

Assurance of Student Learning Report 2023-2024	
CHHS	Department of Public Health
Master of Public Health-152	
Xiuhua Ding	
Is this an online program? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Please make sure the Program Learning Outcomes listed match those in CourseLeaf . Indicate verification here <input checked="" type="checkbox"/> Yes, they match! (If they don't match, explain on this page under Assessment Cycle)

***** Please include Curriculum Map as part of this document (at the end), NOT as a separate file.**

Use this page to list learning outcomes, measurements, and summarize results for your program. Detailed information must be completed in the subsequent pages. Add more Outcomes as needed.		
Program Student Learning Outcome 1: Synthesize foundational MPH competencies		
Instrument 1	Direct: Integrative learning experience (ILE)/capstone paper	
Instrument 2	Indirect: Student self-assessment of competency development (MPH Exit Survey)	
Instrument 3		
Based on your results, check whether the program met the goal Student Learning Outcome 1.		<input checked="" type="checkbox"/> Met <input type="checkbox"/> Not Met
Program Student Learning Outcome 2: Apply MPH competencies in collaboration with public health/related professionals		
Instrument 1	Direct: Summary Report: Applied practice experience projects	
Instrument 2	Indirect: Self-report of service beyond curricular/program requirements (MPH Exit Survey)	
Instrument 3	Indirect: Student reflection of applied practice experiences	
Based on your results, check whether the program met the goal Student Learning Outcome 2.		<input checked="" type="checkbox"/> Met <input type="checkbox"/> Not Met
Program Student Learning Outcome 3: Develop plan, program, or policy to address a public health problem.		
Instrument 1	Direct: Program plan (PH 575)	

Instrument 2	Direct: Policy Brief (PH 548)		
Instrument 3	Indirect measure: Student self-assessment of program preparation to design a population-based policy, program, project or intervention (MPH Exit Survey).		
Based on your results, check whether the program met the goal Student Learning Outcome 3.			<input checked="checked" type="checkbox"/> Met <input type="checkbox"/> Not Met
Assessment Cycle Plan:			
Nothing will change.			

Program Student Learning Outcome 1			
Program Student Learning Outcome	Synthesize foundational MPH competencies		
Measurement Instrument 1	<p>NOTE: Each student learning outcome should have <u>at least one direct measure of student learning</u>. Indirect measures are not required.</p> <p><u>ILE paper</u>: Students produce a professionally written paper that synthesizes MPH program competencies and minimally includes a four parts: 1) thorough overview of the public health problem; 2) literature review, 3) critical analysis/results, and 4) public health recommendations. Rubric is attached.</p>		
Criteria for Student Success	Students will earn a mean score of 2.0 or higher (of 3) on their ILE overall, and on each of the four parts mentioned above.		
Program Success Target for this Measurement	80% of students graduating in AY 23-24 will meet the criteria for student success.	Percent of Program Achieving Target	75%(12/16)

Methods	The census of MPH graduating in AY 23-24 was assessed (N=16). Two independent reviewers assessed each ILE, rating each part as high pass (3), pass (2), low pass (1), or did not pass (0). A mean score was computed by averaging the scores of the four parts. Each rater's scores (parts and overall) were averaged, creating a single score for each student. For ASL reporting, these mean scores were categorized by scores ≥ 2 and <2 .		
Measurement Instrument 2	<u>MPH Exit Survey</u> : Graduating students are required to complete an exit survey, which is administered through Qualtrics. In one section, students self-assess competency development overall using a five-star system. This singular item is a global measure of student perceptions on how well the program developed the required foundational and program competencies.		
Criteria for Student Success	Students rate competency development with 4 or more stars (out of five, with five being the highest).		
Program Success Target for this Measurement	80% of respondents will meet criteria for student success	Percent of Program Achieving Target	86%(12/14)
Methods	Census of graduating students in AY 23-24 complete mandatory MPH exit survey through Qualtrics (N=15). System identifies who has completed the survey. Results are analyzed descriptively (frequency, central tendency). Frequency data are recoded in and compared to target.		
Based on your results, highlight whether the program met the goal Student Learning Outcome 1.		<input checked="" type="checkbox"/> Met	<input checked="" type="checkbox"/> Not Met
Results, Conclusion, and Plans for Next Assessment Cycle (Describe what worked, what didn't, and plan going forward)			
<p>Results: The ILE passing rate in the instrument 1 is slightly lower than program success target for the measurement. One explanation is that we have small sample of students. One or two students with low pass will significantly change the percentage.</p> <p>Conclusions: The current ILE process is doable, especially after the accreditation specialist was hired. It is evident that putting these graduates a class for ILE is working better than working with each student individually. Students enjoyed working with primary reader. However, the ILE process is not efficient in term of reviewing, tracking and grading. Also, with the current setup for the ILE class, some students earn credits and some students do not. It creates problems for reflecting accurate teaching load. For students who take the class without earning the credit, the students are potentially overwhelmed with extra work and have lower expectation towards the completion of the ILE, especially most of them graduates at that semester.</p> <p>Plans for Next Assessment Cycle:</p>			

The program will revisit the ILE process and determine how we revise and/or refine the tracking and reviewing process in order to make it efficient. On the other hand, the program will revisit the curriculum and decide whether we should make the ILE class as a required class.

Program Student Learning Outcome 2			
Program Student Learning Outcome	Apply MPH competencies in collaboration with public health/related professionals.		
Measurement Instrument 1	<p>NOTE: Each student learning outcome should have at least one direct measure of student learning . Indirect measures are not required.</p> <p><u>Applied practice experience products.</u> Our accrediting agency requires each student to complete a minimum of two competency-based products in collaboration with a public health/related agency.</p>		
Criteria for Student Success	Products created during applied practice experiences will demonstrate alignment with MPH competencies.		
Program Success Target for this Measurement	90% of graduates' products align with five or more competencies	Percent of Program Achieving Target	100%
Methods	Students' applied products are assessed using the CEPH competencies throughout their program. A summary database is maintained and products are kept in individual files on the shared drive. Prior to each student's graduation, these documents/files are audited and assessed for compliance. Products include such deliverables as a lesson plan, database, infographic, presentation, webpage, report, program proposal, social media plan, etc. N=15		
Based on your results, circle or highlight whether the program met the goal Student Learning Outcome 2.			<input checked="checked" type="checkbox"/> Met <input type="checkbox"/> Not Met
Results, Conclusion, and Plans for Next Assessment Cycle (Describe what worked, what didn't, and plan going forward)			
<p>Results: Results were what was expected. Students are required to meet the measurement in order to graduate.</p> <p>Conclusions: The current APE process was a disaster. After the accreditation specialist was hired, the current applied practice experience (APE) process was determined doable, but cumbersome. Students were not clear about the APE process and requirements. It needed substantial amount time to answer students' questions about APE. Students depended on the program to track and record their hours and products. It added a substantial amount of unnecessary service time for that purpose. Furthermore, the current APE setup allows students to complete APE during any</p>			

time of the program. However, most of students chose to complete it at the last semester right before their graduation. On the other hand, it makes sense that students conduct APE after they finish the required course and master the competencies.

Plans for Next Assessment Cycle: The program will figure out a better way for students' tracking and submitting their products. So students are able to monitor the hours and products on their own. The program is also going to revise the APE process. It is possible that all APE needs to be done in one class. The program is also going to amend APE handbook to make it as clear as possible once we figure out the process.

Program Student Learning Outcome 3					
Program Student Learning Outcome	Develop plan, program, or policy to address a public health problem.				
Measurement Instrument 1	NOTE: Each student learning outcome should have at least one direct measure of student learning . Indirect measures are not required.				
Criteria for Student Success	<u>Program Proposal:</u> Based on an identified public health problem, PH 575 students develop a program proposal which includes program goals and objectives, budget, marketing, and sustainability.				
Program Success Target for this Measurement		Students score 80% or higher on program proposal	Percent of Program Achieving Target	92%(12/13)	
Methods	Planning projects are graded by the course instructor. Individual grades are reported on a census of students completing PH 575 during the academic year. Rubric attached. N=13				
Measurement Instrument 2	Policy Project: Students in PH 548 assess existing policy for its impact on public health issues and make recommendations for policy change.				
Criteria for Student Success	Students score at least 80% on policy project.				
Program Success Target for this Measurement		80%	Percent of Program Achieving Target	100%(16/16)	
Methods	The policy paper is graded by the course instructor. Individual grades are reported on a census of students completing PH 548 during academic year. N=16				
Based on your results, circle or highlight whether the program met the goal Student Learning Outcome 3.				<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Not Met

Results, Conclusion, and Plans for Next Assessment Cycle (Describe what worked, what didn't, and plan going forward)		
<p>Results: Results were what was expected. Students were doing well and mastered the skills that are needed to develop plan, program, or policy to address a public health problem.</p> <p>Conclusions: The two classes projects are appropriate instruments to measure this learning objective</p> <p>Plans for Next Assessment Cycle: The program is going to refine the assessment in order to help build students' skills to develop plan, program or policy to address a public health problem.</p>		

CURRICULUM MAP TEMPLATE

Program name:	Master of Public Health
Department:	Public Health
College:	College of Health and Human Services
Contact person:	Xiuhua Ding
Email:	xiuhua.ding@wku.edu

KEY:

I = Introduced

R =

Reinforced/Developed

M = Mastered

A = Assessed

			Learning Outcomes		
			LO1:	LO2:	LO3:
			Synthesize foundational MPH competencies	Apply MPH competencies in collaboration with public health/related professionals	Develop plan, program, or policy to address a public health problem.
Course Subject	Number	Course Title			
PH	575	Fundamentals of Public Health Planning	M/A	M/A	M/A
PH	548	Community Organization for Health Education	M/A	M/A	M/A

ILE Rubric

CONTENT REQUIREMENT	High Pass (3)	Pass (2)	Low Pass (1)	Does Not Pass (0)
Clearly described public health issue: <i>Public health issue is clearly defined, sufficiently focused, and supported by current evidence.</i>	Topic is clearly defined and focused. The importance of the topic is well articulated and supported by current data and other reputable sources.	Topic is sufficiently defined and focused. The importance of the topic is adequately articulated and supported by current data and reputable sources.	Topic is not well defined and/or focused. The importance of the topic is marginally supported by current data and/or other reputable sources.	Topic is poorly define and unfocused. Importance is insufficiently supported.
Literature Review: <i>Evidence is relevant, sources correctly cited, and synthesized to effectively provide insight into the question/issue</i>	Evidence is relevant, timely, and clearly summarized with sources correctly cited. Vast majority of supporting evidence come primarily from peer-reviewed journals and other reputable professional sources.	Evidence is mostly relevant and timely, and sufficiently summarized. Most supporting evidence come from reputable sources.	Evidence is marginally relevant, timely, and/or summarized. An adequate amount of evidence come from reputable sources.	Evidence is not relevant, timely, and/or adequately summarized. An inadequate amount of evidence comes from reputable sources.
Critical Analysis: <i>Insightful discussion relative to content form and supporting evidence.</i>	Discussion is thoughtful and insightful, and clearly informed by evidence.	Discussion is sufficient, but but somewhat lacking in thoughtfulness, insight, and understanding of evidence.	Discussion is marginally sufficient, but lacks depth of thoughtfulness, insight, and/or understanding of evidence.	Discussion is inadequate, and does not demonstrate insight or adequate understanding of evidence.
Discuss public health implications: <i>Implications of evidence, research, and/or findings are clearly identified and justified, and actions recommended are comprehensive, feasible, innovative, and ethical</i>	Recommendations flow logically from evidence, are well-argued, and/or are comprehensive, feasible, innovative, and/or ethical	Recommendations somewhat flow logically from evidence and are justified though there are gaps, and/or recommendations are somewhat comprehensive, feasible, innovative, and/or ethical	Recommendations do not logically follow from evidence, are questionable and/or inappropriate, and/or not comprehensive, feasible, innovative, and/or ethical	Does not provide relevant recommendations.

PH 575: Program Planning in Public Health Practice

Program proposal assignment instructions

Double-spaced

12-point standard font

References and in-text citations in APA format

Overview

Over the course of the semester, you will work on a group project culminating in a written and presented program proposal. Students will work together to prepare a written proposal as well as a power point presentation designed to be given to an organization for approval (may include board members, stakeholders, key informants, etc.).

Keep in mind, you will need to divide sections and assign a leader to each. Obviously one person will be responsible for leading multiple sections, so make sure you check and see how best to divide the leadership aspect as equally as possible. Also, each student is responsible for assisting with EACH section in some part.

You will need to communicate with each other at every step of this process. Please reach out to me immediately if you are having difficulty with any aspect of this. Remember, you are creating an ACTUAL program proposal for KY Cancer West. You will be required to meet with a representative from this program at least three times throughout the semester. This may be done through discussion posts, recorded video, presentation or another means pre-approved by me.

Below is a description of what is to be included in each section of the program proposal.

Selection/Discussion of Health Issue: Based on options and information provided by Kentucky Cancer West, students will identify the health focus for the program plan.

Description of the Target Population/Audience: Students will provide a detailed description of the group which the program is being designed. The description should be supported by research, include population data specific to the population, and include characteristics that are unique to the chosen population.

Needs Assessment/Rationale: Conduct a needs assessment for the program based on current literature and data and identify the health issue the program will address. This should include information to support the need for the proposed program; incorporate data related to health status, health-risk behaviors and lack of programs. Describe impact of the social determinants of health on issue.

Program Description/Goals and Objectives: Develop the mission statement, program setting, goals and objectives, and the program description for the program plan.

Planning Model: Develop and fill out planning model related to the program.

Intervention strategies: Create and submit detailed plans describing the activities to be used to accomplish the program objectives. Describe theoretical constructs that will be applied to the health issue/program and identify why these constructs are an appropriate choice.

Identify and describe relationship of the Stakeholders, Coalition Members, Partnerships and Taskforce: Create and submit a detailed description of the current stakeholders, coalition members, partnerships and taskforce. This description should include commentary explaining how they benefit from the program plan and/or why they have established the relationship with the target population. Also, the method used to identify stakeholders and build coalitions and partnerships should be described. Students will determine whether additional members should be added as partners or coalition members and provide strategies to identify stakeholders, coalition members and identify partnerships.

Identification and Allocation of Resources: Personnel, facilities, equipment/supplies and timelines needed for the program are described. Budget MUST be included.

Marketing strategy: Describe the marketing strategy and techniques to be used for the program. Cultural competence should be illustrated in communication tools. Sample of selected strategies will be submitted. Examples of these include: brochure, billboard (can use power point for this), audio ad, social media ad, etc..

Implementation plan: Students will describe plan to implement program including location, strategies, scope, and timeline. Identify potential barriers and plans to address them.

Evaluation plan: Describe manner in which the program will be evaluated. Discuss plans for how process evaluation will be conducted. Do NOT include hypothetical data. This is a plan for how data will be conducted and used.

Assess competencies: 4, 7-11, 18

Required elements (Worth 50 points)	Includes all required elements. Follows all directions. Content is reflective of graduate level work. 40-50 points	May not include all required elements. May not follow all directions. Not very clear or somewhat well-organized. Content may not be reflective of graduate level work. 21-39 points	Does not include all required elements. Not organized. Not reflective of graduate level work. 0-20 points	Feedback:
Application of Course material (Worth 50 points)	Applied constructs from course material appropriately and provides detailed explanations. Supports points. Student displayed critical thinking/introspection in post or response. 40-50 points	Applied constructs from course material inappropriately or does not provide detailed explanation or support. Weak display of critical or introspective thinking. 21-39 points	Does not use constructs appropriately. No or minimal support or explanations. Does not display critical or introspective thinking. 0-20 points	Feedback:
Teamwork (Worth 10 points)	Worked well with partner. Communicated effectively and timely and completed equal amount of work. 8-10 points	Worked okay with partner. May have not communicated well or timely. May not have completed equal share of work. 3-7 points	Did not work well as a partner. Was difficult to reach or respond to communication. Did not compete fair share of work. 0-2 points	Feedback:
Grammar, mechanical, or syntax issues (Worth 5 points)	Free of this type of errors. 4-5 points	Few of these types of error. 1-3.5 points	Several of these errors. 0 points	Feedback:

References (Worth 10 points)	Uses and cites credible references using APA style. 10 points	Uses credible references, but not in APA style. 7.5 points	Does not use any references or does not use credible sources. 0 points	Feedback:
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Policy Project

Be sure to read this document carefully and ask any questions you have. This project is multi-part, and you will be evaluated on each component.

For this project, you will create an abbreviated policy brief and supporting material in which you identify and articulate a public health problem; identify and analyze multiple policy options; and strategize on how to develop your chosen policy solution. As part of that strategy, you will create advocacy materials.

Final products:

You will turn in three components for this project:

- (1) an abbreviated policy brief
- (2) a fact sheet (a “one pager”)
- (3) a recorded presentation of your elevator speech.

Detailed instructions for each follow.

Product 1: Abbreviated policy brief.

A policy brief is a document meant to advise a public actor (usually a legislator or other policy maker) to take a specific course of action. While the content of the policy brief must be factual and evidence-based, the brief is also a piece of persuasive writing. It is not an academic research paper! You will need to present your research in a way that prompts the desired response. Your policy brief should follow this structure:

Cover page with title, date, name

Executive summary (essentially, an abstract. In full-length policy briefs, this may be several pages long; here it should be about two paragraphs long and summarize *the full brief*, including the problem statement, your evaluation of the problem, potential policy solutions, and your analysis and recommended solution.) In your policy brief, the executive summary comes first—right after the cover page. However, you will draft this section last—after you’ve written the full policy brief (you can only summarize it after you’ve written it, right?)

I. Introduction: problem statement along with contextual background (the who, what, where, when, and why/how much of the problem definition.) You should be providing evidence in the form of epidemiological statistics to illustrate the scope and magnitude of the problem. Discuss why or how this problem falls under government regulation (whether that is federal, state, or local) and is best addressed through policy. Length may vary, but this section should probably fall between 1.5-3 pages.

II. Evaluative criteria: this section includes a discussion of the legal, ethical, and political considerations of the problem; essentially, this is where you discuss all of the thorny issues involved! What are the ethical considerations and/or legal considerations that must be taken into account? This is also where you identify and discuss stakeholders, how they are affected by the current state of the problem, and how they may respond to and be impacted by change in the status quo. Again, length may vary, but should fall between 2-3 pages.

III. Policy options: this section consists of a list of policy options along with a brief description of each. You will have four options listed. The first is the status quo—the current policy or state of the situation. If there is a policy in place describe it; if there is not, describe the current status. The second through fourth policy options are the revised drafts of the ones you identified or developed and explained in Week 6. This section should be about 1 page long.

IV. Analysis and recommendation: in this section, you will briefly analyze each of the policy options (about two paragraphs each for three of these options—plus the status quo, in which you consider the political, economic, ethical, social/cultural feasibility as you did in your Week 6 exercise) and identify your recommendation. You’ll defend your recommended option a little more fully than the other three options, with the goal of convincing the reader of its appropriateness. This section should be around 3 pages.

Reference list. Since your policy brief should be evidence-based from beginning to end, you should have at least 6-7 credible references—appropriate public health websites and peer-reviewed articles. Your citations should follow APA guidelines.

Product 2: One-Pager

Your fact sheet will be no more than one page (front and back permitted—so your PDF can be two pages that would be printed on a single sheet.) Ideally policymakers will be well informed and educated on the issues they legislate; however, their time is in short supply. The one-pager is an advocacy tool that is shorter and easier to read than the policy brief. There are hints, tips, guidelines, and sample one pagers available on Blackboard for you to use, so the instructions here are brief. One way to think of the one pager is as a visually appealing, even more easily digestible version of the executive summary, providing the key points you need to make to convince a lawmaker of the importance of this issue.

Product 3. Elevator speech

The elevator speech or pitch is another advocacy tool. Legislators are quite busy, especially during legislative sessions. You may only have a few minutes in which to identify and explain the problem as well as request a specific policy response. Therefore, it's important to be able to whittle things down to the essentials and present complex material briefly and clearly. So, don't be lulled into thinking this is easy! It actually takes a lot of planning and editing to create a successful elevator speech. Traditionally, an elevator speech is just a minute (the time it takes an elevator to get you to your destination), but for this assignment you have up to three minutes to make your case. It is a supplement to the fact sheet and policy brief.

You must record this presentation. Screencast-o-matic is free to use and will allow you to record video using your computer but feel free to use any application you wish. If you are facing technological limitations, send me an email.

Grading rubric, Policy Project

Criteria	Excellent (A)	Good (B)	Satisfactory (C)	Unsatisfactory (D-F)
Policy Brief: structure, format, readability (10%)	All parts present (executive summary through reference list); formatting follows instructions; writing is clear, easy to follow with no typos.	All parts present (executive summary through reference list); formatting follows instructions; writing is clear with very few typos.	All parts present (executive summary through reference list); formatting largely follows instructions; writing is generally clear with only minor typos.	One or more parts is missing; formatting varies significantly from instructions; writing is not clear and/or includes major typos.
Policy Brief: content (executive summary, problem ID, evaluation, options, analysis & recommendation) (40%)	Executive summary presents clear, concise summary of full brief. Problem is clearly identified and well defined, with epidemiological evidence justifying selection; stakeholder identification is comprehensive and logical. Evaluation of legal, ethical, and political criteria is comprehensive and insightful; accounts for differences in perspective of stakeholders, differences in impact on stakeholders. Policy options section includes identification and description of status quo plus three additional options; each is explained fully. Thoughtful analysis of each option, taking political, economic, ethical, social/cultural feasibility into account; policy recommendation is logical and thoughtful, reflecting careful analysis.	Executive summary presents clear summary of full brief. Problem is identified and defined, with epidemiological evidence justifying selection; stakeholder identification is logical. Evaluation of legal, ethical, and political criteria is comprehensive; accounts for differences in perspective of stakeholders and differences in impact on stakeholders. Policy options section includes identification and description of status quo plus three additional options. Analysis of each option takes political, economic, ethical, social/cultural feasibility into account; policy recommendation is logical, reflecting previous analysis.	Executive summary presents partial summary full brief. Problem is partially clearly identified or defined; epidemiological evidence justifying selection is partial or incomplete; stakeholder identification is somewhat logical. Evaluation of legal, ethical, and political criteria is present but may be incomplete; does not fully account for differences in perspective of stakeholders and/or differences in impact on stakeholders. Policy options section includes identification and limited description of status quo plus three additional options. Analysis of each option does not fully take political, economic, ethical, social/cultural feasibility into account; policy recommendation is somewhat logical, partially reflecting previous analysis	Executive summary incomplete or missing. Problem is not clearly identified or defined; epidemiological evidence justifying selection is incomplete or missing; stakeholder identification is not logical or incomplete. Evaluation of legal, ethical, and political criteria is missing or incomplete; does not account for differences in perspective of stakeholders and/or differences in impact on stakeholders. Policy options section is missing status quo or one or more additional options. Analysis of one or more options is missing or does not take political, economic, ethical, social/cultural feasibility into account; policy recommendation is not logical or does not reflect previous analysis
Fact Sheet: Content and structure (30%)	Presents all major points from all sections of policy brief in clear, concise, and easy-to-read manner. Thoughtful summarizing and distilling of material from policy brief.	Presents major points from all sections of policy brief in clear, easy-to-read manner. Clear summarizing of material from policy brief	Presents points from policy brief in mostly clear, easy-to-read manner. Material comes from policy brief but is pulled somewhat at random	Presents some points from policy brief but major points and/or clarity is lacking. Material is not pulled together coherently.
Elevator speech: Content and delivery (20%)	Clear, easily understandable, professionally-delivered content. Adheres to time limit. Thoughtful summarizing/distilling of material from policy brief	Clear, easily understandable content; mainly professionally-delivered. Adheres to time limit. Summarizing material from policy brief	Content somewhat clear and understandable; unrehearsed or difficult to follow. Goes over or significantly under time limit. Material from policy brief pulled somewhat at random.	Content missing or not clear and/or understandable; unrehearsed or difficult to follow. Goes significantly over or under time limit. Material is not pulled together coherently

