at the

completion of the student's capstone presentation. Students would be focusing on completing their degree rather than job searching during their time in the program. Students could have also understood the question to be asking if they were employed in a public health setting and not just if they had any job. This possible misinterpretation has been corrected in the Degree Completion Exit Survey and Alumni Survey. It is important to note that 31.2% of the students reported that they were actively seeking employment at this point in time. It is assumed that these students will report employment on the next alumni survey. Getting students to submit an abstract for presentation or publication has been more difficult than anticipated. This could be due to the University not having set presentation or publication requirements for faculty advancement and the students do not hear about the pressures of presentations and publications. Also a majority of our students work full-time or have other daytime obligations and therefore are not exposed to the value of research presentations and publications in their daily lives. Additionally, our program is a practitioner based program where many of our students wish to become public health professionals and fail to see the value of these endeavors as many of our graduates move out of the area or go work for organizations in which presentations or publications are as not valued or necessary. The faculty are working to change the culture by requiring student presentations at the University level starting during the 2016-17 AY and strongly encouraging professional presentations to further develop professional skills and networks. The graduates in AY 2015-16 really struggled with the competencies 1, 3 and 9, all relating to effectively communicating Biostatistics, Epidemiology and Health Policy and Management. Corrections were made in their writing and proficiency was established in these areas through additional work this percentage reflects the initial evaluation.

AY	Competencies									
	1	2	3	4	5	6	7	8	9	10
2014-15	3.7	4.1	3.9	4.2	4.1	4.2	4.2	4	3.6	4.2
2015-16	3.3	4.4	3.4	4.2	4.4	4.2	4.2	4.3	3.5	4.6

LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Table 2.7b3. Students in MPH Degree, By Students Continuing and Entering Between AY 2012-13 and fall 2016-17						
	Cohort of Students	2012-13	2013-14	2014-15	2015-16	2016-17
2012-13	# Students entered	29				
	# Students withdrew, dropped, etc.	2				
	# Students graduated	6				
	Cumulative graduation rate	20.69%				
2013-14	# Students continuing at beginning of this school year	21	18			
	# Students withdrew, dropped, etc.	3	4			
	# Students graduated	0	0			
	Cumulative graduation rate	20.69%	0.0%			
2014-15	# Students continuing at beginning of this school year	18	14	11		
	# Students withdrew, dropped, etc.	0	0	1		
	# Students graduated	7	2	0		
	Cumulative graduation rate	48.28%	11.11%	0.0%		
2015-16	# Students continuing at beginning of this school year	11	12	10	23	
	# Students withdrew, dropped, etc.	3	0	4	1	
	# Students graduated	8	6	2	0	
	Cumulative graduation rate	72.41%	66.67%	28.57%	0.0%	

LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

	Cohort of Students	2012-13	2013-14	2014-15	2015-16	2016-17
2016-17	# Students continuing at beginning of this school year		6	4	22	7
	# Students withdrew, dropped, etc		0	0	3	0
	# Students graduated					
	Cumulative graduation rate					

The number of students entering in the 2012-13 AY includes the students from the previous 2 AYs. All students that started in the 2012-13 AY have either graduated (72.41%) or are out of the program (timed out; failed out; switch major, took job) . Those students experienced a number of changes to the program while enrolled: start of MPH program in 2010, change in Program Coordinator in 2012, expansion of program to Asheville in 2012, video conferencing courses in 2012, hiring of new faculty 2013 and 2014 and the implementation of program competencies as the program works toward accreditation. Cumulative graduation rates were calculated by subtracting number of continuing students from the total entered for that cohort AY and then dividing the total number of students graduated by that number (Ex: Cohort 2013-14: 18-6 = 12; 8/12= 66.67%). It is anticipated that the remaining 6 students from AY 2013-14 and 4 students from AY 2014-15 will graduate during the 2016-17 AY. Only accepting 11 students into the program in 2014-15 really makes it difficult to maintain acceptable graduation rates when students leave the program for reasons the program cannot control (financial, family, new job, change major). Now the program has experienced faculty, established competencies and improved technologies for multi-campus delivery it is expected to see the enrollment and graduation rates improve. It is important to note that our racially and ethnically underrepresented students have graduation rates that are comparable to our overall student population (AY 12-13 at 75%; AY 13-14 at 71.4%; AY 14-15 at 33%).



**2.7c. An explanation of the methods used to collect job placement data and of graduates’ response rates to these data collection efforts. The program must list the number of graduates from each degree program and the number of respondents to the graduate survey or other means of collecting employment data.**

Currently we use the Degree Completion Exit Survey and Alumni Survey to collect employment data on graduates. The Degree Completion Exit Survey is given to the student right after their Applied Research presentation which has provided us with a 100% (16 of 16) response rate. At end of the survey students are asked to provide contact information. We have compiled an email distribution list for alumni and the Alumni Survey is sent out annually after completing of the fall semester. Our first Alumni Survey was completed in the fall of 2015, with a total of 12 alumni taking the survey. Eleven of those who completed the survey graduated between AY 2013-14 and the fall of 2015 (11/16 = 69% response rate). The twelfth alumni graduated in 2012. Ten of those 11 indicated they were employed (91%) and 1 is actively seeking employment (9%).

It was decided to use the Degree Completion Exit Survey data to complete Table 2.7b3 because the Alumni Survey will only capture alumni through the fall of 2015, it collected graduation information on calendar year not AY (which will be changed upon next use) and was the first time utilizing the Alumni Survey.

Table 2.7c. Destination of MPH in Community Health Graduates by Employment Type, Between AY 2013-14 and 2015-16*			
	2013-14 N (%)	2014-15 N (%)	2015-16 N (%)
Employed	0	8 (88.9%)	10 (62.5%)
Continuing education/training (not employed)	0	0	0
Actively seeking employment	0	1 (11.1%)	5 (31.2%)
Not seeking employment (not employed and not continuing education/training, by choice)	0	0	2 (12.5%)
Unknown	0	0	0
Total	0	9	16

\* collected using Degree Completion Exit Survey

**2.7d. In fields for which there is certification of professional competence and data are available from the certifying agency, data on the performance of the program’s graduates on these national examinations for each of the last three years.**

Not applicable.

**2.7e. Data and analysis regarding the ability of the program’s graduates to perform competencies in an employment setting, including information from periodic**

**assessments of alumni, employers and other relevant stakeholders. Methods for such assessment may include key informant interviews, surveys, focus groups and documented discussions.**

An Employer / Preceptor survey was developed and distributed near the end of the fall 2015 semester that allowed former, current and potential preceptors and employers to provide feedback on the program's selected competencies, the importance to certain skills/behaviors and rate interactions with former or current students. A total of 18 individuals completed the survey (64% response rate).

Competency number*	Very Important	Important	Slightly Important	Not Important
1	10 (55.6%)	8 (44.4%)	1 (5.6%)	0
2	8 (44.4%)	10 (55.6%)	0	0
3	10 (55.6%)	7 (38.9%)	1 (5.6%)	0
4	8 (44.4%)	8 (44.4%)	2 (11.1%)	0
5	13 (72.2%)	5 (27.8%)	0	0
6	15 (83.3%)	3 (16.7%)	0	0
7	9 (50%)	8 (44.4%)	1 (5.6%)	0
8	10 (55.6%)	8 (44.4%)	0	0
9	12 (66.7%)	5 (27.8%)	1 (5.6%)	0
10	15 (83.3%)	3 (16.67%)	0	0
11	10 (55.6%)	8 (44.4%)	0	0
12	11 (61.1%)	7 (39.9%)	0	0
13	15 (83.3%)	3 (16.7%)	0	0
14	14 (77.8%)	4 (22.2%)	0	0
15	12 (70.6%)	5 (29.4%)	0	0

\* full competency wording can be found in criterion 2.6

Table 2.7e2. Rating of competence based upon interactions with MPH program students. N (%)						
Competency number*	Excellent	Above Average	Average	Below Average	Poor	N/A
1	4 (22.2%)	7 (38.9%)	3 (16.7%)	0	0	4 (22.2%)
2	4 (22.2%)	9 (50%)	2 (11.1%)	0	0	3 (16.7%)
3	4 (22.2%)	6 (33.3%)	0	0	0	8 (44.4%)
4	4 (22.2%)	4 (22.2%)	0	0	0	10 (55.6%)
5	6 (33.3%)	6 (33.3%)	4 (22.2%)	0	0	2 (11.1%)
6	6 (33.3%)	9 (50%)	2 (11.1%)	0	0	1 (5.6%)
7	4 (22.2%)	4 (22.2%)	2 (11.1%)	0	0	8 (44.4%)
8	7 (38.9%)	6 (33.3%)	4 (22.2%)	0	0	1 (5.6%)
9	5 (27.8%)	7 (38.9%)	3 (16.7%)	0	0	3 (16.7%)
10	6 (33.3%)	6 (33.3%)	4 (22.2%)	0	0	2 (11.1%)
11	6 (33.3%)	3 (16.7%)	5 (27.8%)	0	0	4 (22.2%)
12	5 (27.8%)	9 (50%)	4 (22.2%)	0	0	0
13	7 (38.9%)	7 (38.9%)	4 (22.2%)	0	0	0
14	10 (55.6%)	5 (27.8%)	2 (11.1%)	0	0	1 (11.1%)
15	6 (33.3%)	7 (38.9%)	3 (16.7%)	0	0	2 (22.2%)

\* full competency wording can be found in criterion 2.6

Additionally the majority, 15 of 17 (88.2%) (1 individual skipped this question and 2 were neutral) would 'agree' or 'strongly agree' to be willing to hire an LR MPH graduate and 14 out of 18 (77.7%) rate LR MPH students as 'very good' to 'excellent'.

This information was discussed at MPH faculty meetings late in the spring of 2016 and shared with the Advisory Board to help us further our evaluation procedures and to make necessary programmatic changes. Most agreed that with it being the first employer/preceptor survey, no immediate changes were deemed necessary based upon

the feedback received. The program will work to incorporating or further emphasizing some of the recommendations, such as: completion of required paperwork in a timely manner; basics of interview and applying; continue incorporating “real” public health experiences and more public speaking.

The Alumni Survey was also developed and distributed near the end of the fall 2015 semester. In addition to collecting employment information, the survey also gathered data on self-assessing their abilities to perform the program competencies in the workplace and satisfaction with the program.

Table 2.7e3. Alumni self-assessment of performing program competencies. N (%)						
Competency number*	Excellent	Very Good	Good	Fair	Poor	N/A
1	1 (8.3%)	3 (25%)	3 (25%)	2 (16.7%)	0	3 (25%)
2	0	3 (25%)	4 (33%)	3 (25%)	0	2 (16.7%)
3	2 (16.7%)	5 (41.7%)	3 (25%)	1 (8.3%)	0	1 (8.3%)
4	1 (8.3%)	6 (50%)	2 (16.7%)	1 (8.3%)	0	2 (16.7%)
5	4 (33%)	2 (16.7%)	3 (25%)	1 (8.3%)	0	2 (16.7%)
6	3 (25%)	6 (50%)	0	1 (8.3%)	0	2 (16.7%)
7	2 (16.7%)	6 (50%)	1 (8.3%)	0	0	3 (25%)
8	2 (16.7%)	7 (58.3%)	1 (8.3%)	0	0	2 (16.7%)
9	3 (25%)	4 (33%)	2 (16.7%)	1 (8.3%)	0	2 (16.7%)
10	4 (33%)	5 (41.7%)	2 (16.7%)	0	0	1 (8.3%)
11	2 (16.7%)	7 (58.3%)	1 (8.3%)	0	0	2 (16.7%)
12	0	8 (66.7%)	1 (8.3%)	0	0	3 (25%)
13	4 (33%)	5 (41.7%)	2 (16.7%)	0	0	1 (8.3%)
14	5 (41.7%)	1 (8.3%)	3 (25%)	0	0	3 (25%)
15	4 (33%)	4 (33%)	2 (16.7%)	0	0	2 (16.7%)

\* full competency wording can be found in criterion 2.6

Table 2.7e4. Satisfaction with the student experience. N (%)						
Criteria	Very Satisfied	More than satisfied	Satisfied	Less than satisfied	Not very satisfied	N/A
Quality of faculty advising	6 (50%)	6 (50%)	0	0	0	0
Timely communication with faculty	6 (50%)	3 (25%)	3 (25%)	0	0	0
Usefulness of field experience	3 (25%)	3 (25%)	4 (33%)	1 (8.3%)	0	1 (8.3%)
Usefulness of applied research	3 (25%)	4 (33%)	4 (33%)	0	1 (8.3%)	0
Overall quality	0	10 (83.3%)	1 (8.3%)	1 (8.3%)	0	0
Support of peer group	3 (25%)	6 (50%)	2 (16.7%)	1 (8.3%)	0	0
Quality of instruction	3 (25%)	6 (50%)	3 (25%)	0	0	0
Effectiveness of career guidance	2 (16.7%)	4 (33%)	4 (33%)	1 (8.3%)	0	1 (8.3%)

Additionally, the Alumni Survey indicated that 100% of the respondents thought that the MPH courses properly prepared them for a profession in public health with 75% reporting that their current job utilizes the skills and knowledge developed while in the program. The program will work incorporating or further emphasizing some of the recommendations, such as: partnering with larger organizations or institutions; applied research restructuring and communication with alumni.

See ERF Evaluation Instruments and Results

**2.7f. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

This criterion is met.

**Strengths:**

We have a strong connection with employers, preceptors and alumni as shown by response rate. Additionally, these groups support the MPH program and the competencies selected and are willing to offer necessary and appropriate feedback for improvements. Our graduation and employment rates are strong and our alumni are competent. Our program provides the unique opportunity to seek a graduate education in Western North Carolina, as no other graduate program offers a focus in Community Health.

**Weaknesses:**

This information is based upon a one-time assessment of alumni and employer/preceptor feedback. Use of exit exam only for job placement is not an accurate measurement as many students are not employed at the completion of the program. Student research is an area that needs great improvement, as documented throughout this self-study.

**Plans:**

Ask our Advisory Board and alumni for suggestions on other ways to keep in contact with alumni. The exit survey was used to measure job placement to ensure 100% response rate and the alumni survey would not capture information on students graduating during the AY 2015-16 because the alumni survey was completed in the fall of 2015. Restructure some parts of our assessment tools (consider projects completed during the program and professional presented) and work to incorporate alumni and employer/preceptor recommendations.

**Criterion 2.8 Bachelor's Degrees in Public Health. If the program offers baccalaureate public health degrees, they shall include the following elements:**

Not applicable

**Criterion 2.9 Academic Degrees. If the program also offers curricula for graduate academic degrees, students pursuing them shall obtain a broad introduction to public health, as well as an understanding about how their discipline-based specialization contributes to achieving the goals of public health.**

Not applicable



**Criterion 2.10 Doctoral Degrees. The program may offer doctoral degree programs, if consistent with its mission and resources.**

Not applicable

**Criterion 2.11 Joint Degrees. If the program offers joint degree programs, the required curriculum for the professional public health degree shall be equivalent to that required for a separate public health degree.**

**a. Identification of joint degree programs offered by the program. The instructional matrix in Criterion 2.1.a may be referenced for this purpose.**

The institution does offer an accelerated Master's program entitled "Bridges to Dreams" which allows qualified undergraduate students to take graduate level courses during the completion of their undergraduate degree. Undergraduate students that are majoring in Community Health and have an interest in pursuing an MPH can apply for this program. An undergraduate may take up to 12 credit hours of graduate level coursework, if that student has met the specified criteria.

The "Bridges to Dreams" program from Community Health to MPH consists of the Articulated Bridge in which specific MPH coursework will satisfy undergraduate degree requirements; thus shortening the length time for the student to complete the MPH program.

General admission requirements for the program consist of the following:

1. Be an LR student in good standing on all accounts (i.e. academic, judicial, and financial) who will have earned at least 92 credit hours by the end of the semester in which she/he is applying to the program.
2. Intend to graduate with an undergraduate degree from LR and file (or have filed) an official application for degree with the Office of the Registrar.
3. Possess a cumulative GPA of 3.25 or above on all LR work to date, an overall 3.25 on all college level coursework at LR or elsewhere, and a 3.25 in undergraduate work in the discipline in which she/he seeks graduate admission.

Masters level courses that can count towards both undergraduate and graduate level credit include the following, with their respective course descriptions:

MPH 576- Drugs, Society, and Human Behavior: This course provides students with an interdisciplinary view of the pharmacology of drugs of abuse and psychotropic drugs, used in the treatment of mental disorders. The historical background, as well as the social context, of drugs is explored.

MPH 577- Human Sexuality: This course provides students with an interdisciplinary review of Human Sexuality. The unalterable facts of anatomy, genes, hormones, and

other biological processes that influence the way humans reproduce will be covered. Additionally, the constant influence of individual and societal values, behaviors, views, and opinions, will be highlighted.

MPH 578- Global Health and Ethics: The course explores a series of contemporary health issues and challenges for the international community. The impact of political, socioeconomic, cultural, environmental, healthcare delivery and demographic conditions on health and human rights from an international perspective are discussed. Topics may include: population dynamics, water and sanitation, HIV/AIDS, technology, international organizations, climate change, pharmaceutical policies, and food delivery. Additionally, various ethical dimensions of public health policy and practice are related to population health issues.

MPH 579- Application of Public Health Theories: The purpose of this course is to provide the student with a comprehensive and in-depth review of the social and behavioral science theories that are utilized in public health. A critical analysis will be conducted of the major theories and the research that supports them. In addition to individual-level theories, attention will be directed toward systems and multi-level perspectives of health behavior. Particular emphasis will be placed on research related to the determinants of health behavior, as well as strategies and techniques intended to promote and initiate positive behavior change.

**b. A list and description of how each joint degree program differs from the standard degree program. The program must explain the rationale for any credit-sharing or substitution as well as the process for validating that the joint degree curriculum is equivalent.**

The “Bridges to Dreams” program provides a direct path for Community Health undergraduate students into the MPH program. These students enroll in the graduate section of the courses listed above and earn both undergraduate and graduate credit. The approved courses are all elective courses in the MPH program and are taught on a rotating bases. There is no change to the MPH curriculum as these students complete the same core, concentration and capstone requirements as all MPH students.

**c. Assessment of the extent to which this criterion is met and an analysis of the program’s strengths, weaknesses and plans relating to this criterion.**

This criterion is met.

Strengths:

This program allows for the high achieving students at the University to get an early start on their graduate education, and it keeps them at the university which assists with enrollment numbers.

**Weaknesses:**

Identifying qualified Community Health undergraduate students early has been problematic as the Community Health degree is a newer degree program and is mostly been as a “fall back” program for nursing students who fail out of the nursing program. There are very few qualified undergraduates that declare Community Health early enough to get the full 12-credit benefit of this program.

**Plans:**

Continue to promote the undergraduate degree during recruitment efforts of high school students, and to incoming freshmen and pre-nursing students as an option for those who want to major in a helping profession. The undergraduate program curriculum now qualifies students to take the Certified Health Education Specialist (CHES) exam that will be used in marketing materials in the upcoming AY.

**Criterion 2.12 Distance Education or Executive Degree Programs.** If the program offers degree programs using formats or methods other than students attending regular on-site course sessions spread over a standard term, these degree programs must a) be consistent with the mission of the program and within the program’s established areas of expertise; b) be guided by clearly articulated student learning outcomes that are rigorously evaluated; c) be subject to the same quality control processes that other degree programs in the university are; and d) provide planned and evaluated learning experiences that take into consideration and are responsive to the characteristics and needs of adult learners. If the program offers distance education or executive degree programs, it must provide needed support for these programs, including administrative, travel, communication and student services. The program must have an ongoing program to evaluate the academic effectiveness of the format, to assess learning methods and to systematically use this information to stimulate program improvements. The program must have processes in place through which it establishes that the student who registers in a distance education or correspondence education course or degree is the same student who participates in and completes the course or degree and receives the academic credit.

**2.12a. Identification of all degree programs that are offered in a format other than regular, on-site course sessions spread over a standard term, including those offered in full or in part through distance education in which the instructor and student are separated in time or place or both. The instructional matrix in Criterion 2.1.a may be referenced for this purpose.**

Table 2.12a. Degree Programs Offered thru Distance Education		
	Academic	Professional
<b>Master’s Degree</b>		
Specialization/Concentration/Focus Area: Community Health		MPH: Community Health

**2.12b. Description of the distance education or executive degree programs, including an explanation of the model or methods used, the program’s rationale for offering these programs, the manner in which it provides necessary administrative and student support services, the manner in which it monitors the academic rigor of the programs and their equivalence (or comparability) to other degree programs**

**offered by the program, and the manner in which it evaluates the educational outcomes, as well as the format and methods.**

The MPH program video conferences all core and concentration courses between the two campuses (Asheville and Hickory). This method of delivery started in the fall of 2012 when the Center of Graduate Studies of Asheville and the MPH program in Asheville were established. Students enrolled in the course at its originating site (Asheville or Hickory) are required to be in the classroom while students enrolled in the course at the receiving site have two options for receiving the course. They can come to the receiving campus classroom for the live video feed or they can join the course from their individual location for the live feed. Students who decide to receive the course individually are required to have their video camera on during the session. The majority of course sessions are recorded and all students have access to the recorded session via the learning management system Canvas.

Starting in the fall of 2016 the MPH program will be available online. This will be an option only for former LR Dietetic Internship (DI) students and will start with just two of the fall courses (one core - MPH 535 and one concentration MPH 555). Enrollment will be controlled by having interested DI students contact the Program Coordinator; the Program Coordinator will verify that the student is a DI student and then will enroll them into the online course. Each semester additional courses will be offered online until the entire program is available online. The rationale for limiting the online option to only former LR DI students at the onset was 1) to maintain our face-to-face course enrollments 2) management of faculty course loads and 3) ensure that we are offering the same quality of courses in the online format prior to allowing all students this option. After the program is fully online, the faculty will discuss the potential for offering this option to all interested students.

These methods of delivery were decided upon to meet the needs for working adult students, DI students desire to complete their MPH from LR, efficient use of faculty resources, expand the program's reach and to meet faculty semester loads. The university has invested and continues to invest a lot of resources into the necessary hardware and software to make video conferencing and online learning as close to a classroom experience as possible. We have increased the number of classrooms equipped with streaming capabilities on both campuses, upgraded the classroom video and audio, added flat screen TVs and upgraded the software used to video conference. The University moved to a new Learning Management System, Canvas, in the fall of 2015 and provides ample support and training. All faculty are provided with training on how to use the technology by IT prior to the start of each semester and can ask IT for additional training

at any time during the semester. Additionally IT provides a trained student worker (Hickory) or reference librarian (Asheville) to be present for each class (originating and receiving) for help with set-up and to troubleshoot if problems arise. Students receiving the class individually and distance students can all the instructor directly or the LRU 24x7 IT hotline for assistance.

During each AY the Center for Teaching and Learning (CTL) holds trainings for faculty on how to improve the streaming and online experiences for faculty and students through better pedagogy. CTL provides pedagogical ideas and concepts that have been used by other faculty at LR and at other institutions. Faculty can use the CTL to test a lecture prior to delivering it to students, ask for a teaching observation, either in classroom or video conference, to get feedback on course delivery and review online content.

Students can receive training through IT or the program on how to use the software prior to the start of the semester upon request. Students have the contact information of the instructors and IT to notify and troubleshoot any problems that might arise during the course. All technology needs are provided to the student upon enrollment in the program in the MPH handbook.

Academic rigor and educational outcomes are monitored and evaluated in the same manner, whether administered as a face-to-face course or at a distance through video-streaming. Students are free to voice their opinions about the delivery method to the course instructor, MPH Program Coordinator directly or through class evaluations. Additionally, students on the MPH Advisory Board express their opinions.

**2.12c. Description of the processes that the program uses to verify that the student who registers in a distance education or correspondence education course or degree is the same student who participates in and completes the course or degree and receives the academic credit.**

LRU complies with the Higher Education Opportunity Act (HEOA) (ERF Other/HEOA) criteria for student identity verification. This requires that institutions offering distance education programs have processes in place to ensure that the student registering for a course is the same student who participates in the course and receives course credit. Students admitted to the distance programs are processed in the same manner as on-campus students. Each student is assigned a unique student identification number which corresponds with a specific username for each student. Each student establishes their own password. As part of this policy, all students are required to change their password every semester. In addition, the LRU email policy requires all faculty communication with

students regarding LRU business be conducted via the official LRU email accounts which also require a secure login. Distance students are required to give a “live” final presentation (as part of the capstone experience) using university-supported technology.

Faculty can work with instructional technology and the CTL to develop and upload all course materials before the start of the semester. Controls regarding exams and assignments are up to the individual faculty member responsible for the course. Recommended procedures for exams is to open the exam for a limited period of time so that students may not confer with others regarding course content.

Video conferencing invitations are sent to the student’s personal Lenoir-Rhyne email account which requires the use of the student’s username and password. Additionally, in order for students to participate in the individual streaming option it is required that they have a working video camera that is turned on during the course. Fully online courses will require video submissions for an array of different assignments. These will allow for visual confirmation of the student’s identity.

While subject matter expertise and content decisions are based on the disciplinary knowledge of the program director and course developer, Lenoir-Rhyne provides development support, project management, as well as technical expertise pertaining to the course or program.

**2.12d. Assessment of the extent to which this criterion is met and an analysis of the program’s strengths, weaknesses and plans relating to this criterion.**

This criterion is met.

**Strengths:**

The university is willing to continue to provide the necessary resources and training for video conferencing to be a successful method of program delivery.

**Weaknesses:**

Hardware on both campuses needs continuous updating to make the learning environment the best possible for all students.

**Plans:**

The MPH program plans to continue to offer the options to stream to students individually and to the classroom. We are looking to continue to expand the individual video conferencing option to students outside the Hickory and Asheville areas who would



complete the entire program through live video conference for each course as well continuing to develop the asynchronous learning component.

**Criterion 3.1 Research. The program shall pursue an active research program, consistent with its mission, through which its faculty and students contribute to the knowledge base of the public health disciplines, including research directed at improving the practice of public health.**

**3.1a. Description of the program's research activities, including policies, procedures and practices that support research and scholarly activities.**

The majority of the research produced from the program is provided by the students through their Applied Research requirement (see ERF Examples of Student Work/Research Abstracts). While primary faculty have research areas focusing on: (a) sexual health; (b) ethnicity and stress; (c) childhood injury prevention; (d) social determinants of health; (e) college alcohol use and abuse and (f) tobacco control; faculty do not have strict research agendas and students are not required to pick any of the topic areas in which the faculty are focused. Instead, students are encouraged to choose a topic of interest to them and become the expert in that area. The faculty supports the student by guiding the student through the research process. This inquiry guided learning process allows the student to personalize their research topic. It also gives them the opportunity to focus on an area of interest with a community organization or potential employer, which directly connects to the program's mission of providing research opportunities with real community benefit.

Lenoir-Rhyne University supports faculty research in several ways: (a) faculty may take time during the week to plan meetings with colleagues, either in person, via conference calls in the morning, or at a time that is most convenient for faculty; (b) faculty are hired on nine month contracts which allows them the summer months to work on their research fulltime; (c) faculty may apply for faculty development funds in order to facilitate research and creative work within one's field that may cover up to \$1500 per year; (d) all tenure track faculty in their first and second year of full-time service will receive a one-course release devoted to professional/scholarly development. Third year tenure track faculty members may apply for a course release; (e) faculty may request a sabbatical, or professional leave, at any time. The sabbatical leave provides one academic year's leave at one-half pay or one semester's leave at full pay. Faculty applying to this program must have completed a minimum of six years of full-time teaching at Lenoir-Rhyne, tenure is not a requirement; (f) faculty teaching at the graduate level have a 3x3 (9 credits per semester; 18 credits per AY) course load while faculty teaching at the undergraduate level have a 4x3 or 3x4 (21 credits per AY).

**3.1b. Description of current research activities undertaken in collaboration with local, state, national or international health agencies and community-based organizations. Formal research agreements with such agencies should be identified.**

Current research collaborations with local health agencies and community-based organizations are as follows:

**Childhood Injury Prevention**

Faculty is engaged in continuing research on child passenger safety started by a MPH program alumna as an applied research project in conjunction with her work as the Safekids Coordinator for the Burke County Health Department. This research is further evaluating the knowledge, attitudes and behavior of parents and caregivers regarding the proper use of child passenger safety restraint use in other communities. Current MPH students are engaged with this work and there are plans for professional presentation upon completion.

**Sexual Health**

There are several current research activities regarding sexual health. Faculty currently work with the Council on Adolescents of Catawba County in developing health education materials and an evaluation plan for an existing mentoring program. MPH faculty have worked with Lenoir-Rhyne University to improve its programming regarding sexual consent and to better understanding the influence religiosity and sexting have on sexual behaviors. Faculty also work with Our VOICE, a sexual violence prevention agency in Buncombe County, on a community assessment of the community's knowledge, beliefs, and perceptions of sexual assault and abuse.

Student involvement in research activities include research conducted on campus regarding infant feeding attitudes (to be presented at a state conference) and initial development of health education materials and improved sexual consent programming. The religiosity and texting research was recently accepted for publication in the Journal of Religion and Health.

**Tobacco Control**

Lenoir-Rhyne University is in the process of determining if a change in the current tobacco policy is warranted. MPH faculty have taken the lead in this endeavor by conducting a University-wide survey, analyzing the data and disseminating the results. This data will play an influential role in the direction the University decides. Students have been actively involved in this process through course assignments as well as survey construction and data analysis. The results of the survey are being presented at a state conference. Further analysis of this data will be conducted and led by students.

### **Chronic Disease Prevention**

Faculty have a close working relationship with Catawba County Public Health and were asked to serve on the Community Health Assessment leadership team with the primary responsibilities for instrument development, data collection, and data entry. Final results were disseminated to the state health department and county constituents after completion of data analyses. The results will be used to guide future interventions with the hope of improving health status of the citizens. No students were involved in this endeavor and these materials were only released locally.

- 3.1c. A list of current research activity of all primary and secondary faculty identified in Criteria 4.1.a and 4.1.b., including amount and source of funds, for each of the last three years. These data must be presented in table format and include at least the following: a) principal investigator and faculty member's role (if not PI), b) project name, c) period of funding, d) source of funding, e) amount of total award, f) amount of current year's award, g) whether research is community based and h) whether research provides for student involvement. Distinguish projects attributed to primary faculty from those attributed to other faculty by using bold text, color or shading. Only research funding should be reported here; extramural funding for service or training grants should be reported in Template 3.2.2 (funded service) and Template 3.3.1 (funded training/workforce development). See CEPH Data Template 3.1.1.**

LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Table 3.1c. Research Activity for 2012 to 2015									
Project Name	Principal Investigator & Department (for schools) or Concentration (for programs)	Funding Source	Funding Period Start/End	Amount Total Award	Amount 2012-2013	Amount 2013-2014	Amount 2014-2015	Community-Based Y/N	Student Participation Y/N
Perceived Discrimination and Stress in Highly Ethnically Identified Individuals	Randall J. Bergman School of HESS MPH	N/A	N/A	N/A	N/A	N/A	N/A	N	N
Prevalence of Tobacco Use and Attitudes Toward Tobacco-Free Policies		N/A	N/A	N/A	N/A	N/A	N/A	Y	Y
Religiosity, Sexting and Hooking-up Among College Students		N/A	N/A	N/A	N/A	N/A	N/A	Y	Y

LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Project Name	Principal Investigator & Department (for schools) or Concentration (for programs)	Funding Source	Funding Period Start/End	Amount Total Award	Amount 2012-2013	Amount 2013-2014	Amount 2014-2015	Community-Based Y/N	Student Participation Y/N
Evaluation of the nutritional program Rainbow In My Tummy	Randall J. Bergman School of HESS MPH	Kate B. Reynold	August 2013 – May 2015	17,000	0	7946	9054	Y	Y
Worksite Health Promotion Program Participation		N/A	N/A	N/A	N/A	N/A	N/A	N	N
Dialog with Your Children and Perceived Norms About Tobacco		N/A	N/A	N/A	N/A	N/A	N/A	N	N
Experience Level and Social Condition Influence on HR, Perceived Exertion and Mood from an Interactive Video Game		N/A	N/A	N/A	N/A	N/A	N/A	Y	Y

LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Project Name	Principal Investigator & Department (for schools) or Concentration (for programs)	Funding Source	Funding Period Start/End	Amount Total Award	Amount 2012-2013	Amount 2013-2014	Amount 2014-2015	Community-Based Y/N	Student Participation Y/N
PA and Nutrition Evaluation of Structured Recess	Randall J. Bergman School of HESS MPH	N/A	N/A	N/A	N/A	N/A	N/A	Y	Y
Child Safety Knowledge, Attitudes, and Behaviors of Caregivers in Catawba County, NC	Kimberly J. Price School of HESS MPH	N/A	N/A	N/A	N/A	N/A	N/A	Y	Y
Perceptions of Sexual Assault Community Assessment of Buncombe County, NC		N/A	N/A	N/A	N/A	N/A	N/A	Y	Y

LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Project Name	Principal Investigator & Department (for schools) or Concentration (for programs)	Funding Source	Funding Period Start/End	Amount Total Award	Amount 2012-2013	Amount 2013-2014	Amount 2014-2015	Community-Based Y/N	Student Participation Y/N
Mixing Alcohol with Energy Drinks: Using the Theory of Planned Behavior to Examine its Use among Undergraduate Students	Supriya G. Reddy School of HESS MPH	N/A	N/A	N/A	N/A	N/A	N/A	N	N
Factors Associated with Mixing Alcohol with Energy Drinks among College Undergrads		N/A	N/A	N/A	N/A	N/A	N/A	N	N



**3.1d. Identification of measures by which the program may evaluate the success of its research activities, along with data regarding the program's performance against those measures for each of the last three years. For example, programs may track dollar amounts of research funding, significance of findings (eg, citation references), extent of research translation (eg, adoption by policy or statute), dissemination (eg, publications in peer-reviewed publications, presentations at professional meetings) and other indicators. See CEPH Outcome Measures Template.**

Outcome Measure	Target	AY 2013-14	AY 2014-15	AY 2015-16
Primary faculty will publish one research article every 5 years <sup>#</sup>	80%	100%	66.67%	100%
Primary faculty will have one professional presentation every academic year	80%	100%	66.67%	33.33%
Primary faculty will mentor student research	100%	100%	100%	100%
Students will submit an abstract for professional presentation every academic year	75%	0%*	11.11%	20%
Students will present or publish in collaboration with faculty every academic year	25%	0%*	0%	0%

\* Did not have any graduates

<sup>#</sup> Calculated starting with AY 2013-14, both MPH faculty members were published during this AY. Those publications will carry over for the next 5 years, if a new publication happens during that period the 5 year period starts over from the newest publication date. In the 2014-15 AY, the new faculty added was not published and therefore only 2 of the 3 faculty members had a publication. This faculty member was published during the 2015-16 AY, resulting in the 100% outcome.

**3.1e. Description of student involvement in research.**

Students are involved in research mostly through the MPH Applied Research requirement. Students are required to complete an applied research project under the supervision of a primary faculty member, in addition to having two other committee members review their work. With the exception of the research chair, the other members of the research committee can be outside of the MPH program. Oftentimes, this provides some interdisciplinary collaboration. The MPH research project gives students the experience of conducting research, from choosing a topic and designing the study through data collection, data analysis and dissemination. Faculty mentor students throughout the time it takes the student to complete his/her research project. Students are able to develop their project from an area of personal interest or borrow some aspect of a faculty member's ongoing research project. Many students have borrowed from existing faculty research in order to help facilitate their own research projects.

Students who wish to improve their research skill and abilities may serve as research assistants on faculty driven research projects if they approach the faculty asking to be involved. A few students have been involved in faculty driven research by assisting with writing the Institutional Review Board proposal, data collection, data entry, data analysis and proofing the document.

**3.1f. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

This criterion is met with commentary

**Strengths:**

The MPH program has a student-driven focus on research projects that reflect the interest of the student and mirror what public health professionals are responsible for in professional settings. The faculty bring a wide array of methodological approaches to their research by utilizing both quantitative and qualitative methods. Faculty are able to sustain ongoing collaborative research initiatives with local and community-based public health organizations and often involve students in these projects. Faculty maintain an active research agenda by serving as research consultants for public health and community-based organizations, publishing in peer-reviewed journals, and presenting research at state and national conferences for their own professional development as well as exposing students to this arena.

Faculty members mentor students to conduct an MPH research project, engage them as research assistants and encourage them to present their research findings at the state and national levels.

**Weaknesses:**

As shown in the data student submissions to state and national conferences and student involvement with faculty-driven research are drastically lacking. The development of a research culture is necessary and is something the faculty continuously discuss. Many of the MPH students work full-time and only are only on campus for courses in the evening.

**Plans:**

Continue to develop a culture of research by possible changes in the presentation requirements for the Applied Research project; get more students involved with faculty-driven research; restructure the Research Methods course and continue to promote attendance at state and national conferences.

We are looking into pairing students in the Applied Research course sequence with first-year MPH students to assist in creating a better sense of community and creating earlier exposure to the research process.

**Criterion 3.2 Service. The program shall pursue active service activities, consistent with its mission, through which faculty and students contribute to the advancement of public health practice.**

**3.2a. Description of the program's service activities, including policies, procedures and practices that support service. If the program has formal contracts or agreements with external agencies, these should be noted.**

Faculty are actively involved in community-based organizations, local and national professional organizations, and local departments of public health throughout Western North Carolina. Specifically, faculty have served important roles as (a) reviewers for prestigious journals in the field of health education/health promotion (b) leaders and researchers/consultants with American Public Health Association, as well as researchers and leaders within the North Carolina Public Health Association (NCPHA) (c) Board members of local community based organizations such as The Council on Adolescents of Catawba County and Exodus Homes, which are both in Hickory, NC, and Mountain True (environmental group) in Asheville, NC (d) Executive committees for the Catawba County Department of Public Health's community health assessment and the North Carolina Society for Public Health Education.

Our policies and practices for service to advance public health education are in line with Lenoir-Rhyne University's mission to encourage faculty service to the university and the community. Lenoir-Rhyne faculty are expected to provide service to the University to the extent that such work does not compromise their teaching and commitment to personal development. Lenoir-Rhyne faculty are also expected to provide service to the community outside the University to the extent that such work does not compromise their teaching, commitment to professional development, and service to the University. Community service includes active membership in and/or voluntary service in church, civic organizations, and community activities.

The MPH program actively pursues scholarship of engagement throughout a student's educational experiences by connecting academia with the larger society and community by integrating community work and community-based partnerships into the MPH curriculum, infusing the educational experience with theory and practice. The MPH program is also responsible for making connections across a wide array of disciplines in order to facilitate interdisciplinary collaborations, while encouraging students to develop creative solutions to real life problems.

Lenoir-Rhyne's MPH program also actively partners with the community to effectively apply and utilize the university's knowledge, resources, and expertise to mutually address

the needs and problems facing today's society. Students and faculty go beyond the classroom setting by getting involved in the local community as well as across the globe.

**3.2b. Description of the emphasis given to community and professional service activities in the promotion and tenure process.**

Lenoir-Rhyne University promotes and tenures faculty based on their achievements in teaching, scholarship, and service to the university and/or academic professional organizations within the faculty person's area of expertise. Service is an integral part of a faculty member's ability to mentor students and to bring professional practice experience into both teaching and research.

Service both within and outside of the university demonstrates a faculty member's ability to work effectively with students in student-focused activities outside of the classroom. The faculty member must also demonstrate a capacity to work collegially on tasks related to the faculty role in University governance, including committee tasks, and to work collaboratively on projects and tasks related to the college, school, or program of appointment. These roles are viewed as highly desirable in the tenure and promotion process and become essential qualities as individuals apply for promotion to associate and full professors. To be promoted to full professor at Lenoir-Rhyne University a formal administrative leadership role at the college or school is considered university-level service.

**3.2c. A list of the program's current service activities, including identification of the community, organization, agency or body for which the service was provided and the nature of the activity, over the last three years. See CEPH Data Template 3.2.1. Projects presented in Criterion 3.1 should not be replicated here without distinction. Funded service activities may be reported in a separate table; see CEPH Template 3.2.2. Extramural funding for research or training/continuing education grants should be reported in Template 3.1.1 (research) or Template 3.3.1 (funded workforce development), respectively.**

Table 3.2c. Faculty Service from 2012 to 2015				
Faculty member	Role	Organization	Activity or Project	Year(s)
Randall J. Bergman	Research Committee member and chair	North Carolina Society for Public Health Education	Attend and actively participate in monthly meetings for each committee; assist with the planning, implementation and evaluation of conferences; session moderator at each conference; assist with the functioning of the organization	Member: October 2012-present Chair: August 2014- present
	Program Committee member			August 2014- present
	Executive Committee member			August 2014- present
	Research Committee member	North Carolina Public Health Association	Support research initiatives by the organization and provide feedback on research reports; assist with the planning, implementation and evaluation of conferences	October 2012- present
	Wellness Section Program Committee member			October 2013-present

LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Faculty member	Role	Organization	Activity or Project	Year(s)
Randall J. Bergman	Community Health Assessment Core Team  iMAP Grant Team Community Member	Catawba County Public Health	Assisted with the development, implementation, evaluation and dissemination of the Community Health Assessment; evaluate website/database of evidence-based interventions prior to going "live"	February 2015- January 2016  Oct 2012-May2013
	Board Member, treasurer, secretary	Council on Adolescents of Catawba County	Attend and actively participant in monthly meetings; assist with planning and implementation of fundraisers; reproductive health classroom observations; United Way funding presentations	Member: November 2013-present Treasurer: April 2015-August January 2016 Secretary: April 2016-present
	Co-Chair - Social, Emotional, and Mental Health Domain	Children's Agenda of Catawba County	Attend and actively participate in quarterly meetings; develop collaborations between organizations to provide necessary services	October 2012- May 2015

LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Faculty member	Role	Organization	Activity or Project	Year(s)
Kimberly J. Price	Consultant	OurVoice	Community needs assessment contributor	2015-present
	Moderator	Asheville Bioneers Conference	Panel moderator	Nov 2015
	Board Member	MountainTrue	Board Member, Diversity Committee member; activity participant in meetings and provide support for services provided	2015-present
	Volunteer Health Educator	SafeKids of Western North Carolina	Volunteer at health fairs, Splash (water safety program at YMCA), and child passenger safety	2014-present
	Abstract Reviewer	American Public Health Association	Review abstracts for Public Health Education and Health Promotion Section for the annual national conference	2015



LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Faculty member	Role	Organization	Activity or Project	Year(s)
Kimberly J. Price	Abstract Reviewer	Society for Public Health Education	Review abstracts for presentation at the annual national conference	2015
	Participant	MountainTrue	Z. Smith Reynolds Foundation Racial Equity Initiative	2015
	Exhibitor; volunteer	Asheville Buncombe Institute of Parity Achievement	Health conference presenter; consultant	2015-present
	Volunteer	Asheville Area Chamber of Commerce	Community outreach events; American Red Cross Blood Drive: Jan 2015 Chamber Challenge 5K Race: June 2015 Health Fair: Nov 2015	2015 – present

LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Faculty member	Role	Organization	Activity or Project	Year(s)
Supriya G. Reddy	Abstract Reviewer	American Public Health Association	Review abstracts for Public Health Education and Health Promotion Section for the annual national conference	2014
	Community Health Assessment Committee Member	Catawba County Public Health	Assisted with the development, evaluation and dissemination of the Community Health Assessment	Feb 2015- January 2016
	Review Board Member	The American Journal of Health Behavior	Review journal articles and provide feedback to author(s) submitting for publication	2013-present
	Board Member	Exodus Homes	activity participant in meetings and provide support for services provided	2014- present
	Volunteer Health Educator	Pollsmoor Prison, Capetown, South Africa	Volunteer Health Educator- Adopt-a Cell Program; provide health education presentations and materials	July 2014

LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Faculty member	Role	Organization	Activity or Project	Year(s)
Supriya G. Reddy	Volunteer Health Educator and Mentor	Safe Harbor Rescue Mission	Volunteer Health Educator and Mentor; provide health education presentations and materials to the organization and its' participants	2014- present
	Mentor	Council on Adolescents of Catawba County	Lunch Buddy Mentoring Program at Northview Middle School; meet weekly with student during lunch period to provide positive relationship	2014- present
	Volunteer/Data Analysis Consultant	Greater Hickory Cooperative Christian Ministry	Analyze data and disseminate results to the organization for efficiency and possible grant applications	2013- present

**3.2d. Identification of the measures by which the program may evaluate the success of its service efforts, along with data regarding the program's performance against those measures for each of the last three years. See CEPH Outcome Measures Template.**

Outcome Measure	Target	2013-14	2014-15	2015-16
Primary faculty will be engaged in community service at the local, state, national and/or international level every AY	100%	100%	100%	100%
Primary faculty will be engaged in professional service at the local, state, national and/or international level every AY	75%	100%	100%	100%
Students will participate in primary faculty lead service opportunities within the university and/or in the community	50%	0%*	20%	66.7%

\* Did not have any graduates

**3.2e. Description of student involvement in service, outside of those activities associated with the required practice experience and previously described in Criterion 2.4.**

During National Public Health Week (NPHW) students have implemented various activities to promote awareness of public health issues throughout the campus and the community. Students created fliers that were placed throughout campus, especially in high traffic areas to create awareness of NPHW. Students engaged the campus and community by disseminating information about different public health topics, such as:

teen pregnancy prevention, substance abuse awareness, obesity prevention for preschoolers, child immunization, nutrition education, fire safety, and dental health.

Other service activities on campus include: participating in the annual Faculty and Staff Wellness Day by promoting health behaviors or providing information about a specified topic; taking an active role in determining if tobacco policy change is appropriate for the University and assisting with the 1-day Stand against tobacco use and writing a grant for the American Cancer Society's Tobacco-Free College Campus initiative.

Although we do not have an established public health student organization, students have gotten involved with many community-based public health organizations in a variety of different ways. A number of students assisted with the Catawba County Public Health Community Health Assessment by distributing surveys, inputting data and interpreting results for dissemination. Students that are engaged in volunteer activities with Advancing Life. Fighting AIDS (ALFA), which is the community-based organization in Hickory that is focused on providing AIDS awareness and education to Catawba County and its eight surrounding counties. We also have other students that are involved with The Hickory Soup Kitchen, Rape Crisis Center, and Cooperative Christian Ministry. In Asheville, students have volunteered at animal rescues and community gardens. Additionally, some of our students are also actively involved in their respective church communities.

**3.2f. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

The criterion is met with commentary

**Strengths:**

The program maintains an outstanding level of service that advances public health both internally, within the university, and to public health organizations within the local and regional community. The broad commitment to service is in response to Lenoir-Rhyne University's commitment to the engagement of scholarship, which specifically calls for service beyond the university community and to the public health discipline itself. The faculty contributes leadership and expertise to a wide range of community health organizations. These activities enrich faculty teaching and mentoring of students, while being responsive to the needs of the community. Lenoir-Rhyne recognizes these contributions to service through promotion and tenure and to a healthier campus community. The program has clearly defined expectations and targets for service for primary faculty who play significant roles in teaching and mentoring students.

Weaknesses:

Student contributions to service is lacking, possibly due to many of the MPH students work full-time and only are on campus for courses in the evening. Student feedback has collected via informal discussions and the student survey failed to ask any questions regarding services opportunities. The program has not established a public health organization that is affiliated with the university that could enhance service opportunities for students.

Plans:

Faculty will continue to consider course schedules and work schedules when planning and volunteering for service projects. Additionally, faculty will be more outspoken and timely about service opportunities and the value of service outside of the field experience requirement. Questions regarding barriers to and interest in service opportunities will be added to student survey for the 2016-17 AY. Lastly, serious consideration for the development of a student-centered health organization is necessary that could include all students in the School of HESS. At this time nothing has been formally proposed regarding such an organization. Undergraduate Program Coordinators might have to take the lead on this endeavor as the MPH program is an evening program and MPH students are not on campus during the main operating times of the university.

**Criterion 3.3 Workforce Development. The program shall engage in activities other than its offering of degree programs that support the professional development of the public health workforce.**

**3.3a. Description of the ways in which the program periodically assesses the continuing education needs of the community or communities it intends to serve. The assessment may include primary or secondary data collection or data sources.**

Currently no formal assessment of continuing education (CE) needs is conducted by the MPH program. All of the information collected about CE needs is through personal communication with preceptors, public health professionals and leaders of community organizations. MPH faculty are highly involved with community organizations, through this involvement needs for CE are seen and discussed informally. Through these discussion the faculty make concerted efforts to meet the needs of the organizations and their staff by providing educational opportunities and support.

**3.3b. A list of the continuing education programs, other than certificate programs, offered by the program, including number of participants served, for each of the last three years. Those programs offered in a distance-learning format should be identified. Funded training/ continuing education activities may be reported in a separate table. See CEPH Data Template 3.3.1 (ie, optional template for funded workforce development activities). Only funded training/continuing education should be reported in Template 3.3.1. Extramural funding for research or service education grants should be reported in Template 3.1.1 (research) or Template 3.2.2 (funded service), respectively.**

**Non-Matriculation:** Continuing education for graduate coursework is offered to non-matriculated students throughout the year. The non-matriculated students may be community members, working professionals, or students in other programs with an interest in one or more of the MPH courses. This option allows individuals to take specific courses that might assist them in their professional roles or academic disciplines without being enrolled in the MPH program. Additionally exposure to public health material might lead to the person enrolling in the program. To date no students have enrolled in the non-matriculation option.

**Safe Harbor Rescue Mission:** Dr. Reddy provided training and materials to staff on a number of health topics as well as best practices on how to distribute this information to their clientele. Dr. Reddy then developed a toolkit and tailored it to the population this organization serves so that this information can continue to be appropriately

communicated. This toolkit contains information on a number of topics, including but not limited to: chronic disease management, women's health, breast cancer and substance abuse. These topics were chosen by the staff as they are the topics that have been asked about the most during meetings with their clients. Three staff members participated in this training and continue to use the toolkit provided.

Council on Adolescents of Catawba County: Dr. Bergman conducts observations of classroom instruction of the reproductive and sexual health curriculum for grades 4-7. After observing a number of classrooms, training is provided to discuss presentation styles and format, information, and student involvement. Six staff members participate in these observations and trainings on an annual basis.

Symposium on the Future of Healthcare: Lenoir-Rhyne University in conjunction with the Northwest Area Health Education Alliance annually hosts this event on LR's Hickory campus. While the MPH program is not a direct sponsor of this event, faculty members are on the planning committee and are regular speakers. Additionally the MPH program markets the event to public health professionals and students.

2014 Attendance:	62
2015 Attendance:	54
2016 Attendance:	73

Lectures/Invited Speakers: (open to the faculty, students, professional and the public)  
American Academy of Pediatrics Tobacco Prevention lecture: "Clearing the Air for Children" by Dr. Jonathan Winickoff. Dr. Winickoff is a practicing pediatrician and Associate Professor of Pediatrics at Harvard Medical School. He has drafted key tobacco control policy for the AAP, the American Medical Association, and the American Pediatric Association. The national program he developed out of his research through the AAP Pediatric Research in Office Settings program is known as CEASE — Clinical Effort Against Secondhand Smoke Exposure. Additionally, Sally Herndon from the North Carolina Tobacco Prevention Control Branch and Ashley Borda from the Tobacco-Free College Campus Initiative through the U.S. Department of Health and Human Services spoke at this event. The College of Health Science was a supporting partner the event and the MPH Program Coordinator headed up the organizational efforts for the College. This event was held over a two-day period with twenty people attending Dr. Winickoff's lecture on the evening of the first day, fifteen individuals from the community and university administration joining us for a breakfast briefing from all three speakers and around seventy-five CHS students participating in a mid-morning panel discussion.



**3.3c. Description of certificate programs or other non-degree offerings of the program, including enrollment data for each of the last three years.**

Lenoir-Rhyne University does not offer a formal certificate program in public health.

**3.3d. Description of the program's practices, policies, procedures and evaluation that support continuing education and workforce development strategies.**

To be enrolled as a non-matriculated student, a non-degree student application must be submitted to the University. Courses in the MPH program (except those which require prerequisite courses and epidemiology and biostatistics) are open to community members and prospective students. Prospective students can register for up to 6 credits as a non-matriculated student before applying to the program. If admitted, all credits taken as a non-matriculated student can be applied to their degree.

We do not evaluate graduate courses for non-matriculated students beyond the overall standardized course evaluation. The MPH Program Coordinator can ask faculty about the performance of students in graduate courses and can consider their performance in cases where the students apply for admission to the MPH program.

No formal agreements have been made with any organization. Currently faculty are asked to continue communication and work with community organizations so that a formal agreement can be established and continual CE opportunities provided. It is by the nature of our discipline and faculty that the current CE opportunities have been successfully completed. A minimal number of workforce development activities have been initiated and the program has not formally evaluated the impact of the activities for those organizations. It has been informally reported that the organizations have been pleased with trainings and grateful for the opportunity to participate. Continuous education with the two organizations is not possible due the nature of the work conducted by the organizations. Therefore, other opportunities to offer CE need to be established and evaluated. Expanded involvement with the Symposium on the Future of Healthcare as well as establishing an agreement with one organization in both the Hickory and Asheville areas is necessary.

**3.3e. A list of other educational institutions or public health practice organizations, if any, with which the program collaborates to offer continuing education.**

Not applicable

**3.3f. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

The criterion is not met.

**Strengths:**

The MPH program has strong connections with many organizations in the community that would benefit for continuing education programs. In the short existence of the MPH program there has been some progress made with offering programs.

**Weaknesses:**

Currently there are not sustainable CE programming being conducted or sponsored by the MPH program. While there are documented trainings provided by MPH faculty much more can be done to meet this criterion.

**Plans:**

This issue was brought to the MPH Advisory Board's attention in May of 2016. Suggestions by the Advisory board: 1) connect Customer Service training with diversity training; 2) Quality improvement training 3) diversity training prior to SOURCE CHS poster presentation; 4) create health promotion certificate. Additionally, we will explore partnerships with organizations (like AHEC, MAHEC) and become more involved in their CE programming. Lastly, once an organization(s) has been identified, create a contract so that sustainable CE programming is conducted for that organization(s) on a regular basis. Practices, policies, procedures and evaluations for this criterion will need to be developed.

**Criterion 4.1 Faculty Qualifications.** The program shall have a clearly defined faculty which, by virtue of its distribution, multidisciplinary nature, educational preparation, practice experience and research and instructional competence, is able to fully support the program's mission, goals and objectives.

**4.1a.** A table showing primary faculty who support the degree programs offered by the program. It should present data effective at the beginning of the academic year in which the self-study is submitted to CEPH and should be updated at the beginning of the site visit. This information must be presented in table format and include at least the following: a) name, b) title/academic rank, c) FTE or % time, d) tenure status or classification\*, g) graduate degrees earned, h) discipline in which degrees were earned, i) institutions from which degrees were earned, j) current instructional areas and k) current research interests. See CEPH Data Template 4.1.1.

LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Table 4.1a. Current Primary Faculty Supporting Offerings of Program by Department/Specialty Area									
Department (schools) / Specialty Area (programs)	Name	Title/ Academic Rank	Tenure Status or Classification	FTE or % Time to the program*	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
School of HESS  MPH	Randall J. Bergman	Associate Professor of Public Health	Tenured	Goal = 100% or 1FTE  13-14 = 0.86 FTE  14-15 = 1.12 FTE  15-16 = 0.85 FTE	PhD    MS	University of Tennessee, Knoxville    Indiana State University	Human Ecology with an Emphasis in Community Health    Exercise Science	Health Policy & Administration, Communication, Environmental Health, Human Sexuality, Applied Research Field Experience	Health Policy, Sexual Health, Program Evaluation, Adolescent Health Behaviors

LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Department (schools) / Specialty Area (programs)	Name	Title/ Academic Rank	Tenure Status or Classification	FTE or % Time to the program*	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
School of HESS  MPH	Kimberly J. Price	Assistant Professor of Public Health	Non-Tenure track, renewable term appointment	Goal = 100% or 1 FTE  14-15 = 0.59 FTE  15-16 = 1.08 FTE	PhD   MA	University of Cincinnati   Columbia University	Health Education with a concentration in Epidemiology   Health Education	Program Planning, Program Evaluation and Implementation, Research Methods, Epidemiology, Applied Research, Field Experience	Childhood Injury Prevention, Social and Behavioral Determinants of Health Behaviors, Program Evaluation, Qualitative Methods
School of HESS  MPH	Supriya G. Reddy	Assistant Professor of Public Health	Tenure Track	Goal = 50% or 0.5 FTE  13-14 = 0.34 FTE  14-15 = 0.40 FTE  15-16 = 0.57 FTE	PhD   MPH	University of Alabama, Tuscaloosa   University of Alabama, Birmingham School of Public Health	Health Education and Health Promotion   Behavioral Sciences/Health Behavior	Biostatistics, Drug Use and Abuse, Applied Research	Biostatistics, Quantitative Methods, Theoretical Applications to Health Behavior, Drug Use and Misuse among College Pops.

\* FTE reflects the MPH courses credits only. Didactic courses are primarily 3 credit hours. Load for the research and field experience courses is allocated on a per student basis (0.11 per student x course load) (1 student completing a 2 credit research course is allocated at 0.22 credits; 1 x 2 x .11 = 0.22). Faculty also contribute to the MPH program with advising, mentoring and research committee work.

**4.1b. Summary data on the qualifications of other program faculty (adjunct, part-time, secondary appointments, etc.). Data should be provided in table format and include at least the following: a) name, b) title/academic rank, c) title and current employment, d) FTE or % time allocated to the program, e) gender, f) race, g) highest degree earned (optional: programs may also list all graduate degrees earned to more accurately reflect faculty expertise), h) disciplines in which listed degrees were earned and i) contributions to the program. See CEPH Data Template 4.1.2.**

Table 4.1b. Other Faculty Used to Support Teaching Programs (adjunct, part-time, secondary appointments, etc.)							
Department (school)/Specialty Area (program)	Name	Title/Academic Rank	Title & Current Employer	FTE or % Time*	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
School of Counseling	Dominque Hammonds	Adjunct	Assistant Professor; Appalachian State University	.16	PhD  MA	Counselor Education and Supervision  Clinical Mental Health Counseling	Diversity Issues
	Dia Harden	Adjunct	High School Counselor; A.L. Brown High School	.16	PhD  MEd	Counselor Education and Supervision  School Counseling and Guidance	Diversity Issues
	Myra Jordan	Assistant Professor of Counseling	Lenoir-Rhyme University	.16	PhD  MA	Counselor Education and Supervision  School Counseling	Diversity Issues
	Laura Ritchie	Adjunct	Lenoir-Rhyme University	.16	PhD  MA	Counselor Education and Supervision  Marriage and Family Therapy	Diversity Issues

LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Department (school)/Specialty Area (program)	Name	Title/Academic Rank	Title & Current Employer	FTE or % Time*	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
	Nikki Vasilas	Assistant Professor of Counseling	Lenoir-Rhyne University	.08	PhD  MEd	Counselor Education and Supervision  Community Agency Counseling	Diversity Issues
School of Education	Jeff Isenhour	Adjunct	Principal; Bunker Hill High School	.16	EdD  MA	Education Leadership and Administration  School Administration	Research Methods and Statistics
School of Health, Exercise and Sport Science	William Gardner	Adjunct	Medical Examiner; Piedmont Pathology	.16	MA	Biology with an emphasis in Human Anatomy	Bioterrorism
	Jean-Jacques Maury	Adjunct	Program Evaluator; East Tennessee State University	.16	MPH	Public Health in Epidemiology and Biostatistics	Biostatistics; Epidemiology
	Brittany Dobbins	Adjunct	Assistant Health Director; Caldwell County Health Department	.08	MPH	Public Health	Administration

LENOIR-RHYNE UNIVERSITY CEPH FINAL SELF-STUDY OCTOBER 2016

Department (school)/Specialty Area (program)	Name	Title/Academic Rank	Title & Current Employer	FTE or % Time*	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
	Susan Rucker	Adjunct	Consulting Director; Discover Wellness	.16	PhD MA	Health Administration Health Administration	Administration

\* Credit hours taught divided by 18; graduate faculty has a load requirement of 18 credits per AY



**4.1c. Description of the manner in which the faculty complement integrates perspectives from the field of practice, including information on appointment tracks for practitioners, if used by the program. Faculty with significant practice experience outside of that which is typically associated with an academic career should also be identified.**

The MPH Program integrates practice perspectives across all categories of faculty. Currently, we are only utilizing primary faculty to teach class offerings within the MPH program.

**Primary Faculty:**

All Primary Faculty have experience in public health practice through their service activities and prior professional employment. They are all engaged in community health research that has a practice and/or policy focus. As a result, primary faculty are well prepared to incorporate practice perspectives into their teaching, by bringing their practical experiences into the classroom. These practice perspectives are also integrated into student advising and service to the university that is related to public health research and education.

Through service to the profession and community the MPH Program Coordinator, Dr. Randall J. Bergman has public health experience in health administration and health policy as well as program implementation and evaluation. He publishes in the areas of adolescent health behaviors, including sexual health, physical activity research, and chronic disease management. All of these areas link research, policy, and practice. Dr. Bergman is engaged with public health practitioners in his public health leadership roles both locally and regionally.

Dr. Kimberly J. Price has significant public health practice knowledge and experience through her prior work in clinical/hospital systems and with community based organizations in Ohio, New Jersey, and New York. She has experience in qualitative methods, conducting focus groups with veterans to understand their perspectives of medically unexplained symptoms and analyzing evaluation surveys of hospital employees participating in project management training. She also has several years of experience in health program implementation and evaluation as a health educator working with vulnerable populations in the areas of visual health, injury prevention, and chronic disease. She currently engages in volunteer work with public health organizations in Western North Carolina. Her primary research interests include childhood injury prevention and social and behavioral determinants of health.

Dr. Supriya G. Reddy has extensive experience with quantitative methods and biostatistics. She volunteers as a consultant and data analyst for community based

organizations in the area. Her primary research interests include substance abuse issues among college populations, including drinking and driving prevention. Her current research is focused on theoretical applications for why college students mix alcohol with energy drinks.

**Adjunct Faculty:**

Adjunct faculty are academic professionals or community practitioners with specific expertise hired to teach specific courses or parts of courses. This allows students to get the most current and practical information and allows the program to integrate practice perspective into all aspects of the curriculum. Adjunct faculty who meet the expected level of competence as demonstrated by their teaching materials and student evaluations are rehired. Students often comment how much they appreciate the practical perspective from health professionals who bring real world situations into the classroom.

**4.1d. Identification of measurable objectives by which the program assesses the qualifications of its faculty complement, along with data regarding the performance of the program against those measures for each of the last three years. See CEPH Outcome Measures Template.**

Outcome Measure	Target	AY 2013-14	AY 2014-15	AY 2015-16
100% of primary faculty will hold a MPH/MSPH and/or doctoral degree in a public health discipline	100%	100%	100%	100%
100% of primary faculty will have public health professional practice experience	100%	100%	100%	100%
At least 80% of primary faculty will publish 1 original research article every 5 years	80%	100%	33.33%	66.67%
At least 80% of primary faculty will have 1 professional presentation every academic year	80%	100%	66.67%	33.33%

**4.1e. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

The criterion is met with commentary.

**Strengths:**

The MPH program has qualified primary faculty who hold doctoral degrees in public health disciplines, have practical experiences that are shared in the classroom, and conduct research and engage in practice-related service. The adjunct faculty in the MPH program are well qualified with vast experience in community settings. Our strong collaborative and interdisciplinary relationships with the School of Counseling and community practitioners allow us to provide diverse perspectives in the classroom.

**Weaknesses:**

The MPH program has three full time faculty members who devote most of their time to teaching graduate and undergraduate courses. The use of adjunct faculty in teaching MPH courses is limited due to need of meeting primary faculty teaching loads and meeting required class/student enrollments.

**Plans:**

The MPH program plans to continue to build the adjunct faculty pool as student enrollment increases. We will also continue to explore different ways to bring in those with professional practice experience to be included into the current curriculum, either as guest speakers or through outside symposiums.

**Criterion 4.2 Faculty Policies and Procedures. The program shall have well-defined policies and procedures to recruit, appoint and promote qualified faculty, to evaluate competence and performance of faculty, and to support the professional development and advancement of faculty.**

**4.2a. A faculty handbook or other written document that outlines faculty rules and regulations.**

Lenoir-Rhyne University provides all full-time and part-time faculty a University-wide Faculty Handbook summarizing the policies, procedures, rules and regulations affecting faculty. Faculty and staff can access it off campus through the faculty staff intranet, which is accessed through a password-protected account. See ERF Faculty Handbook and P&T Guidelines.

Full and part-time faculty who teach in the MPH program also receive a handbook that addresses specific policies and procedures that govern the Masters of Public Health Program (ERF Other/ MPH handbook)

**4.2b. Description of provisions for faculty development, including identification of support for faculty categories other than regular full-time appointments.**

### **Faculty Development**

#### **Mentoring Program (All Fulltime Faculty)**

Lenoir- Rhyne University has a program for systematically fostering informal mentoring. New full-time faculty are linked with a faculty member from a school other than his/her own, to provide a broader perspective about campus life. The Promotion and Tenure Committee, in cooperation with the Office of the Provost, is responsible for assigning mentors.

#### **Sabbaticals (All Fulltime Faculty)**

The university provides a sabbatical program for which full time faculty are eligible after a minimum of six years of full-time teaching at Lenoir-Rhyne University. Sabbaticals provide one academic year's leave at one-half pay or one semester's leave at full pay. Subsequent applications for professional leave may be made every fifth year.

#### **Institutional Support for Faculty Development (All Fulltime Faculty)**

Each academic year, each Lenoir-Rhyne University full-time faculty member with a tenured, tenure-track, or term appointment will be allotted an individualized amount of faculty development support to be used for approved travel and other

forms of approved professional development (Visiting one-year appointments are not included in the allocation of funds). Additionally, the Office for Academic Affairs (OAA) will determine allocation of resources from the Faculty Development grant.

**Personal Development Allotments (All Fulltime Faculty)**

Each budget year, a pre-determined allotment of funds shall be made available to each individual full-time faculty member for approved faculty development opportunities (outlined below). Use of one's individual allocation of development funds must be pre-approved by the appropriate School Chair and by OAA. (No reimbursements will be provided from faculty personal allotments unless the funds are pre-approved through the appropriate procedures.) Faculty must submit an online Faculty Travel/Absence Request form. This form is located on the L-R Faculty Internal Web. The faculty member's School Chair, his/her dean, and the OAA receive this application once submitted online. If the School Chair approves the application, the OAA then evaluates it and determines what amount of the faculty travel budget can be allocated to the request. (Specific allotment policies are described below.) The OAA then informs the faculty member of the amount allocated.

**Faculty Development Fund (All Fulltime Faculty)**

The Lenoir-Rhyne University Faculty Development Fund exists separate and beyond individual development allocations to support the intellectual, creative, and professional growth of the faculty of the University by providing funds to cover actual costs incurred in various development activities. Faculty are expected to utilize personal fund allotments first before using resources from the general fund.

**Travel (All Fulltime Faculty)**

The University encourages faculty members to participate in professional meetings. An amount each year is allocated in the budget of the Provost to assist with expenses. The faculty development fund is also intended to cover these expenses and faculty are expected to utilize their personal fund allotments before utilizing resources from the general fund.

**Tuition Funds (All Fulltime Faculty)**

Funds are available for full-time faculty wanting to take classes at Lenoir-Rhyne University. A faculty member, or any full time employee at Lenoir-Rhyne

University, is able to enroll in up to 9 hours a semester without any cost to the individual.

**Faculty Developmental Activity Days (All Fulltime Faculty)**

Prior to the beginning of each semester and at the end of the AY all faculty are invited to participate in the University scheduled activity days. There are numerous sessions scheduled over a two-day period (ERF Other/Faculty Developmental Activity Days)

**May Workshop (All Faculty and Staff)**

End of the year retreat to discuss future direction of the University. There are numerous sessions scheduled for a one-day workshop (ERF Other/May Workshop)

**Healthcare Symposium (All Faculty and Staff)**

This annual program includes research on a particular topic that is novel to the healthcare field. Experts in public health, health policy, counseling services, mental health, nursing, and a wide array of other health related disciplines are able to serve as speakers for this campus-wide one-day conference. The conference is open to all faculty, staff, and the community and is coordinated through the Health Care Symposium Committee as well as North Carolina AHEC.

**Library Resources for Faculty Scholarship (All Faculty)**

The library's Web page provides full details about its hours, policies, collections and resources, as well as procedures for ordering books and articles via interlibrary loan. Professional librarians are available to assist faculty members engaged in research and scholarship. Faculty members must present their university ID cards to check out library resources. They may check out books for the entire academic year. Once a year they will be asked to confirm and renew the materials they have checked out.

**Center for Teaching and Learning (All Faculty and Staff)**

Lenoir-Rhyne's Center for Teaching and Learning (CTL), located in the Rudisill Library on the Hickory campus, promotes the pursuit of excellence in teaching and learning, providing support that enables faculty to be innovative and creative in ways that enhance student learning. The CTL offers ongoing faculty development workshops, and it provides individual consultation for faculty in a range of areas related to teaching, pedagogy, and scholarship.

Technology Workshops (All Faculty and Staff)

Workshops, coordinated through the OAA and IT are available for faculty periodically throughout the year.

Release for special assignments and projects (All Faculty and Staff)

Approval comes through the Office of the Provost in conjunction with the School Chair.

To view awards given to the faculty go to ERF Other / Faculty Awards.

**4.2c. Description of formal procedures for evaluating faculty competence and performance.**

Several procedures are utilized to evaluate faculty competence and performance. These include (a) student course evaluations (b) the faculty annual report, and (c) the continuation, promotion and tenure review process.

Student Course Evaluations

Course evaluations are administered online through the director of Institutional Research. Course Evaluations are available to students a few weeks prior to the end of the semester and close prior to the first day of final exams. Printouts of the results are then sent to the instructor and the School Chair at the end of each semester. Students are also sent reminders to fill out course evaluations, via email, once they are released to students.

Course Improvement

Instructors who wish to improve their teaching are recommended to consult their School Chairs, other colleagues within their schools, as well as the Center for Teaching and Learning. Lenoir-Rhyne University has a strong commitment to excellence in teaching and new faculty should not hesitate to approach any faculty member for assistance.

Faculty Annual Reports

Full-time, continuing faculty member's performance will be evaluated regarding the three general areas outlined: teaching and mentoring; professional and scholarly development; and University and community service. Each of these areas will be rated separately; as well, a general rating will be determined. This is completed by self-assessment at the end of each calendar year, which summarizes their teaching, research, and service activities for the calendar year.

The report evaluates faculty members' annual performances to identify and affirm excellent work and to address general or specific areas of performances in need of improvement. This is an opportunity for faculty to highlight accomplishments and specify their plans for the future. The reports are sent directly to the Dean of the College. The Dean then shares the information with the School Chair, if necessary, faculty meet with their School Chair for a performance review.

#### Continuation, Promotion and Tenure Review Process

Tenure-track and non-tenure track faculty are reviewed in their second and fourth year of service. Tenure-track faculty are reviewed for tenure status after they complete six years of teaching at the University. This process is conducted by the Professional Review Committee, School Chair, College Dean, and the University Provost. Tenure, promotion and continuation review decisions are made in the spring semester of each academic year. There is a third year continuation review process in place for faculty. This process involves meeting with the School Chair, Dean of the College, and University Provost. This process is the same as the second and fourth year review and is intended to let new faculty know where they stand as they continue to work towards tenure and also to notify the faculty member of any improvements that need to be made in the areas of service, teaching, or research.

The assigned mentor is designed to help them navigate the university alongside the mentoring they receive from the Chair, dean, and faculty within their own school. The external mentor serves as another contact on campus to assist faculty in developing collaborative relationships with faculty in other departments as well as their own program.

As a university that is centered on teaching, the primary focus for tenure is the individual's teaching expertise with emphasis on innovation in the classroom with the ability to integrate new technology, such as streaming software, and remain abreast of the ever changing field of public health as measured by student and peer evaluations. Development of new course offerings and involvement in international and collaborative interdisciplinary approaches is also strongly encouraged.

It is assumed that faculty being considered for continuation, promotion, or tenure will have met the minimum eligibility requirements. The Provost will determine whether the minimum eligibility for these requirements have been met. The following areas of evaluation, in order of priority, provide the general basis upon which such decisions can be made:



- teaching and mentoring effectiveness (55%)
- professional/scholarly development (25%)
- service to the University and Community (20%)

The institution regularly evaluates the effectiveness of each faculty member in accord with published criteria, regardless of contractual or tenured status and provides ongoing professional development of faculty as teachers, scholars, and practitioners.

The results of the evaluation are to be used in two ways: 1) to serve as the basis for the conditions of reappointment and 2) to provide a cumulative record of the faculty member's performance. In this respect, the results of each evaluation are considered in relationship to those that precede it to provide data for decisions to reappoint. Primary consideration in these decisions will be the accomplishments and professional improvement of the faculty member. Continued inability or unwillingness to perform adequately in response to evaluations will be grounds for a decision not to reappoint. If the evaluation process has been effective, it will provide a basis for measuring performance by the faculty member. It likewise provides opportunities for establishing professional performance goals for the faculty member.

Scholarship plays a prominent role in both the tenure and promotion process. Faculty are expected to have an ongoing research agenda that shows growth and development in their area of expertise. Research should be designed to focus on the experience of the student. Taking a student to a national conference may be more highly valued than publishing in one's area of expertise.

Service both within and outside the university demonstrates a person's commitment to the institution and department within which they work as well as to their respective discipline. The roles that the faculty assume in professional organizations, as consultants, researchers, board members, and volunteers with community based organizations enrich the individual's ability to interact with and refer students to experts and potential internships outside of the university. These service roles are highly valued in the tenure and promotion process and become essential as faculty apply for promotion at the associate and full professor rank.

**4.2d. Description of the processes used for student course evaluation and evaluation of instructional effectiveness.**

The MPH program utilizes four primary methods for evaluating instructional effectiveness: (a) Student Course Evaluations; (b) MPH Student survey; (c) Degree Completion Exit Survey; (d) Alumni Survey; and (e) MPH Student survey

**Student Course Evaluations**

University standardized evaluation forms are used for students to evaluate the instructor and content of each course in the program. The School Chair receives and reviews all student course evaluations at the end of each semester. The Chair looks at the scores for each area and compares them to the university averages as well and the instructors other courses. As necessary the Chair will discuss evaluations with instructors and make the Program Coordinator aware of possible issues. After the School Chair brings the issue to the Program Coordinator's attention, the Program Coordinator can request to view the student course evaluations to determine if a course or instructor change is needed.

**MPH Student Survey**

Used to have current students evaluate the MPH program and provides students the opportunity to assess if faculty are meeting competencies through teaching and course offerings. This survey is completed every fall semester.

**Degree Completion Exit Survey**

This survey is administered at the completion of each student's MPH research project. The students self-report their level of competency on each of the program competencies. Students also assess the program overall and give faculty feedback regarding the strengths and weaknesses of the MPH program.

**Alumni Student Survey**

This survey provides information on employment, value of degree, demographics and self-assessment of their ability to perform MPH competencies in the work setting.

**4.2e. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

This criterion is met.

Strengths:

Lenoir-Rhyne University has a faculty handbook and the MPH program has an additional handbook that clearly delineates policies and procedures that are specific to our program.

There is a wide array of faculty development resources available to faculty. The School of HESS is well connected and willing to work together, as is the institution as a whole. There are resources available to improve teaching and facilitate research.

There are clearly defined procedures for evaluating the teaching competency of faculty including student evaluations, a faculty annual report, and written, well established promotion and tenure procedures that make teaching effectiveness the primary criterion for tenure and promotion.

There are established methods for assessing student evaluation of courses and program effectiveness.

Weaknesses:

The program does not have an established committee to oversee only evaluation due to the having 3 primary faculty members. This places a lot of emphasis on the Program Coordinator to oversee all evaluation processes.

Plans:

The self-study has demonstrated the need to distribute responsibilities to other MPH faculty and invite adjunct faculty to participate in professional development activities.

**Criterion 4.3 Student Recruitment and Admissions. The program shall have student recruitment and admissions policies and procedures designed to locate and select qualified individuals capable of taking advantage of the program's various learning activities, which will enable each of them to develop competence for a career in public health.**

**4.3a. Description of the program's recruitment policies and procedures. If these differ by degree (eg, bachelor's vs. graduate degrees), a description should be provided for each.**

Enrollment management conducts a series of Graduate Open Houses in the Fall, Spring, and Summer semesters. Open house events are hosted separately for the Hickory and Asheville campuses. Open houses are advertised on campus and in the community. MPH faculty attend these events to meet with potential students. If the timing for open houses do not work for students, then the admissions office is responsible for organizing meetings between program faculty and a student that may be interested in a campus visit. In some cases, faculty may provide a preliminary portfolio review and evaluation of the student's unofficial transcript during these meetings. Additionally, Enrollment management personnel travel to different conferences and schools throughout the state promoting all graduate programs. Enrollment management staff are orientated to all graduate programs every fall semester. Specific staff members are assigned certain graduate programs but all staff have knowledge about the program's mission and entrance requirements. Once contact information from a potential student is received the appropriate MPH faculty (Hickory or Asheville) is put in contact with the student and a communication plan is initialized. Currently there is not a specific recruitment plan for the recruitment of international students into the MPH program.

Additionally, we offer a bridge program from an undergraduate in community health into the MPH program. Students that maintain at least a 3.25 GPA in their undergraduate coursework are eligible to enroll in MPH course offerings during their Junior and Senior Year, which will potentially allow them to finish the MPH program in a year and a half. Students are notified by university communications about this bridge program multiple times during the AY. Additionally, the community health Program Coordinator identifies students who are eligible for this opportunity and encourages them to apply.

**4.3b. Statement of admissions policies and procedures. If these differ by degree (eg, bachelor's vs. graduate degrees), a description should be provided for each.**

All graduate applications are completed online. The Program Coordinator is charged with developing program-level admission standards that meet or exceed the minimum

standards set forth by the Graduate School. Admission standards must be approved by the School Chair and College Dean, and then submitted for approval by the Graduate Studies Council. Based upon these standards the University's Enrollment Management office is charged with making admissions decisions with the verification of the Program Coordinator. The university uses the Recruiter admissions management system to streamline this process. The Program Coordinator and all Enrollment Management staff have access to Recruiter enter applicants, review files and documents communications with potential students. With rolling admissions an applicant is informed within a two-week period if they have been accepted. Enrollment Management processes applications ensuring receipt of all of the required credentials and documents.

The program accepts applicants who will contribute to the quality of interaction in the classroom, be prepared to develop competencies through completing the program's various learning activities, and produce an MPH research project that demonstrates their competence for a career in public health practice in communities. Students are evaluated for their ability to succeed in the program by evaluating the total admissions application. Interviews with applicants are conducted if deemed necessary by the Program Coordinator and provisional admission might be extended to applicants don't meet all of the requirement standards but enough that it is determined they can be successful if monitored and only allowed to enroll in 6 credit hours their first year in the program. After they successfully completed their first year without earning any grades of "C" or below they are fully accepted.

Lenoir-Rhyne's MPH program caters to individuals that are working full time. As a result, all of our course offerings are only offered during the evening. Many of our students are already health educators or public health practitioners who bring a wealth of knowledge into the classroom setting.

The criteria for admission include:

1. Undergraduate cumulative GPA of 2.7 or higher on a 4.0 scale
2. GRE Scores:
  - Verbal – minimum 147
  - Quantitative – minimum 147
  - Analytical Writing – minimum 3.5Or
  - Miller Analogies Test (MAT) – minimum 390
3. An essay clearly articulating goals and life experiences that have impacted their decision to pursue an MPH
4. Resume

#### 5. Recommendation Letter – career track admissions

The “Bridges to Dreams” program from Community Health to MPH consists of the Articulated Bridge in which specific MPH coursework will satisfy undergraduate degree requirements; thus shortening the length time for the student to complete the MPH program.

General admission requirements for the program consist of the following:

1. Be an LR student in good standing on all accounts (i.e. academic, judicial, and financial) who will have earned at least 92 credit hours by the end of the semester in which she/he is applying to the program.
2. Intend to graduate with an undergraduate degree from LR and file (or have filed) an official application for degree with the Office of the Registrar.
3. Possess a cumulative GPA of 3.25 or above on all LR work to date, an overall 3.25 on all college level coursework at LR or elsewhere, and a 3.25 in undergraduate work in the discipline in which she/he seeks graduate admission.

**4.3c. Examples of recruitment materials and other publications and advertising that describe, at a minimum, academic calendars, grading and the academic offerings of the program. If a program does not have a printed bulletin/catalog, it must provide a printed web page that indicates the degree requirements as the official representation of the program. In addition, references to website addresses may be included.**

We have the following recruitment materials that are disseminated to prospective students at open houses, conferences, direct email contact, Recruiter and/or mailings:

1. Brochures and postcards
2. Flyers and fact sheet
3. Emails and letters

This past AY, the University has completed a ‘rebranding’ as well as updated to using Recruiter software for admissions. Once a prospective student has provided information (email and/or address) a systematic release of letters and/or email will be sent until the student request it to stop or has deposited.

4. Website for the MPH Program

The University’s website is currently being updated for the start of the AY 2016-17. There will be an ‘inner’ and ‘outer’ web and information will be specific to each format. The ‘outer’ web will be for recruitment and other University information for individual who are not currently affiliate with

the University. The ‘inner’ web will be for individuals who are affiliated with the University and have a University email account.

- ERF Recruiting Materials
- EFF Other/MPH Handbook
- ERF Other/Programs of Study

**4.3d. Quantitative information on the number of applicants, acceptances and enrollment, by concentration, for each degree, for each of the last three years. Data must be presented in table format. See CEPH Data Template 4.3.1.**

Table 4.3d. Quantitative Information on Applicants, Acceptances, and Enrollments, 2013 to 2016				
		AY 2013-14	AY 2014-15	AY 2015-16
MPH	Applied	48	39	37
	Accepted	23	22	35
	Enrolled	18	11	23

**4.3e. Quantitative information on the number of students enrolled in each specialty area of each degree identified in the instructional matrix, including headcounts of full- and part-time students and an FTE conversion, for each of the last three years. Non-degree students, such as those enrolled in continuing education or certificate programs, should not be included. Explain any important trends or patterns, including a persistent absence of students in any degree or specialization. Data must be presented in table format. See CEPH Data Template 4.3.2.**

Table 4.3e. Student Enrollment Data from 2013 to 2016						
	AY 2013-14		AY 2014-15		AY 2015-16	
	HC	FTE	HC	FTE	HC	FTE
MPH	69	29.75	64	24.625	77	25.5

HC Students – Fall +Spring; AY 2015-2016 – Fall + Spring projected  
 FTE Students – 1 FTE = 1 student taking 9 or more semester hours; Fall + Spring / 2

**4.3f. Identification of measurable objectives by which the program may evaluate its success in enrolling a qualified student body, along with data regarding the performance of the program against those measures for each of the last three years. See CEPH Outcome Measures Template.**

Outcome Measure	Target	AY 2013-14	AY 2014-15	AY 2015-16
Newly enrolled MPH students will meet GRE criteria: Verbal of at least 150 <b>OR</b> GPA of at least 3.2: <sup>1</sup>	75%	50%	54%	65%
Newly enrolled MPH students will have at least 6 years of work experience <sup>2</sup>	20%	11.1%	18%	8.7%

<sup>1</sup> GRE scores: Career track admissions and LR alumni (with adequate GPA) are not required to submit GRE scores. MAT scores are accepted as equivalent.

<sup>2</sup> Work experience: Measured by number of current MPH students enrolled by completing career track admissions. To qualify for career track admission of minimum of 6 years of work experience is required.

**4.3g. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

The criterion is met with commentary

**Strengths:**

Enrollment management schedules multiple open houses each semester for students interested in graduate programs at Lenoir-Rhyne. Faculty participate in these open houses, each time they are held so that we can reach students that are interested in the MPH program. The new Recruiter software has streamlined the recruitment process and puts all information in one central location. All reviewers review the whole application and not just test scores or GPA. The communication between Enrollment Management and the program is exceptional.

**Weaknesses:**

Program faculty have limited time to engage in additional recruitment efforts because of teaching, service and research responsibilities. All of the initial recruitment is completed by Enrollment Management. Provisional acceptances allow students with sub-par GPA or



test scores to take classes on a part-time basis. While many of these students succeed, some do not and in a small program, that is reflected in the percentages. We have yet to reach a number of applications that would allow us to be more selective with acceptance.

Plans:

Continue to explore all avenues of recruitment including at national, regional and state conferences and to appeal to working adults through our LR Partners programs. Work with enrollment management and administration to ensure we are accepting students who have the potential to be successful in the program. Community partners, advisory board members, and MPH faculty anticipate that as the program graduates more students and those students are successful in the workforce as well as achieving accreditation, our program will become more recognized and see an increase in applications. Other ideas are to promote the program directly to undergraduate students at neighboring universities with degrees in the health sciences by contacting faculty at those institutions and asking to be included in campus graduate school fairs or coming into the classroom.

**Criterion 4.4 Advising and Career Counseling. There shall be available a clearly explained and accessible academic advising system for students, as well as readily available career and placement advice.**

**4.4a. Description of the program's advising services for students in all degrees and concentrations, including sample materials such as student handbooks. Include an explanation of how faculty are selected for and oriented to their advising responsibilities.**

Enrollment Management sends accepted students a letter of intent to matriculate and refers each student to the Program Coordinator for additional information regarding the curriculum. Although graduate student advising is not required for students to enroll in courses (meaning they do not have to be “released” by their MPH faculty advisor to sign up for courses in the enrollment system), MPH faculty advisors prefer to meet with each MPH student in order to develop a written program plan with the student. Currently, the Program Coordinator is based in Hickory and is responsible for advising all MPH students in Hickory that wish to be advised. Similarly, the faculty member in the Asheville Center for Graduate Studies is responsible for meeting with the students in Asheville that want a written program plan. Currently, this is accomplished by having students set up appointments with the faculty member. Lastly, students are always encouraged to meet with any of the MPH faculty at any time.

The MPH Program Coordinator created a student handbook (ERF Other/MPH Handbook) for all students in the MPH program and updates it annually. The program holds one annual program meeting at the beginning of each fall semester. All students are invited to this meeting via email. At this meeting primary MPH faculty and students discuss key policies and procedures that are described in the handbook. Additional questions that students may have are also addressed at this time.

**4.4b. Description of the program's career counseling services for students in all degree programs. Include an explanation of efforts to tailor services to meet specific needs in the program's student population.**

Students are responsible for identifying their own internships and job placement, but do rely on faculty to try to help them as they search for a placement sites. Lenoir-Rhyne University's Career Center works with graduate students to identify opportunities for job placement. The Career Center host career fairs (one every spring specifically for health sciences) and has a job board posted online.

Career counselors assist students with writing effective resumes and cover letters as well as preparing for interviews, identifying resources they can use to identify prospective

employers through employment ads, reading journals, websites, reading professional newsletters, and using other resources that may aid in job placement. Additionally, an advantage for the Asheville Center for Graduate Studies is that the campus is actually located on the top floor of the Chamber of Commerce Building. Asheville students have these resources at their fingertips as well.

At the program level, the MPH program has current student and alumni email distribution list. Job announcements received by the Program Coordinator that may be of interest to MPH students are sent out to all via these distribution lists. Additionally, there is a job links document posted in the program's learning management system's site that has links to many popular job search websites (ERF Other/Internship and Job links).

**4.4c. Information about student satisfaction with advising and career counseling services.**

The program evaluates satisfaction with advising and career counseling through the recently developed and implemented Alumni Survey. This survey was administered for the first time in the fall of 2015 and will be administered annually.

Twelve of the sixteen alumni completed (75%) the survey. Eighty-three percent responded that they were satisfied, more than satisfied or very satisfied with career guidance. Regarding quality of advising, 100% responded they were more than satisfied or very satisfied. Additionally, alumni were asked to provide information on how they valued the degree, in which 83% responded as high or extremely high. Lastly, 7 areas of professional and personnel skills were evaluated with the majority reporting more than satisfied or very satisfied. See ERF Evaluation Instruments and Results / Alumni Survey for complete results.

**4.4d. Description of the procedures by which students may communicate their concerns to program officials, including information about how these procedures are publicized and about the aggregate number of complaints and/or student grievances submitted for each of the last three years.**

The MPH program follows University policy for initiation of formal complaints. Students are encouraged to follow the chain of command to resolve issues prior to filing a formal complaint. Students should first address concerns with the faculty involved. If issues are not resolved, then the student is advised to address concerns with the Chair of the school of HESS and the Dean of the Graduate Studies. Students who wish to file a formal complaint at the University level should follow procedure as outlined in University's Student Handbook. This information is provided to the students in the MPH Handbook (ERF Other/MPH Handbook).

Members of the Lenoir Rhyne University Community who feel they have experienced discrimination, disciplinary action, or harassment based upon race, color, national origin, ethnicity, ancestry, religion, creed, age, sex, marital status, sexual orientation, gender, gender expression, gender identity, non-conformity with gender stereotypes, physical or mental disability, or veteran status have the rights to grievance procedures which should both address the complaints and see that misbehavior is permitted or that their wrongdoings are corrected. These processes are described in the Faculty Handbook and University Student Handbook.

A formal grievance can be filed with the Office of Student Affairs for individuals who feel that their complaint cannot be resolved through informal discussions at the program level. The University and Office of Student Affairs reserves the right to remove an individual from campus pending the completion of complaint procedures, in any situation, indicate that it is necessary to do so. All complaints and grievances filed with the Office of Student Affairs are maintained. Over the past three years, the MPH Program Coordinator has successfully addressed all but one grievance informally at the program level. One grievance was filed with the Office of Student Affairs, see ERF Student Complaints and Grievances for details.

**4.4e. Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.**

The criterion is met.

**Strengths:**

All students are made aware of a MPH student handbook and are invited to attend an annual MPH Program Meeting that is held at the start of each fall semester. Lenoir-Rhyne's career and counseling center provides a wide array of career development and job search tools. The MPH program does distribute job announcements to students. Students are asked to evaluate whether or not the program provided adequate advising and career counseling in the Alumni Survey.

**Weaknesses:**

None identified

**Plans:**

To continue to monitor complaints and grievances informally at the program level until changes are necessary. Any complaints are reported to the School Chair so they are aware of the situation.