Council on Education for Public Health Adopted on October 7, 2016

REVIEW FOR ACCREDITATION

OF THE

STANDALONE BACCALAUREATE PROGRAM

 AT

SUNY - CORTLAND

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES: April 11-12, 2016

SITE VISIT TEAM: Cheryl Addy, PhD, Chair Alison Sullivan, MPH

SITE VISIT COORDINATOR: Nicole E. Williams, MPH

CRITERIA:

Accreditation Criteria for Standalone Baccalaureate Programs, amended June 2014

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1.0 LEADERSHIP, MANAGEMENT AND GOVERNANCE

Criterion 1.1: The program maintains an organizational description and organizational chart(s) that define the program's administrative structure and relationships to other institutional components. The organizational chart presents the program's relationships with its department(s), school(s), college(s) and other relevant units within the institution.

(For evidence, see DR 1-1 and DR 1-2)

Finding:	
Met	

Team Comments:

Observations from the Self-Study

The program presented an organizational chart that clearly identifies and summarizes the structure and relationships among faculty, adjunct faculty and staff members. The program also maintains organizational charts representing its relationship to other units within the institution.

The community health program being reviewed for accreditation is located within the Health Department, which offers two additional bachelor's degree programs in human service studies and health education and three master's degrees: an MS in community health and a MSEd and MST in health education. The department chair serves as the program leader for all programs within the department, including the SBP. All full-time and adjunct faculty report to the chair.

The department is located in the School of Professional Studies. The chair reports to the dean of the school. The dean reports to the provost and vice president for academic affairs. The provost reports to the president of SUNY-Cortland.

Observations on Site

Site visitors confirmed that the program's organization is aligned with the organizational outline materials provided in the self-study.

During the site visit, program representatives specifically described their relationship to other programs within the department and how the department interacts with the other related departments, especially where there is an overlap in coursework and transfer students between departments. Meetings with the dean and vice provost indicated that the program and department serve as a model to other departments within the school and across campus.

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Criterion 1.2: The program demonstrates administrative autonomy that is sufficient to affirm its ability to fulfill its mission and goals and to conform to the conditions for accreditation. Administrative autonomy refers to the program's ability, within the institutional context, to make decisions related to the following:

- allocation of program resources
- implementation of personnel policies and procedures
- development and implementation of academic policies and procedures
- · development and implementation of curricula
- admission to the major

(For evidence, see DR 1-3)

Finding:	
Met	

Team Comments:

Observations from the Self-Study

The university system allocates resources from the state budget to the President's Cabinet. The President's Cabinet allocates resources to the dean who in turn allocates resources to the department where they are controlled by the department chair. The department chair serves as the leader for all programs within the department.

Implementation of personnel policies and procedures originates at the department level. The department has constructed a Personnel Committee to assist in the implementation of personnel policies in conjunction with the chair. Development of department-specific academic policies and procedures is achieved through individual faculty proposals to the entire department. If the department approves the proposal, it then moves to approval by the tenure-track faculty, the dean, and finally, the provost/vice-president. Once approved, the department implements academic policies and procedures.

Curricula is developed by the faculty. Minor changes are approved by the department, school and vice provost. Major changes must also be approved through the greater SUNY system.

The SUNY-Cortland Office of Admissions makes admission decisions for all first-time students. Current SUNY-Cortland students who wish to change their major and join the program must apply. The department chair and faculty review these applications and make admissions decisions.

Observations on Site

The site visit team concluded that the program has sufficient administrative autonomy to fulfill its mission and goals and to make decisions related to allocation of program resources; implementation of personnel policies and procedures; development and implementation of academic policies and procedures; development and implementation of curricula; and admission to the major.

Program leaders noted that the program budget comes from the state budget and is allocated to the department for use throughout the year. The program explained that resources have not posed a significant issue in terms of providing for student and faculty needs, but acknowledged that the timing of funding allocation alerts actually happens after the start of the semester. When asked, faculty noted that they do not feel as though they have to bargain for resources within the department, and each program is receiving funding that is commensurate with its needs. When additional needs are identified, the department, dean and president have assisted in securing additional funds.

Any issues with personnel policies and procedures can be brought to the department chair and will be addressed throughout the reporting line, if necessary. The program also noted that the department's Personnel Committee exists to field concerns from faculty regarding personnel policy issues. However, the United University Professions Labor Union represents all faculty and bargains on behalf of the individuals employed at the university.

The program faculty noted that they are represented and actively participate in organizational bodies that develop and implement academic procedures throughout the department, school and university. For example, numerous faculty noted involvement with the Faculty Senate.

The program detailed the three levels of review that are required to make changes to the existing curriculum or to add new curricular requirements. The program has the autonomy to propose both major and minor curricular changes to adapt to and address student need. The program also noted that faculty are engaged in curriculum review committees at the department, school and university level.

The university's Office of Admissions handles the review and entry of all students either as first-time students or as external transfers from another university. The majority of first-time SUNY-

Cortland students enter as undeclared majors and subsequently transfer into the program of their choice after completing the university general education requirements. There are no specific program admission requirements for first-time SUNY-Cortland students. Internal transfer students are required to submit an application. The application includes an essay detailing students' motivations for entering the departmental program of their choice and a current transcript of their work. The department chair and two additional faculty members (one in community health and one from another program within the department) evaluate these applications. Criteria for evaluation include the student's GPA, writing skills and completed coursework.

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Criterion 1.3: The program has a single individual who serves as the designated leader. The designated leader is a full-time faculty member at the institution and has immediate responsibility for developing and monitoring the program's curriculum. Finding: Met **Team Comments:** Observations from the Self-Study The chair of the department is a full-time faculty member and serves as the designated leader of the program. Her responsibilities include initiating program development and monitoring the program's curriculum. Observations on Site Site visitors confirmed that the chair is currently serving as the designated program leader in addition to her responsibilities as chair. The program faculty and university leadership explained that all department chairs serve as the program leader for all programs within their departments. Program faculty noted that she engages the faculty in program and curriculum development and convenes the faculty on a regular basis to discuss department- and program-level needs of the faculty, staff and students. **Commentary:** (if applicable) Click here to enter text. **Compliance Concern:** (if Partially Met or Not Met) Click here to enter text. **Institution Comments:** Click here to enter text.

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Criterion 1.4: Program administrators and faculty have clearly defined rights and responsibilities concerning program governance and academic policies. Program faculty have formal opportunities for input in decisions affecting curriculum design, including program-specific degree requirements, program evaluation, student assessment and student admission to the major. Faculty have input in resource allocation to the extent possible, within the context of the institution and existing program administration.

(For evidence, see DR 1-3 and DR 2-4)

Finding:		
Met		

Team Comments:

Observations from the Self-Study

The department's Curriculum Committee is the forum for faculty to have formal opportunities to provide input in decisions affecting curriculum design, program evaluation, student assessment and admission to the major.

Observations on Site

Faculty do not have any formal influence on the department-level budget provided each year by the school. However, faculty can and do identify and advocate for any individual needs to the program director/department chair who communicates those needs to the dean.

Faculty noted that participation in the Faculty Senate also affords the opportunity to provide input on academic policies. At least three of the faculty noted that they were currently serving as an elected senator or as a representative of a committee.

Faculty confirmed that they all participate on the Curriculum Committee and have formal opportunities to develop and design curricula.

The program makes admissions decisions on internal transfers each semester. A three-person Admissions Committee includes the designated leader and at least one community health faculty member. The department faculty determine the admissions requirements used by the committee to assist in decision making.

Institutional leadership noted that the program administrators and faculty have formed a model department in terms of faculty governance and involvement in university-level affairs.

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Criterion 1.5: The program ensures that all faculty (including **full-time and part-time faculty**) regularly interact and are engaged in ways that benefit the instructional program (eg, instructional workshops, curriculum committee).

(For evidence, see DR 1-4)

Finding:	
Met	

Team Comments:

Observations from the Self-Study

Full-time faculty hold regular 90-minute faculty meetings three out of every four weeks to discuss all department- and program-specific business. Full-time faculty also participate in various standing committees related to topics such as curriculum, CEPH accreditation and personnel.

In addition, the department hosts two annual one-day retreats for professional development.

Adjunct faculty are full-time public health practitioners. As a result, engagement of the adjunct faculty is limited by their schedule and availability.

Observations on Site

The faculty indicated that they regularly interact more often than what was noted within the self-study, citing weekly meetings within the department to discuss student needs, university policy changes and other matters related to the instructional program. Faculty noted examples of discussing curriculum changes due to an increased demand from students in a particular topic or working in groups to research possible changes to focus areas. All full-time faculty have offices housed in the same building. As the faculty grows, the program has prioritized keeping full-time faculty offices physically together to encourage engagement.

In addition, multiple representatives from the faculty are engaging on university-level forums for curriculum development, workshops on advising and research tools and additional resources that can be provided to students to further service learning. Adjunct faculty have offices on campus which allow them to consistently interact with full-time faculty and be available to students. Additionally, the program directs funds toward the development of adjunct faculty.

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Criterion 1.6: Catalogs and bulletins used by the program, whether produced by the program or the institution, to describe its educational offerings accurately describe its academic calendar, admission policies, grading policies, academic integrity standards and degree completion requirements. Advertising, promotional materials, recruitment literature and other supporting material, in whatever medium it is presented, contains accurate information.

(For evidence, see DR 3-5, DR 5-16 and DR 5-17)

Finding:	
Met	

Team Comments:

Observations from the Self-Study

The self-study details the policies for assembling, reviewing, approving, and posting catalogs bulletins and additional advertising and communication materials included in the university communications guide.

The admissions criteria, grading policy, academic standards, and degree completion requirements are explained in the college catalog. Each department is primarily responsible for maintaining content on the department website. The program works with the department to ensure all program-related content is accurate.

The self-study described this as a challenge based on staff workloads. As a result, there can be a lag between substantive changes in programs and the production of new materials.

Observations on Site

Upon review of the university website and departmental materials, the literature contains relevant and accurate content.

On-site reviewers confirmed that the department is responsible for posting content on the website, and that the program continues to work to ensure that materials are posted in a timely manner. No concerns from the students and faculty were noted.

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2.0 RESOURCES

Criterion 2.1: The program has **sufficient faculty resources** to accomplish its mission, to teach the required curriculum, to oversee extracurricular experiences and to achieve expected student outcomes. Generally, the minimum number of faculty required would be 2.0 FTE faculty in addition to the designated leader's effort each semester, trimester, quarter, etc., though individual circumstances may vary. The FTE calculation follows the institution or unit's formula and includes all individuals providing instruction in a given semester, trimester, quarter, etc.

(For evidence, see DR 2-1, DR 2-2, DR 2-4 and DR 2-5)

Finding:	
Met	

Team Comments:

Observations from the Self-Study

The program has had 23 faculty members contribute approximately 9.63 FTE over the past four semesters. More specifically, required program courses are instructed by 13 full-time faculty members who contributed approximately 5.85 FTE over the past four semesters.

All undergraduate programs in the department share some common course requirements. As a result, most full-time tenured and tenure-track faculty serve all of the programs within the department. Each faculty member's contribution to the SBP may change each semester.

A nine-credit-hour teaching load is considered full time at SUNY-Cortland. Each three-credit, required program course taught within the department is equal to 0.33 FTE. The department chair is the designated leader and devotes one three-credit course worth of release time to perform administrative duties related to the program. The program's fieldwork coordinator receives three-credit hours of release time for fieldwork placement and other related administrative duties.

When calculating the program's FTE, only required courses offered within the department were included. Required courses offered outside of the department, such as biological sciences, are not included. If the department chair and designated leader are aware of an increase in program enrollment, they will inform relevant programs so that they may advocate for increased faculty teaching resources at the school and university levels.

Observations on Site

Faculty FTE is calculated based exclusively on teaching loads. However, faculty also contribute to the program by advising students and participating in various departmental committees. For example, one full-time tenured professor teaches epidemiology and biostatistics, advises students and chairs the program's CEPH Committee.

Faculty and program leaders reported that an additional faculty line will be filled in fall 2016. They also indicated that faculty resources are at a very comfortable level in order to instruct the required curriculum, advise students and perform administrative requirements.

If a faculty member requests sabbatical leave, the department chair must demonstrate how the need left by that absence will be filled before approving the request. The chair has delayed sabbaticals until the summer semester because the faculty member's fall or spring semester course could not be appropriately covered.

Students reported that faculty are readily available outside of the classroom both as formal and informal advisors.

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Criterion 2.2: The mix of **full-time and part-time faculty** is sufficient to accomplish the mission and to achieve expected student outcomes. The program relies primarily on faculty who are full-time institution employees.

(For evidence, see DR 2-3, DR 2-5 and DR 3-1)

Finding:		
Met		

Team Comments:

Observations from the Self-Study

Over the last four semesters, nine of the 23 faculty who have provided instruction within the program have been adjunct faculty. The majority of required core courses in the community health program are taught by full-time tenured or tenure-track faculty members. In spring 2016, 87% of required community health courses were taught by full-time faculty.

The dean and provost provide the program with resources to hire adjunct faculty as needed to limit the number of students in the required course to 35 or fewer.

Most adjunct faculty are currently practicing public health professionals selected to bring their experiences into the classroom. For example, some sections of HLH 203 Community Health have been taught by a staff member with the Cortland County Health Department and HLH 492 Chronic and Communicable Disease was taught by a former college physician.

Observations on Site

The department chair explained that if student enrollment indicated the need for additional course sections, the dean and provost will provide necessary resources to bring on an adjunct faculty member to teach the course. The chair said that in 12 years, no such request has been denied.

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Criterion 2.3: The program tracks student enrollment to assist in gauging resource adequacy. Given the complexity of defining "enrollment" in an undergraduate major or baccalaureate degree program, the program uses consistent, appropriate quantitative measures to track student enrollment at specific, regular intervals.

(For evidence, see DR 2-6 and DR 2-7)

Finding:	
Met	

Team Comments:

Observations from the Self-Study

Students can enter the community health major as first-time, first-year students, by changing majors from another department or college (internal transfer students) or by transferring into the program from another institution (external transfer students). Historically, most students enter the program as internal or external transfer students.

When the community health major is declared and processed, the CHEA (community health) major code is attached to the student's record; this allows the program to track enrollment in the program and in individual courses.

The program had 152 students (84 FTE) in fall 2014, 166 (78 FTE) in spring 2015, 163 (90 FTE) in fall 2015 and 164 (86 FTE) in spring 2016. More than 90% of program students are enrolled as full-time students.

Student headcount includes all students enrolled in the community health major no matter how many credits they take in a given semester. Student FTE was calculated by taking the number of student credit hours generated across the community health major required courses offered by the department divided by 15 (the standard credit load for a full-time student as defined by SUNY).

Observations on Site

The program leader detailed the ways in which the program maintains records of various groups of enrolled students. The program secretary maintains a list of internal transfer students. Faculty can access the record of any student designated with the CHEA major code.

Additionally, as faculty serve as student advisors, they help students plan their course of study in order to move efficiently through the program. One internal transfer student said that her advisor researched what courses are only offered in a particular semester to help her graduate on time. The program leader uses this enrollment information to determine if additional sections of courses are required. If so, she will request necessary faculty resources from the dean. **Commentary:** (if applicable) Click here to enter text.

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Criterion 2.4: The program's **student-faculty ratios (SFR) are sufficient** to ensure appropriate instruction, assessment and advising. The program's SFR are comparable to the SFR of other baccalaureate degree programs in the institution with similar degree objectives and methods of instruction.

(For evidence, see DR 2-6, DR 2-7 and DR 2-8)

Finding:	
Met	

Team Comments:

Observations from the Self-Study

The program maintains student-faculty ratios (SFR) in instruction and advising that are appropriate for its needs and lower than those of a comparable baccalaureate program at the institution.

The program selected the sports management program as the comparable program. Like the SBP, the sports management program includes core courses, major requirements outside the department and a semester-long, full-time internship. The sport management program instruction is primarily face-to-face.

The SBP SFR was 12.7:1 in fall 2014, 13.8:1 in spring 2015, 12.2:1 in fall 2015 and 12.7:1 in spring 2016. The comparable program had SFRs of 51.9:1, 39.3:1, 40:1 and 39.4:1, respectively.

The community health program had an average class size of 24 in fall 2014, 21.4 in spring 2015, 25.6 in fall 2015 and 22.3 in spring 2016. In comparison, the sports management program had an average class size of 25.3 in fall 2014, 28.7 in spring 2015, 26.7 in fall 2015 and 26.1 in spring 2016.

The program has maintained an average advising load between 22 and 26 students over the last four semesters. The spring 2016 advising load was 23 students. The comparable program's advising load is higher, ranging from 36 to 40 over the last four semesters. The spring 2016 advising load for the comparable program was 36 students.

Observations on Site

Advising responsibilities are spread across the program faculty. The department secretary assigns incoming majors to faculty advisors and monitors faculty advising loads. If advising loads become uneven due to graduation and transfer students, the department secretary will alert the program director. Faculty provide the department secretary with requests related to advising load. If a faculty member feels that he or she is at capacity they will address these concerns with the program director and will not be assigned additional advisees if appropriate. This allows faculty to provide the best advisement possible.

Onsite, students reported high levels of satisfaction with faculty availability and class sizes.

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Criterion 2.5: The program has access to financial and physical resources that are adequate to fulfill its operating needs, accomplish the mission, teach the required curriculum and provide an environment that facilitates student learning, including faculty office space, classroom space and student gathering space.

(For evidence, see DR 2-1, DR 2-9, DR 2-10 and DR 2-11)

Finding:	
Met	

Team Comments:

Observations from the Self-Study

In the self-study, the program explains that the resources for the department are the resources for the program because all department faculty teach in the program, and community health students comprise 75% of the department's student population.

The office and classroom space in the Moffett Center is described as sufficient in quantity. The space is also described as dated, based on multiple references to plans for major renovation.

The self-study describes the fiscal resources as adequate for the program's needs. One area of note may be the net decrease of 14% from FY2012 to FY2016. However, this is largely due to the completion of a major grant, and sustained external funding does not appear to be critical to the program's operation.

Observations on the Site Visit

As anticipated, the physical space is dated, but faculty and university leadership are optimistic about the planned renovations to the program's space. The renovations have progressed to the stage of building plans. The department anticipates relocating for 18 to 24 months while the renovations are completed. Until the renovation takes place, the department uses some space outside of Moffett for adjunct faculty offices. However, the program keeps all full-time faculty offices together in Moffett.

The department chair reports that the budget is allocated each year based on a submitted teaching schedule but that it has always been adequate to cover the needs of the department, including adjunct faculty. Faculty and students confirmed that the program is responsive to any unforeseen need. The dean and vice provost confirmed their commitment to providing

appropriate fiscal resources sup	pport the program	and to ensuring c	ompletion of th	ne building
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Criterion 2.6: The academic support services available to the program are sufficient to accomplish the mission and to achieve expected student outcomes. Academic support services include, at a minimum, the following:

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

(For evidence, see DR 2-1, DR 2-12 and DR 2-13)

Finding:	
Met	

Team Comments:

Observations from the Self-Study

SUNY-Cortland provides a variety of academic support services to all students, including public health students. The Office of Information Resources provides technological and computing services. Faculty, staff and students can all receive academic-related technology trainings.

The institution's library services include a fully automated online catalog. Additionally, students have access to resources at all SUNY campuses. Students can also check out laptops from the library for academic use.

The Advisement and Transition Office provides advising to students regarding the transition to college, academic planning, choosing a major and general academic decision making. One section of the required COR 101 Cortland Experience is provided for first-time, first-year students in the department each year.

The Office of Career Services provides career counseling for all students and provides print resources and career-related workshops on resume writing and interviewing.

Observations on Site

Students were extremely positive about the advisement process and the accessibility not just of their assigned advisor but of all faculty for any public health-related questions. Students explained that while the Office of Career Services is useful, program faculty provide the most helpful public health-specific career counseling.

Representatives of campus offices confirmed the strength of the faculty advisement, citing the faculty as setting a best practice standard. Faculty work with the campus librarian to educate students about resources available; the librarian has developed tailored resources for health students and often meets with students individually about specific research questions.

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3.0 FACULTY QUALIFICATIONS

Criterion 3.1: The program meets the requirements of regional accreditors for faculty teaching baccalaureate degree students. Faculty with doctoral-level degrees are strongly preferred and, in most cases, expected. A faculty member trained at the master's level may be appropriate in certain circumstances, but the program must document exceptional professional experience and teaching ability.

(For evidence, see DR 3-1, DR 3-2, DR 3-3 and DR 3-6)

Finding:		
Met		

Team Comments:

Observations from the Self-Study

All full-time faculty hold a doctoral degree in a public health-related area. Adjunct faculty must have a completed master's degree unless there are no other qualified candidates and it can be demonstrated that the proposed course instructor is an exceptional fit for the position.

A number of full-time faculty also have relevant certifications and licensures (eg, MCHES, CHES, RN) to further qualify them for their roles as instructors.

Observations on Site

Faculty qualifications are strongly focused in areas of health education and community health. During the visit, faculty indicated that the interest areas of the students mirror the population of the faculty, and there have not been significant issues in lecturing or advising on the key public health domains.

Students remarked on the breadth of knowledge possessed by their faculty. One student said that faculty could answer a variety of his public health questions outside of the topic areas of the course.

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Criterion 3.2: The designated leader of the program is a **full-time faculty member** with educational qualifications and professional experience in a **public health discipline.** If the designated program leader does not have educational qualifications and professional experience in a public health discipline, the program documents that it has sufficient public health educational qualifications, national professional certifications and professional experience in its primary faculty members. Preference is for the designated program leader to have formal doctoral-level training (eg, PhD, DrPH) in a public health discipline or a terminal professional degree (eg, MD, JD) and an MPH.

(For evidence, see DR 3-1	')
Finding:	
Met	

Team Comments:

Observations from the Self-Study

The chair serves as the designated leader of the program. She is a full-time faculty member and possesses a PhD in health education and a master's degree in exercise science. She has over 25 years of experience in teaching, as a principal investigator on numerous grants and as an advisor to students in fieldwork and academics.

Observations on Site

Institutional and academic leaders also noted that the professional experience and leadership of the chair has benefitted the program and its faculty, staff and students. The institutional and academic leadership said that they highly regard the chair's leadership of the department and program, sharing that she is a high-quality example of faculty leadership and student engagement for her peers across the university. They also noted that she remains engaged with the field by conducting research, teaching and presenting/publishing.

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Criterion 3.3: Practitioners are involved in instruction through a variety of methods (eg, guest lectures, service learning, internships and/or research opportunities). Use of practitioners as instructors in the program, when appropriate, is encouraged, as is use of practitioners as occasional guest lecturers.

(For evidence, see DR 3-4)

Finding:	
Met	

Team Comments:

Observations from the Self-Study

The program provides students with access to public health practitioners through a variety of methods. Twenty-four practitioners have provided at least one guest lecture during the 2014-2015 and 2015-2016 academic years. More than 50 practitioners have served as agency supervisors. In addition, at least five community partners were involved in the program's service learning projects during these two academic years.

Observations on Site

Several students mentioned the value of having practitioners as guest lecturers. In particular, the students noted the value of a variety of health professionals in HLH 221 Professional Issues in Health Science for exploring various career pathways.

While the self-study talks about practitioner involvement in the context of the service learning project in HLH 203 Community Health and the fieldwork in HLH 499, on-site students described how other courses have involvement with practitioners, including service learning experiences and volunteer activities.

Practitioners described participating with the program as fieldwork preceptors, service-learning partners and guest lecturers.

Commentary:

(if applicable)

Compliance Concern.
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Criterion 3.4: All faculty members are informed and current in their discipline or area of public health teaching. (For evidence, see DR 3-5) Finding: Met **Team Comments:** Observations from the Self-Study At the aggregate level, the faculty complement is active in scholarly and professional service activities, all of which demonstrate some level of being informed/qualified and current in the area of teaching. Examples of scholarly activities include peer-reviewed publications, presentations at professional meetings and participation in professional organizations through manuscript reviews. Examples of professional service include membership on the ASHA Research and Publications Committee, SOPHE Community College Curriculum Task Force and SOPHE Professional Development Committee. Site visitors' review of faculty CVs confirmed that faculty remain current and informed in their specific discipline. Observations on Site Faculty confirmed individual involvement in research, publications, membership in professional organization and attendance/presentation at professional meetings in the past two years, supporting the self-study affirmation that all faculty are informed and current. Commentary: (if applicable) Click here to enter text. **Compliance Concern:** (if Partially Met or Not Met) Click here to enter text.

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Criterion 3.5: Course instructors who are currently enrolled graduate students, if serving as primary instructors, have at least a master's degree in the teaching discipline or are pursuing a

doctoral degree with at least 18 semester credits of doctoral coursework in the concentration in which they are teaching. (For evidence, see DR 3-7) Finding: Not applicable **Team Comments:** Observations from the Self-Study The program does not use graduate students as primary instructors. Observations on Site The site visit team confirmed that the program does not use graduate students as course instructors. **Commentary:** (if applicable) Click here to enter text. **Compliance Concern:** (if Partially Met or Not Met) Click here to enter text. **Institution Comments:** Click here to enter text. **Council Comments:** Click here to enter text.

4.0 CURRICULUM

Criterion 4.1: The overall undergraduate curriculum (eg, general education, liberal learning, essential knowledge and skills, etc.) introduces students to the following domains:

- the foundations of scientific knowledge, including the biological and life sciences and the concepts of health and disease
- the foundations of social and behavioral sciences
- basic statistics
- the humanities/fine arts

The curriculum addresses these domains through any combination of learning experiences throughout the undergraduate curriculum, including general education courses defined by the institution as well as concentration and major requirements or electives.

(For evidence, see DR 4-1, DR 4-2, DR 4-3, DR 4-8 and DR 4-9)

Finding:	
Partially Met	

Team Comments:

Observations from the Self-Study

All students must complete two general education components: 1) 30 credit hours across nine categories as required by the SUNY system and 2) six credit hours from two courses: a) Prejudice and Discrimination and b) Science, Technology, Values and Society. These requirements, in addition to the program's required courses, address to varying degrees the domains required by the criterion.

The foundations of scientific knowledge, including the biological and life sciences and the concepts of health and disease

All students complete courses in natural sciences. The program requires courses in human anatomy and physiology, microbiology and human disease and chronic and communicable disease.

The foundations of social and behavioral sciences

The university requires all students to complete one three-credit course in each of the following categories: social sciences, contrasting cultures and prejudice and discrimination. The community health program requires all majors to complete HLH 394 Health-related Behavior: Formation and Change.

Basic statistics

SUNY-Cortland requires all students to complete one three-credit hour course in quantitative skills. The program does not require students to take an introduction to statistics. The program does require students to complete HLH 391 Epidemiology and Biostatistics.

The humanities/fine arts

All SUNY students must complete three credit hours in both humanities and arts.

Observations on Site

The SUNY system requires all students to complete 30 credit hours of general education requirements in the categories of 1) quantitative skills, 2) natural sciences, 3) social sciences, 4) United States history and society, 5) contrasting cultures, 6) humanities, 7) the arts, 8) foreign language and 9) basic communication.

Site visitors reviewed the syllabus for HLH 391 Epidemiology and Biostatistics and found a cursory amount of instruction related to statistics provided at the end of the course. The statistics content included in the course is primarily presented in the final third of the semester, meaning students complete a majority of the course without a basic introduction to statistical principles that would aid in comprehension.

Commentary:

(if applicable)

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Compliance Concern:

(if Partially Met or Not Met)

The concern is that the program does not require students to complete an introductory course in statistics. While the general education requirement includes quantitative skills, it does not specify statistics.

The program requires HLH 391 Epidemiology and Biostatistics. The content of HLH 391 is split between these two public health areas and does not provide a statistics-specific introduction. The biostatistics portion of the course is primarily presented in the final weeks of the semester, meaning that the fundamental concepts of statistics are not present to inform the

epidemiological principles presented in the beginning of the course. The program should ensure that students receive an introduction to statistics that will provide the fundamentals necessary to inform the public health concepts throughout their curriculum.

Institution Comments:

Subsequent to the site team visit and prior to the end of the academic year the program faculty proposed the addition of a statistics course to the required community health degree program requirements. The proposal was voted on and passed by the entire Health Department, the first step in curriculum change approval process. The proposal to add the statistics requirement will move through the rest of the curriculum change approval process during the fall 2016 semester. It is anticipated that the statistics requirement will be in place for the fall 2017 semester. Thus, B.S. community health students will be required to take a statistics course (e.g. MAT 210, HLH 299) and HLH 391-Epidemiology and Biostatistics.

Council Comments:

The Council notes that the program appears to be poised to demonstrate compliance with this criterion, but the statistics course still needs final approval through the university's curriculum change approval process.

Criterion 4.2: The requirements for the public health major or concentration provide instruction in the following domains. The curriculum addresses these domains through any combination of learning experiences throughout the requirements for the major or concentration coursework (ie, the program may identify multiple learning experiences that address a domain—the domains listed below do not each require a single designated course).

- the history and philosophy of public health as well as its core values, concepts and functions across the globe and in society
- the basic concepts, methods and tools of public health data collection, use and analysis and why evidence-based approaches are an essential part of public health practice
- the concepts of population health, and the basic processes, approaches and interventions that identify and address the major health-related needs and concerns of populations
- the underlying science of human health and disease including opportunities for promoting and protecting health across the life course
- the socioeconomic, behavioral, biological, environmental and other factors that impact human health and contribute to health disparities
- the fundamental concepts and features of project implementation, including planning, assessment and evaluation
- the fundamental characteristics and organizational structures of the US health system as well as the differences in systems in other countries
- basic concepts of legal, ethical, economic and regulatory dimensions of health care and public health policy and the roles, influences and responsibilities of the different agencies and branches of government
- basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology

If the program intends to prepare students for a specific credential, then the curriculum must also address the areas of instruction required for credential eligibility (eg, CHES).

((For evidence.	see DR 4-1	. DR 4-2.	. DR 4-4.	. DR 4-8 and	I DR 4-9
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Finding:		
Met		

Team Comments:

Observations from the Self-Study

Each domain and specific component of each domain is addressed in multiple required courses, and every course addresses multiple sub-domains. The evaluation of courses may not be consistent. For example, sub-domains attributed to HLH 390 Environmental Health and Ecology seem broader in scope than the course syllabus suggests (eg, coverage of needs assessment, interventions and determinants of health).

Observations on Site

The SBP is the BS in community health and all students graduate with this degree. In addition, the program offers optional focus areas to students, if desired. The program does not require

that students choose a focus area. These focus areas vary in requirements (18 to 30 credit hours) and enrollment. Many of these focus areas require courses from outside the major. Additionally, many courses listed as a part of the focus areas are no longer offered. These focus areas do not serve as typical CEPH concentrations and do not differentiate the degree students earn. Site visitors learned onsite that many students do not complete focus areas because they often require students to extend beyond their intended 4 years of study. The current focus areas include: allied health, college health promotion and prevention, environmental health, health communication, healthcare administration and planning, wellness and health promotion and international health.

Site visitors explored the intended revision of the focus areas available to students. In the revision currently in the approval process, faculty have identified courses that are no longer accessible to students for various reasons and proposed revisions that limit each focus area to 15 to 18 credit hours. This revised structure may lead to more students choosing a focus area as part of their study. The allied health focus area includes courses that are typically prerequisite to further study in a health discipline, not allied health content. The health administration focus area is newer but growing rapidly in demand; this parallels interest in health administration/health services as a career option.

During the curriculum review leading to development of the current student learning outcomes and the CEPH self-study, faculty cross-referenced the CHES competencies with the course learning objectives to be sure all were adequately addressed. In practice, few students complete the CHES exam, in part because the cost is a significant barrier.

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Criterion 4.3: Students must demonstrate the following skills:

- the ability to communicate public health information, in both oral and written forms and through a variety of media, to diverse audiences
- the ability to locate, use, evaluate and synthesize public health information.

(For evidence, see DR 4-1, DR 4-2, DR 4-5, DR 4-8 and DR 4-9)

Finding:	
Met	

Team Comments:

Observations from the Self-Study

All of the required health classes include at least one written assignment. Two (HLH 390 Environmental Health and Ecology and HLH 494 Assessment and Evaluation of Health Programs) are identified as writing-intensive based on requirements for a longer manuscript with multiple drafts throughout the semester. Most of the classes include an oral presentation or group facilitation. Other than in the more introductory classes, these presentations typically require communication with diverse audiences. Two of the class projects/presentations require use of a variety of media: development of a health communication campaign for HLH 380 Introduction to Health Informatics and Communication and a portfolio including a PSA, PowerPoint presentation and use of social media for HLH 493 Community Health Education.

Observations on Site

Faculty and students separately confirmed the frequency of oral and written assignments in the various classes. Preceptors who met with the site visit team further confirmed that students meet and exceed fieldwork expectations in terms of preparation, ability to understand specialized information and to communicate effectively with a diverse audience (eq. in a clinical population). Site visitors noted that faculty have developed and use separate rubrics for assessing oral communication and writing skills across multiple courses, assignments and projects.

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Criterion 4.4: Students have opportunities to integrate, synthesize and apply knowledge through cumulative and experiential activities. All students complete a cumulative, integrative and scholarly or applied experience or inquiry project that serves as a capstone to the education experience. These experiences may include, but are not limited to, internships, service-learning projects, senior seminars, portfolio projects, research papers or honors theses. Programs encourage exposure to local-level public health professionals and/or agencies that engage in public health practice.

(For evidence, see DR 4-1, DR 4-2, DR 4-6, DR 4-9, DR 4-10 and DR 4-11)

Finding:		
Met		

Team Comments:

Observations from the Self-Study

Students have two required opportunities to integrate, synthesize and apply knowledge through cumulative and experiential activities: HLH 203 Community Health and HLH 499 Fieldwork in Health. Both of the courses require field experiences by students.

HLH 203 Community Health is taken as one of the first courses within the major, while Fieldwork in Health is usually the last course within the major prior to graduation. Community Health is meant to be an introduction to the major and requires students to complete a short service learning project as a group. In addition to the service learning project, students complete a paper describing the project and its overall impact, as well as a personal reflection paper and group presentation delivered in class.

HLH 499 Fieldwork in Health includes a semester-long project that requires students to identify a community health organization to work full time with over the course and design a project that will be beneficial for both the student and for the organization. It is designed to be an immersive experience, where students are participating in meetings, activities, events and day-to-day work of the organization. Students are responsible for identifying their placement, and options include local, state, federal, and international placements. During the fieldwork, students are required to complete weekly logs and a variety of academic assignments to chronicle and demonstrate key aspects of this learning.

Observations on Site

During the site visit, faculty, staff, students and preceptors all noted both courses described above as key elements for preparedness for the field of public health. Students noted that HLH

203 Community Health provided a holistic introduction to the possibilities of public health careers and provided a unique opportunity to immediately engage with the community through the service learning group project.

The fieldwork was also noted as a highlight of the program by students, providing a full-time immersive process that allows them to apply all of the public health principles they learned in the program. Students did not express any concerns over finding or completing their placements, and preceptors noted that the students were of high quality, performing work commensurate with entry-level staff and highlighted the proactive nature of the faculty in supporting the students and preceptors during the fieldwork semester.

Meetings with the institutional and academic leadership noted that the program was a university leader in service learning and internship experiences provided to students. The program is second only to athletic training in terms of the number of students who have completed internships.

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Criterion 4.5: The overall undergraduate curriculum and public health major curriculum expose students to concepts and experiences necessary for success in the workplace, further education and life-long learning. Students are exposed to these concepts through any combination of learning experiences and co-curricular experiences. These concepts include the following:

- advocacy for protection and promotion of the public's health at all levels of society
- community dynamics
- critical thinking and creativity
- cultural contexts in which public health professionals work
- ethical decision making as related to self and society
- independent work and a personal work ethic
- networking
- organizational dynamics
- professionalism
- research methods
- systems thinking
- teamwork and leadership

(For evidence, see DR 4-1, DR 4-2, DR 4-7 and DR 4-9)

Finding:	
Met	

Team Comments:

Observations from the Self-Study

The program provides students with exposure to the required concepts in and out of the classroom. For example, advocacy for protection and promotion of the public's health at all levels of society is included in the service learning project in HLH 203 Community Health and as part of student fieldwork in HLH 499 Fieldwork in Health as well as through student organizations such as Health Club and APAC: A Voice for Sexual Health.

The service learning project in HLH 203 Community Health serves to expose students to 10 of the 12 concepts. Fieldwork during the students' internship exposes students to all of the concepts.

Observations on Site

Through conversations with faculty, staff, students and alumni, site visitors found that students are exposed to the required concepts a variety of ways throughout the educational experience.

For example, students noted that a number of group projects allowed them to develop skills in teamwork. Additionally, the instructional services librarian serves as a resource for research

methods. She is dedicated to health programs and assists students throughout coursework and in co-curricular activities such as Eta Sigma Gamma. Fieldwork preceptors noted students' research abilities as a particular strength, including their understanding and use of reliable sources.

Preceptors of	did note	e that	while s	students	demonstr	ate some	areas	of	professionalism,
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5.0 PROGRAM EFFECTIVENESS

Criterion 5.1: The program defines a mission statement that guides program activities and is congruent with the mission statement(s) of the parent institution(s).

(For evidence, see DR 5-1) Finding: Met **Team Comments:** Observations from the Self-Study The program's mission statement is "To prepare students with the skills to assess the health needs of diverse communities; identify and advocate for evidence-based solutions to public health issues; and plan, implement, administer and evaluate health programs, policies, and systems throughout the world." The program mission statement is both appropriate for public health and congruent with the SUNY-Cortland mission statement, which addresses "engaged citizens with a strong social conscience" and the SUNY system mission statement. Observations on Site The mission statement was reviewed and revised in the context of preparation for this accreditation review, with final approval in spring 2015. Commentary: (if applicable) Click here to enter text. **Compliance Concern:** (if Partially Met or Not Met) Click here to enter text. **Institution Comments:**

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Council Comments:		
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Criterion 5.2: The program defines expected student learning outcomes that align with the program's defined mission and the institution's regional accreditation standards and guide curriculum design and implementation as well as student assessment.

(For evidence, see DR 5-2)
Finding:
Met
Team Comments:
Observations from the Self-Study
The student learning outcomes provide a framework for the program's curriculum and link
closely with its mission statement as well as the scope required for an accredited SBP. In
addition to the student learning outcomes being consistent with the regional accreditation
standards, the self-study presents a strong argument for the program's linkage with several of
the SUNY-Cortland values (eg, integrity and intellectual life) and priority areas (eg, academic
excellence, transformational education and well-being).
Observations on Site
Faculty confirmed that the current student learning outcomes were developed in the context of
this accreditation review, with final faculty approval in spring 2015.
Commentary:
(if applicable)
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Criterion 5.3: Syllabi for required and elective courses for the major include objectives that are sufficient to demonstrate that they address the domain(s) identified in Criterion 4.

(For evidence, see DR 4-8)

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Met with Commentary

Team Comments:

Observations from the Self-Study

Each syllabus reviewed presented a large number of course objectives. While the objectives mapped well with the domains required by Criterion 4.2, there was occasionally some disconnect with the detailed syllabus for the course. For example, the spring 2016 syllabus for HLH 390 Environmental Health and Ecology includes three objectives related to interventions and health communication that did not seem to be addressed in the detailed course outline.

Every syllabus included standard information about course requirements, grading scale, attendance policy, academic integrity and student disabilities. The self-study noted that the program is trying to develop a common syllabus for at least each required course, but as this is still in progress, the electronic resource file contained multiple syllabi for courses taught in multiple sections and multiple semesters.

Observations on Site

Faculty provided additional information for several syllabi upon request. For example, at least one of the syllabi for HLH 391 Epidemiology and Biostatistics did not include a complete course schedule.

Commentary:

(if applicable)

The commentary relates to some inconsistency in stated course learning objectives and apparent course content. For example, the spring 2016 syllabus for HLH 390—which is inconsistently titled Environmental Health (syllabus) or Environmental Health and Ecology (self-study)—includes three objectives related to interventions and health communication that clearly relate to the program student learning outcomes but seem disconnected from the detailed course outline/schedule in the same syllabus. These objectives were not included in the spring 2015 or fall 2015 sections that had the same text and detailed course outline/schedule. Some courses such as HLH 492 Chronic and Communicable Diseases include a strong clinical component that is consistent with student interests but not as aligned with program student

learning outcomes. The course learning objectives reference evidence-based practice, health care systems and protecting and promoting health, but it is not clear from the detailed schedule how much this is actually done.

Compliance Concern:

(if Partially Met or Not Met)

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Institution Comments:

Course instructors for all required courses taught within the health department have reviewed and updated their syllabi to address inconsistencies among program outcomes, course objectives, and course content/activities for the fall 2016 semester. The Program Director and CEPH committee will review the curriculum map and syllabi during the fall semester to check on alignment.

Council Comments:

The Council notes that the program appears to have taken necessary steps toward ensuring consistency across syllabi.

Criterion 5.4: The program defines and implements a student assessment plan that determines whether program graduates have achieved expected student outcomes and assesses the program's effectiveness. Assessment methodologies may vary based on the mission, organization and resources of the program, but whatever the approach, assessment processes are analytical, useful, cost-effective, accurate and truthful, carefully planned and organized, systematic and sustained. At a minimum, the assessment plan includes regular **surveys or other data collection** (eg, focus groups, key informant interviews, data from national exams (eg, CHES) from enrolled students, alumni and relevant community stakeholders (eg, practitioners who teach in the program, service learning community partners, internship preceptors, employers of graduates, etc.).

(For evidence, see DR 5-3, DR 5-4 and DR 5-5)

Finding:	
Partially Met	

Team Comments:

Observations from the Self-Study

The program details an assessment plan that includes 1) specific assessments from required courses, 2) student fieldwork supervisor evaluation, 3) end-of-fieldwork student survey, 4) program alumni survey, 5) periodic focus groups of fieldwork supervisors, and 6) periodic key informant interviews of employers of recent program graduates.

The program notes how assessment opportunities are aligned to student learning outcomes. Program leaders also noted that they completed a focus group with a selection of fieldwork agency preceptors to learn more about their experiences with the program's students. The program plans to conduct similar key informant interviews with employers in summer 2017.

The self-study also noted a number of planned assessment activities including a student survey piloted during the 2015 fall semester and an alumni survey to be distributed in summer 2016. These activities are in addition to course evaluations.

Observations on Site

The program has a comprehensive plan for assessing whether graduates of the program have achieved expected student outcomes to assess program effectiveness; however, the majority of these assessment activities have not been fully implemented as of the site visit. The student survey meant to serve as an exit survey prior to graduation and regular focus groups with fieldwork preceptors have only been piloted, and the alumni survey and key informant interviews with employers of graduates have yet to be completed.

Commentary:

(if applicable)

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Compliance Concern:

(if Partially Met or Not Met)

The concern relates to the fact that the program has not fully implemented its assessment plan. The program should show evidence of regular implementation of the student fieldwork supervisor evaluation, end-of-fieldwork student survey, program alumni survey, focus groups with fieldwork supervisors and key informant interviews with employers of recent graduates.

Institution Comments:

The pilot test data from fall 2015 indicated good reliability and validity for the student survey (attachment 1). Student survey results from spring 2016 and summer 2016 (attachment 2) support student self-efficacy with regards to the outcomes of the program.

A review of the Fieldwork Supervisor Evaluation data for fall 2015 and spring 2016 (attachment 3) indicated that all but one of the community health students were "very strong" or "strong" in meeting program outcomes.

Program faculty will review and discuss these results during the fall 2016 semester.

Council Comments:

The program's response to the site visit team's report indicates that steps to achieve compliance are underway. The program must document completion of its updated assessment plan.

Criterion 5.5: The program collects quantitative data at least annually on the following:

- 1) graduation rates within the maximum time to graduation allowed by the institution
- 2) rates of job placement or continued education within one year of graduation.

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

(For evidence, see DR 5-4, DR 5-6, DR 5-7 and DR 5-9)

Finding:	
Partially Met	

Team Comments:

Observations from the Self-Study

The program collects quantitative data on graduation rates for some but not all of its students. Graduation and job placement data are collected at the university level by the Office of Institutional Research. The department receives a report of the data at an aggregate-level. The program has worked with the Office of Institutional Research to separate the data specific to its students.

The program plans to track the population of transfer students, who make up the largest percentage of graduating students. The self-study noted this population as the most difficult to track and did not provide data for these students.

Observations on Site

The team discussed data collection challenges with the program in more detail during the site visit. Students are currently tracked by how they enter the university system. There is no systematic tracking of students who change their major, meaning it is difficult to calculate graduation rates for internal and external transfers.

It was noted that the university is developing a new system to track these data more effectively. In the meantime, the program is trying to develop a plan to manually track the requested quantitative data.

Meetings with institutional and academic leadership noted that the university-wide data warehouse is being developed, but the reporting features from this data warehouse are not yet

functional. Specifically, officials noted the difficulty in tracking internal transfer students as well as defining graduation rates that are sufficient for students who are transferring in externally.

Commentary:

(if applicable)

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Compliance Concern:

(if Partially Met or Not Met)

The concern relates to the fact that the program relies exclusively on institutional data that does not include change-of-major (ie, internal) transfer students. The program must implement methodologies to collect data on these students.

Institution Comments:

The program has created an internal database for tracking internal and external transfer movement through the program to graduation. Students will be entered into the database once the major code CHEA (community health) has been attached to their electronic records. The database will allow the program to track progress to graduation; investigate whether or not there are differences in progress based on the number of credit hours completed prior to entry into the major; and identify any differences in progress between internal and external transfer populations.

The program used existing internal files to compute the graduation rates for transfer students entering the program in the fall 2011 semester: 91% of external transfers and 75% of internal transfers graduated by May 2016 (5 years). It is estimated that once August 2016 graduates are confirmed 95% of external transfers and 85% of internal transfers from fall 2011 will have graduated. The program will continue to track student progress for subsequent semesters of entry.

Council Comments:

The program's response indicates progress in complying with this criterion. Now that the program has established an internal database, updated information must be input. Additionally, the program has yet to use database to answer questions about difference in student progress, identify any differences in progress between student populations, etc.

Criterion 5.6: The program collects qualitative data on the destination of graduates related to both employment and further education, such as type of graduate degree pursued and sector of employment, as defined by the program.

(For evidence, see DR 5-8)

Finding:	
Met	

Team Comments:

Observations from the Self-Study

The SUNY-Cortland Career Service Office collects qualitative information through the Graduate Outcomes Survey. This data is available to the program.

The Graduate Outcomes Survey response rate has ranged from 58% to 76% between 2012 and 2014. The survey includes one question asking graduates to describe their current employment status.

Observations on Site

On site, the program confirmed the survey results included in the self-study. Program students pursue further education in degree programs such as public health, community health, nursing, healthcare administration and physical therapy. Graduates find employment with organizations such as non-profits, medical offices, hospitals and universities.

The program receives institutional data that is sufficient to meet its needs. However, program leaders noted that they hope to have additional data from alumni through the execution of the assessment plan detailed in Criterion 5.4.

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Criterion 5.7: The program demonstrates that at least 70% of students for whom data are available graduate within six years or the maximum time to graduation as defined by the institution, whichever is longer. The program demonstrates that at least 80% of graduates for whom data are available have secured employment or enrolled in further education within one year of graduation. Data collection methods for graduates' destinations are sufficient to ensure at least a 30% response rate. If the program cannot demonstrate that it meets these thresholds, the program must document the following:

- that its rates are comparable to similar baccalaureate programs in the home unit (typically a school or college)
- 2) a detailed analysis of factors contributing to the reduced rate and a specific plan for future improvement that is based on this analysis.

(For evidence, see DR 5-10, DR 5-11 and DR 5-12)

Finding:	
Partially Met	

Team Comments:

Observations from the Self-Study

The program presented graduation rates for first-time students and external transfer students. The program did not have any data on change of major, internal transfer students. The first-time students' graduation rate meets the required threshold.

The graduation rate of external transfer students in academic year 2014-2015 was 56% which is below the 70% threshold required in this criterion. The self-study details that while the external transfer graduation rate is lower than the required threshold, the data are based on a three-year graduation rate. This methodology may not be the most effective or accurately representative of the student population. The program is looking into potential plans to improve this data.

Observations on Site

The site visit team learned that internal transfer graduation rates are not collected by the program. The program explained that the majority of students enter as internal or external transfer students. Very few students enter the program as first-time, first-year students. Because the highest graduation rates are representative of the smallest portion of the program's students, the graduation rates provided are less accurate than the self-study originally implied.

Commentary:

(if applicable)

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Compliance Concern:

(if Partially Met or Not Met)

The concern is that the program's graduation rates do not meet the required benchmark. The overall graduation rate is 56%, which is below the threshold as well as inaccurate. The majority of program students are transfer students. External transfer student graduation rates are insufficient and internal transfer student graduate rates are unknown. The program must work to increase its overall graduation rate and provide a detailed analysis of any related issues with specific plans for future improvement.

Institution Comments:

The program used existing internal files to compute the graduation rates for transfer students entering the program in the fall 2011 semester: 91% of external transfers and 75% of internal transfers graduated by May 2016 (5 years). It is estimated that once August 2016 graduates are confirmed 95% of external transfers and 85% of internal transfers from fall 2011 will have graduated. The program will continue to track student progress for subsequent semesters of entry.

Council Comments:

The program has begun using improved data tracking and analysis techniques to track graduation rates. The program must continue to implement these techniques, calculate a single graduation rate and ensure that the program's overall graduation rate is 70% or higher.

Criterion 5.8: The program establishes a schedule for reviewing data on student outcomes.
(For evidence, see DR 5-13)
Finding:
Met
Team Comments:
Observations from the Self-Study
The program plans to collect data on outcomes each semester and input that data into a
program assessment database.
The department chair and designated leader will produce a course-based assessment report
annually to share with faculty. The faculty will discuss these data at least once a year.
Graduation data will be assessed annually.
The program will also create a Community Health Assessment Committee to conduct focus
groups with fieldwork supervisors and employers in three-year cycles.
Observations on Site
The program has established a schedule for reviewing data on student outcomes. The data will
be collected and the review schedule implemented as part of the assessment plan detailed in
Criterion 5.4.
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Compliance Concern: (if Partially Met or Not Met)
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Criterion 5.9: The program uses student and faculty assessment results to improve student learning and the program.

(For evidence, see DR 5-14)

Finding:	
Met	

Team Comments:

Observations from the Self-Study

The program does not have assessment data on which to base changes that would improve student learning and the program. However, the program has made changes based on faculty observations and enrollment trends.

Faculty noticed a decline in writing performance of students across the required courses. As a result, faculty worked to identify uniform standards of writing assessment and an associated rubric to be used across all required courses taught within the department.

Enrollment trends, course availability and graduate program and workforce requirement updates indicated that the program's optional focus areas needed to be updated. The program assigned full-time faculty to workgroups to investigate workforce trends, course availability and alternative structures (eg, minors and concentrations in other departments) related to each focus area. Also of concern are SUNY policies related to maximum number of credit hours. Changes to the focus areas will be submitted to the campus curriculum process by the end of 2016.

Observations on Site

The rubric developed by the program to assess students writing will be used as part of the assessment plan detailed in Criterion 5.4. When implemented, that plan will be used to assist the program in making changes to improve student learning and its own effectiveness. Because the assessment plan has not yet been implemented, program changes are made based on informal observations by faculty and program leaders.

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(if applicable)

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Criterion 5.10: The program regularly evaluates its mission and expected student outcomes to ensure their continuing relevance.
(For evidence, see DR 5-15)
Finding: Met
Team Comments:
Observations from the Self-Study
The program plans to review its mission every five years by the Community Health Assessment
Committee.
Observations on Site
The program's mission and expected student outcomes were adopted by the program in spring
2015 as part of the self-study process. The program plans to review its mission and student
outcomes every five years beginning in 2020.
The program will use the data collected as part of the assessment plan detailed in Criterion 5.4
to evaluate both the mission and outcomes.
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Criterion 5.11: The program maintains clear, publicly available policies on student grievances or complaints and maintains records on the aggregate number of complaints received for the last three years.

(For evidence, see DR 5-16 and DR 5-17)

Finding:		
Met		

Team Comments:

Observations from the Self-Study

The program has clear policies on student grievances available online as a part of the SUNY-Cortland Student Handbook.

The program and department first encourage an informal settlement between the student and instructor. If an informal settlement cannot be reached or if the student wishes to appeal a decision, the student must file a written statement to the chair of the department. If the chair's decision is unsatisfactory, either the student or instructor may submit an appeal to the dean. The dean will convene a special hearing or less formal meeting of all involved parties. All relevant materials related to the decision are kept in the Dean's Office for one year. The next level of appeal is the Academic Grievance Tribunal. The tribunal makes a recommendation to the provost and vice president. The final level of appeal is through the President's Office.

The program has had no grievances filed by students within three years that have not been resolved within the department. No grievances have been recorded at the college level.

Observations on Site

The program clarified that in the past three years, three formal grievances have been filed and resolved within the department. Each of these grievances was related to final course grades. The department chair maintains records of all formal complaints filed within the department.

All other complaints were resolved informally.

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6.0 ADVISING

Criterion 6.1: Students are advised by program faculty (as defined in Criterion 2.1) or qualified program staff beginning no later than the semester (quarter, trimester, term, etc.) during which students begin coursework in the major and continuing through program completion.

(For evidence, see DR 6-1, DR 6-2 and DR 6-3)

Finding:		
Met		

Team Comments:

Observations from the Self-Study

Many freshmen are initially advised through the campus Advisement and Transition Office (ATO) prior to declaring community health as a major. This office provides various assessments and resources to identify at-risk students and to assure student success. The Advisement and Transition Office also provides training for new faculty advisors and distributes critical information to advisors.

Within the Health Department, all full-time faculty are expected to advise students on coursework, fieldwork requirements, service opportunities, career counseling and discussion of graduate school options. The self-study ERF includes a student survey for advisor assessment but does not provide detailed results. In narrative, the self-study describes overall student satisfaction, acknowledging some inconsistency related to faculty availability and preparation.

Observations on Site

Students were very positive about the broad advisement support offered by the faculty, with specific comments about availability and accessibility as well as support for identifying fieldwork opportunities and exploring career and graduate education opportunities. This support was also affirmed by the associate director of the campus Advisement and Transition Office that supports pre-major students and provides training opportunities for faculty advisors; she noted that the Health Department establishes best practices for campus advising.

Students, alumni and preceptors praised the commitment of faculty to helping students be successful and to resolving any problems. All stakeholders described the faculty as supportive and responsive to any issues or concerns.

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7.0 DIVERSITY

Criterion 7.1: The program demonstrates a commitment to diversity and provides evidence of an ongoing practice of cultural competence in student learning.

Aspects of diversity may include, but are not limited to, age, country of birth, disability, ethnicity, gender, gender identity and expression, language, national origin, race, refugee status, religion, culture, sexual orientation, health status, community affiliation and socioeconomic status. This list is not intended to be exhaustive.

Cultural competence, in this context, refers to skills for working with diverse individuals and communities in ways that are appropriate and responsive to relevant cultural factors. Requisite skills include self-awareness, open-minded inquiry and assessment and the ability to recognize and adapt to cultural differences. Reflecting on the public health context, recognizing that cultural differences affect all aspects of health and health systems, cultural competence refers to the skills for recognizing and adapting to cultural differences. Each program defines these terms in its own context.

Programs can accomplish these aims through a variety of practices including the following:

- incorporation of diversity and cultural competency considerations in the curriculum;
- recruitment/retention of faculty, staff and students; and
- reflection in the types of research and/or community engagement conducted.

(For evidence, see DR 7-1 and DR 7-2)

Finding:			
Met			

Team Comments:

Observations from the Self-Study

The program's mission aims to prepare students with the skills "to assess the health needs of diverse communities; identify and advocate for evidence-based solutions to public health issues; and plan, implement, administer and evaluate health programs, policies, and systems throughout the world." Program courses such as HLH 203 Community Health, HLH 380 Introduction to Health Informatics and Communication HLH 493 Community Health Education Methods and HLH 499 Fieldwork in Health all include learning activities related to diversity and cultural competence.

The self-study acknowledges the limited racial/ethnic diversity in rural Cortland County. However, the campus student body (~20% non-white) and the community health student body in particular (27% non-white) reflect much greater diversity than the county population (7.3%)

non-white). Racial diversity among the program faculty is much more limited—one African-American faculty member.

The program's commitment to diversity and cultural competence is also evidenced by the explicit inclusion of those items in the department's strategic plan and by the opportunity for students to complete both community-based activities and research opportunities in diverse populations.

Observations on Site

The program demonstrates its commitment to diversity and cultural competence throughout its mission and curriculum. Faculty and students described a respectful, inclusive culture in the department.

The campus chief diversity officer met with the site visitors and described broad-based initiatives focused on equity and inclusion. She indicated that the Health Department has been very supportive of any initiatives of the Diversity Office and that students have served as peer diversity trainers and have been leaders for some issues such as an equitable space program.

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8.0 DISTANCE EDUCATION PROGRAMS

Criterion 8.1: A degree program offered via distance education is a curriculum or course of study designated to be primarily accessed remotely via various technologies, including internet-based course management systems, audio or web-based conferencing, video, chat, or other modes of delivery. All methods used by the SBP support regular and substantive interaction between and among students and the instructor either synchronously and/or asynchronously and are:

- a) consistent with the mission of the program and within the program's established areas of expertise;
- b) guided by clearly articulated student learning outcomes that are rigorously evaluated;
- c) 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 online learners.

(For evidence, see DR 8-1 and DR 8-2)

Finding: Not Applicable
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Observations on Site
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(For evidence, see DR 8-2) Finding: Not Applicable **Team Comments:** Observations from the Self-Study Click here to enter text. Observations on Site Click here to enter text. **Commentary:** (if applicable) Click here to enter text. **Compliance Concern:** (if Partially Met or Not Met) Click here to enter text. **Institution Comments:** Click here to enter text. **Council Comments:** Click here to enter text.

Criterion 8.2: The university provides needed support for the program, including administrative,

communication, IT and student services.

Criterion 8.3: There is an ongoing effort to evaluate the academic effectiveness of the format, to assess learning methods and to systematically use this information to stimulate program improvements. Evaluation of student outcomes and of the learning model are especially important in institutions that offer distance learning but do not offer a comparable in-residence program.

(For evidence, see DR 8-2)

Finding:
Not Applicable
Team Comments:
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Criterion 8.4: The program has processes in place through which it establishes that the student who registers in a distance education course or degree is the same student who participates in and completes the course or degree and receives the academic credit. Student identity may be verified by using, at the option of the institution, methods such as a secure login and pass code; proctored examinations; and new or other technologies and practices that are effective in verifying student identity. The university notifies students in writing that it uses processes that protect student privacy and alerts students to any projected additional student charges associated with the verification of student identity at the time of registration or enrollment.

(For evidence, see DR 8-3)
Finding:
Not Applicable
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AGENDA SUNY-Cortland

BS in Community Health

Standalone Baccalaureate Program (SBP) Agenda

April 11-12, 2016

Monday, April 11, 2016

8:30 am	Request for Additional Documents 1. Bonni Hodges, PhD- Program Director and Health Department Chair 2. Leslee Anne Bellardini- Health Department Secretary
8:45 am	Team Resource File Review
9:30 am	Meet with Program Leader and Faculty/Staff with significant roles relating to the following criteria: • Criterion 1: Leadership, Management and Governance (1.1-1.6) • Criterion 2: Resources (2.1-2.6) • Criterion 3: Faculty Qualifications (3.1-3.5) • Criterion 7: Diversity (7.1)
	 Bonni Hodges- Chair, Professor, Health; Program Director Barbara Barton- Assistant Professor, Health Sarah Beshers- Associate Professor, Health; Fieldwork Coordinator beginning Spring 2016 Margaret DiVita- Assistant Professor, Health Jill Murphy- Associate Professor, Health Ben Wodi- Professor, Health; former Fieldwork Coordinator
10:45 am	<u>Break</u>
11:00 am	 Meet with Program Leader and Faculty Related to Curriculum and Degree Programs 1. Bonni Hodges- Chair, Professor, Health; Program Director 2. Barbara Barton- Assistant Professor, Health 3. Sarah Beshers- Associate Professor, Health; Fieldwork Coordinator beginning Spring 2016 4. Margaret DiVita- Assistant Professor, Health 5. Jill Murphy- Associate Professor, Health 6. Ben Wodi- Professor, Health; former Fieldwork Coordinator
12:15 pm	<u>Break</u>
12:30 pm	Lunch with Students 1. Lindsey Concra 2. Laura Connolly 3. Victoria Filim

- 4. Richelle Filipello
- 5. Jared Lamm
- 6. Sam Mitchell
- 7. Gabriella Tuccillo
- 8. Madison Terriollion
- 9. Briana O'Shaughnessy
- 10. Mai Youssef

1:30 pm Break

1:45 pm <u>Meet with Faculty and Staff with Significant Responsibilities related to the</u> following criteria:

- Criterion 1: Leadership, Management and Governance (1.4, 1.5)
- Criterion 2: Resources (2.4-2.6)
- Criterion 3: Faculty Qualification (3.4)
- Criterion 6: Advising (6.1)
- Criterion 7: Diversity (7.1)
- 1. Bonni Hodges- Chair, Professor, Health; Program Director
- 2. Barbara Barton- Assistant Professor, Health
- 3. Sarah Beshers- Associate Professor, Health; Fieldwork Coordinator beginning Spring 2016
- 4. Margaret DiVita- Assistant Professor, Health
- 5. Jill Murphy- Associate Professor, Health
- 6. Ben Wodi- Professor, Health; former Fieldwork Coordinator
- 7. Jena Curtis- Associate Professor, Health; Graduate Coordinator-all programs; Chair DPC
- 8. Kathryn Coffey- Associate Professor, Health, DPC Member
- 9. Donna Videto-Professor, Health; DPC member
- 10. Alan Sofalvi- Associate Professor, Health; DPC Member
- 11. Alexis Blavos- Assistant Professor, Health
- 12. Abby Thomas Director or Lori Schlicht Associate Director- Advisement & Transition
- 13. John Shirley- Director Career Services & Internship Coordinator
- 14. Anita Kuiken-Senior Assistant Librarian; Instructional Services Librarian
- 15. Noelle Chaddock Paley, Chief Diversity Officer; Multicultural Life and Diversity Office

2:45 pm Resource File Review and Executive Session

4:00 pm Meet with Alumni, Community Representatives, Preceptors

- 1. Jackie Leaf, Seven Valleys Health Coalition (Executive Director)
- 2. Mary Dykeman Cortland Prevention Resources (Prevention Educator)
- 3. Kirsten Parker Cortland County Community Action Program (WIC Director)
- 4. Cathy Feuerherm, Cortland County Health Department (Director)
- 5. Michael Ryan-Cortland County Health Department (Environmental Health Director)
- 6. Sara Earl-YWCA of Cortland (Bridges for Kids-Program Director)
- 7. Nicki Anjeski-(Class of 2010), Cortland County Health Department (Public Health Educator)
- 8. Lauren Herman-(Class of 2012), SUNY Cortland (College Health Educator)

- 9. Rebecca Smith-(Class of 2003), Cortland County Health Department (Public Health Projects Manager)
- 10. Jen Henriquez-(Class of 2010), YWCA of Corland (Aid to Victims of Violence Family Advocate)
- 11. Megan Wise-(Class of 2013), Tomkins Community Action (Health & Nutrition Specialist)

5:00 pm Adjourn

Tuesday, April 12, 2016

8:30 am Meet with Institutional Academic Leadership/University Officials

- 1. Carol Van Der Karr, Associate Provost, Academic Affairs
- 2. John Cottone- Dean, School of Professional Studies

9:15 am <u>Executive Session and Report Preparation</u>

12:30 pm <u>Exit Interview</u>

- 1. Bonni Hodges- Chair, Professor, Health; Program Director
- 2. Sarah Beshers- Associate Professor, Health; Fieldwork Coordinator beginning Spring 2016
- 3. Margaret DiVita- Assistant Professor, Health
- 4. Jill Murphy- Associate Professor, Health
- 5. Ben Wodi- Professor, Health; former Fieldwork Coordinator
- 6. Alan Sofalvi- Associate Professor, Health
- 7. Alexis Blavos- Assistant Professor, Health
- 8. John Cottone- Dean, School of Professional Studies