



Master of Public Health Program

Final Self-Study Report

Submitted to the

Council on Education for Public Health

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Introduction

1) Describe the institutional environment, which includes the following:

a. year institution was established and its type (e.g., private, public, land-grant, etc.)

Kansas State University (K-State) is a land-grant, public research university established in 1863 and is one of the six state universities under the governance of the Kansas Board of Regents (KBOR) (<http://www.kansasregents.org/>). K-State is committed to teaching and learning, research, and service to the people of Kansas, the nation, and the world; and offers more than 250 majors and options, ensuring each student finds an outlet for success. Additionally, both undergraduate and graduate students have numerous opportunities for research.

b. number of schools and colleges at the institution and the number of degrees offered by the institution at each level (bachelor's, master's, doctoral and professional preparation degrees)

In addition to nine colleges and over 60 academic departments, the Graduate School offers 73 master's degree programs and 43 doctoral programs. The faculty conduct research in more than 90 research centers or facilities, including four U.S. Feed the Future labs. K-State also is developing important partnerships with the National Bio and Agro-defense Facility, which is being constructed adjacent to the Manhattan campus.

The university fulfills its obligation to outreach largely through K-State Research and Extension, which makes research-based information available to all Kansans. There is an extension office in each of the 105 counties in the state

c. number of university faculty, staff and students

Statistics and unique strengths of faculty, staff and students are available on K-States website and updated regularly: <https://www.k-state.edu/about/stats-strengths/>

d. brief statement of distinguishing university facts and characteristics

Unique university metrics are available on the K-State website: <http://www.k-state.edu/2025/dashboards/>

e. names of all accrediting bodies (other than CEPH) to which the institution responds. The list must include the regional accreditor for the university as well as all specialized accreditors to which any school, college or other organizational unit at the university responds

Many of the colleges, departments and programs at K-State seek specialized and professional accrediting for their unique programs. There are 61 of these specialized and professional accrediting bodies to which K-State programs are responsible. Among some of the partners of the MPH program, in our supporting colleges, the external accrediting agencies include:

- Institute of Food Technologists (<http://www.ift.org/>) for the Food Science Institute, College of Agriculture.
- Commission on Accreditation for Dietetics Education (<http://www.eatright.org/ACEND/content.aspx?id=73>), Commission on Accreditation of Athletic Training Education (<http://www.caate.net/>) for the Athletic Training Program in the Department of Food, Nutrition, Dietetics and Health, College of Human Ecology.
- American Veterinary Medical Association (<http://www.avma.org>) Council on Education for the College of Veterinary Medicine.

In addition, each academic department within the university undergoes a departmental/college internal review process on a regular basis. The MPH program, as part of the Graduate School, had a KBOR review in 2011 and a mid-cycle review in 2016. The next review will be in 2020.

- f. brief history and evolution of the public health program (PHP) and related organizational elements, if applicable (e.g., date founded, educational focus, other degrees offered, rationale for offering public health education in unit, etc.)**

The Master of Public Health (MPH) program was approved by the KBOR in January 2003, as an interdisciplinary graduate degree-granting program and operates within a regionally accredited university. K-State has been continuously accredited by the Higher Learning Commission (HLC) of the North Central Association of Colleges and Schools since 1916. The most recent HLC accreditation focused site visit was conducted in 2012. K-State was fully reaccruited, and received continued accreditation through 2021-2022. (<http://www.k-state.edu/assessment/accreditation/>)

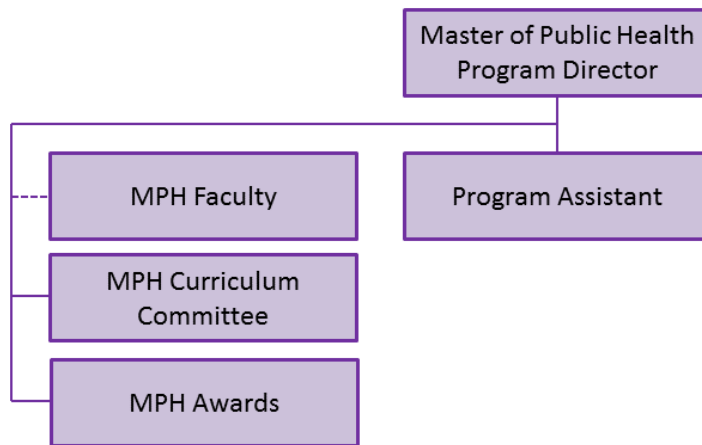
The K-State MPH program is an interdisciplinary program, and as such, faculty are shared with their home departments. Faculty interested in working with MPH students fill out an online application, which asks about their graduate faculty status, courses they teach, and their public health research and service. The application form is submitted with a short curriculum vitae to the MPH Program director.

Applications are reviewed by, and voted on by the Faculty Advisory Council (FAC). A list of current MPH faculty is available on the MPH website: <http://www.k-state.edu/mphealth/faculty/faculty-staff.html>. All faculty in the program are considered full-time in their respective departments, and are on 12- or 9- month contracts. (See ERF “1-Intro” for MPH Graduate Faculty Application.)

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

- a. the program’s internal organization, including the reporting lines to the dean/director**

Figure 1. Introduction. Responsibilities of MPH Program Director.



(See ERF “1-Intro”)

- b. the relationship between program and other academic units within the institution. Ensure that the chart depicts all other academic offerings housed in the same organizational unit as the program. Organizational charts may include committee structure organization and reporting**

The University Organizational chart, which demonstrates the relationship between the MPH program and other academic units within the institution, is located at <http://www.k-state.edu/provost/about/orgchart.html>. (Click on box entitled: "Colleges, K-State Polytechnic, K-State Olathe, Global Campus, Libraries and Graduate School.")

The MPH director supervises the program assistant and co-ordinates the MPH-related work of MPH faculty from the following university components:

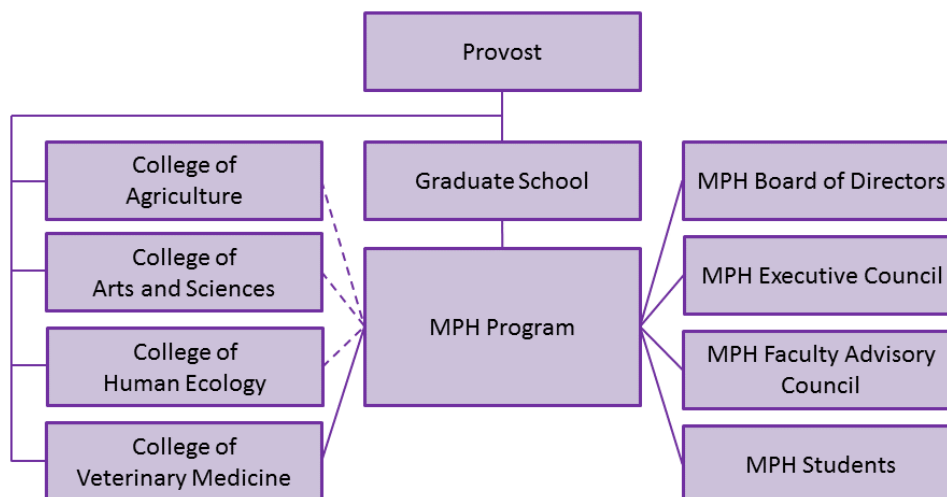
- The Provost's office and Vice-President for Administration and Finance
- The Graduate School
- College of Agriculture
 - Department of Animal Sciences and Industry
 - Department of Entomology
- College of Arts and Sciences
 - AQ Miller School of Journalism
 - Division of Biology
 - Department of Mathematics
 - Department of Statistics
- College of Engineering
 - Department of Industrial and Manufacturing Systems Engineering
- College of Human Ecology
 - Department of Food, Nutrition, Dietetics and Health
 - Department of Kinesiology
 - School of Family Studies and Human Services
- College of Veterinary Medicine
 - Department of Anatomy and Physiology
 - Department of Clinical Sciences
 - Department of Diagnostic Medicine and Pathobiology

c. the lines of authority from the program's leader to the institution's chief executive officer (president, chancellor, etc.), including intermediate levels (e.g., reporting to the president through the provost)

The organization chart below depicts the program's relationships with the partnering colleges, along with the governance structures from the MPH Program Agreement of Support (see ERF "1-Intro" for the 2018 MPH Program Agreement of Support).

The Master of Public Health program's academic and administrative home is the College of Veterinary Medicine, which provides operational funding and administrative support to the program. The program director's faculty appointment is in the Department of Diagnostic Medicine and Pathobiology in the College of Veterinary Medicine, and reports directly to the dean of the College of Veterinary Medicine. As with all other graduate programs at Kansas State University, the dean of the Graduate School has oversight of graduate student admissions and progress as well as course and curriculum issues.

Figure 2. Introduction. MPH Organization Chart.



- d. for multi-partner programs (as defined in Criterion A2), organizational charts must depict all participating institutions Not applicable
- 3) An instructional matrix presenting all of the program’s degree programs and concentrations including bachelor’s, master’s and doctoral degrees, as appropriate. Present data in the format of Template Intro-1.

Table 1. Instructional Matrix – Introduction-1.

Instructional Matrix - Degrees and Concentrations			
		Categorized as public health*	Campus based
Master's Degrees	Professional		
<i>Concentration</i>	<i>Degree</i>		
MPH Food Safety and Biosecurity	MPH	MPH	MPH
MPH Infectious Diseases and Zoonoses	MPH	MPH	MPH
MPH Public Health Nutrition	MPH	MPH	MPH
MPH Public Health Physical Activity	MPH	MPH	MPH

- 4) Enrollment data for all of the program’s degree programs, including bachelor’s, master’s and doctoral degrees, in the format of Template Intro-2.

Table 2. Enrollment – Introduction-2.

Degree		Current Enrollment
Master's		AY 2019 to date
	MPH Concentration Areas	
	Food Safety and Biosecurity (FSB)	2*
	Infectious Diseases and Zoonoses (IDZ)	44
	Public Health Nutrition (PHN)	8
	Public Health Physical Activity (PHPA)	12

*Although the enrollment in FSB is low at this time, we anticipate increased interest in this emphasis area with focused marketing and some unique opportunities in the region.

A1. Organization and Administrative Processes

The program demonstrates effective administrative processes that are sufficient to affirm its ability to fulfill its mission and goals and to conform to the conditions for accreditation.

The program establishes appropriate decision-making structures for all significant functions and designates appropriate committees or individuals for decision making and implementation.

The program ensures that faculty (including full-time and part-time faculty) regularly interact with their colleagues and are engaged in ways that benefit the instructional program (eg, participating in instructional workshops, engaging in program specific curriculum development and oversight).

- 1) List the program's standing and significant ad hoc committees. For each, indicate the formula for membership (e.g., two appointed faculty members from each concentration) and list the current members.**

MPH Program Board of Directors (Deans)

The formula for membership is the program director, the Dean for each member college participating in the program with either an emphasis area concentration or faculty teaching a required core course, and the Dean of the Graduate School.

Current members are:

- Ellyn Mulcahy (Program Director and Chair)
- Carol Shanklin (Dean of the Graduate School)
- J. Ernest Minton (Interim, Dean, Agriculture)
- Amit Chakrabarti (Dean, Arts and Sciences)
- John Buckwalter (Dean, Human Ecology)
- Bonnie Rush (Interim, Dean, Veterinary Medicine)

MPH Executive Council (Department Heads)

The formula for membership is the program director, the Chair for each member department participating in the program with either an emphasis area concentration or faculty teaching a required core course and a community member representing public health practitioners.

Current members are:

- Ellyn Mulcahy (Program Director and Chair)
- Derek Mosier (Department Head, Diagnostic Medicine and Pathobiology)
- Craig Harms (Department Head, Kinesiology)
- Mark Haub (Department Head, Human Nutrition)
- James Neill (Interim, Department Head, Statistics)
- Evan Titgemeyer (Interim, Department Head, Animal Sciences and Industry)
- Elizabeth Davis (Department Head, Clinical Sciences)
- Brian Spooner (Division Head, Biology)
- Jennifer Green (Director, Riley County Health Department)

MPH Program Faculty Advisory Council (FAC)

The formula for membership is the program director, at least three primary faculty members from each emphasis area concentration of the program, the core course instructors who are not named as primary faculty in an emphasis area, and a current MPH student.

Current members are:

- Ellyn Mulcahy (Program Director and Chair)

- Sara Gragg, Justin Kastner, Abbey Nutsch (Food Safety and Biosecurity primary faculty)
- A. Paige Adams, Natalia Cernicchiaro, Kate KuKanich, Annelise Nguyen (Infectious Diseases and Zoonoses primary faculty)
- Jennifer Hanson, Richard Rosenkranz, Sara Rosenkranz, Weiqun Wang (Public Health Nutrition primary faculty)
- Gina Besenyi, Emily Mailey, Mary McElroy (Public Health Physical Activity primary faculty)
- Wei-Wen Hsu (MPH 701); Robert Larson (MPH 754); Michael Sanderson (MPH 854) (MPH Core Course Instructors who are not named primary instructional faculty)
- MPH student member: an MPH student that is a member of the Comprehensive Public Health Group (CPHG, see A3).

MPH Program Curriculum Committee

The formula for membership is the program director, at least one primary faculty member from each emphasis area concentration of the program (and an additional faculty member from the emphasis area under review that year), at least one core course instructor who is not named as a primary faculty in an emphasis area, and a current MPH student.

Current members are:

- Ellyn Mulcahy (Program Director)
- Justin Kastner and Abbey Nutsch (Food Safety and Biosecurity)
- Robert Larson (Infectious Diseases and Zoonoses)
- Richard Rosenkranz (Public Health Nutrition)
- Mary McElroy (Public Health Physical Activity)
- MPH student member: an MPH student that is a member of the Comprehensive Public Health Group (CPHG).

MPH Program Travel Awards

Current members are ad hoc from the FAC and used when needed.

2) Briefly describe which committee(s) or other responsible parties make decisions on each of the following areas and how the decisions are made:

Because of the unique interdisciplinary organization of the MPH program, the university uses a blend of governance structures, working under the auspices of the MPH Program Agreement of Support, to address the needs of the program and its faculty and students Support (see ERF “1-Intro” for the 2018 MPH Program Agreement of Support). The Program director and staff are directly responsible for daily operations, to include coordination of student applications, monitoring of student progress, student recruiting, operations budgeting and allocation, along with communications to and with the various program-governing entities.

a. degree requirements

The program director and FAC in coordination with the Graduate School are responsible for decision making regarding degree requirements. The program director and FAC follow the guidelines and policies of the K-State graduate handbook <https://www.k-state.edu/grad/graduate-handbook/> and the University Handbook Link: <http://www.k-state.edu/provost/universityhb/>. All changes to the MPH degree requirements are processed and approved through a central Curriculum Management System at K-State, named Curriculog (<http://www.k-state.edu/curriculog/>).

b. curriculum design

The curriculum committee and FAC are responsible for decision making regarding curriculum design. The MPH Curriculum Committee meets at least once a year and provides oversight of the program’s

curriculum, reviewing any applicable materials from the programmatic assessment and/or issues presented by program administration, faculty and students.

At a minimum, the committee routinely reviews all courses in each emphasis area curriculum once every four years and make recommendations to the FAC for necessary changes before November 1st of each calendar year. If the program is made aware of significant changes in individual courses in MPH curricula, the committee will assess that course in the same year as the changes are made. If a new course is introduced as a potential match for an MPH elective course, the syllabus of the potential elective is reviewed by the program director, the FAC and the course instructor to ensure it is suitable for MPH students to take as an elective. All changes to the MPH curricula are processed and approved through a central structure at K-State, named Curriculog. (See ERF “A1-1B” for Curriculum Committee Reports.)

c. student assessment policies and processes

The Graduate School, program director and FAC are responsible for decision making regarding student assessment policies and processes. The program director, FAC and instructional faculty follow the guidelines and policies for the department where the course originates for student assessment policies and processes, in addition to university-wide student assessment policies and processes (<http://www.k-state.edu/provost/policies/classroom.html>).

d. admissions policies and/or decisions

The Graduate School, faculty members from each emphasis area, program director and FAC are responsible for decision making regarding student admission policies and decisions. All new student applications are reviewed in the following manner:

- The MPH Program staff review a new application to ensure it is complete with a current transcript(s) from all universities attended, a statement of interest in the MPH program, three letters of reference, and GRE scores.
- The MPH Program Director reviews the application materials, including reading of the statement of interest, review of transcripts, GPA and GRE scores, and letters of reference.
- The emphasis area faculty review the application and make a decision on admission into the program.
- The Graduate School reviews the application upon a recommendation by the MPH faculty for admission.
- If the student is an international student, the Graduate School assists with visa regulations.

e. faculty recruitment and promotion

The MPH Program director and FAC are responsible for decision making regarding faculty recruitment to the MPH Program. Faculty interested in working with MPH students fill out an online application, which asks about their graduate faculty status, courses they teach, and their public health research and service. The application form is submitted with a short curriculum vitae to the MPH Program director. Applications are reviewed by, and voted upon by the Faculty Advisory Council (FAC). (See ERF “1-Intro” for MPH Graduate Faculty Application). Members of the MPH Executive Council and MPH Program Board of Directors, with input from the program director, are responsible for decision making regarding faculty promotion. The process and procedures for faculty promotions are laid out in the Department/Unit Head Manuals (<http://www.k-state.edu/provost/resources/dhmanual/>).

f. research and service activities

Members of the MPH Executive Council and MPH Program Board of Directors, with input from the program director, are responsible for decision making regarding research and service activities.

3) A copy of the bylaws or other policy documents that determine the rights and obligations of administrators, faculty and students in governance of the program.

- See ERF “A1-3” for the MPH Graduate Handbook
- K-State Policy and Procedure Handbook Link: <http://www.k-state.edu/policies/ppm/>
- K-State Graduate School Handbook Link: <https://www.k-state.edu/grad/graduate-handbook/>
- University Handbook Link: <http://www.k-state.edu/provost/universityhb/>
- Department/Unit Head Manual Link: <http://www.k-state.edu/provost/resources/dhmanual/>

4) Briefly describe how faculty contribute to decision-making activities in the broader institutional setting, including a sample of faculty memberships and/or leadership positions on committees external to the unit of accreditation.

Each MPH faculty member serves on department, college, and university-wide committees that are external to the unit of accreditation. MPH faculty contribute to decision-making activities in the broader institutional setting by both serving on committees and being a committee chair. These committees include the Faculty Senate, the Graduate Council, the University Assessment and Review Committee, Strategic planning committees and other important committees at K-State that provide input to the institution. The MPH program is represented on the Graduate Council by a specific representative who is a member Applied Sciences Academic Area of the council. The MPH program is one of the degree programs in the Applied Sciences Academic Area, and the MPH program is currently represented by an MPH faculty member. MPH faculty members can be nominated to be on the ballot for a three-year term during the election cycle. A faculty member must volunteer to be on the ballot, or to be asked to run by another member of the Applied Sciences Academic Area. Table 3 below illustrates examples of faculty membership on university committees external to the unit of accreditation.

Table 3. Section A1-4. Faculty Who Hold Membership on University Committees (2017 to 2019).

Faculty Member	University Committee Service
Adams, A. Paige	Member, search committee for Provost/Executive Vice President Chair, search committee for professor of practice for K-State Olathe Member, search committee for program manager Member, One Health Day organizational committee Member, admissions committee for Professional Science Master in Applied Science and Technology, K-State Olathe Member, curriculum committee K-State Olathe
Besenyi, Gina	Extension Walk Kansas 5K for the Fight Planning Committee Department of Kinesiology Marketing Committee Department of Kinesiology Exercise is Medicine on Campus Committee MPH Faculty Advisory Committee College PHD Coordinating Committee
Cernicchiaro, Natalia	Member, Biosecurity, Environmental Health and Safety Committee Member, College of Veterinary Medicine Research Committee
Chengappa, M.M.	Graduate Council Faculty Senate
Heinrich, Katie	Faculty Senate Infectious Disease Advisory Committee
Haub, Mark	University Research Finance Committee
Johannes, Elaine	Graduate program director for Great Plains-IDEA Advisory committee for Center for Engagement and Community Development.

Faculty Member	University Committee Service
Kastner, Justin	Chair, K-State Presidential Scholarship Interview and Selection Committee Member, Academic Affairs Committee, School of Applied and Interdisciplinary Studies (K-State Olathe) Member, College of Veterinary Medicine Library committee Member, Teval User Experience Research Study Committee, K-State Teaching and Learning Center
Kidd, Tanda	Chairman, Human Ecology Academic Affairs Committee
KuKanich, Kate	Member, College of Veterinary Medicine Continuing Education Committee Member, College of Veterinary Medicine Biosecurity, Environmental Health and Safety Committee Member, College of Veterinary Medicine Scholarship and Awards Committee Member, Clinical Sciences Department Committee on Planning Member, Clinical Sciences Curriculum Committee
Larson, Robert	Global Campus Advisory Council Search Committee, Dean, College of Veterinary Medicine
Lindshield, Brian	Faculty Senate President Leader of Open/Alternative Textbook Initiative Tuition and Fees Strategies Committee Provost Search Committee Higher Learning Initiative Quality Initiative project on first Generation Student Success
Mailey, Emily	College of Human Ecology Faculty Council Smoke Free Promotion Committee Department of Kinesiology Undergraduate Council
McElroy, Mary	Member Drive-In (Diversity Committee) Graduate Council Member, Human Ecology Faculty Council
Moore, Susan	Member, College of Veterinary Medicine Biosecurity, Environmental Health and Safety Committee
Mosier, Derek	Faculty Senate and Faculty Affairs University Integrity in Research Committee University Shared-leave Committee
Mulcahy, Ellyn	CVM Strategic Planning task force committee on A Culture of Respect and Collegiality K-State Intercampus Programs Subcommittee of the Undergraduate Programs Council CVM graduate student scholarship committee K-State Planning committee for One Health Day College Committee on Planning (CVM CCOP)
Muturi, Nancy	Institution Review Board
Nguyen, Annalise	OURCI Committee for undergraduate research University Faculty Mentoring Committee GROW, EXCITE, & SUCCEED Steering Committee Faculty Senate
Nutsch, Abbey	Member, Graduate Council; Chair, Student Affairs Sub-committee Member, Selection Committee for K-State Presidential Scholarship Awards Member, Department Course and Curriculum Committee Member, Food Science Graduate Coordinating Committee

Faculty Member	University Committee Service
Nwadike, Londa	Member, Curriculum Committee for K-State Olathe Member, Open House Planning committee Member, Research and Extension Nutrition, Food Safety and Health Program Focus Team
Procter, Sandra	Global Food Systems Initiative CATS Cupboard Student Food Pantry Advisory Board
Renberg, Walter	University Faculty Senate Provost's International Advisory Committee
Rosenkranz, Sara	University Environmental Health and Safety Committee Faculty Senate Faculty Affairs Committee University Human Subjects IRB Committee College of Human Ecology Faculty Council University Smoke-Free Education Committee
Stamm-Heier, Jessica	Graduate Committee, Industrial and Manufacturing Systems Engineering Department College of Engineering Diversity Committee
Van Landingham, Dana	Graduate Council, MPH representative University IRB Committee University Academic Affairs Committee
Wang, Weiqun	University Radiation Safety Committee K-State Presidential Lecture Service Member, Search Committee for K-State Cancer Center Director
Yelland, Erin	University Handbook and Policy Committee

5) Describe how full-time and part-time faculty regularly interact with their colleagues (self-study document) and provide documentation of recent interactions, which may include minutes, attendee lists, etc.

Full-time faculty regularly interact with their colleagues within their own academic departments, and between academic departments and colleges. MPH graduate faculty in their respective departments interact regularly with members of the MPH Faculty Advisory Council (FAC) at monthly meetings. FAC members bring issues to the council from their departments and relay information back to their departmental colleagues. MPH faculty attend the annual MPH Orientation meeting, and the annual MPH Field Experience meeting. These annual meetings are also recorded and shared with faculty members that are unable to attend in person. MPH faculty also attend emphasis area faculty meetings that occur as needed to facilitate the distribution of new information pertinent to that emphasis area. The MPH Program does not have part-time faculty. See ERF "A1-5" for examples of regular faculty interactions along with agendas and minutes.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The organization is cost efficient, providing access for students to many experts in a wide variety of public health-related disciplines while spreading responsibilities and sharing associated costs across many academic units. The nature of interdisciplinary programs at this university encourages collaboration across traditional college and department lines, adding to the experience and interprofessional interactions for students and faculty. The FAC helps facilitate communication and provides perspectives from all supporting faculty, staff and students, and the Graduate School and Graduate Council provides the necessary structure for standardized policies and procedures.

Weaknesses: There are no weaknesses in this area.

Plans for Improvement: Continue to hold routine meetings with administration and coordinating committees in order to improve transparency and communication with the stakeholders of the

program. Continue to hold department and college level meetings for MPH faculty members, record meetings where possible, and distribute minutes and agendas of all meetings to MPH faculty.

A2. Multi-Partner Programs (applicable ONLY if functioning as a “collaborative unit” as defined in CEPH procedures) Not applicable.

A3. Student Engagement

Students have formal methods to participate in policy making and decision making within the program, and the program engages students as members on decision-making bodies whenever appropriate.

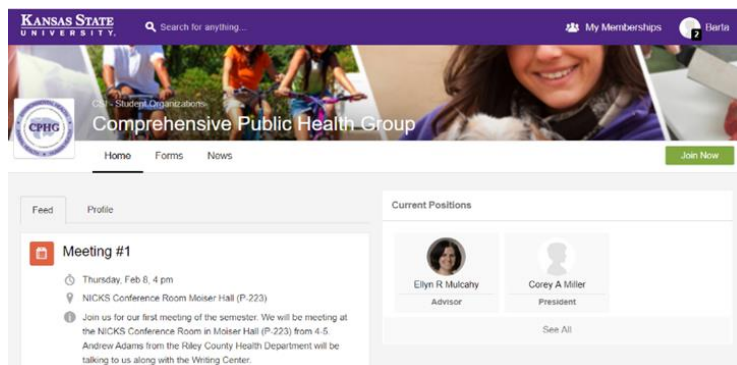
- 1) Describe student participation in policy making and decision making at the program level, including identification of all student members of program committees over the last three years, and student organizations involved in program governance.**

MPH students are represented within K-State at the programmatic level, the college level and the university level:

1. The MPH Program Faculty Advisory Council includes an MPH student representative. This student is a member of the MPH student body and is also a member or officer of the Comprehensive Public Health Group (CPHG). The CPHG consists of MPH students from all MPH emphasis areas, and regularly meets to discuss topics of interest to the MPH student body. Agendas and minutes of the CPHG meetings are available at the groups' OrgSync website. Recent meeting descriptions/minutes, student attendees, and planning documents for 2018/2019 are provided in the ERF. (See ERF “A3-1”).
2. Students meet with the program director regularly to provide specific input to the program and self-study document development. Recent meeting minutes and list of student attendees are provided in the ERF (see ERF “A3-1”). A draft of the self-study document, specifically the sections of vision, mission, values, goals; and evaluation measures; and diversity and cultural competencies, was shared and discussed with the student group. In addition, feedback was gathered after the meeting. This feedback was incorporated into the final self-study document.
3. MPH students are represented in their individual colleges by a graduate student committee (GSC) whereby students provide input to the college on matters relating to graduate education. College of Human Ecology: <https://www.he.k-state.edu/students/grad/>; College of Veterinary Medicine: <http://www.vet.k-state.edu/education/students/index.html> and <http://www.vet.k-state.edu/education/students/organizations/gsa/index.html>

Please note all official student organizations are located to a central university website (OrgSync) and off the individual college's websites. The link is password protected and only available to those with a K-State eID and password. Figure 3 shows a screen shot of K-State's OrgSync Website for the CPHG.

Figure 3. Section A3-1. Screen Shot of K-State’s OrgSync Website for the Comprehensive Public Health Group (CPHG).



4. At the university level, MPH students are represented by the Graduate Student Council. A member of the Comprehensive Public Health Group represents the MPH student body at regular meetings of the council. (Link: <https://www.k-state.edu/grad/students/studentcouncil/>)

Also, in an effort to encourage feedback from all students, the MPH website has an electronic Suggestion Box to solicit anonymous and informal feedback on any topic pertaining to the program <http://www.k-state.edu/mphealth/current/>. This suggestion box is monitored weekly by the program staff.

2) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: Student participation in the FAC is encouraged and valued. Student feedback and opinions on any program related concern or issue are welcomed and solicited using a number of methods, including the MPH electronic suggestion box, student survey instrumentation that is sent to students at regular intervals, and regular meetings of students and MPH faculty and staff during the academic year including the MPH orientation meeting and the MPH field experience meeting.

Weaknesses: Student participation in the FAC is not consistent due to the continual change of student involvement in the Comprehensive Public Health Group from semester to semester. MPH student participation on the GSC is also irregular.

Plans for improvement: Continue to include students in the FAC. Ensure that an MPH student attend at least one FAC meeting per semester. Encourage MPH student participation in the CPHG on the GSC.

A4. Autonomy for Schools of Public Health Not applicable.

A5. Degree Offerings in Schools of Public Health Not applicable.

B1. Guiding Statements

The program defines a *vision* that describes how the community/world will be different if the program achieves its aims.

The program defines a *mission statement* that identifies what the program will accomplish operationally in its instructional, community engagement and scholarly activities. The mission may also define the program's setting or community and priority population(s).

The program defines *goals* that describe strategies to accomplish the defined mission.

The program defines a statement of *values* that informs stakeholders about its core principles, beliefs and priorities.

- 1) A one- to three-page document that, at a minimum, presents the program's vision, mission, goals and values.**

The MPH Program vision, mission, goals and values:

The MPH Program vision: Be a Leader and Innovator in Public Health.

The MPH Program mission: To provide interdisciplinary education, scholarship and service across public health, affecting human, animal, and community health locally, regionally, and globally.

This multi-faceted mission aligns with the three main aspects of Kansas State University's land-grant mission - education, research, and service.

The MPH Program has four overarching goals aligned with the program vision that describe how our mission will be accomplished in instruction, scholarship, service, and student success in order to advance the field of public health and promote student success.

Instruction: Provide excellent interdisciplinary education to all students in public health through current and relevant curricula.

Scholarship: Conduct and communicate collaborative research and scholarship in public health.

Service: Partner with and support public health practitioners, to enhance health within Kansas and beyond.

Student Success: Mentor and support public health students who excel and will succeed beyond graduation to build the public health workforce.

The MPH program statement of values guides and informs the program and its stakeholders. The MPH Program is an integral part of the entire university setting and adheres to the values communicated in the Kansas State University's Principles of Community statement. This statement is located on K-State's website: <http://www.k-state.edu/about/community.html>

Kansas State University is a land-grant, public research university committed to teaching and learning, research, and service to the people of Kansas, the nation, and the world. Our collective mission is best accomplished when every member of the university community acknowledges and practices the following principles:

We affirm the inherent dignity and value of every person and strive to maintain an atmosphere of justice based on respect for each other.

We affirm the value of human diversity for community.

We affirm the right of each person to freely express thoughts and opinions in a spirit of civility and decency. We believe that diversity of views enriches our learning environment, and we promote open expression within a climate of courtesy, sensitivity, and mutual respect.

We affirm the value of honesty and integrity. We will operate with honesty in all professional endeavors and expect the same from our colleagues.

We acknowledge that we are a part of multiple communities, and we have an obligation to be engaged in a positive way with our civic partners.

We recognize our individual obligations to the university community and to the principles that sustain it. We will each strive to contribute to a positive spirit that affirms learning and growth for all members of the community.

These principles have been endorsed by the following university governance bodies:

- Student Governing Association
- Graduate Student Council
- Graduate Council
- Faculty Senate
- Classified Senate

As an interdisciplinary graduate program in a land-grant university, the MPH program has instruction, scholarship, student success, and service roles related to public health, and these principles apply to all members of our program. The MPH Program mission statement is consistent with that of Kansas State University: <http://www.k-state.edu/about/mission.html>

2) If applicable, a program-specific strategic plan or other comparable document.

To develop and map out the MPH program vision, mission, values, and goals; the FAC members carried out strategic planning at monthly faculty meetings in 2017 and 2018. In addition, sub-groups of the FAC met between the monthly FAC meetings to focus on strategic planning for their emphasis areas. In 2017 and 2018, the FAC monthly meetings also focused on the preparation to submit the self-study document to CEPH for accreditation as a program.

The MPH program operates as an integral part of the university, and as such, is an important part of the strategic planning at the university, college and department level. MPH faculty serve on many strategic planning committees and task forces as outlined in Table 3. Section A1-4. As part of the College of Veterinary Medicine, the MPH Program Director and other MPH faculty participate in strategic planning for the College. MPH faculty in other colleges also participate in these planning processes.

The strategic plans currently in place are:

Kansas State University 2025 Visionary Plan: <http://www.k-state.edu/2025/>

Each college/major unit/departmental created a strategic action and alignment plan to implement the university's 2025 Visionary Plan: <http://www.k-state.edu/2025/plan/action.html>

The College of Veterinary Medicine, where the MPH Program Director, MPH faculty and one of the four emphasis areas is located, has a strategic plan: <http://www.vet.k-state.edu/StrategicPlan/>

The College of Human Ecology, where MPH faculty and two of the four emphasis areas are located, has a strategic plan: <http://www.k-state.edu/2025/documents/college-planning/K-State-2025-Human-Ecology-Strategic-Direction-Action-and-Alignment-Plan-March-2016.pdf>

The College of Agriculture, where MPH faculty and one of the four emphasis areas are located, has a strategic plan: http://www.k-state.edu/2025/documents/K-State-2025-Agriculture_and_KSRE-Strategic-Direction-Action-and-Alignment-Plan-Aug-2013.pdf

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: This interdisciplinary program operates as an integral part of the university—with its established processes and expectations—while also establishing its own expectations as a non-traditional component of multiple entities on campus.

Weaknesses: There are no weaknesses in this area.

Plans for Improvement: Leverage the expertise of the university’s Office of Educational Innovation and Evaluation to design and implement more efficient processes for monitoring goals and objectives as well as revising them when necessary. Continue to hold routine meetings with administration and coordinating committees in order to improve transparency and communication with the stakeholders of the program. Continue to hold department and college level meetings for MPH faculty members, and distribute minutes and agendas of all meetings to MPH faculty.

B2. Graduation Rates

The program collects and analyzes graduation rate data for each degree offered (e.g., BS, MPH, MS, PhD, DrPH).

The program achieves graduation rates of 70% or greater for master’s degrees.

1) Graduation rate data for each degree in unit of accreditation. See Template B2-1.

Table 4. Template B2-1. Students in MPH Degree, by Cohorts Entering Between AY 2012-13 and AY 2018-19.

Maximum Time To Graduate: 6 years*							
AY	Cohort of Students	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019
2013	# Students continuing	23					
& 14	# Students withdrew, dropped	0					
	# Students graduated	0					
	Cumulative graduation rate	0%					
2014	# Students continuing	23	33				
& 15	# Students withdrew, dropped	2	2				
	# Students graduated	5	1				
	Cumulative graduation rate	22%	3%				
2015	# Students continuing	16	30	20			
& 16	# Students withdrew, dropped	2	0	1			
	# Students graduated	4	10	0			
	Cumulative graduation rate	39%	33%	0%			
2016	# Students continuing	10	20	19	29		
& 17	# Students withdrew, dropped	0	1	0	0		
	# Students graduated	3	8	7	0		
	Cumulative graduation rate	52%	58%	35%	0%		
2017	# Students continuing	7	11	12	29	21	

Maximum Time To Graduate: 6 years*							
AY	Cohort of Students	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019
& 18	# Students withdrew, dropped	1	1	1	1	0	
	# Students graduated	1	4	8	7	0	
	Cumulative graduation rate	57%	70%	75%	24%	0%	
2018	# Students continuing*	5	6	4	21	21	6
& 19	# Students withdrew, dropped						
	# Students graduated						
	Cumulative graduation rate						

*Three students over the six year mark are being tracked because they have indicated an interest in finishing, and will be allowed to do so once their coursework is “revalidated” and they complete all requirements.

The MPH program is committed to helping students complete the program within 24-27 months. The Graduate School allows up to six years to complete a graduate degree and concurrent MPH/DVM students are limited by the number of graduate hours they can take per semester during the DVM degree program. The table below stratifies the MPH student population.

Table 5. Time in Months to Complete MPH Degree: Detailed Analysis of Graduation Rates

AY Start	MPH Students Only Mos in Program to Graduate			Concurrent MPH/DVM Mos in Program to Graduate			All MPH Students Mos in Program to Graduate			Withdraw / Transferred
	24-27	> 27	Active, Not Graduated,	24-27	> 27	Active, Not Graduated	24-27	> 27	Not Graduated	
2014	50% (7/14)	36% (5/14)	14% (2/14)		25% (1/4)	75% (3/4)	39% (7/18)	33% (6/18)	28% (5/18)	22% (5/23)
2015	64% (14/22)	23% (5/22)	13% (3/22)		71% (5/7)	29% (2/7)	48% (14/29)	31% (9/29)	21% (6/29)	12% (4/33)
2016	86% (12/14)	14% (2/14)	7% (1/14)	25% (1/4)		75% (3/4)	72% (13/18)	5% (1/18)	22% (4/18)	10% (2/20)
2017*	30% (7/23)		70% (16/23)			100% (4/4)	25% (7/28)		75% (21/28)	3% (1/29)

*24-27 months for students starting in AY 2017 is AY 2019.

Note: Students completing requirements by the last day of classes may graduate the next semester without enrolling in classes; therefore, 24-27 months was selected to capture the time frame for those students that graduate in the next semester without enrolling in a class and still remain within two years of completion.

- 2) **Data on doctoral student progression in the format of Template B2-2.** Not applicable.
- 3) **Explain the data presented above, including identification of factors contributing to any rates that do not meet this criterion’s expectations and plans to address these factors.**

The data presented in Table 4 includes data from four student groups. Table 4 includes (1) MPH students not enrolled in a concurrent MPH/DVM degree program, (2) MPH students enrolled in a concurrent MPH/DVM degree program, (3) MPH students that have transferred to another graduate program, and (4) students that have withdrawn from the program. Collectively (for these four groups) a 70% and 75% rate of graduation for 2014/2015 and 2015/2016, respectively, demonstrates a graduation rate that meets and

exceeds this criterion for all MPH students. A 65% rate of graduation for 2012/2013 includes one MPH/DVM student currently completing the final semester required for MPH graduation. A 57% rate of graduation for 2013/2014 includes two MPH/DVM students who are currently active in both their DVM program and MPH program and anticipate to complete their programs in 2019. MPH students matriculated in and after 2016/2017 are active in the program currently.

The program meets this criterion's expectations for MPH students not enrolled in a concurrent MPH/DVM degree program. As indicated in Table 5, the program meets the requirement of a 70% graduation rate for MPH students (not in a dual-degree program), and exceeds it with a cumulative graduation rate of 85% for 2014 to 2016, as follows:

- 86% of students starting in AY14 graduating at 24-27, or >27 months. 14% of students are currently active in the program.
- 87% of students starting in AY15 graduating at 24-27, or >27 months. 13% of students are currently active in the program.
- 77% of students starting in AY16 graduating at 24-27, or >27 months. 22% of students are currently active in the program.

MPH students are also tracked based on their enrollment in a dual degree program (MPH/DVM) (see Table 5 above). This is performed to ensure that tracking takes into account the ability of a student to complete the MPH program within six years. Students have six years to complete MPH degree. After six years, students are marked as inactive unless there are extenuating circumstances (as outlined below) and their coursework older than six years is "revalidated" by the graduate committee.

MPH/DVM students who have not completed within six years with extenuating circumstances are assisted to complete their degree based on their individual needs with revalidation. Examples of these circumstances include military deployment, employment responsibilities after DVM graduation, and personal family circumstances. Another factor that contributes to the time to graduation of MPH/DVM students is that DVM students may begin the MPH program at any time-point during or before their DVM program. As indicated by the numbers in Table 5 (above), the graduation rates for MPH/DVM students (in a dual-degree program) are:

- 25% of students starting in AY14 graduating at 24-27, or >27 months. 75% of students are currently active in the program.
- 71% of students starting in AY15 graduating at 24-27, or >27 months. 29% of students are currently active in the program.
- 25% of students starting in AY16 graduating at 24-27, or >27 months. 75% of students are currently active in the program.

For these reasons, the program tracks these students carefully to ensure persistence and support for degree completion. This six-year time to graduation tracking is also important for students who are employed full-time and self-report as part-time students.

Identification and monitoring of factors contributing to graduation rates that do not meet this criterion's expectations is carried out at the program level and routinely tracked each semester. These factors are addressed at the program level by program staff and include ongoing monitoring of each student's progress of their POS, ongoing monitoring of each student's semester course load, and regular advising of each student to ensure that students are on track with their POS. In addition, regular planning of the timing of the stages of the program including forming of a graduate committee, initiation and continuance of annual reporting using the MPH checklist (see ERF "D5" MPH Checklist), planning of the APE, completion of the APE report and the ILE is carried out by the program staff and members of the graduate committee.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The program generally meets the requirement of a 70% graduation. The program carefully and regularly tracks students at multiple points each semester (day one, day 20, review of final

grades, prior to the next semester) as well as during the graduate program of each student (using an entry survey, annual meeting with advisor, the MPH checklist, a mid-point survey, and preparation for graduation using the MPH checklist) to ensure progress in coursework and field experience placement. The program also works with the Graduate School to ensure annual progress reporting of students is carried out with the Major Professor to ensure student success.

Weaknesses: Students in the program are assisted and advised by both the MPH program office and their major advisor. Therefore, communications and distribution of information regarding student progress, graduation information, and surveys involves coordinated and streamlined processes; this is not insurmountable and is effective with careful planning.

Plans for Improvement: Continue to work with the FAC and the Graduate School to ensure all new guidelines are communicated to each emphasis area. Continue to participate in graduate director semester meetings to maintain currency in Graduate School and graduate handbook training. Continue to assist major professors with all aspects of student advising. Continue to carefully advise MPH students regarding timing of coursework and time to graduation to ensure degree completion.

B3. Post-Graduation Outcomes

The program collects and analyzes data on graduates' employment or enrollment in further education post-graduation, for each degree offered (eg, BS, MPH, MS, PhD, DrPH).

The program achieves rates of 80% or greater employment or enrollment in further education within the defined time period for each degree.

- 1) Data on post-graduation outcomes (employment or enrollment in further education) for each degree. See Template B3-1.

Table 6. Template B3-1. Post-Graduation Outcomes.

Post-Graduation Outcomes	AY 2015	AY 2016	AY 2017
Employed	8 (50%)	17 (89%)	14(66%)
Continuing education/training (not employed)	7 (44%)	2 (11%)	5 (24%)
Not seeking employment or not seeking additional education by choice	0	0	1 (5%)
Actively seeking employment or enrollment in further education	0	0	0
Unknown	1 (6%)	0	1 (5%)
Total Graduated	16	19	21

- 2) Explain the data presented above, including identification of factors contributing to any rates that do not meet this criterion's expectations and plans to address these factors.

The program uses post-graduation outcomes as one measure to evaluate student employment after graduation. Students are surveyed at graduation and are tracked up to one year post-graduation using survey instrumentation. As indicated by the numbers above in Table 6, an average of 91.6% of students (AY 2015 to AY 2017) are employed or are in an advanced degree or training program.

Post-graduation data are also collected by the K-State Career Center. The K-State Career Center compiles information about the first destinations of recent K-State graduates. The data are collected up to 6 months after graduation from degree recipients. Most of the data are self-reported via an online survey form and in response to an extensive phone calling campaign.

In addition, data are solicited from employers, faculty, and other sources to ensure good report reliability with a typical knowledge rate of over 80% of the graduating class. Data collection and reporting processes are informed by the National Association of Colleges and Employers first-destination standards

and protocols. The K-State Career Center liaison collaborates with the program staff to provide this timely information back to the program. In addition, students are asked and encouraged to report any employment or educational changes post-graduation via email or telephone to the program staff. Further, data are collected by program staff from employment or professional websites. These data collections methods are combined to ensure that the program has a low number of graduates with unknown post-graduation outcomes.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: Employment tracking at or within one year of graduation indicates a high percentage of MPH graduates are employed or are in an advanced degree or training program. The current data collections methods by the MPH program and the K-State Career Center ensure that the program has a low number of graduates with unknown post-graduation outcomes.

Weaknesses: Long-term tracking of students can be challenging within or after one years of graduation due to students moving out of state or internationally for their career, or further graduate or professional education.

Plans for Improvement: Continue to maintain an active post-graduation relationship with MPH alumni in order to track students post-graduation and decrease the number of students with unknown status. Continue to maintain a database of students after graduation as to the location of first employer and thereafter when communication is maintained using the methods as stated above. Continue to collaborate with the K-State Career Center liaison.

B4. Alumni Perceptions of Curricular Effectiveness

For each degree offered, the program collects information on alumni perceptions of their own success in achieving defined competencies and of their ability to apply these competencies in their post-graduation placements.

The program defines qualitative and/or quantitative methods designed to maximize response rates and provide useful information. Data from recent graduates within the last five years are typically most useful, as distal graduates may not have completed the curriculum that is currently offered.

1) Summarize the findings of alumni self-assessment of success in achieving competencies and ability to apply competencies after graduation.

Alumni are surveyed at graduation (exit survey) and one year after graduation (Alumni Survey). These surveys are administered through the MPH program staff using an electronic survey instrument tool sent to alumni via e-mail.

At the point of graduation, data collected from the exit survey (AY 2015 to AY 2017):

- 100% of students said they understand the connection between the expected competencies and the course requirements.
- 24% of students reported that the program had excellently prepared them for future employment, and 48% reported this preparation was good.
- 21% of students strongly agreed that the program had kept pace with the public health field, and 69% reported they agreed that the program had kept pace with the public health field.

At one year post-graduation, data collected from the Alumni Survey (AY 2015 to AY 2017):

- 80% of graduates reported working in a public health field,
- 86% of graduates reported they were adequately or more than adequately prepared for their employment position by the MPH program.
- 73% of graduates reported they understood the connection between the expected competencies and the course requirements.

Table 7. Section B4-1. Exit and Alumni Response Rates.

Survey	AY 2015		AY 2016		AY 2017	
	Launched	Response	Launched	Response	Launched	Response
Exit Survey Launched graduation semester	18	14 (78%)	16	10 (63%)	23	19 (83%)
Alumni Survey (1 year after graduation)	38	12 (32%)	21	10 (48%)	19	Will be included

2) Provide full documentation of the methodology and findings from alumni data collection.

See ERF “B4-2” for full documentation of methodology and data collection.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: Alumni self-assessment of success in achieving competencies and ability to apply competencies after graduation or within one year of graduation indicates that a high percentage of MPH graduates are confident in their abilities to understand, achieve and apply competencies. The current data collection methods ensure that program graduates have opportunity to report their success in achieving competencies and skills to apply them after graduation.

Weaknesses: Long-term tracking of students can be challenging within or after one year of graduation. A disparity at one year post-graduation in the percentage of graduates reporting that they were prepared for their position (86%) and understanding of the competencies (73%) indicates an area for improvement in graduates’ linkage of achieving competencies to career preparedness.

Plans for improvement: Continue to maintain an active post-graduation relationship with MPH alumni in order to track students post-graduation. Continue to maintain a database of students after graduation regarding the location of their first employer and employer(s) thereafter. The exit survey and Alumni Survey will be updated to include more specific questions regarding alumni perceptions of their success in achieving the 22 public health competencies and the five emphasis area competencies, and of their ability to apply these competencies in their post-graduation placements. The questions below (or similar) will be added to update the existing surveys:

1. Did the K-State MPH program prepare you to be successful in achieving the public health foundational competencies?
2. Did the K-State MPH program prepare you to be successful in achieving your emphasis area specific competencies?
3. Did the K-State MPH program provide you with the skills and knowledge to apply these competencies?

B5. Defining Evaluation Practices

The program defines appropriate evaluation methods and measures that allow the program to determine its effectiveness in advancing its mission and goals. The evaluation plan is ongoing, systematic and well-documented. The chosen evaluation methods and measures must track the program’s progress in 1) advancing the field of public health (addressing instruction, scholarship and service) and 2) promoting student success.

1) Present an evaluation plan that, at a minimum, lists the program’s evaluation measures, methods and parties responsible for review. See Template B5-1.

Table 8. Template B5-1. Evaluation Plan.

Evaluation measures	Data collection method for measure	Responsibility for review
Goal Statement 1. Provide excellent interdisciplinary education to all students in public health through current and relevant curricula.		
<i>Measure 1.</i> Student perception of instructional effectiveness, and currency and relevance of curricula.	Mid-point and Exit Surveys completed at the end of students' programs.	MPH Director, MPH Faculty Advisory Board.
<i>Measure 2.</i> Faculty participation in professional development that supports innovative instruction and currency in interdisciplinary research and education.	Annual reporting of professional development by faculty.	MPH Director, MPH Faculty Advisory Board.
Goal Statement 2. Conduct and communicate collaborative research and scholarship in public health.		
<i>Measure 3.</i> Primary MPH faculty communication of public health related research to the public via scholarly presentations and/or publications.	Annual self-reporting of faculty written or oral public health scholarship.	MPH Director, MPH Faculty Advisory Board.
<i>Measure 4.</i> MPH students communication of public health related research or practice to the public via oral or poster presentations and/or publications	Annual data of student completion of MPH requirement of written or oral communications, and by annual self-reporting of students and their major professors.	MPH Director, MPH Major Professors.
Goal Statement 3. Partner with and support public health practitioners, to enhance health within Kansas and beyond.		
<i>Measure 4.</i> Primary MPH faculty engagement and support of community education, outreach, extension, or service projects.	Annual self-reporting of faculty service and engagement.	MPH Director, MPH Faculty Advisory Board.
<i>Measure 6.</i> MPH students' active participation in community education, outreach, extension, or service projects.	Annual self-reporting of student service and engagement.	MPH Director, MPH Faculty Advisory Board.
Goal Statement 4. Mentor and support public health students who excel and will succeed beyond graduation to build the public health workforce.		
<i>Measure 7.</i> Completion of degree requirements within 24-27 months of enrollment in the program for MPH students not seeking a dual degree.*	Annual graduation rate data	MPH Director, MPH Faculty Advisory Board.
<i>Measure 8.</i> Completion of degree requirements within six years of enrollment in the program for MPH students.**	Annual graduation rate data	MPH Director, MPH Faculty Advisory Board.
<i>Measure 9.</i> Preparation of students for employment through career counseling.	Mid-point and Exit Surveys completed at the end of students' programs.	MPH Director, MPH Faculty Advisory Board, Major advisors.

*This measure includes MPH students not seeking a dual degree, and reflects students completing the program in six contiguous semesters or less.

**This measure includes MPH/DVM and MPH students, and reflects the six-year maximum for students to complete a graduate degree allowed by the K-State Graduate School.

2) Briefly describe how the chosen evaluation methods and measures track the program's progress in advancing the field of public health (including instruction, scholarship and service) and promoting student success.

The evaluation methods and measures track the program's progress in advancing the field of public health. The program goals identified above in Table 8 (Template B5-1) are associated with evaluation measures related to each major goal for the program, including instruction, scholarship, service, and student success. The instructional and student success goals and measures will ensure that MPH graduates are trained in foundational public health skills that are transferable to all public health careers, and they are prepared and confident for a future career in public health. The scholarship and service goals and measures will ensure that MPH program faculty and students are both committed to and engaged in public health in their community. In addition, these goals and measures fulfill important principles of the tenets of the mission and vision of the program, which are to serve and improve public health in our community. Data collected for these measures will be tracked annually and will demonstrate the integral role of students and faculty in public health advancement.

3) Provide evidence of implementation of the plan described in Template B5-1. Evidence may include reports or data summaries prepared for review, minutes of meetings at which results were discussed, etc. Evidence must document examination of progress and impact on both public health as a field and student success.

The evaluation plan is implemented in an ongoing manner with data input each semester and annually from a number of sources. Some key components of the evaluation process include:

- Student, Graduate and Alumni Surveys
- Employer/Potential Employer Surveys
- Faculty Evaluations of Student Performance / Attainment of Program Competencies
- Student and Preceptor Evaluations of Students after Field Experiences
- Kansas Board of Regents Program Review
- Program Updates to Provost, Deans and Department Heads
- Meetings of the Faculty Advisory Council

For goal statement 1, measures 1 and 2: evidence of faculty currency in public health related education and research is collected by self-reporting annually by faculty. Student perception of instructional effectiveness is demonstrated through collection of data from the mid-point and exit survey. These are documented in the ERF.

For goal statement 2, measures 3 and 4: evidence of faculty and student communication of public health related research to the public via scholarly presentations and/or publications is demonstrated in the ERF.

For goal statement 3, measures 5 and 6: evidence of faculty and student support of community education, outreach, extension, or service projects is demonstrated in the ERF.

For goal statement 4, measures 7, 8 and 9: evidence promoting student success and progression to graduation is demonstrated in the tabulation of graduation rate and employment tracking, and in the careful tracking of student success each semester performed by the MPH program office and the Major Professor (see Tables 5 and 6 in section B2, and ERF "H1-3" Student Advising).

See ERF "B5-3" for complete documentation.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The program director and staff collect all data, coordinating with university staff; faculty and students, and OEIE staff provides advice and analytical assistance. The program director and staff share the results with the FAC and MPH faculty, students and administrators from the Graduate School and four supporting colleges. The program director and staff immediately consider feedback involving specific policies or procedures and makes necessary adjustments

Weaknesses: There are no major weaknesses.

Plans for Improvement: Programmatic assessment can be improved upon by involving more stakeholders, particularly public health-related employers, in the process. With the assistance of the Office of Educational Innovation and Evaluation, improvement in the assessment processes and more efficiencies will be incorporated into the evaluation methods and measures used to track the program's progress.

B6. Use of Evaluation Data

The program engages in regular, substantive review of all evaluation findings, as well as strategic discussions about the implications of evaluation findings.

The program implements an explicit process for translating evaluation findings into programmatic plans and changes and provides evidence of changes implemented based on evaluation findings.

- 1) Provide two to four specific examples of programmatic changes undertaken in the last three years based on evaluation results. For each example, describe the specific evaluation finding and the groups or individuals responsible for determining the planned change, as well as identifying the change itself.**

Specific examples of programmatic changes undertaken in the last three years that are based on evaluation results are listed below. These specific examples listed below are particularly related to the program goal to promote public health student success in ensuring timely progress to graduation through advising and mentoring (measures 7 and 8). The evaluation of this goal and its measures has included enhanced communication between the program office and students, and a careful review of all procedures to ensure students have sufficient information regarding degree requirements. In addition, to guide and prepare students for post-graduation and career training, the program office has focused on early career preparation and employment with assistance from the K-State Career Center (measure 9).

Two student comments from the Exit Survey (see below) regarding the culminating experience process have been addressed by holding an annual orientation meeting each November to prepare students for the culminating experience, and explain requirements and expectations of the culminating experience. These meetings are recorded and posted on the program website for students to refer to at a later date. We also have prepared a list of public health agency placement sites where other K-State students have gone. We have invited public health agency preceptors from regional sites that have hosted MPH students in the past to meet students and talk about how to plan for a culminating experience at those locations. We have collaborated with International Programs to facilitate culminating experiences outside the United States and assisted students with applications, travel planning and other requirements for international travel.

- "It would be helpful to have more information about field experience options, requirements, and process. I think this should be included in an overview class."
- "More options for field experiences, for example field experience to developing countries."

A student comment from the Exit Survey (see below) has been addressed by reviewing graduation deadlines, printing out the Graduate School's calendar and distributing it to each student when they bring forms in for signatures. In addition, all dates for registration for courses each semester, and upcoming deadlines for graduation are emailed to students. The MPH office reviews each student's record in the K-State Student Information System (KSIS) every semester. Students are e-mailed and reminded of deadlines concerning their individual progress such as the requirement to complete and turn in a POS after nine hours of graduate credits have been completed. To assist with this process, a sample POS is

available in the MPH Graduate Handbook, a sample POS for each emphasis area is available on the MPH website, and a template and link to the Graduate School site is on the MPH website. A sample POS is also handed out at the new student orientation.

- “A lot of deadlines came up too quickly and I was not adequately notified about them in time to prepare for them all.”

A student comment from the Exit Survey (see below) has been addressed by reviewing and improving career training and advice in both formal and informal settings. The program director regularly interacts with the K-State Career Center liaison for the program. From these, the program office communicates postings, and current and upcoming deadlines and due dates for fellowships and employment opportunities. The program hosts potential state and local public health employers, including MPH graduates, during and outside core courses to facilitate networking and employment opportunities. In addition, the program office maintains and regularly updates the alumni database to provide potential contacts in different public health agencies.

- “If the MPH office could help recent MPH grads with job searching and using contacts they have to help recent graduates find the job they want in their area of interest, I think that would greatly improve the success of this program.”

2) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The MPH program prioritizes public health student success through advising and mentoring during their career program and for career preparation. Through review and improvement of program processes based on evaluation results, the program can adapt to student needs and ensure timely integration of changes and updates to the program.

Weaknesses: Introduction and incorporation of major programmatic change is not a rapid process, and requires an approval process through university committees.

Plans for improvement: Continue to survey MPH students at graduation and as they enter their early career in order to determine areas for improvement and adaptation to continue to update the program. Continue to respond to student needs and incorporate changes into the program in an ongoing manner as needed and as possible.

C1. Fiscal Resources

The program has financial resources adequate to fulfill its stated mission and goals. Financial support is adequate to sustain all core functions, including offering coursework and other elements necessary to support the full array of degrees and ongoing operations.

- 1) Describe the program's budget processes, including all sources of funding. This description addresses the following, as applicable:**

The responsibility for fiscal planning is done at multiple levels. Each academic department manages all expenses involving their own courses, research and service/extension, to include faculty salaries and benefits for those MPH faculty in their department. Fiscal planning and management for program-wide expenses, to include staff salaries and operating expenses, are provided by the academic home of the program, currently the College of Veterinary Medicine. Management of university-wide expenses related to graduate programs is done by the Dean and Staff of the Graduate School.

- a) Briefly describe how the program pays for faculty salaries. If this varies by individual or appointment type, indicate this and provide examples. If faculty salaries are paid by an entity other than the program (such as a department or college), explain.**

The MPH Program is supported in two main ways: (1) faculty and instructional support expenditures are covered by the academic homes of those personnel and courses, and (2) the facility costs, salaries, and operating budget of the program office are coordinated through the business office of the College of Veterinary Medicine. (See the MPH Support Agreement in ERF "1-Intro" for Support Agreement.)

- b) Briefly describe how the program requests and/or obtains additional faculty or staff (additional = not replacements for individuals who left). If multiple models are possible, indicate this and provide examples.**

When a need is identified it is discussed with FAC, the Executive Council and the Board of Directors. As an interdisciplinary program, when new faculty are hired into academic units supporting the program, the program director visits with those faculty that have an interest in public health. Once the new faculty member is granted graduate faculty status in their home department, they are invited to become an MPH graduate faculty member and work with MPH students. A priority area for faculty needs, when identified, is discussed with department chairs in order to identify a new faculty member needed, for example for a specific area of education.

- c) Describe how the program funds the following:**

- a. operational costs (programs define "operational" in their own contexts; definition must be included in response)**

The program director, with direct assistance from the Assistant Dean for Administration and Finance at the College of Veterinary Medicine (CVM), works with staff at all levels to ensure adequate resourcing for the program including operational costs. Operational costs includes printing, technology, office supplies, telephone service, marketing materials. Operational costs are funded by the budget provided by CVM.

- b. Student support, including scholarships, support for student conference travel, support for student activities, etc.**

The program director works with program staff to organize and support travel costs for students. Student support, including scholarships, support for student conference travel, and support for student activities are funded by the budget provided by CVM. Student support, support for student conference travel, is also provided by the Graduate School through an application system. In addition, student support, including support for student conference travel, is provided by each of the colleges partnering in the program. MPH students are eligible to apply for all Graduate Student scholarships that are offered by the

Graduate School. Support for student activities including activities of the two public health student clubs, the CPHG and the Student Outbreak Response Team (SORT), are funded by the program and organized by the program director and program staff. This support includes travel costs for club activities, support for invited speakers and other costs incurred.

c. Faculty development expenses, including travel support. If this varies by individual or appointment type, indicate this and provide examples.

The program provides financial support for MPH faculty to participate as members of KPHA annually. The program does not provide other financial support for individual MPH faculty to cover faculty development expenses, including travel support. This form of support comes from the individual academic departments and colleges to which the faculty member belongs. The program does provide support for the program director for travel related to program and academic development. These costs are funded by the budget provided by CVM.

d) In general terms, describe how the program requests and/or obtains additional funds for operational costs, student support and faculty development expenses.

The program director, with direct assistance from the Assistant Dean for Administration and Finance at the College of Veterinary Medicine, would request additional funds from the Dean of the College of Veterinary Medicine.

e) Explain how tuition and fees paid by students are returned to the program. If the program receives a share rather than the full amount, explain, in general terms, how the share returned is determined. If the program's funding is allocated in a way that does not bear a relationship to tuition and fees generated, indicate this and explain.

Tuition from MPH graduate students is managed centrally by the university and is not directly linked to the program's budget. The Provost and the College of Veterinary Medicine provide annual support to the program, in accordance with the MPH Program Agreement of Support.

f) Explain how indirect costs associated with grants and contracts are returned to the program and/or individual faculty members. If the program and its faculty do not receive funding through this mechanism, explain.

The university has a policy in place to distribute indirect costs (IDCs) generated from grants and contracts to the colleges, departments, and central administration based on the purpose and oversight of the project. K-State has a negotiated indirect rate agreement with the Department of Health and Human Services. The most recent agreement may be found at <https://www.k-state.edu/finsvcs/sponsoredprograms/> and is in effect until 2020.

Each college at K-State has its own policy for distributing indirect costs it receives. In the College of Veterinary Medicine where the MPH program is located, funds are not distributed back to faculty and/or programs directly. However, IDCs are used to support operating expenses, start-up expenses, programs, etc. so indirectly they are used to support faculty and or programs.

If the program is a multi-partner unit sponsored by two or more universities (as defined in Criterion A2), the responses must make clear the financial contributions of each sponsoring university to the overall program budget. The description must explain how tuition and other income is shared, including indirect cost returns for research generated by the public health program faculty appointed at any institution. Not Applicable.

2) A clearly formulated program budget statement in the format of Template C1-1, showing sources of all available funds and expenditures by major categories, for the last five years.

Table 9. Template C1-1. Source of Funds and Expenditures by Major Category.

Sources of Funds and Expenditures by Major Category, Fiscal Years 2015 to 2019*					
	2015	2016	2017	2018	2019
Source of Funds					
Tuition & Fees		\$142,707	\$139,400	194,198	133,750
State Appropriation	\$21,137	\$21,137	\$21,137	21,137	21,137
University Funds					
Grants/Contracts			\$25,000		
Indirect Cost Recovery					
KSU Foundation	\$5,000	\$120	\$224.07	70.00	
Gifts					
College of Veterinary Medicine	\$113,242				
Other (explain)					
Other (explain)					
Total	\$139,379	\$163,964	\$185,761.07	215,405.00	154,887.00
Expenditures					
Faculty Salaries & Benefits					
Staff Salaries & Benefits	\$42,022	\$48,049	\$49,725.37	50,573.27	7,691.51
Operations	\$55,030	\$57,328	\$24,810.26	140,398.89	3,753.42
Travel	\$3,667	\$3,134	\$5,635.76	4,277.21	
Student Support	\$2,600	\$9,500	\$6,141.25	7,434.23	11,114.38
University Tax (F&A Overhead)			\$198.49		
Other (explain)					
Other (explain)					
Other (explain)					
Total	\$99,652	\$118,010	\$86,511.13	202,683.60	22,559.31

* Through 08/31/2018.

If the program is a multi-partner unit sponsored by two or more universities (as defined in Criterion A2), the budget statement must make clear the financial contributions of each sponsoring university to the overall program budget. Not Applicable

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The University has ensured adequate support to sustain the MPH program. The College of Veterinary Medicine has provided adequate fiscal resourcing for daily operational needs. Working with one academic home and its business office makes budgeting and allocation much more efficient.

Weaknesses: There is currently no separate or different financial model for interdisciplinary graduate programs at Kansas State University; the program works with multiple college/department stakeholders, and their budget processes, to implement changes.

Plan for Improvement: Using the Agreement of Support, while revising when necessary, continue to refine the governance structure, which is responsive to the needs of the program.

C2. Faculty Resources

The program has adequate faculty, including primary instructional faculty and non-primary instructional faculty, to fulfill its stated mission and goals. This support is adequate to sustain all core functions, including offering coursework and advising students. The stability of resources is a factor in evaluating resource adequacy.

Students' access to a range of intellectual perspectives and to breadth of thought in their chosen fields of study is an important component of quality, as is faculty access to colleagues with shared interests and expertise.

All identified faculty must have regular instructional responsibility in the area. Individuals who perform research in a given area but do not have some regular expectations for instruction cannot serve as one of the three to five listed members.

- 1) A table demonstrating the adequacy of the program's instructional faculty resources in the format of Template C2-1.

Table 10. Template C2-1. Primary Instructional Faculty (PIF).

CONCENTRATION	FIRST DEGREE LEVEL			ADDITIONAL FACULTY	
	PIF 1*	PIF 2*	PIF 3*	FACULTY 3^	
Food Safety and Biosecurity	Gragg, Sara	Kastner, Justin	Nutsch, Abbey		PIF: 5
MPH	.60	.57	.63		Non-PIF: 1
Infectious Diseases and Zoonoses	Cernicchiaro, Natalia	KuKanich, Kate	Nguyen, Annelise		PIF: 12
MPH	.70	.51	.72		Non-PIF: 17
Public Health Nutrition	Hanson, Jennifer	Rosenkranz, Richard	Rosenkranz, Sara		PIF: 4
MPH	.60	.82	.55		Non-PIF: 4
Public Health Physical Activity	Besenyi, Gina	Heinrich, Katie	Mailey, Emily		PIF: 4
MPH	.65	.76	.55		Non-PIF: 0
TOTALS:	Named PIF	12			
	Total PIF	14			
	Non-PIF	30			

2) Explain the method for calculating FTE for faculty in the templates and evidence of the calculation method's implementation. Programs must present calculation methods for primary instructional and non-primary instructional faculty.

Method for calculating faculty FTE: one FTE = one full time twelve-month faculty with 100% of appointment in public health instruction, research, service and/or administration. To convert contracts of faculty with nine month appointments to twelve months, a calculation of: $\frac{\text{total public health effort}}{12} \times .818$ was used to normalize the data when figuring primary instructional faculty and non-primary instructional faculty. The conversion is $\frac{9}{11}$ which is 0.818. (Methodology: twelve-month faculty earn 22 vacation days, ten sick days, and ten holidays each year; which is more than one month of leave so eleven months was used; nine-month faculty only earn prorated sick and holidays each year.)

Primary Instructional Faculty are faculty that teach a required course (core or emphasis) or highly prescribed elective course taken by MPH students. Except for two instructors of core courses (MPH 754 Introduction to Epidemiology and MPH 701 Fundamental Basics of Biostatistics), PIF and NPIF also indicate that 50% of their contract (teaching, research, service) is public health related.

Non-Primary Instruction Faculty are faculty that do not report that 50% of their time is spent in public health related activities.

Data on faculty contracts was self-reported by each faculty member to determine the public health portion of appointment. (See ERF "C2" for Data Call document sent to all faculty and Excel spread sheet figuring PIF status.)

3) If applicable, provide a narrative explanation that supplements reviewers' understanding of data in the templates.

Due to the interdisciplinary nature of the program, faculty are "shared" with their home departments. Faculty interested in working with MPH students fill out an online application that asks about their graduate faculty status, courses they teach and public health interests. It is submitted with a short CV to the MPH Program director. (See ERF "C2" for MPH Faculty Application form.)

Applications are reviewed and voted on by the FAC. Once approved as a member of the MPH Graduate Faculty, they and their department head are sent a letter from the MPH Program director along with the current MPH Graduate Handbook and other relevant information. They are also listed on the MPH website and MPH Graduate Faculty Booklet with their research interests. Students use the booklet when selecting a major professor and/or committee members.

Primary Faculty are counted based on the method described above in C2-2, and C2-1 demonstrates faculty adequacy for the program. Each of the four emphasis areas of the program has three primary faculty (PIF) members. None of the four emphasis areas of the program have faculty who are considered as a Faculty 3. Each of the four emphasis areas of the program has three primary faculty (PIF) members that are not counted or included in a second emphasis area.

4) Data on the following for the most recent year in the format of Template C2-2. See Template C2-2 for additional definitions and parameters.

Table 11. Template C2-2. Faculty Regularly Involved in Advising, Mentoring and the Integrative Experience (AY 2017 & 2018).

General advising and career counseling			
Degree level: MPH	Average	Min	Max
Admittance Advisor Assigned for first 9 hours*			
FSB	NA	1	2
IDZ	NA	1	21
PHN	NA	1	6
PHPA	NA	1	3
Master's (Major Professor) Primary Faculty selected by student at time of Program of Study preparation			
FSB	1	1	2
IDZ	3.2	1	6
PHN	1	1	6
PHPA	3	1	4
Advising by MPH Program Staff**	N/A	1	49
Master's (Major Professor) Non-primary Faculty			
FSB	0	0	0
IDZ	0.80	1	2
PHN	1	1	1
PHPA	0	0	0
Advising in MPH Integrative Experience			
	Average	Min	Max
Master's (Major Professor)	2	1	6
Advising by MPH Program Staff**	21	1	41
Career Counseling			
	Average	Min	Max
Master's (Major Professor)	2	1	6
Master's (Committee Members)	1	1	10
Master's Program Staff**	8	1	41

*After an MPH application has been reviewed by both the program staff and emphasis area faculty and indicated as acceptable to admit to the program, an advisor/major professor must be named for Graduate School processing and matriculation. Unless a specific faculty member requests or has recruited a specific student, an emphasis area admittance advisor is named to help the student be admitted and register for the first nine hours of course work (generally the first semester). After nine hours of course work, the Graduate School requires each student to submit a POS, which names a major professor of their choosing and two other MPH faculty to serve as committee members. The student is allowed, upon request, to have one non-MPH faculty on their committee if it meets their APE, ILE or research goals. (See ERF "C2" for a sample POS document.)

**Program Staff visit with every student when Graduate School forms are signed by the program director. At a minimum, this is three times throughout their degree (not including orientation and other meetings); when the POS is submitted, when the APE form is submitted and when the Form to Schedule Final Exam is submitted.

5) Quantitative data on student perceptions of the following for the most recent year:

a. Class size and its relation to quality of learning (eg, The class size was conducive to my learning)

Quantitative data on student perceptions of (a) class size and its relation to quality of learning is measured by survey instrumentation on the Exit Surveys distributed to students at the completion of the degree. The following quantitative data regarding student perceptions of this measure of the adequacy of faculty were collected:

Table 12. Section C2-5. Question from Student Exit Survey. How satisfied were you with class size and its relation to quality of learning?

#	Answer	%	Count
1	Very Dissatisfied	0	0
2	Dissatisfied	0	0
3	Satisfied	24%	2
4	Very Satisfied	75%	6
	Total	100%	8

Note: These data were first collected in the Exit Survey beginning May 2018. Additional data will be collected in surveys administered in December 2018 and May 2019.

b. Availability of faculty (i.e., Likert scale of 1-5, with 5 as very satisfied)

Quantitative data on student perceptions of (b) satisfaction with the availability of faculty members is measured by survey instrumentation on the Exit Surveys distributed to students at the completion of the degree. The following quantitative data regarding student perceptions of this measure of the adequacy of faculty were collected:

Table 13. Section C2-5. Question from Student Exit Survey. How satisfied were you with the availability of faculty members? (AY16 to AY 17)

#	Answer	%	Count
1	Very Dissatisfied	0.00%	0
2	Dissatisfied	3.45%	1
3	Satisfied	62.07%	18
4	Very Satisfied	34.48%	10
	Total	100%	29

6) Qualitative data on student perceptions of class size and availability of faculty.

Qualitative data on student perceptions of (a) class size and its relation to quality of learning and (b) satisfaction with the availability of faculty members is measured by survey instrumentation on the Exit Surveys distributed to students at the completion of the degree. Students' comments on both of these measures of faculty adequacy of the program show that students are satisfied with course size and faculty availability. Representative comments regarding class size include:

- "Small class interactions were valuable";
- "Key strength of the program is the ability to interact with instructors in small classroom settings".

Representative comments regarding availability of faculty include:

- “I had fantastic advisors that were always available to answer questions”;
- “My advisor and committee members were very responsive and provided advice/feedback in a timely manner, which I very much appreciated”;
- “Everyone was very helpful and always there to listen”.

See ERF “C2-6” for full results and documentation.

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The MPH Program Agreement of Support provides for a guaranteed number of seats for MPH students in core and required courses on a predictable schedule. The program director routinely communicates with students and faculty about changes in department offerings of MPH-related courses. The program staff update the course offerings each semester and when instructors communicate course offering changes to the program office. These changes are maintained in one document on the program website and provided to students during orientation and advising sessions, and before enrollment opens for the next semester. Any changes to course offerings mid-semester is communicated with students via e-mail in addition to updating of the course offering document.

Weaknesses: No weakness in this area.

Plans for improvement: Continue to communicate with department staff and MPH faculty regarding course offering changes. Continue to update course offering document and regularly inform students of any changes.

C3. Staff and Other Personnel Resources

The program has staff and other personnel adequate to fulfill its stated mission and goals. The stability of resources is a factor in evaluating resource adequacy.

- 1) A table defining the number of the program’s staff support for the year in which the site visit will take place by role or function in the format of Template C3-1. Designate any staff resources that are shared with other units outside the unit of accreditation.**

Table 14. Template C3-1. Support Staff.

Role/function	FTE
Program Assistant	.70

- 2) Provide a narrative description, which may be supported by data if applicable, of the contributions of other personnel.**

The program receives administrative assistance with course planning, enrollment, grading entry from department administrative support personnel in the home departments and colleges of the MPH faculty members. The program receives administrative assistance from the College of Veterinary Medicine business office for accounting, ordering, budgeting etc. The program also receives administrative assistance from the Graduate School.

- 3) Provide narrative and/or data that support the assertion that the program’s staff and other personnel support is sufficient or not sufficient.**

The program’s staff and other personnel support is sufficient for the success of the program. Additional programming assistance is available from the College of Veterinary Medicine when needed, for example with student orientations, alumni career seminars, invited speakers etc.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The current program infrastructure provides the support and resources that are utilized by MPH students and faculty. It is a cost effective model, which includes a dedicated program assistant, and shared administrative support from collaborative departments and colleges in the program.

Weaknesses: None.

Plans for improvement: Continue to collaborate with department and college staff to ensure that any programmatic updates and changes are clear and regularly communicated.

C4. Physical Resources

The program has physical resources adequate to fulfill its stated mission and goals and to support instructional programs. Physical resources include faculty and staff office space, classroom space, student shared space and laboratories, as applicable.

1) Briefly describe, with data as applicable, the following. (Note: square footage is not required unless specifically relevant to the program's narrative.)

- **Faculty office space:** Offices for faculty are in each of their home departments.
- **Staff office space:** Offices for the MPH Program director and program assistant are located in 103 Trotter Hall, College of Veterinary Medicine. Both the MPH Program director and program assistant have their own dedicated offices. The program also has use of shared conference rooms across campus.
- **Classrooms:** The program has use of campus-wide classroom and meeting resources, as determined by the departments and colleges.
- **Shared student space:** Depending on the emphasis area, students may have a shared graduate student office. All MPH students have access to the collaborative space on third floor of Eisenhower Hall that is accessible seven days a week. The space has rooms that students can study or work together on team projects. There is also a lounge for social interaction with other graduate students from across campus. A family room is available for parents with young children. In addition, 121 Eisenhower Hall can be reserved for committee meetings. <https://www.k-state.edu/grad/students/graduatestudentlife/thirdfloor/graduatestudentspace.html>
- **Shared Library space:** All students have access to the libraries on campus, including the library within the College of Veterinary Medicine.
- **Laboratories, if applicable to public health degree program offerings:** There are no laboratory spaces specifically for MPH students. MPH research faculty and if they have an MPH student during research, generally have laboratory space in their home departments.

2) Provide narrative and/or data that support the assertion that the physical space is sufficient or not sufficient.

The physical space is sufficient. The program director and staff have sufficient and dedicated office space, and access to sufficient conference, meetings spaces in the College of Veterinary Medicine, and other collaborating colleges. MPH faculty have office and conference space within their own departments.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The current university infrastructure provides the necessary office spaces, meeting and conference facilities, labs when applicable, to the MPH program director, staff and faculty. It is a cost effective model, which shares physical resources and space.

Weaknesses: The MPH program does not have any weakness with physical resources; the resources required for the program are not unique and are similar to other graduate programs.

Plans for improvement: Continue to collaborate with department and college staff to ensure that any programmatic needs for physical resources are clear and regularly communicated.

C5. Information and Technology Resources

The program has information and technology resources adequate to fulfill its stated mission and goals and to support instructional programs. Information and technology resources include library resources, student access to hardware and software (including access to specific software or other technology required for instructional programs), faculty access to hardware and software (including access to specific software required for the instructional programs offered) and technical assistance for students and faculty.

1) Briefly describe, with data if applicable, the following:

- **Library resources and support available for students and faculty:** K-State Librarians provide in-class instruction about library resources and skills at the request of instructors. Additionally, librarians offer one-on-one research consultations for faculty and graduate students. Library reference services are also provided in person, by phone, email, and instant messaging. A copyright consultation service is offered by the library to help students and faculty learn their rights as authors. MPH students are also served by a librarian appointed to include public health as one of her subject matter areas. This librarian is housed in Hale Library and attends MPH student orientations annually and is available to assist MPH students individually.
- **Student access to hardware and software (including access to specific software or other technology required for instructional programs):** Information Technology Services (ITS) provides instruction sessions on using the university's technology systems and technology trends in teaching and learning. ITS also offers training for graduate students about using K-State's Electronic Dissertations, Theses, & Reports system.

Use of databases/abstracts, indexes/journals or any other print or electronic collection is not limited. Requests to purchase materials are also permissible. A list of databases and other research tools is available through K-State Libraries may be found at: <https://www.lib.k-state.edu/>

Journals/serials: Over 90% of K-State Libraries' journals and serials are available electronically. Of those electronically available, over 12,000 titles are in the agricultural, environmental, health or life sciences.

Monographs: K-State Libraries' collection contains almost 2.5 million monographs with extensive holdings in the agricultural, environmental, health, and life sciences. Many new monographs are purchased as electronic books.

Relevant electronic book platforms:

- CABI eBooks (150+ titles); IEEE-Wiley eBooks Library (250 titles)
- Knovel (3,300 titles); SRMO - SAGE Research Methods Online (650+ titles)
- SpringerLink - Biomedical and Life Sciences (3,750+ titles)
- faculty access to hardware and software (including access to specific software or other technology required for instructional programs)

The CatPack is a free, personalized software collection for K-State. Because some software is restricted due to licensing agreements, the CatPack is for K-State faculty, staff, students, and university departments. The CatPack is for computers running Windows and Macintosh operating systems.

- **technical assistance available for students and faculty:** K-Staters interested in purchasing software for departmental or personal use have several options:
 - [Software Licenses](#) - See listing.
 - [K-State Purchasing Contract List](#) - Departmental use only.
 - [State of Kansas Procurement Contract List](#) - Departmental use only.

K-State Student Union Computer Store - Has some departmental software, but primarily for personal use.

Support Services: IT Help Desk: The first point of contact for campus information technology needs, including test-scoring scanner (Scantron) support. The IT Help Desk uses Service-now incident management system and knowledge base and Linktivity, a remote desktop support tool.

Desktop support and Computer Repair: Offers varying levels of desktop support services from computer repair to rights management for administrative and academic departments. Computer Repair service for university and personally owned computers and printers is available in the Information Technology Assistance (iTAC <https://www.k-state.edu/itac/>), which provides warranty service for Dell and Apple computers.

Technology Training & Instructional Support is provided through consulting, management and support of communications/training efforts for enterprise-wide systems including K-State Online, KSIS, Emergency Messaging System, antivirus, and proprietary systems such as the MS Office Suite. Delivery of training occurs in online and face-to-face methods.

Instructional designers are available to assist faculty in developing engaging and high-quality learning environments for both on- and off-campus use. Instructional designers offer:

- Face-to-face presentations to departments on instructional design topics
- Support for grant development (in terms of pedagogical design)
- Support with authoring tools and technologies for online learning development

The instructional designers in conjunction with the Global Campus developed the eLearning modules to assist faculty and staff with mediated delivery of instruction. These are available from http://www.elearningfacultymodules.org/index.php/Main_Page. Teaching workshops are held each year to showcase faculty and staff in best practices in teaching in learning <http://www.k-state.edu/tlc/>.

Video conferencing services are available for Polycom and web-based systems. ITS is in the process of investigating new technologies for its users; ZoomUs.com is a video conferencing service available to all students and faculty at this university.

Communication with campus about information technology is available through

- K-State Today – <http://www.k-state.edu/today/>
- IT News - <https://blogs.k-state.edu/it-news/>
- IT Status page - <http://www.k-state.edu/its/status/>
- Social media
 - Facebook - <http://www.facebook.com/kstateithelp>
 - Twitter - <http://twitter.com/KStateIThelp>

At Kansas State University, the Vice Provost for Information Technology Services directs a comprehensive support program for students, faculty, administration and staff. The web site (www.k-state.edu/its) has an all-inclusive listing of services, training, security, and policies related to this support.

2) Provide narrative and/or data that support the assertion that information and technology resources are sufficient or not sufficient.

Information and technology resources for the program are sufficient.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The current university infrastructure for information and technology resources is a cost effective model, which shares resources, library expertise, librarian assignment and cost.

Weaknesses: The MPH program does not have any weakness with information and technology resources.

Plans for improvement: Continue to collaborate with library, department and college staff to ensure that any information and technology needs are clear and regularly communicated.

D1. MPH Foundational Public Health Knowledge

The program ensures that all MPH graduates are grounded in foundational public health knowledge.

The program validates MPH and DrPH students' foundational public health knowledge through appropriate methods.

- 1) Provide a matrix, in the format of Template D1-1 that indicates how all MPH and DrPH students are grounded in each of the defined foundational public health learning objectives (1-12). The matrix must identify all options for MPH and DrPH students used by the program.

Table 15. Template D1-1. Content Coverage for MPH.

Content	Course number(s) or other educational requirements	Specific Assessment Opportunity
1. Explain public health history, philosophy and values	MPH 720, Administration of Health Care Organizations	720: Exam 1 questions require students to write a brief narrative of the history of Public Health, to compare and contrast the holistic vs the medical model of health, and to understand the evolution of health services from home care, poorhouses, and unsanitary filled hospitals (Florence Nightingale) to the hospitals of today. Quiz 2a question #2 requires students to identify the Flexner Report's (1910) role in reforming medical education and question #8 requires students to distinguish between the social justice vs market justice model of distribution of health services.
	MPH 754, Introduction to Epidemiology	754: Assessed by quiz 1-2 including questions on: the history of epidemiology (Quiz 1-2), and the history of the first use of administrative databases to study disease (Quiz 1-2).
	MPH 818, Social and Behavioral Bases of Public Health	818: Assessed in an assignment in week 2 where students learn about the history of public health and create a biographical sketch to examine the achievements of a significant figure in public health history.
2. Identify the core functions of public health and the 10 Essential Services	MPH 720, Administration of Health Care Organizations	720: Exam 1 questions #36 requires the student to list the 10 essential services and the core functions of public health.
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	MPH 701, Fundamental Methods of Biostatistics	701: Assessed by homework 1, 5, 6, 7, 8, Exam 1, 3, and final exam. Students are required to describe the population's health with descriptive statistics (HW1 question 1-3; Exam1 question 1, 4, 6, 7, 12) and use

Content	Course number(s) or other educational requirements	Specific Assessment Opportunity
	<p>MPH 720, Administration of Health Care Organizations</p> <p>MPH 754, Introduction to Epidemiology</p>	<p>advanced statistical inference tools, such as confidence interval (HW5 question 6.23-6.45; Exam 3 question 5, 7b, 7c, 8a), hypothesis testing (HW6 question 7.33-7.38, HW7 question 8.41-8.47; Exam 3 question 7d, 7e, 7f) and regression models (HW8 question 11.13-11.15; Final exam question 3), to answer these scientific questions related to public health.</p> <p>720: Stakeholder interview assignment, as part of the Community Needs Project, requires the students to utilize qualitative methods in assessing community health.</p> <p>754: Assessed by calculating quantitative measures of population health (Assignment 1, Assignment 2, & Assignment 3) and Examinations 1, 2, & 3 Including questions requiring students to calculate amount of disease in a population (Assignment 1 & Exam 1), measures of association (Assignment 2 & Exam 2), and effect of risk factors on exposed populations, and effect of risk factors on entire populations (Assignment 3 & Exam 3).</p>
<p>4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program</p>	<p>MPH 720, Administration of Health Care Organizations</p> <p>MPH 754, Introduction to Epidemiology</p>	<p>720: Exam 1 question #18 requires students to know the relative life expectancy of different racial/ethnic group in the US.</p> <p>754: Discussion questions 1&3 Including questions on shifts in leading causes of death over time (Discussion Question 1) and the role of epidemiology to identify public health priorities based on changing disease trends (Discussion Question 3).</p>
<p>5. Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.</p>	<p>MPH 701, Fundamental Methods of Biostatistics</p> <p>MPH 720, Administration of Health Care Organizations</p> <p>MPH 754, Introduction to Epidemiology</p>	<p>701: Use probability tool: Bayes' rule to evaluate the health screening test (HW 2 question 3.21-3.29, 3.93-3.119 and Exam 1 question 10, 11).</p> <p>720: Quiz 1a questions #3-4 requires students to identify the prevention level when given examples of different interventions.</p> <p>754: Exam 1 & Discussion Question 2 Including questions asking students to identify different public health interventions as primary, secondary, or tertiary (Exam 1),</p>

Content	Course number(s) or other educational requirements	Specific Assessment Opportunity
		questions requiring students to design and justify a disease screening strategy (Exam 1 and Discussion Question 2)
6. Explain the critical importance of evidence in advancing public health knowledge	<p>MPH 701, Fundamental Methods of Biostatistics</p> <p>MPH 720, Administration of Health Care Organizations</p> <p>MPH 754, Introduction to Epidemiology</p>	<p>701: Assessed by homework 5, 6, 7 and Exam 3. Use advanced statistical inference tools, such as confidence interval (HW5 question 6.23-6.45; Exam 3 question 5, 7b, 7c, 8a), hypothesis testing (HW6 question 7.33-7.38, HW7 question 8.41-8.47; Exam 3 question 7d, 7e, 7f), to evaluate the importance of evidence in advancing public health knowledge.</p> <p>720: Exam 2, question #9 requires students to know the mission of the federal agency AHRQ (Agency for Healthcare Research and Quality).</p> <p>754: Exam 3 Including questions on causal criteria and evidence based medicine/public health (Exam 3)</p>
7. Explain effects of environmental factors on a population's health	<p>MPH 701, Fundamental Methods of Biostatistics</p> <p>MPH 802, Environmental Health</p>	<p>701: Assessed by homework 8 and Final Exam. Use regression models to evaluate the environmental factors on the health outcomes of population (HW8 question 11.48-11.49; Final exam question 3).</p> <p>802: Quizzes on the effects of environmental factors on population's health: quiz 1. Environmental hazards to human health and policy; quiz 2. Natural environmental factors/natural resources on population's health; quiz 3. Manufactured goods and occupational health; quiz 4. Process of producing food on human health; quiz 5. urbanization on population's health</p>
8. Explain biological and genetic factors that affect a population's health	<p>MPH 754, Introduction to Epidemiology</p> <p>MPH 802, Environmental Health</p>	<p>754: Exam 2, Exam 3, quiz 12-4 Including questions on assessing multiple variables at the same time (Exam 2 & Exam 3) and specifically the methods to investigate the role of environment and genetics on disease risk and prognosis (Quiz 12-4).</p> <p>802: Quizzes on the biological and genetic factors: quiz 1. Adverse effects due to biological and genetic factors and quiz 2. Environmental agents affecting population's health based on biological and genetic makeup.</p>

Content	Course number(s) or other educational requirements	Specific Assessment Opportunity
9. Explain behavioral and psychological factors that affect a population's health	<p>MPH 701, Fundamental Methods of Biostatistics</p> <p>MPH 720, Administration of Health Care Organizations</p> <p>MPH 818, Social and Behavioral Bases of Public Health</p>	<p>701: Assessed by homework 6 and Exam 3. Use hypothesis testing to evaluate the psychological factors on the health outcomes of population (HW6 question 6.30-6.32; Exam 3 question 8).</p> <p>720: Exam 2, question #38 requires students to list major barriers to mental health care.</p> <p>818: Assessed in assignments in week 4 where students complete assignments for page 3 and critique an article using one of the individual approaches (e.g. health belief model, stages of change framework and page 4 (social cognitive theory). Students compare and contrast the pros and cons of individual based approaches on test 1.</p>
10. Explain the social, political and economic determinants of health and how they contribute to population health and health inequities	<p>MPH 720, Administration of Health Care Organizations</p> <p>MPH 818, Social and Behavioral Bases of Public Health</p>	<p>720: Exam 1, requires students to identify the general characteristics of the US Health Care System (questions #2 & #8), and the Affordable Care Act (questions #19 & #21). Quiz 1a questions #1 & #2 requires students to distinguish between Medicare, CHIP, and Medicaid. Quiz 1a questions #8 & #9 requires students to identify the meaning of the terms "moral hazard" and "defensive medicine". Exam 2 question #35 students must identify which branch of government is responsible for developing and submitting budget proposals to congress. Exam 2, question #20 students must identify which division of government is responsible for interpreting and implementing new laws. Quiz 2a, question #4 requires students to identify the determinants of health according to Blum's Force Field.</p> <p>818: Assessed in an assignment where students learn about Race, Ethnicity and Health Inequities and complete Assignment # 6 where they write a 300 word paper addressing how social class impacts health.</p>
11. Explain how globalization affects global burdens of disease	MPH 754, Introduction to Epidemiology	754: Discussion question 3 Including questions requiring students to compare risk factors and disease burden in developed and developing countries (Discussion Question 3)

Content	Course number(s) or other educational requirements	Specific Assessment Opportunity
	MPH 802, Environmental Health	802: Quiz 2 assesses globalization contributing to an increase in infectious diseases
12. Explain an ecological perspective on the connections among human health, animal health and ecosystem health (e.g., One Health)	MPH 802, Environmental Health MPH 818, Social and Behavioral Bases of Public Health	802: Quizzes 1, 2, 3, 4, and 5 assess the relationship between environment, animal, and human producing adverse effects. 818: Assessed in an assignment where students learn about One Health, and the behavioral and social perspectives of the human-animal bond and complete page 12 activities, interactive assignment # 12 and reading assignment # 1. Students also read selected relevant literature (the Barker article) and examine the benefits of dog walking on human health.

- 2) Document the methods described above. This documentation must include all referenced syllabi, samples of tests or other assessments and web links or handbook excerpts that describe admissions prerequisites, as applicable.**

The syllabi for the listed courses in Table 15 are located in the ERF “D1-2.” Table 15 also documents the specific assessment opportunities for each of the twelve content areas of foundational public health knowledge. The MPH program director, program staff and FAC (including the instructors for each of these listed courses) met monthly to discuss these twelve content areas and developed the process of how these content areas would be taught and assessed in their courses. Each course listed in Table 15 was reviewed by the instructor and other members of the FAC. The content of these courses was updated to include, assess and reflect the twelve content areas of foundational public health knowledge. The FAC reviewed the syllabi and assessment opportunities in several drafts during 2017 and 2018 in order to complete Table 15.

- 3) If applicable, assessment of strengths and weaknesses related to this criterion and plans for improvement in this area.**

Strengths: The matrix shown in D1-1 demonstrates that the five core required courses that are required for all MPH students in each of the four emphasis areas cover and assess the twelve foundational public health learning objectives. This ensures that the all MPH students are grounded in each of the twelve defined content areas of foundational public health knowledge. Assessment of the twelve contact areas is performed using different assessment methods, including; quiz questions, exam questions, discussion-based, and homework assignments, utilizing both qualitative and quantitative assessment forms. MPH faculty in the FAC and instructional faculty of the core courses developed this matrix collaboratively and thoughtfully over a period of two years to ensure a thorough and complete content coverage.

Weaknesses: There are no perceived weaknesses in addressing assessment of the twelve foundational public health learning objectives in five core courses.

Plans for improvement: Continue to work with the FAC and primary instructional faculty to ensure core courses provide thorough and complete content coverage and assessment of the twelve foundational public health learning objectives.

D2. MPH Foundational Competencies

The program documents at least one specific, required assessment activity (e.g., component of existing course, paper, presentation, test) for each competency, during which faculty or other qualified individuals (e.g., preceptors) validate the student’s ability to perform the competency.

Assessment opportunities may occur in foundational courses that are common to all students, in courses that are required for a concentration or in other educational requirements outside of designated coursework, but the program must assess *all* MPH students, at least once, on each competency. Assessment may occur in simulations, group projects, presentations, written products, etc. This requirement also applies to students completing an MPH in combination with another degree (e.g., joint, dual, concurrent degrees). For combined degree students, assessment may take place in either degree program.

- 1) List the coursework and other learning experiences required for the program’s MPH degrees, including the required curriculum for each concentration and combined degree option. Information may be provided in the format of Template D2-1 or in hyperlinks to student handbooks or webpages, but the documentation must present a clear depiction of the requirements for each MPH degree.

Table 16. Template D2-1. Requirements for MPH Degree.

Requirements for MPH degree		
Course number	Course name*	Credits (if applicable)
<i>“Core Courses” Required for each emphasis</i>		
MPH 701	Fundamental Methods of Biostatistics	3
MPH 802	Environmental Health	3
MPH 754	Introduction to Epidemiology	3
MPH 720	Administration of Health Care	3
MPH 818	Social and Behavioral Bases of Public Health	3
<i>Food Safety and Biosecurity Emphasis (FSB)</i>		
Required courses for all FSB Students		
FDSCI 730	Multidisciplinary Overview of Food Safety & Biosecurity	2
FDSCI 731	Food Protection & Defense – Essential Concepts	2
DMP 815	Multidisciplinary Thought and Presentation	3
DMP 816	Trade and Agricultural Health	2
DMP 888	Globalization, Cooperation, and the Food Trade	1
<i>Infectious Diseases and Zoonoses Emphasis (IDZ)</i>		
Required courses for all IDZ Students		
BIOL 530 or	Pathogenic Microbiology	3
DMP 812	Veterinary Bacteriology and Mycology (lecture and lab)	4
BIOL 670 or	Immunology	4
DMP 705	Principles of Veterinary Immunology	3
DMP 710	Introduction to One Health	2
DMP 815	Multidisciplinary Thought and Presentation	3

Public Health Nutrition Emphasis (PHN)		
Required courses for all PHN Students		
FNDH 600	Public Health Nutrition	3
FNDH 820	Functional Foods for Chronic Disease Prevention	3
FNDH 844	Nutritional Epidemiology	3
FNDH 880	Graduate Seminar in Human Nutrition	1
Public Health Physical Activity Emphasis (PHPA)		
Required courses for all PHPA Students		
KIN 610	Program Planning and Evaluation	3
KIN 612	Policy, Built Environment and Physical Activity	3
KIN 796	Graduate Seminar in Kinesiology	1
KIN 805	Physical Activity and Human Behavior	3

- 2) Provide a matrix, in the format of Template D2-2, which indicates the assessment activity for each of the foundational competencies. If the program addresses all of the listed foundational competencies in a single, common core curriculum, the program need only present a single matrix. If combined degree students do not complete the same core curriculum as students in the standalone MPH program, the program must present a separate matrix for each combined degree. If the program relies on concentration-specific courses to assess some of the foundational competencies listed above, the program must present a separate matrix for each concentration.

Table 17. Template D2-2. Assessment of Competencies for MPH Degree.

Assessment of Competencies for MPH (all concentrations)		
Competency	Course number(s) and name(s)*	Specific assessment opportunity
Evidence-based Approaches to Public Health		
1. Apply epidemiological methods to the breadth of settings and situations in public health practice	MPH 701, Fundamental Methods of Biostatistics	701: Assessed by Exam 1. Use probability tools for public health practice. The questions on calculating prevalence and incidence (question 13), as well as sensitivity and specificity (question 10) were given for assessment.
	MPH 754, Introduction to Epidemiology	754: Discussion Questions 1, 2, &3, and Assignment 1. Questions on chronic diseases such as cancer and heart disease (Discussion Question 1), infectious disease (Assignment 1 & Discussion Question 2), disease screening (Discussion Question 3); and at the population levels of schools (Discussion Question 1), communities (Assignment 1), nations (Discussion Question 1), and risk groups based on behaviors (Discussion Question 2)
2. Select quantitative and qualitative data collection methods appropriate for a given public health context	MPH 701, Fundamental Methods of Biostatistics	701: Evaluated by Homework 5 & 6 and Exam 3. Questions on the sample size and power calculation for the associated study designs (/data collection design) were given (HW5 6.32; HW6 7.102-7.103; Exam 3 question 7e, 7f).

Assessment of Competencies for MPH (all concentrations)		
Competency	Course number(s) and name(s)*	Specific assessment opportunity
	<p>MPH 720, Administration of Health Care Organizations</p> <p>MPH 754, Introduction to Epidemiology</p>	<p>720: Exam 1 question requires students to compare and contrast qualitative and quantitative methods, and given different public health scenarios, select the appropriate methods required.</p> <p>754: Discussion Question 1, Assignments 2&3, and Exam 3. Questions that require students to select and calculate the best measures for specific disease based on chronicity, lethality, contagiousness, and other attributes (Discussion Question 1, Assignment 1, Assignment 2, and Exam 3)</p>
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate	<p>MPH 701, Fundamental Methods of Biostatistics</p> <p>MPH 720, Administration of Health Care Organizations</p> <p>MPH 754, Introduction to Epidemiology</p>	<p>701: Assessed by homework 1, 5, 6, 7, 8, Exam 1, 3, and final exam. Students are required to describe the population's health with descriptive statistics (HW1 question 1-3; Exam1 question 1, 4, 6, 7, 12) and use advanced statistical inference tools, such as confidence interval (HW5 question 6.23-6.45; Exam 3 question 5, 7b, 7c, 8a), hypothesis testing (HW6 question 7.33-7.38, HW7 question 8.41-8.47; Exam 3 question 7d, 7e, 7f) and regression models (HW8 question 11.13-11.15; Final exam question 3), to answer these scientific questions related to public health. The basic analysis with SAS is evaluated by Exam 1 question 5.</p> <p>720: The "Community Needs Project" requires students to complete stakeholder interviews and qualitative data analysis.</p> <p>754: Assignments 1, 2,& 3, and Exams 1,2,&3. Questions that require students to calculate various measures of incidence, prevalence, attributable risk, and population risk (Assignments 1, 2, & 3, Exams 1,2,&3).</p>
4. Interpret results of data analysis for public health research, policy or practice	MPH 701, Fundamental Methods of Biostatistics	701: Assessed by homework 5, 6, 7, 8, Exam 3, and final exam. Students are required to interpret the results of advanced statistical inference methods, such as confidence interval (HW5 question 6.23-6.45; Exam 3 question 5, 7b, 7c, 8a), hypothesis testing (HW6 question 7.33-7.38, HW7 question 8.41-8.47; Exam 3 question 7d, 7e, 7f) and regression models (HW8 question 11.13-11.15; Final exam question 3), for the questions of public health.

Assessment of Competencies for MPH (all concentrations)		
Competency	Course number(s) and name(s)*	Specific assessment opportunity
	MPH 754, Introduction to Epidemiology	754: Discussion Questions 1, 2, & 3, Assignments 1, 2, & 3, and Exams 1, 2, & 3. Questions that require students to interpret disease measures and the application of those interpretations at risk-group, community, and population level decisions and policy (Discussion Questions 1, 2, & 3, Assignments 1, 2, & 3, and Exams 1, 2, & 3).
Public Health & Health Care Systems		
5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings	MPH 720, Administration of Health Care Organizations	720: Quiz 1a requires students to understand the concept of primary care (question #5), acute care (question #7), and the Quad Functional Model of Basic Health Care Delivery Systems (question #6). Exam 2 question #5 requires students to understand the authority structure over the local county health department. Quiz 4a questions #7-9, requires students to distinguish between distributive policies, redistributive policies, and regulatory tools. Exam 1 requires students to compare and contrast regulatory systems between national and international countries (systems examined from Canada, England, and Germany).
6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels	MPH 818, Social and Behavioral Bases of Public Health	818: Assessed in Interactive Assignment # 6, reading assignment # 6 and Exam 1. Students complete the Health Equity Quiz provided in the Unnatural Causes project, and complete a group assignment in which students identify the risk factors associated with a health problem found in vulnerable populations. In Exam 1 (question # 6), students examine in an essay question how structural bias/racism undermine health and how to achieve health equity (structural and cultural competence) at individual, organizational, community, and societal levels.
Planning & Management to Promote Health		
7. Assess population needs, assets and capacities that affect communities' health	MPH 720, Administration of Health Care Organizations	720: Exam 2 question #39 requires students to describe the factors used in the yearly Robert Johnston Foundation County Health Rankings. The "Community Needs Project" requires students to assess and analyze population needs, assets and capacities that affect communities' health.
	MPH 802, Environmental Health	802: In written questions in quiz 1, students examine Healthy Population 2020, goal #8, and investigate the challenges in environmental health that affect communities' health. Exam 1 requires students to identify three challenges of

Assessment of Competencies for MPH (all concentrations)		
Competency	Course number(s) and name(s)*	Specific assessment opportunity
		environmental health in their communities. For example, high level of radon is region-specific and relatively high risk of exposure has significant negative impact on human health of Riley County community.
8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs	MPH 818, Social and Behavioral Bases of Public Health	818: Assessed in Interactive Assignment # 7, Reading Assignment # 7 and Exam 2. Students learn about community interventions and complete a question (# 5) on Exam 2 which asks the student to create a program that is theory based and uses an appropriate cultural intervention.
9. Design a population-based policy, program, project or intervention	MPH 754, Introduction to Epidemiology	754: Assignment 2: Students are required to design a large-scale Phase III clinical trial with specific requirements to address population-based design and interpretation questions. Discussion Question 2: Students are required to design and defend their choices for best intervention strategies for two specific diseases (breast cancer and lung cancer) in U.S. women. Discussion Question 3, Assignment 3 Questions requiring students to examine the factors that federal and state agencies should use to prioritize public funds when designing population-based disease prevention campaigns (Discussion Question 3), and examine how different measures of disease are used to inform policy for different types of populations (Assignment 3). Quiz 15-1 and Quiz 15-2 Questions about determining how much data and what types of data is needed to justify a disease prevention effort based on disease severity, disease frequency, prevention efficacy, and societal values.
10. Explain basic principles and tools of budget and resource management	MPH 720, Administration of Health Care Organizations	720: The “Community Needs Project” requires students to develop a program budget and to develop a plan for budget management. Exam 1 question # 35 requires students to describe 2 managed care methods used to monitor and control utilization of health care services. Exam 2 question #18 requires students to understand the difference between operational and capital budgets, question #34 requires students to quantify the relative cost of fraudulent health care billing. Quiz 4a question #6 requires students to understand the basic concept of block grants.

Assessment of Competencies for MPH (all concentrations)		
Competency	Course number(s) and name(s)*	Specific assessment opportunity
	MPH 754, Introduction to Epidemiology	754: Discussion question 3, Exam 3, quiz 14-5. Questions requiring students to calculate and interpret different measures of disease for the purpose of informing policy based on the best use of scarce resources (Assignment 3), screening test resources (Exam 3), and total optimum cost (Quiz 14-5).
11. Select methods to evaluate public health programs	MPH 701, Fundamental Methods of Biostatistics	701: Assessed by Exam 3 (question 3) and final exam (question 1). Use confidence intervals and hypothesis testing to evaluate the intervention or public programs.
	MPH 720, Administration of Health Care Organizations	720: exam 2 requires students to list and briefly describe three methods used to monitor and control cost and utilization of services. Hypothesis testing to evaluate the intervention or public programs.
	MPH 754, Introduction to Epidemiology	754: Discussion question 3, Assignment 3, Exam 3 Questions requiring students to defend their choice of measures to base decisions for individuals and communities (Discussion Question 3), to calculate and interpret population relative risk, population attributable risk and attributable fractions (Assignment 3 & Exam 3).
Policy in Public Health		
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence	MPH 720, Administration of Health Care Organizations	720: Exam 2 requires students to 1) correctly identify the role of the executive, legislative, and judicial branches of government, 2) recognize the difference between allocative and distributive policies, 3) understand the concept of pluralism, 4) recognize the magnitude of industry lobby group spending.
	MPH 754, Introduction to Epidemiology	754: Discussion question 3, Assignment 3, Exam 3 Questions require students to consider raw death risk, quality of life lost, years of potential life lost, emerging disease problems, and effectiveness of intervention in the policy-making process when allocating scarce public health resources. Assignment 3 asks students how levels of evidence and ethical considerations for data collection impact their conclusions (Exam 3).
	MPH 802, Environmental Health	802: In written questions in quizzes 2, 3, and 4, students examine environmental policy and regulation in areas of water quality, air quality,

Assessment of Competencies for MPH (all concentrations)		
Competency	Course number(s) and name(s)*	Specific assessment opportunity
		food safety, wastes, and occupational health. Students select historical cases of environmental health legislation that were influenced by ethical and evidence-based supports to examine the influence of decisions on the outcome of policy-making process that are in part depend on ethical and evidence-based testimonies.
13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes	MPH 720, Administration of Health Care Organizations	720: The “Community Needs Project” requires students to identify pertinent stakeholders and develop strategies for building community partnerships.
	MPH 802, Environmental Health	802: Students prepare a class presentation on public health challenges, including proposed strategies to identify and engage stakeholders related to the issue they select.
	MPH 818, Social and Behavioral Bases of Public Health	818: Students complete a Health Indicator Group assignment, which asks them to identify key stakeholders, and build a coalition of affected groups to address their health indicator in the community.
14. Advocate for political, social or economic policies and programs that will improve health in diverse populations	MPH 720, Administration of Health Care Organizations	720: The “Community Needs Project” requires students to write a letter to an elected official (state or federal) describing the needs of their project’s community and offering proposed strategies for improvements.
	MPH 818, Social and Behavioral Bases of Public Health	818: Assessed in Health Indicator Group Activity 7. Students learn about Social Capital and Public Policy Advocacy, Community Building and Community Capacity and write an opinion editorial (op-ed) article, which addresses the need to advocate for improved health in members of Riley County, Kansas.
15. Evaluate policies for their impact on public health and health equity	MPH 754, Introduction to Epidemiology	754: Discussion Questions 2 & 3, Assignment 3, Exam 3 Questions requiring students to calculate both risk-group and population-level risk reduction measures on potential public health interventions and their interpretation regarding implementing those interventions based on the calculated values (Discussion Questions 2&3), and to consider different population-groupings when evaluating health outcomes (Assignment 3 and Exam 3).
	MPH 802, Environmental Health	802: Exams 1 and 2 assess students’ qualitative understanding of how to analyze environmental health concepts and policy, and evaluate

Assessment of Competencies for MPH (all concentrations)		
Competency	Course number(s) and name(s)*	Specific assessment opportunity
		environmental regulations and policies for the impact on public health and health equity.
Leadership		
16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making	MPH 720, Administration of Health Care Organizations	720: For the "Community Needs Project" students will work on inter professional teams. Each student will have an assigned responsibility. Using course resources and lecture material, students will apply the principles of leadership and provide a peer assessment along with a detailed self-assessment. Exam 2 question #36 students must provide examples of potential organizational threats and offer administrative actions which could decrease the risk.
	MPH 818 Social and Behavioral Bases of Public Health	818: Assessed in Group Debate Presentations: As part of this assignment, students work in interprofessional teams to develop their team governance, including developing a vision for the group and collaborative working process. Students provide a written reflection of this process. Each student is also required to take leadership on at least one group assignment. The student is assigned as temporary group coordinator and is responsible for assigning group responsibilities, collecting completed tasks and collating the final project.
17. Apply negotiation and mediation skills to address organizational or community challenges	MPH 720, Administration of Health Care Organizations	720: For the "Community Needs Project" students will work on inter professional teams and apply negotiation skills to address the community challenges identified in the assessment and analysis phase.
Communication		
18. Select communication strategies for different audiences and sectors	DMP 815 for FSB & IDZ	815 for FSB & IDZ emphasis areas: 1. Students will select and design a news release to communicate a multidisciplinary science topic; 2. Students will select and design a technical report for a specific target audience related to a multidisciplinary science topic.
	FNDH 880 for PHN	880 for PHN emphasis area: 1) Students will select and design a public news release to communicate a health-related topic to the public. 2) Students will select and design a scientific abstract for a specific target audience related to a multidisciplinary science topic.

Assessment of Competencies for MPH (all concentrations)		
Competency	Course number(s) and name(s)*	Specific assessment opportunity
	KIN 796 for PHPA	796 for PHPA emphasis area: 1) Students will select and design a public news release to communicate a health-related topic to the public. 2) Students will select and design a scientific abstract for a specific target audience related to a multidisciplinary science topic.
19. Communicate audience-appropriate public health content, both in writing and through oral presentation	DMP 815 for FSB & IDZ	815 for FSB & IDZ emphasis areas: Students will prepare and orally present a scientific seminar for a specific target audience related to a multidisciplinary public health topic.
	FNDH 880 for PHN	880 for PHN emphasis area: 1) Students will prepare and orally present a scientific seminar for a specific target audience related to a multidisciplinary public health topic. 2) Students prepare a written scientific abstract for a specific target audience related to a multidisciplinary science topic.
	KIN 796 for PHPA	796 for PHPA emphasis area: 1) Students will prepare and orally present a scientific seminar for a specific target audience related to a multidisciplinary public health topic. 2) Students prepare a written scientific abstract for a specific target audience related to a multidisciplinary science topic.
20. Describe the importance of cultural competence in communicating public health content	MPH 720, Administration of Health Care Organizations	720: For the "Community Needs Project" students will need to demonstrate cultural competence in communicating needs and formulating solutions to their assigned community's needs.
	MPH 818, Social and Behavioral Bases of Public Health	818: Page 6 section on Race, Ethnicity and Health Inequities, students complete the 3 checklist assessment "Self-assessment for cultural competency" provided by ASHA (American Speech Language Hearing Association).
Interprofessional Practice		
21. Perform effectively on interprofessional teams	MPH 720, Administration of Health Care Organizations	720: For the "Community Needs Project", students will work on inter professional teams. Each student will have an assigned

Assessment of Competencies for MPH (all concentrations)		
Competency	Course number(s) and name(s)*	Specific assessment opportunity
	<p>MPH 818, Social and Behavioral Bases of Public Health</p> <p>MPH 840, Applied practice experience and Integrated learning experience.</p>	<p>responsibility and students will peer rate one another's performance.</p> <p>818: students representing different public health emphases are specifically placed in teams to work together on a project designed to address specific issues related to their assigned health indicator.</p> <p>840: The APE preceptor and the teams with which they work during the APE placement are diverse in their professions, so that students work with two or more professions in order to learn about, from and with each other to enable effective interprofessional collaboration. In addition, students are required to select and demonstrate incorporation of competency #21 as one of their five competencies addressed during their APE. These are required and expected for MPH 840.</p>
Systems Thinking		
22. Apply systems thinking tools to a public health issue	<p>MPH 754, Introduction to Epidemiology</p> <p>MPH 802, Environmental Health</p>	<p>754: Discussion question 2 & 3 Questions require students to alter decisions based on differing prior knowledge (Discussion Question 2) and to consider upstream and downstream factors when allocating public resources (Discussion Question 3).</p> <p>802: Students prepare a class presentation and assess the usage of system thinking tools to address the challenges in environmental health. For example, students examine the risk assessment of domoic acid toxicity in early childhood development during the peak season of shellfish along the coast of California. The measures of environmental epidemiology were used to assess the impact of domoic acid on human health. The source of hazard was identified in shellfish. Dose-response assessment was collected and analyzed. Assessment of fetal, infant, childhood exposure was used in the risk characterization and subsequently provided a recommendation of the relatively risk of exposure to cause an adverse effect on human health. Thus, students learn to use system thinking to address public health issues.</p>

- 3) **Include the most recent syllabus from each course listed in Template D2-1, or written guidelines, such as a handbook, for any required elements listed in Template D2-1 that do not have a syllabus.**

The syllabi for the listed courses in Table 17 are located in the ERF "D1-2". Table 17 also documents the specific assessment opportunities for each of the 22 foundational competencies. The MPH program director, program staff and FAC (including the instructors for each of these listed courses) met monthly to discuss these 22 foundational competencies and developed the process of how these competencies would be taught and assessed in their courses. Each course listed in Table 17 was reviewed by the instructor and other members of the FAC. The content of these courses was updated to include and provide formal instruction and assessment of each of the 22 foundational competencies. The FAC reviewed the syllabi and assessment opportunities in several drafts during 2017 and 2018 in order to complete Table 17.

- 4) **If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.**

Strengths: The matrix shown in D2-1 and D2-2 demonstrates the courses and the degree requirements that are required for MPH students, for each of the four emphasis areas, adequately provide instruction and assessment for the 22 foundational competencies. This ensures that the all MPH students are grounded in each of the 22 defined foundational competencies. Assessment of the 22 competencies is performed using different assessment methods, including; quiz questions, exam questions, discussion-based, homework assignments, poster presentations, reflection paper, , utilizing both qualitative and quantitative assessment forms. MPH faculty in the FAC and instructional faculty of the courses developed this matrix collaboratively and thoughtfully over a period of two years to ensure a thorough and complete content coverage.

Weaknesses: There are no perceived weaknesses in addressing assessment of the 22 foundational competencies in the program coursework.

Plans for improvement: Continue to work with the FAC and primary instructional faculty to ensure core courses provide thorough and complete content coverage and assessment of the 22 foundational competencies.

D3. DrPH Foundational Competencies Not applicable

D4. MPH Concentration Competencies

The program defines at least five distinct competencies for each concentration or generalist degree at each degree level in addition to those listed in Criterion D2 or D3.

The program documents at least one specific, required assessment activity (e.g., component of existing course, paper, presentation, test) for each defined competency, during which faculty or other qualified individuals (e.g., preceptors) validate the student's ability to perform the competency.

If the program intends to prepare students for a specific credential (e.g., CHES/MCHES) that has defined competencies, the program documents coverage and assessment of those competencies throughout the curriculum.

- 1) **Provide a matrix, in the format of Template D4-1, that lists at least five competencies in addition to those defined in Criterion D2 or D3 for each MPH or DrPH concentration or generalist degree, including combined degree options, and indicates at least one assessment activity for each of the listed competencies. Typically, the program will present a separate matrix for each concentration.**

Table 18. Template D4-1. Competencies for Each Emphasis Area.

Content	Course number(s) or other educational requirements	Specific Assessment Opportunity
<i>Food Safety and Biosecurity emphasis area competencies.</i>		
<p>1. Food safety and biosecurity. Evaluate solutions appropriate for different food safety, biosecurity, and defense issues in the food production continuum.</p>	<p>FDSCI 730, Multidisciplinary Overview of Food Safety and Security</p> <p>FDSCI 731, Food Protection and Defense: Essential Concepts</p>	<p>730: Report #4. Students will author a position paper about a food safety, biosecurity, or defense-related issue of their choosing in the food production continuum. Students will explain the issue, describe possible solutions, compare and contrast opposing viewpoints, examine and interpret evidence to formulate an opinion about the most effective solution, and argue in favor of the position they support.</p> <p>731: Module B Quizzes (L1, L2, CS1, L3, L4, L5). Students are required to compare and contrast different characteristics that make the food and agricultural system a critical infrastructure, and examine attributes that make the food system an attractive target and make it difficult to protect from biosecurity challenges. Students also analyze potential consequences of biosecurity lapses using historical examples.</p>
<p>2. Threats to the food system. Examine specific threats to the food system and scientifically investigate how each can be prevented, controlled, and/or mitigated in the food production system.</p>	<p>FDSCI 730, Multidisciplinary Overview of Food Safety and Security</p> <p>FDSCI 731, Food Protection and Defense: Essential Concepts</p>	<p>730: Quiz, Lecture D1; Quiz, Lecture F1. Through didactic lecture and written quiz questions, students will examine disease agents that can be transmitted via the food system, select control strategies for foodborne pathogens, distinguish trends that increase vulnerability to foodborne disease, and examine mitigation steps that comprise the basis of preventive food safety system such as HACCP (Hazard Analysis and Critical Control Point systems).</p> <p>731: Module C, Quizzes (L6, L7); Module E Quizzes (L13, L15, L16); Module F Quiz (CS2). Through didactic lecture and written quiz questions, students will differentiate threats to the food system, select intrinsic and extrinsic attributes of food products that can control microbial threats, compare approaches and systems (such as CARVER) that can be used to evaluate food defense threats.</p>
<p>3. Food safety laws and regulations. Differentiate key US food safety regulatory bodies and their unique legislative authorities, missions, and jurisdictions.</p>	<p>DMP 816, Trade & Agricultural Health</p>	<p>816: Module 5 quiz, questions #2, 3, 4, 5 and 6. These include the following questions:</p> <ul style="list-style-type: none"> • A question regarding the comparative administrative and personnel challenges of the USDA and FDA

Content	Course number(s) or other educational requirements	Specific Assessment Opportunity
		<ul style="list-style-type: none"> • A question regarding specific regulated food product(s) and the jurisdictional/responsible U.S. federal agency. • A question about the role played by the U.S. Department of Homeland Security in food safety regulation. • A question regarding different food safety laws and their year of passage. • A question about the mission/goals of the FDA Food Safety Modernization Act
<p>4. Food safety policy and the global food system. Analyze and distinguish how food safety and governmental biosecurity policies, globalization, and international trade cooperation influence public health.</p>	DMP 888, Globalization, Cooperation, and the Food Trade	<p>888: Module 1 assignment (questions 2, 4, and 6); Module 3 assignment (questions 2, 3, and 4); and Module 7 assignment (questions 1 and 2). These include the following questions:</p> <ul style="list-style-type: none"> • A question about the dilemma presented by imports of food that are both economically valued but could also pose safety/health/security. • A question involving public policies, economic forces, and the role of the "state/government" and the "market." • A question about aflatoxin-related food safety concerns in imported pistachios. • A question about the challenges facing the food processing sector. • A question about the <i>Salmonella</i> Saint Paul outbreak and the complexity of a supply chain that crossed borders. • A question about three specific international and national food safety and bioterrorism events. • Two questions about an historical (19th century) trade dispute about the pork trade and trichinosis.
<p>5. Multidisciplinary leadership. Contrast the food safety/ biosecurity technical needs of different stakeholders and make judgements as to the appropriate methods of collaboration.</p>	DMP 815, Multidisciplinary Thought & Presentation	<p>815: Three assignments in DMP 815 assess this competency: Students are asked to develop a news release to communicate a multidisciplinary science topic. Students are asked to author a technical report for a specific target audience related to a public health/food safety multidisciplinary science topic. Students are asked to write and present a scientific seminar for a specific target audience related to a public health/food safety multidisciplinary science topic.</p>
<i>Infectious Diseases and Zoonoses emphasis area competencies.</i>		
<p>1. Pathogens/pathogenic mechanisms. Evaluate modes of disease</p>	BIOL 530, Pathogenic Microbiology or	530 and 812: Students utilize differential strategies to examine and analyze pathogens. Pathogens and pathogenic mechanisms are investigated and examined through formative

Content	Course number(s) or other educational requirements	Specific Assessment Opportunity
causation of infectious agents.	DMP 812, Veterinary Bacteriology and Mycology	<p>didactic lecture, and assessed in written exam questions in both of these courses. These skills are further developed and assessed in two summative laboratory reports.</p> <p>530: Written reports assess students' examination of the causative agents, diagnosis, virulence and treatment options in the form of the preparation of a clinical case study. For each written laboratory report, students are evaluated and assessed for their skills in correctly testing and analyzing enteric organisms (report 1) and unknown organisms (report 2).</p> <p>812: Students compare and contrast the mechanisms of pathogenesis and disease, and distinguish bacterial species in two assessed laboratory assignments. In each assignment, students accurately select an unknown micro-organism using experimental laboratory procedures to support their decision.</p>
<p>2. Host response to pathogens/immunology. Investigate the host immune response to infection.</p>	<p>BIOL 670, Immunology or DMP 705, Principles of Veterinary Immunology</p>	<p>670 and 705: Students critically evaluate the immune response through examination of research or clinical problems involving humans or vertebrate animals. These analytical skills are developed through didactic lecture, problem-solving, group exercises; and assessed in written examination questions.</p> <p>670: Exams 1, 2 and 3 contain sequential written questions that require students to draw connections between the components of the immune system and what induces activation of the immune response. In exam 1, students examine the different innate immune responses and antibody structure and function. For exam 2, students investigate T cell biology and cytokine biology. In exam 3, students select appropriate adaptive and innate components of the immune response to infectious disease. Students are also required to critically evaluate recently published primary literature.</p> <p>705: Exam 1 and 2 contain written questions that require students to distinguish different components of the immune response. Exam 1 questions 1b-f asks students to relate pathogen recognition mechanisms to the evasion of</p>

Content	Course number(s) or other educational requirements	Specific Assessment Opportunity
		immune responses. Exam 2 questions ask students to compare and contrast the role played by MHC molecules and MHC polymorphisms in immune responses against extracellular and intracellular pathogens; and also students select appropriate adaptive immune response mechanisms involved in the clearance of intracellular bacterial infections
<p>3. Environmental/ecological influences. Examine the influence of environmental and ecological forces on infectious diseases.</p>	DMP 710, Introduction to One Health	710: Week 4 written questions require student to evaluate the risks of zoonotic diseases in different environments. Week 9 written questions analyze the environment as it relates to physical safety, walkability, and bikeability. In week 12, through written questions, students draw connections between potential threats to animals and the built environment, the natural environment, non-native species, and introduced pathogens
<p>4. Disease surveillance and quantitative methods. Analyze disease risk factors and select appropriate surveillance.</p>	DMP 710, Introduction to One Health	710: Students author a case analysis paper assignment, and a final term paper assignment that must critique primary research articles and evaluate disease surveillance and risk analysis. Students examine specific risk factors for the transmission and development of diseases, and select appropriate surveillance methods.
<p>5. Disease Vectors. Investigate the role of vectors, toxic plants and other toxins in infectious diseases.</p>	DMP 710, Introduction to One Health	710: Students author a case analysis paper that must critique primary research articles and examine food-borne illness and compare and contrast the role of toxin-producing organisms in infectious diseases.
Public Health Nutrition emphasis area competencies.		
<p>1. Information literacy of public health nutrition. Examine the acquisition of public health nutrition knowledge and skills, and evaluate how to select information efficiently and effectively for public health practice.</p>	FNDH 820, Functional Foods for Chronic Disease Prevention	820: students select and write a review paper that examines public health-related functional foods or nutraceutical practice. In the review paper, students must critically analyze current literature and organize their understanding of public health nutrition knowledge by including the information of active components, chemical basis, food process, legal requirements, potential health benefits, and underlying molecular mechanism. Furthermore, students need to integrate the nutritional science, food science, regulatory principles, and public health together and examine the functional foods, nutraceuticals, and dietary supplements. Finally, students should be able to evaluate public health-related biochemical basis, technologies, legal requirements, and clinical

Content	Course number(s) or other educational requirements	Specific Assessment Opportunity
	FNDH 844, Nutritional Epidemiology	<p>assessment in available or potentially available products.</p> <p>844: Critical analysis of nutritional epidemiological evidence: students will author three written research critiques according to a standardized format that is provided by the instructor, each covering one major type of epidemiological research design. After completing the first critique, students will select for themselves appropriate research articles to examine for the next two assignments. Students are evaluated on their efforts to address the twelve areas of the critique, as well as their ability to appraise knowledge of nutritional epidemiology. Critiques are evaluated subjectively according to a rubric in the following four areas: 1) Thought- degree of demonstrating substantial and complex thought on questions and issues relevant to article; 2) Format- degree of following the instructions and organizing the critique according to the requirements; 3) Coverage- degree of actually addressing issues/answering questions (in depth) posed on critique instruction outline; 4) Readability- degree of quality of language, spelling, grammar, and ability to convey thoughts via written word.</p>
<p>2. Compare and relate research into practice. Examine chronic disease surveillance, policy, program planning and evaluation, and program management.</p>	FNDH 600, Public Health Nutrition	<p>600: Food security service-learning project. Students perform 5 hours of service for a food security organization in the community. Students then compose a scholarly report, where they describe what they have learned about the organization(s) before and during their service learning, citing academic references. Students also describe who the organization helps, including a description of the clientele and their characteristics (with citations). Students describe how their service fit into the overall services provided by the organization, and how their service activities with the organization fit with what they have learned previously about food security and related public health nutrition issues (including citations). Last, students include personal reactions and thoughtful reflections that demonstrate their learning from the service. The report constitutes 1/6 of total semester grade, and is assessed according to a rubric for evaluating qualities of: evidence and</p>

Content	Course number(s) or other educational requirements	Specific Assessment Opportunity
	FNDH 820, Functional Foods for Chronic Disease Prevention	<p>description of five or more hours of service time; description of what was learned academically and personally, including personal reflections on the service; compliance with assignment instructions.</p> <p>820: Weekly written assignments and a final review paper assess the ability of students to examine the role of functional foods in chronic disease prevention. Specific assessments are provided as follows:</p> <ul style="list-style-type: none"> • Examine the regulatory basis of functional food products by U.S. policy. • Select the types of functional foods available for public health-related program and management. • Examine the knowledge of the scientific basis and technologies available to construct potential new functional food practice. • Using literature searches as a source to obtain updated information, evaluate online information to support the professional and life-long learning.
<p>3. Population-based health administration. Develop and examine the administration of population-based food, nutrition and health services.</p>	FNDH 600, Public Health Nutrition	<p>600: Food security service-learning project: Students perform five or more hours of service time for one or more organizations dedicated to promoting food security (fighting hunger, helping people who experience food insecurity). Students provide proof of service with at least one convincing photograph and a signed and dated service statement from the supervisor of their work. Students write a 500- to 1500-word critical examination of their service, including an analysis of what they have learned. Within the assignment, students must draw explicit connections between the service learning and the didactic learning including lectures, readings, and discussions taking place in class. The report constitutes 1/6 of total semester grade, and is assessed according to a rubric for evaluating qualities of: evidence and description of five or more hours of service time; description of what was learned academically and personally, including personal reflections on the service; compliance with assignment instructions.</p>

Content	Course number(s) or other educational requirements	Specific Assessment Opportunity
<p>4. Analysis of human nutrition principles. Examine epidemiological concepts of human nutrition in order to improve population health and reduce disease risk.</p>	<p>FNDH 600, Public Health Nutrition</p>	<p>600: Through didactic lecture, readings, and in-class discussion, students examine the public health burden of biological, physical, and chemical food contaminants that lead to food-borne illness. This includes analysis of annual incidence rates, reporting systems, systemic and individual prevention. Student learning of food safety issues is assessed by an exam that includes items with a multiple choice, matching, and fill-in-the-blank format.</p>
<p>5. Analysis of nutrition epidemiology. Critique nutritional epidemiological research design methods.</p>	<p>FNDH 844, Nutritional Epidemiology</p>	<p>844: Critical analysis of nutritional epidemiological evidence: students will author three written research critiques according to a standardized format that is provided by the instructor, each covering one major type of epidemiological research design. After completing the first critique, students will select for themselves appropriate research articles to examine for the next two assignments. Students are evaluated on their efforts to address the twelve areas of the critique, as well as their ability to appraise knowledge of nutritional epidemiology. Critiques are evaluated subjectively according to a rubric in the following four areas: 1) Thought- degree of demonstrating substantial and complex thought on questions and issues relevant to article; 2) Format- degree of following the instructions and organizing the critique according to the requirements; 3) Coverage- degree of actually addressing issues/answering questions (in depth) posed on critique instruction outline; 4) Readability- degree of quality of language, spelling, grammar, and ability to convey thoughts via written word.</p>
<p>Public Health Physical Activity emphasis area competencies.</p>		
<p>1. Population health. Examine and evaluate evidence-based knowledge of the relationship between physical activity and population health.</p>	<p>KIN 612, Policy, Built Environment and Physical Activity</p>	<p>612: Article critique: Students select a peer-reviewed article and lead a class discussion to examine the evidence between built environment or policy and, using the social ecological model, critique the effects on physical activity (PA) and population health.</p>
<p>2. Social, behavioral and environmental influences. Investigate social, behavioral and environmental factors that contribute to</p>	<p>KIN 610, Program Planning and Evaluation</p>	<p>610: Assignment 1 Part 2 Students design and conduct a simulated community needs assessment including an investigation of social, cultural, and environmental elements to support a physical activity intervention.</p>

Content	Course number(s) or other educational requirements	Specific Assessment Opportunity
participation in physical activity.	KIN 805, Physical Activity and Human Behavior	805: Debate 1: Students examine peer-reviewed evidence to justify the positions that physical activity is an individual choice, or that physical activity is determined by biological or environmental factors.
3. Theory application. Examine and select social and behavioral theories and frameworks for physical activity programs in community settings.	KIN 610, Program Planning and Evaluation KIN 805, Physical Activity and Human Behavior	610: Assignment 3 Program Plan part 2, students select social, behavioral and/or environmental theories to construct the foundation for their PA interventions. 805: Theory presentation: Students examine a peer-reviewed article and critique the theory-based physical activity intervention including an evaluation of the methods, results, and implications in order to effectively design an intervention.
4. Developing and evaluating interventions. Develop and evaluate physical activity interventions in diverse community settings.	KIN 610, Program Planning and Evaluation KIN 805, Physical Activity and Human Behavior	610: Assignment 3 Program Plan parts 3-7 Students develop a theory-based physical activity intervention including a logic model, identifying resources, marketing, and implementation plan. Assignment 4 Part 1, Students design a comprehensive evaluation plan for a physical activity intervention including study design, and outcomes and process measures. 805: Final project: Students develop a theory-based physical activity intervention. Project includes a needs assessment, detailed intervention content, and an evaluation plan.
5. Support evidence-based practice. Support public health officials and other community partners in the promotion of physical activity with evidence-based practices.	KIN 612, Policy, Built Environment and Physical Activity	612: Final project: Students develop an evidence-based built environment or policy intervention and present to the intervention to partner community stakeholders.

- 2) For degrees that allow students to tailor competencies at an individual level in consultation with an advisor, the program must present evidence, including policies and sample documents, that demonstrate that each student and advisor create a matrix in the format of Template D4-1 for the plan of study. Include a description of policies in the self-study document and at least five sample matrices in the electronic resource file.**

All emphasis areas follow the same matrix for how students demonstrate the objectives and competencies outlined in Tables 15 and 17. Students within each emphasis area follow the same matrix to demonstrate the area specific competencies as outlined in Table 18. The program allows for up to 12 credits (3 to 4 classes) of approved electives for an approved list of courses. A matrix of the allowed elective classes for each emphasis area is in the ERF "D4-3."

- 3) Include the most recent syllabus for each course listed in Template D4-1, or written guidelines for any required elements listed in Template D4-1 that do not have a syllabus.**

The syllabi for the listed courses in Table 18 are located in the ERF “D4-3.” Table 18 also documents the specific assessment opportunities for each of the five specific emphasis area competencies. The MPH program director, program staff and FAC (including the instructors for each of these listed courses) met monthly to discuss these competencies and developed the process of how the competencies would be taught and assessed in their courses. Each course listed in Table 18 was reviewed by the instructor and other members of the FAC. The content of these courses was updated to include and provide formal instruction and assessment of each of the competencies. The FAC reviewed the syllabi and assessment opportunities in several drafts during 2017 and 2018 in order to complete Table 18.

- 4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.**

Strengths: The matrix shown in D4-1 demonstrates that the emphasis areas courses that are required for MPH students, within each of the four emphasis areas, cover and assess the five concentration competencies. This ensures that the all MPH students are grounded in each of the five concentration competencies. Assessment of the five concentration competencies is performed using different assessment methods, including; quiz questions, exam questions, discussion-based, homework assignments, oral presentations, reflection paper, service-learning projects, utilizing both qualitative and quantitative assessment forms. MPH faculty in the emphasis areas developed this matrix collaboratively and thoughtfully over a period of two semesters to ensure a thorough and complete content coverage.

Weaknesses: There are no perceived weaknesses in addressing assessment of the five concentration competencies in emphasis area courses at this time.

Plans for improvement: Continue to work with the emphasis area faculty to ensure emphasis area courses provide thorough and complete content coverage and assessment of the five concentration competencies.

D5. MPH Applied Practice Experiences

MPH students demonstrate competency attainment through applied practice experiences.

The applied practice experiences allow each student to demonstrate attainment of at least five competencies, of which at least three must be foundational competencies (as defined in Criterion D2). The competencies need not be identical from student to student, but the applied experiences must be structured to ensure that all students complete experiences addressing at least five competencies, as specified above. The applied experiences may also address additional foundational or concentration-specific competencies, if appropriate.

The program assesses each student’s competency attainment in practical and applied settings through a portfolio approach, which demonstrates and allows assessment of competency attainment. It must include at least two products. Examples include written assignments, projects, videos, multi-media presentations, spreadsheets, websites, posters, photos or other digital artifacts of learning. Materials may be produced and maintained (either by the program or by individual students) in any physical or electronic form chosen by the program.

- 1) Briefly describe how the program identifies competencies attained in applied practice experiences for each MPH student, including a description of any relevant policies.**

The applied practice experience (APE) for all MPH students in each of the four emphasis areas is an applied practice public health experience at a public health agency or other public health practice location.

- The APE is a specific requirement of the K-State MPH program, and is considered a required section of MPH 840 (Public Health Practice).

- Students complete their APE after completion of the five core courses and a majority of their emphasis area courses.
- The APE is usually completed during the fourth or fifth semester and may be completed in one semester or over two semesters.
- Student identify a site for their APE with the program staff and major professor based on their career goals and/or public health interests.
- The student, their major advisor, their preceptor, along with their committee members and the program director discuss and develop the APE content and complete the APE proposal form (in the MPH 840 syllabus) which includes APE objectives, a description of products to be developed, a description of activities to be performed/delivered, and the APE competencies to be attained).
- Students identify at least five foundational competencies in the proposal stage of their APE.
- All students are required to choose competency #21, in addition to at least four other self-identified foundational competencies from template D2-2.
- The student, their major advisor, their preceptor, along with their committee members and the program director approve the proposal and the identified foundational competencies.
- The faculty group and student use a table of the foundational competencies, in the form of template D5-1 to determine the foundational competencies that will be addressed and mastered during the APE.
- The identification and policies regarding the APE and the foundational competencies attained for the APE are described in both the syllabus for the APE (MPH 840) and the MPH program handbook.
- The five chosen foundational competencies are assessed as part of the APE in the practice-based products that are developed. .A portfolio containing at least two products for each student demonstrates and allows assessment of competency attainment.
- At the completion of the APE, the major professor and committee members complete an APE MPH 840 assessment distributed by the program staff (Survey delivered using Qualtrics software, see ERF “D5” for MPH Assessment Survey).
- The practice-based products are graded by the major professor as the for-credit grade for MPH 840. This grade is communicated to the program director to enter into the MPH 840 course grade book at the completion of the semester in which the APE takes place.
- APE products will be maintained by the program in electronic form, or in physical form if an electronic form is not possible.
- Specific forms of products developed in the APE in the students’ portfolios that demonstrate application or practice of the foundational competencies are the same for each student. Sample matrices in the format of Template D5-1 to demonstrate the competencies chosen and addressed by students are located in the ERF “D5” (Student APE products folder).
- Prior to advancing to the final exam, students complete an MPH Checklist with the program office and their major advisor. The checklist is utilized by the MPH program staff to ensure that all APE requirements are discussed and completed, and the APE products have been submitted to the program office, before students can schedule their final exam and apply for graduation (see ERF “D5” MPH Checklist).

Table 19. Template D5-1. Practice-based Products that Demonstrate MPH Competency Achievement.

Specific products in portfolio that demonstrate application or practice	Competency as defined in Criteria D2
1. APE specific deliverables/products presented to APE preceptor.	Student chosen competency
2. Presentation to APE preceptor and APE site staff at APE site.	Student chosen competency
3. Poster and/or Oral presentation to inter-professional, community or non-university audience.	Student chosen competency
	#21. Perform effectively on interprofessional teams.

2) Provide documentation, including syllabi and handbooks, of the official requirements through which students complete the applied practice experience.

Students complete the APE during an applied practice public health experience, including the development and completion of APE products and a presentation of the APE to an interprofessional and/or non-university audience. All MPH students are required to demonstrate their abilities to synthesize and integrate knowledge acquired during the APE. This information is communicated to students annually in the MPH 840 required training session whereby the program director reviews all policies and procedures, required paperwork, and deadlines regarding the APE. The syllabus for the APE (MPH 840) and the MPH Graduate Handbook are located in D5 APE and A1-3 ERF folders. Students also complete an MPH Checklist with the program office and their major advisor before and after they complete their APE. The MPH Checklist is utilized by the MPH program staff to ensure that all degree and APE requirements are completed before students can schedule their final exam and apply for graduation (see ERF "D5" MPH Checklist).

3) Provide samples of practice-related materials for individual students from each concentration or generalist degree. The samples must also include materials from students completing combined degree programs, if applicable. The program must provide samples of complete sets of materials (ie, Template D5-1 and the work products/documents that demonstrate at least five competencies) from at least five students in the last three years for each concentration or generalist degree. If the program has not produced five students for which complete samples are available, note this and provide all available samples.

Samples of practice-related materials for individual students from each concentration are located in the ERF "D5" APE folder.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The program requires an APE in the format of a practical public health experience of every student, while also giving the student options to pursue other types of research-related experiences (see D7). The identification of competencies by the student and their committee members allows the supervisory committees to assess individual capabilities and skills attained during the APE, in addition to providing programmatic assessment data.

Weaknesses: There have not been significant challenges in this area. Agencies and site preceptors have been helpful in offering and working with MPH students in their APEs.

Plans for improvement: Continue to use the APE as a means to assess student competency in the chosen foundational competencies. Continue to ensure that students are offered communication skills and interprofessional development opportunities during their APE to enhance their career training and preparation. Continue to communicate with preceptors about the process and requirements for the APE and types of APE products.

D6. DrPH Applied Practice Experience Not applicable.

D7. MPH Integrative Learning Experience

MPH students complete an integrative learning experience (ILE) that demonstrates synthesis of foundational and concentration competencies. Students in consultation with faculty select foundational and concentration-specific competencies appropriate to the student's educational and professional goals.

Professional certification exams (e.g., CPH, CHES/MCHES, REHS, RHIA) may serve as an element of the ILE, but are not in and of themselves sufficient to satisfy this criterion.

The program identifies assessment methods that ensure that at least one faculty member reviews each student’s performance in the ILE and ensures that the experience addresses the selected foundational and concentration-specific competencies. Faculty assessment may be supplemented with assessments from other qualified individuals (e.g., preceptors).

- 1) List, in the format of Template D7-1, the integrative learning experience for each MPH concentration, generalist degree or combined degree option that includes the MPH. The template also requires the program to explain, for each experience, how it ensures that the experience demonstrates synthesis of competencies.

All MPH students are required to complete an integrative learning experience (ILE), demonstrating their abilities, in written form, to synthesize and integrate knowledge acquired in coursework and competencies mastered during the program. For the MPH degree, students have two options for the ILE, the two options include:

Table 20. Template D7-1. MPH Integrative Learning Experience for all Concentrations.

Integrative learning experience (list all options)	How competencies are synthesized
Written report	Final oral presentation, defense, and oral exam
Thesis option	Final oral presentation, defense, and oral exam

- 2) Briefly summarize the process, expectations and assessment for each integrative learning experience.

The program recognizes two different plans to fulfill the requirements for the MPH and meet the Graduate School requirements. At the time of the submission of the POS, students must select the for-credit ILE option which is:

- MPH 840 for 6 credit hours (240 hours) or
- MPH 840 for 3 credit hours (180 hour) plus research credit for 6 credit hours. Students completing a thesis must focus the research on a population-based health question.

For both options listed above, students are required to write a high quality ILE that demonstrates synthesis of foundational and concentration competencies.

- The ILE is a specific requirement of the K-State MPH program, and is a required section of MPH 840.
- Students write their ILE after completion of the five core courses and all of their emphasis area courses and after completion of the APE.
- The ILE is usually completed during the last semester and may be completed in one or over two semesters.
- The student, their major advisor, along with their committee members and the program director discuss and develop the ILE content based upon their thesis research and/or based upon a project(s) the student carried out at the public health agency where they conducted their APE, or a second agency where they worked on a public health project.
- Students and their major professor select foundational and concentration-specific competencies that are appropriate to the student’s educational and professional goals.
- The student, their major advisor, along with their committee members and the program director discuss and develop the ILE structure based on a template provided by the MPH Program office (see ERF “D7”) or the thesis template approved by the Graduate School (<https://www.k-state.edu/grad/etdr/index.html>).
- The policies regarding the ILE are described in both the MPH program handbook and the Graduate Handbook for theses.

- At the completion of the ILE, the agency preceptor and student complete ILE surveys distributed by the program staff delivered using Qualtrics survey software, (see ERF “D5” survey). These surveys contains questions for the student and the preceptor regarding the experience, and provide a mechanism for both students and preceptors to give feedback and commentary to the program office. This feedback is used to improve the process for both students and preceptors.
- The ILE is assessed during the final exam. The final exam includes a public oral presentation of the ILE written report, and a closed session for the oral defense and exam.
- Prior to the final exam, students complete an MPH Checklist with the program office and their major advisor. The checklist is utilized by the MPH program staff to ensure that all ILE requirements are discussed and completed before students can schedule their final exam and apply for graduation (see ERF “D5” MPH Checklist).
- THE ILE written report is given to the graduate committee at least two weeks before the scheduled final exam.
- The ILE written report is edited and improved upon until the committee is satisfied with the quality of the ILE written report. This editing occurs before the final exam date.
- Prior to the final exam and oral defense, the major professor and committee members receive instructions for assessment of the ILE. This includes the competencies the student has chosen for the ILE.
- The chosen competencies are assessed as part of the ILE in the written report and during the final oral presentation, defense and exam.
- At the completion of the ILE, the major professor and committee members complete the ILE MPH assessment distributed by the program staff delivered using Qualtrics survey software, (see ERF “D5” MPH Degree Assessment survey). This survey contains the assessment of the ILE chosen competencies in addition to all emphasis area competencies.
- The ILE is graded by the major professor and committee members as the Pass/Fail grade for the Final Examination Ballot. This is communicated directly by the Major Professor to the Graduate School at the completion of the semester in which the ILE takes place. This is a standard K-State Graduate School form and process for al graduate students.

The two options for the ILE are:

Written ILE Report and Oral Defense. In this option, during the final semester, the student completes a high quality written report and presents an oral report to the graduate supervisory committee members, members of the university, and other invited guests. The supervisory committee members assess required knowledge and competencies from the high-quality written report, during the oral presentation, and after the presentation in the oral defense. In addition, the supervisory committee members assess required knowledge and competencies in an ILE survey-based assessment for the final defense. These assessments are combined into completion of the Final Examination Ballot.

Thesis Presentation and Oral Defense. In this option, during the final semester, the student presents an oral report and written thesis from their original research investigation of a public health problem or topic to the graduate supervisory committee members, members of the university and other invited guests. In addition, the student completes a high quality written report from a project completed during the APE. Depending on the expectations of the supervisory committee, the student may also present details related to their APE at the same time. The supervisory committee members will assess required knowledge and competencies from the high-quality written report, during the oral presentation, and after the presentation in the oral defense. These assessments are combined into completion of the Final Examination Ballot.

3) Provide documentation, including syllabi and/or handbooks that communicates integrative learning experience policies and procedures to students.

Communication to students of the ILE policies and procedures is carried out using documentation that includes: MPH 840 syllabus, ILE report template, and the thesis template where required (see ERF “D5” APEs). This information is communicated to students annually in the MPH 840 required training session

whereby the program director reviews all policies and procedures, required paperwork, and deadlines regarding the ILE. The required policies and procedures are made available electronically to students in a number of ways:

- Program Website
 - Assessment of Student Learning (<http://www.k-state.edu/mphealth/about/learning-outcomes/>)
 - Areas of emphasis (<http://www.k-state.edu/mphealth/areas/>)
- Handouts, with competencies and curriculum for each area of emphasis (ERF)
 - Food Safety and Biosecurity
 - Infectious Diseases and Zoonoses
 - Public Health Nutrition
 - Public Health Physical Activity

4) Provide documentation, including rubrics or guidelines that explains the methods through which faculty and/or other qualified individuals assess the integrative learning experience with regard to students' demonstration of the selected competencies

To determine the student's ability to appropriately integrate and synthesize selected competencies in the ILE, the graduate supervisory committee members assess each student using the final exam, whereby the committee members use guidelines based on the template D2-2 to ask questions specifically regarding the selected competencies, in addition to specific competencies in each area of emphasis. The final competency of integration is assessed by the graduate committee at the completion of the culminating experience and all coursework.

The ILE assessment completed by the supervising graduate committee (major professor and two MPH graduate faculty) following the oral final defense also contains questions regarding the students' demonstration of selected competencies and their ability to integrate knowledge and skills to solve problems relevant to public health (Survey delivered using Qualtrics software, see ERF "D5" MPH Degree Assessment 2018). The committee grades the ILE and submits the final grade to the Graduate School and Program Director.

Integration. At the completion of the degree requirements, students will demonstrate their ability to integrate knowledge and skills to solve problems and to produce scholarly work in both an applied practice experience (APE; i.e., field experience and products) and an integrated learning experience (ILE; i.e., written report and final exam).

5) Include completed, graded samples of deliverables associated with each integrative learning experience option from different concentrations, if applicable. The program must provide at least 10% of the number produced in the last three years or five examples, whichever is greater.

Samples of completed and graded ILEs for individual students from each concentration are located in the ERF "D7" ILEs. Note that many of the graded ILEs follow the pre-2016 CEPH. All students matriculated to the program for and after Fall 2018 will follow the ILE requirements outlined herein.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The program requires an ILE in the format of a high-quality written report and oral presentation of every student. The identification of competencies by the student and their committee members allows the supervisory committees to assess competencies addressed in the ILE, in addition to providing programmatic assessment data.

Weaknesses: There have not been significant challenges in this area.

Plans for improvement: Continue to use the ILE final exam and survey as a means to assess student competency in the chosen foundational competencies. Continue to ensure that students are offered assistance and guidance to produce a high-quality written report for the ILE.

D8. DrPH Integrative Learning Experience Not applicable.

D9. Public Health Bachelor's Degree General Curriculum Not applicable.

D10. Public Health Bachelor's Degree Foundational Domains Not applicable.

D11. Public Health Bachelor's Degree Foundational Competencies Not applicable.

D12. Public Health Bachelor's Degree Cumulative and Experiential Activities Not applicable.

D13. Public Health Bachelor's Degree Cross-Cutting Concepts and Experiences Not applicable.

D14. MPH Program Length

An MPH degree requires at least 42 semester-credits, 56 quarter-credits or the equivalent for completion.

Programs use university definitions for credit hours.

- 1) Provide information about the minimum credit-hour requirements for all MPH degree options. If the university uses a unit of academic credit or an academic term different from the standard semester or quarter, explain the difference and present an equivalency in table or narrative form.**

The MPH degree is a 42 semester credit hour program designed to provide graduate-level education for individuals currently employed or anticipating a career in the field of public health. Each student in this program will complete 15 credit hours of the core curriculum, covering courses in each of the five broad aspects of public health:

1. Epidemiology
2. Environmental Health Sciences
3. Biostatistics
4. Health Service Administration
5. Social and Behavioral Sciences

The remainder of the coursework is in one of the areas of emphasis:

- Food Safety and Biosecurity
- Infectious Diseases and Zoonoses
- Public Health Nutrition
- Public Health Physical Activity

- 2) Define a credit with regard to classroom/contact hours.**

One Credit Hour is the amount of effort required to attain a specific amount of knowledge or skill equivalent to three hours of effort per week for 15 weeks. Any combination of contact time and effort outside of class is allowed. Common practice is for one academic hour of credit to be composed of a lecture or class to meet for one hour (50 minutes) per week, with two hours per week of outside assignment and study effort expected each week for 15 weeks.

A laboratory class period equivalent to an academic hour of credit would either meet for one three-hour period each week for 15 weeks with all effort by the student expected to be completed during the

laboratory period; or one two-hour laboratory period with one hour of student effort expected outside the class period, each week for 15 weeks.

Shortened academic sessions (including condensed semesters, intersession classes, or summer classes) are expected to maintain an equivalent amount of time (contact and outside of class time) as those classes in the 15-week semester. It should be noted that the judgment of the amount of academic effort that comprises one hour of credit for any class is ultimately a faculty decision, from the development of the course syllabus to the approval through Faculty Senate. For further detail please see the Department Head's manual: <http://www.k-state.edu/academicpersonnel/depthead/contents.html>

D15. DrPH Program Length Not applicable.

D16. Bachelor's Degree Program Length Not applicable.

D17. Academic Public Health Master's Degrees Not applicable.

D18. Academic Public Health Doctoral Degrees Not applicable.

D19. All Remaining Degrees Not applicable.

D20. Distance Education Not applicable.

E1. Faculty Alignment with Degrees Offered

Faculty teach and supervise students in areas of knowledge with which they are thoroughly familiar and qualified by the totality of their education and experience.

Faculty education and experience is appropriate for the degree level (bachelor's, master's, doctoral) and the nature of the degree (research, professional practice, etc.) with which they are associated.

- 1) Provide a table showing the program's primary instructional faculty in the format of Template E1-1. The template presents data effective at the beginning of the academic year in which the final self-study is submitted to CEPH and must be updated at the beginning of the site visit if any changes have occurred since final self-study submission. The identification of instructional areas must correspond to the data presented in Template C2-1.

Table 21. Template E1-1. Primary Instructional Faculty Alignment with Degrees Offered

Name*	Title/ Rank	Tenure Status or Class^	Grad Degrees Earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Current instruct area(s) [†]
Adams, A. Paige	Res Asst Prof	Non-TT	PhD DVM	Cornell Univ Texas A&M	Immunology Vet Med	IDZ
Besenyi, Gina	Assist Prof	Tenure Track	PhD MPH	Univ of South Carolina Kansas State Univ	Health Promotion Physical Activity	PHPA
Cernicchiaro, Natalia	Asst Prof	Tenure Track	DVM PhD	Univ of Rep, Uruguay Univ of Guelph	Vet Medicine Epidemiology	IDZ
Fleming, Sherry	Prof	Tenured	PhD	Univ of Colorado Health Sci Ctr	Immunology	IDZ
Gragg, Sara	Asst Prof	Tenure Track	PhD MS	Texas Tech	Animal Sciences Food Science	FSB
Hanson, Jennifer	Asst Prof	Tenure Track	PhD MS	Kansas State Univ Univ of Nevada-Reno	Human Nutrition Nutrition	PHN
Heinrich, Katie	Assoc Prof	Tenured	PhD MS	Univ of Missouri, KC	Health Psychology Ed Research Psych	PHPA
Hsu, Wei Wen	Assoc Prof	Tenured	PhD	Michigan State Univ	Statistics Biostatistics	OT Core Instructor
Kastner, Justin	Assoc Prof	Tenured	PhD PgDip	Univ of Guelph Univ of Edinburgh	Food Science Public Health	FSB
KuKanich, Kate	Assoc Prof	Tenured	DVM PhD	Univ of Minnesota Univ of Tennessee	Vet Medicine Infectious Disease	IDZ
Larson, Robert	Prof	Tenured	PhD DVM	Kansas State Univ Kansas State Univ	Repro physiology Vet Med	IDZ Core Instructor
Londono- Renteria, Berlin	Asst Prof	Tenure Track	PhD MS	Tulane Univ Univ de Antioquia	Tropical Medicine Parasitology/Micro	IDZ
Mailey, Emily	Assoc Prof	Tenured	PhD MS	Univ of Illinois Ball State Univ	Kinesiology Sport & Exercise Psy	PHPA
McElroy, Mary	Prof	Tenured	PhD MS	Univ Of Maryland Ohio State University	Kinesiology Kinesiology	PHPA
Moore, Susan	Clinical Asst Prof	Non-TT	PhD MS	Kansas State Univ	Pathobiology	IDZ

Name*	Title/ Rank	Tenure Status or Class^	Grad Degrees Earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Current instruct area(s) ⁺
Mulcahy, Ellyn	Assoc Prof	Tenured	PhD MPH	Creighton Univ Univ of Kansas	Microbiology Public Health	IDZ
Nagaraja, T.G.	Prof	Tenured	PhD MVSc	Kansas State Univ Univ of Ag Sciences	Microbiology Vet Microbiology	IDZ
Nguyen, Thu Annelise	Assoc Prof	Tenured	PhD MBA	Texas A&M Univ Kansas State Univ	Toxicology Management	IDZ
Nutsch, Abbey	Asst Prof	Non- tenure	PhD	Kansas State Univ	Food Science/ Food Microbiology	FSB
Nwadike, Londa	Asst Prof	Non Tenure Track	PhD MS	Univ of Iowa Kansas State Univ	PH-Occ Health & Safety Meat Safety	FSB
Rosenkranz, Ric	Assoc Prof	Tenured	PhD MA	Kansas State Univ Univ of North Dakota	Human Nutrition Kinesiology	PHN
Rosenkranz Sara	Asst Prof	Tenure Track	PhD MS	Kansas State Univ Kansas State Univ	Human Nutrition Kinesiology	PHN
Sanderson, Michael W.	Prof	Tenured	DVM MS	Colorado State Wash State	Vet Med Epidemiology	IDZ
Trinetta, Valentina	Asst Prof	Tenure Track	PhD MS	Univ of Milan, Italy Univ of Naples, Italy	Food Sci & Tech Genetic Biotech	FSB
Vanlandingham, Dana	Assoc Prof	Tenured	PhD MS	Liverpool Sch Trop Med Colorado State	Tropical Medicine Microbiology	IDZ
Wang, George	Prof	Tenured	PhD	Nanjing Ag Univ	Animal Physiology & Biochemistry	PHN

- 2) Provide summary data on the qualifications of any other faculty with significant involvement in the program's public health instruction in the format of Template E1-2. Programs define "significant" in their own contexts but, at a minimum, include any individuals who regularly provide instruction or supervision for required courses and other experiences listed in the criterion on Curriculum. Reporting on individuals who supervise individual students' practice experience (preceptors, etc.) is not required. The identification of instructional areas must correspond to the data presented in Template C2-1.

Table 22. Template E1-2. Non-Primary Instructional Faculty Regularly Involved in Instruction.

Name*	Acad Rank^	Title and Current Emp	FTE or % Time Alloc	Grad Degrees Earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Current inst area(s) ⁺
Chengappa, M.M.	Prof	Tenured	.40	PhD MS	Michigan State Michigan State	Microbiology Microbiology	IDZ
Haub, Mark D.	Prof	Tenured	.20	PhD MS	Univ of Kansas	Exercise Physiology Exercise Science	PHN
Muturi, Nancy	Prof	Tenured	.42	PhD MS MA	Univ of Iowa Univ of Nairobi	Mass Comm Sociology	OT
Renter, David	Assoc Prof	Tenured	.29	PhD DVM	Kansas State Univ Kansas State Univ	Epidemiology Vet Med	IDZ

Table 23. Template E1-2. Non-Primary Instructional Faculty Regularly Involved in Research.

Name*	Acad Rank^	Title and Current Emp	FTE or % Time Alloc	Grad Degrees Earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Current inst area(s)⁺
Cohnstaedt, Lee W.	Research Entom	With USDA	1.0	PhD MPhil	Yale Univ Yale Univ	Epidemiology & Public Health	IDZ
Davis, A. Sally	Asst Prof	Tenure Track	.04	PhD DVM	North Carolina State North Carolina State	Biomedical Sci Vet Med	IDZ
Dritz, Steve	Prof	Tenured	.08	PhD DVM	Kansas State Univ Univ of Minnesota	Swine Production Vet Med	IDZ
Doll, Gayle	Assoc Prof	Tenured	.38	PhD MS	Kansas State Univ	Life Span Human Dev – Aging	OT
Ganta, Roman R.	Prof	Tenured	0	PhD MS	All India Institute Andhra Univ	Biochemistry	IDZ
Heier Stamm, Jessica	Asst Prof	Tenure Track	.27	PhD	Georgia Inst of Tech	Industrial & Sys Engineering	OT
Jaberi-Douraki, Majid	Asst Prof	Tenure Track	0	PhD MS	Univ of Laval Amirkabir Univ	Mathematical Biology	OT
Johannes, Elaine	Assoc Prof	Tenured	.25	PhD MS	Kansas State Univ	Life Span Develop Adult & Comm Counseling	OT
Kidd, Tanda	Assoc Prof	Tenured	.90	PhD MS	Kansas State Univ	Human Nutrition	PHN
Lin, Zhoumeng	Asst Prof	Tenure Track	.70	PhD	Univ of Georgia	Toxicology	IDZ
Lindshield, Brian	Assoc Prof	Tenured	0	PhD	Univ of Illinois	Nutritional Sciences	PHN
Lowery, Ellen	Prof of Prac	Non Ten Track	.5	PhD DVM	Kansas State Univ	Comparative Path Vet Med	IDZ
Montelone, Beth A.	Prof	Sr Assoc VP for Research	0	PhD	Univ of Rochester	Biology	IDZ
Mosier, Derek A.	Prof	Tenured	0	PhD DVM	Oklahoma State Kansas State Univ	Pathobiology Vet Medicine	IDZ
Nayduch, Dana	Res Molecular Biologists	With USDA	1.0	PhD	Clemson Univ	Zoology	IDZ
Phebus, Randall K.	Prof	Tenured	0	PhD MS	Univ of Tennessee	Food Sci & Technology	FSB
Pohlman, Lisa	Assoc Prof	Tenured	.125	DVM MS	Univ of Guelph Auburn Univ	Vet Medicine Clinical Pathology	IDZ
Procter, Sandra	Asst Prof	Non-Ten Track	1.00	PhD MS	Kansas State Univ	Human Nutrition Dietetics	PHN
Raghavan, Ram	Res Asst Prof	Non-Ten Track	.16	PhD MS	Kansas State Univ	Spatial Epidemiology	IDZ
Reif, Kathryn	Asst Prof	Tenure Track	.60	PhD MSPH	Louisiana State Tulane Univ	Vet Med Tropical Med	IDZ

Name*	Acad Rank^	Title and Current Emp	FTE or % Time Alloc	Grad Degrees Earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Current inst area(s)+
Renberg, Walter	Prof	Tenured	.01	DVM MS	Oklahoma State VA Poly Tech	Vet Med	IDZ
Syme, Maggie	Asst Prof	Tenure Track	.50	PhD MPH	Univ of Kansas San Diego State	Counseling Psychology Epidemiology	OT
Volkova, Victoriya	Asst Prof	Tenure Track	.40	PhD DVM	Mississippi State Univ Kharkov State	Vet Med Vet Med	IDZ
Wiles, Bradford	Asst Prof	Tenure Track	0	PhD MS	Virginia Poly Tech Inst & State Univ	Human Development	OT
Yelland, Erin	Asst Prof	Tenure Track	.27	PhD	Univ of Kentucky	Human Dev & Family Studies	OT
Zurek, Ludek	Prof	Tenured	0	PhD MS	Univ of Alberta Mendel Ag Univ	Microbiology	IDZ

3) Include CVs for all individuals listed in the templates above. (See ERF “E1-3.”)

4) If applicable, provide a narrative explanation that supplements reviewers’ understanding of data in the templates.

The data were self-reported by MPH interdisciplinary faculty in the 2018 data call. See ERF “C2” for the template sent to each faculty member. The template asked for updated information concerning their public health teaching, research, service, IRB numbers, contract breakdown, courses they teach, membership on university committees, publications, and career advising. Table E1-1 lists the primary faculty including primary faculty for each emphasis area and faculty teaching the core MPH courses. Table E1-2 lists the non-primary instructional faculty including faculty that serve on student committees, faculty who teach approved elective courses, and KSRE specialist faculty.

5) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: MPH primary instructional faculty demonstrate tremendous breadth and depth of public health and emphasis area expertise, providing a thorough and unique set of opportunities for student preparation, and faculty collaboration and networking. The Primary Instructional Faculty in the K-State MPH program are trained in a large variety of disciplines including food safety, veterinary medicine, public health, biochemistry, toxicology, human nutrition, physical activity, epidemiology, kinesiology, sociology, microbiology, animal sciences, pathology, exercise physiology, exercise psychology, communication, and biostatistics. This totality of experience and expertise ensures that Primary Instructional Faculty are aligned with the emphasis areas that are offered. Each emphasis area has sufficient primary instructional faculty to effectively teach and supervise MPH students in areas for which they are trained.

Weaknesses: There are no weaknesses in this area.

Plans for improvement: The program director will continue to work through the governance structure, under the MPH Program Agreement of Support, to meet the needs of faculty and students in the program.

E2. Integration of Faculty with Practice Experience

To assure a broad public health perspective, the program employs faculty who have professional experience in settings outside of academia and have demonstrated competence in public health

practice. Programs encourage faculty to maintain ongoing practice links with public health agencies, especially at state and local levels.

To assure the relevance of curricula and individual learning experiences to current and future practice needs and opportunities, programs regularly involve public health practitioners and other individuals involved in public health work through arrangements that may include adjunct and part-time faculty appointments, guest lectures, involvement in committee work, mentoring students, etc.

- 1) Describe the manner in which the public health faculty complement integrates perspectives from the field of practice, including information on appointment tracks for practitioners, if applicable. Faculty with significant practice experience outside of that which is typically associated with an academic career should also be identified.

As a program, the MPH program does not have any specific appointments for faculty, for instructional, research or practitioners tracks. However, program faculty integrate perspectives from the field of practice regularly and efficiently through interaction with our public health practice peers. Faculty members regularly invite public health practitioners to deliver guest lectures. MPH 802 and MPH 720, two courses that all MPH students are required to take, have guest lectures each semester from public health practitioners including local health department staff, and state health department staff. The program director and other MPH faculty are members of the Kansas Public Health Association (KPHA) and regularly attend KPHA meetings to interact and learn from their peers in practice. KPHA is a professional association for Kansas public health practitioners, professionals, and advocates. As a voice for public health, KPHA provides a forum for individuals and organizations to work collectively to assure conditions in which Kansans' lives will be healthy. KPHA is the oldest and largest public health organization in Kansas. MPH faculty also attend the Kansas Governors' Public Health meeting to interact with their practice peers and maintain currency in their field. This allows the MPH faculty to integrate this knowledge back into their scholarship and instruction.

The program faculty includes many members with significant practice experience outside of that, which is typically, associated with an academic career, including Extension specialists, Clinical practitioners in Veterinary Medicine, and licensed Nursing/Dietetics. The program faculty is strengthened in its public health practice by several Kansas Extension specialists including; Dr. Sandra Procter, Dr. Elaine Johannes, Dr. Erin Yelland, Dr. Tanda Kidd, and Dr. Bradford Wiles. Dr. Kate KuKanich is a practicing board-certified small animal veterinary internist, with a focus on infectious and zoonotic disease, and active in one health and public health research and practice in the State of Kansas. Dr. Jennifer Hanson is a licensed Dietitian and is active in teaching, research and service in her areas of expertise.

The program integrates public health practices in courses through guest lectures given by public health practitioners and other individuals involved in public health work. A list of guest lectures provided by staff members of local and state public health agencies is provided in the ERF "E2-1". Public health practitioners also serve as preceptors and site/agency mentors for MPH students engaged in the APE and ILE.

- 2) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: MPH faculty include a wide array and depth of public health and emphasis area expertise, providing a thorough and unique set of opportunities for student preparation, and faculty collaboration and networking. In this manner, public health faculty have the ability to integrate diverse perspectives from the field of practice

Weaknesses: MPH faculty are aligned directly with specific departments and colleges, and therefore the program itself has no direct methods to require hiring of public health practitioners or faculty with significant experience in public health practice. This is a challenge, but not an issue that negatively affects interactions or impacts the program.

Plans for improvement. The program director will continue to work with faculty and support attendance at practitioner conferences to ensure that perspectives from the field of practice are integrated into

courses and student interactions. The program director will continue to seek input from public health practitioners to continue to improve and update coursework, program requirements including the APE and ILE.

E3. Faculty Instructional Effectiveness

The program ensures that systems, policies and procedures are in place to document that all faculty (full-time and part-time) are current in their areas of instructional responsibility and in pedagogical methods.

The program establishes and consistently applies procedures for evaluating faculty competence and performance in instruction.

The program supports professional development and advancement in instructional effectiveness.

- 1) Describe the means through which the program ensures that faculty are informed and maintain currency in their areas of instructional responsibility. The description must address both primary instructional and non-primary instructional faculty and should provide examples as relevant.

Currency in the field for faculty is a requirement of the MPH faculty for their areas of instructional responsibility. MPH faculty attend state public health meetings annually. The MPH Program supports the financial cost of the annual membership for all MPH faculty to allow faculty to attend KPHA, the state public health meeting, and be informed regularly through KPHA of statewide public health. In addition, faculty attend conferences in their own areas of expertise to maintain currency in their field of research and instructional responsibilities.

Faculty also are responsible for maintaining currency in their field for their own licensures and memberships where appropriate through continuing education. In the table below are listed specific examples of faculty members maintaining currency in their field.

Table 24. Section E3-1. Examples of Memberships and Licensures of Faculty to Facilitate Maintaining Currency in their Respective Fields.

Faculty Member	Primary or Non-primary inst	Example
Besenyi, Gina	Primary	Member, Delta Omega Honorary Society for Public Health; Member, American Public Health Association
Cernicchiaro, Natalia	Primary	Association for Veterinary Epidemiology and Preventive Medicine (AVEPM)
Chengappa, M.M.	Non-Primary	Diplomate, American College of Veterinary Microbiologist
Davis, A. Sally	Non-Primary	American Society of Investigative Pathology The Histochemical Society
Fleming, Sherry	Primary	American Association of Immunologists; Clinical Society for Immunology
Hanson, Jennifer	Primary	Dietetic Licensure (LD-2004), Dietetic Registration, Board Certified Specialist in Sports Dietetics (CSSD-2013)
Heier-Stamm, Jessica	Non-Primary	Institute for Operations Research and Management Sciences
KuKanich, Kate	Primary	International Society for Companion Animal Infectious Diseases
Larson, Robert	Non-Primary	Diplomate, American College of Veterinary Preventive Medicine, Epidemiology Specialty
Mailey, Emily	Primary	Society of Behavioral Medicine; American Heart Association
Moore, Susan	Non-Primary	High Complexity Laboratory Director (HCLD) and Diagnostic Immunology certification (ABB)

Faculty Member	Primary or Non-primary inst	Example
Mulcahy, Ellyn	Director, Non-Primary	KPHA (2016, 2017, 2018); APHA (2017, 2018): Kansas Governors' Public Health meeting (2017)
Nguyen, Annelise	Primary	Society of Toxicology; American Association for Cancer Research
Nwadike, Londa	Non-Primary	Delta Omega Honorary Society in Public Health; Institute of Food Technologists
Procter, Sandra	Non-Primary	Kansas Breastfeeding Coalition; Kansas Food Security Roundtable
Rosenkranz, Ric	Primary	Member & Fellow: American College of Sports Medicine; ACSM Central States Chapter
Rosenkranz, Sara	Primary	International Society of Behavioral Nutrition and Physical Activity as of Fall 2017
Sanderson, Michael	Primary	Diplomate, American College of Veterinary Preventive Medicine, Epidemiology Specialty
Syme, Maggie	Non-Primary	Gerontological Society of America; American Psychological Association
Vanlandingham, Dana	Primary	Kansas Public Health Association; American Mosquito Control Association
Yelland, Erin	Non-Primary	National Council on Family Relations; Immunize Kansas Coalition

2) Describe the program's procedures for evaluating faculty instructional effectiveness. Include a description of the processes used for student course evaluations and peer evaluations, if applicable.

Each department and college assesses their faculty, using their specific policies and procedures for annual evaluation and for promotion and tenure. Each faculty member meets annually with their department head to establish professional goals and objectives and to discuss their relative importance within the context of the department's goals. It is expected that their participation in the MPH program and goals is part of the discussion.

The MPH Program director has the opportunity to provide input to the assessment process, based upon university guidelines and on the MPH Program Agreement of Support. The MPH program does not have any specific procedures for evaluating faculty instructional effectiveness that are tied to faculty advancement. (Please see Section E3-4). Tenure and progress toward tenure is handled at the department and college level along with any merit and/or salary adjustments.

The MPH program evaluates the courses offered as part of the MPH program in surveys distributed to MPH students. In the Exit Survey that students complete before they graduate, students are asked about the courses they have taken. Three questions regarding student satisfaction with courses with a 4-point scaled answer are asked to collect data on student satisfaction with required core courses, required emphasis area courses, and elective courses (see ERF "E3-2"). Students are also asked to provide qualitative feedback on MPH courses and curriculum as part of the Exit Survey.

In addition, each faculty member is evaluated in their courses by student evaluations, which are part of the faculty's academic department requirement. Student evaluations of courses allow the gathering of data regarding teaching effectiveness, and allow departments and deans are able to make informed and objective decisions about promotion and tenure. The most important benefit of student evaluations is the feedback for instructors, so they can improve their courses and teaching practices. Student evaluations of courses are carried out using the Teval system. The Teval paper and online evaluation are unique to Kansas State University and are intended to provide an indicator of student's impressions of teaching effectiveness in a given class.

Peer review of teaching or peer evaluations are not required at the programmatic or departmental level. These are organized at the university level through the Teaching and Learning Center and several MPH

faculty participate in this program http://www.k-state.edu/tlc/programs/prtp/participant_list.html. In the table below are listed examples of MPH faculty members that have participated in the peer review of teaching program.

Table 25. Section E2-2. MPH Faculty Participation in the Peer Review of Teaching Program.

Faculty	Primary instructional or Non-primary instructional
Johannes, Elaine	Non-primary instructional
Lindshield, Brian	Non-primary instructional
Mailey, Emily	Primary instructional
Muturi, Nancy	Non-primary instructional

- 3) Describe available university and programmatic support for continuous improvement in faculty’s instructional roles. Provide three to five examples of program involvement in or use of these resources. The description must address both primary instructional faculty and non-primary instructional faculty.**

University wide support for continuous improvement in faculty’s instructional roles occurs at the college and departmental level. The program also supports these efforts. At the university level, the Teaching and Learning Center encourages, supports and promotes excellence in teaching and learning throughout the university. The center supports advancements in research-based scholarship of teaching and learning (SoTL) and providing professional development for all members of the campuses teaching community. The center achieves its mission through the work of several programs including seminars, peer review, and a new faculty institute <http://www.k-state.edu/tlc/>.

At the college level, each college and department supports teaching through seminar series, training, instructional development and support of new faculty. In the table below are listed examples of college and department support structures for primary instructional faculty and non-primary instructional faculty members to improve instructional effectiveness.

Table 26. Section E3-3. Support for Improvement in Faculty Instruction Effectiveness.

Faculty	University, College or Department Level	Example
Davis, A. Sally	University	New Faculty Institute
Mulcahy, Ellyn	Department	Participation in Clifton Strengths testing to enhance teaching in role of course coordinator.
Mulcahy, Ellyn	College	Teaching & Learning Online Seminar Series
Mulcahy, Ellyn	University	New Faculty Institute
Nguyen, Annelise	University	Faculty Mentoring Committee
Reif, Kathryn	University	New Faculty Institute

- 4) Describe the role of evaluations of instructional effectiveness in decisions about faculty advancement.**

Faculty that have graduate faculty status in their home departments, “apply to” the MPH Program via an application to become a member of the MPH interdisciplinary faculty. (See ERF C2 for the application.) The applicants are reviewed and voted on by the FAC; and if acceptable to the committee, they are added to the list of faculty approved to work with MPH students. The MPH Program recommends to students, faculty from the list that would be appropriate to serve as their major professors and/or committee members.

As a program, the MPH program does not have any specific procedures or decision making abilities in faculty advancement based on faculty instructional effectiveness. Each faculty member is evaluated in their courses by student evaluations (Tevals), which are included and reviewed by Department chairs for the process of annual evaluations, and by department Tenure and Promotion committees for the university process of tenure and promotion.

- 5) Select at least three indicators, with one from each of the listed categories that are meaningful to the program and relate to instructional quality. Describe the program's approach and progress over the last three years for each of the chosen indicators. In addition to at least three from the lists that follow, the program may add indicators that are significant to its own mission and context.**

The three indicators that are meaningful to the program and relates to instructional quality are:

1. Faculty currency: peer/internal review of syllabi/curricula for currency of readings, topics, methods. The program's approach over the last three years for peer/internal review of syllabi/curricula has included regular review by the FAC and the curriculum committee, and is as follows:
 1. The MPH course and curriculum committee conducts internal review of all syllabi of courses approved for MPH students.
 2. Internal review occurs cyclically with each emphasis area reviewing the content and currency of the emphasis area required courses and elective courses in an annual rotation.
 3. The remaining three emphasis area that are not in the current year of the cycle rotation also review their content at that time to make changes to the list of electives that are approved for MPH students in that emphasis area.
 4. The curriculum committee submits a report of the curriculum review to the program director, and this is discussed at the following FAC meeting.
 5. All changes are voted upon by the FAC before moving forward to the process of the university approval system through Curriculog. The curriculum reports are available in the ERF "A1-1B."

Where appropriate for the development of new courses, a faculty member may submit the syllabus of a course to the program director or member of the FAC for approval to be added to the list of MPH elective courses. The syllabus for this course is then distributed to all members of the FAC and discussed at the following FAC meeting. If this course is found to be suitable for MPH students, the FAC votes to add this course to the listing for the next cycle of course and curriculum changes. The program's progress over the last three years for peer/internal review of syllabi/curricula has been satisfactory and has allowed for continual updating of courses and curricula.

2. Faculty instructional technique: student satisfaction with instructional quality. The program's approach over the last three years for tracking student satisfaction with instructional quality has been to survey and track student satisfaction. Student satisfaction with instructional quality is assessed in surveys distributed to MPH students. In the Exit Survey that students complete before they graduate, students are asked questions about the courses they have taken:
 1. Students are asked whether they are satisfied with the degree of intellectual challenge in the MPH program.
 2. Students are asked whether they are satisfied with the academic standards of the faculty in the MPH program.
 3. Students are asked whether the instruction in the MPH program keeps pace with recent developments in the public health field.

The program's progress over the last three years for student satisfaction with instructional quality has been satisfactory, with these survey results indicating that students rate the instructional quality as satisfactory or very satisfactory. The survey results are in the ERF "A3-1."

3. School- or program-level outcomes: courses that integrate technology in innovative ways to enhance learning. The program's approach over the last three years to assess the utilization integrate

technology in courses has been for faculty to self-report innovative methods of integration. Below are examples currently used by the primary instructional faculty in the MPH program:

- MindMapping
- Canvas for course platforms and classroom lectures
- Students conduct interviews using Zoom
- PubMed and RefWorks
- Nutrition analysis software
- Kahoot for quizzes and test review
- Online games for budgeting
- Infographics with online software
- Online statistical calculators to illustrate concepts
- TopHat; Community Park Audit Tool app
- Google polls

The program's progress over the last three years to track faculty members that integrate technology into their courses innovative ways to enhance learning has been satisfactory.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: MPH faculty value and strive for instructional quality and strive to improve their teaching and maintain pace with new instructional methods.

Weaknesses: There are no weaknesses in this area.

Plans for improvement: The program director will continue to work with faculty and OEIE, use feedback from various surveys, direct faculty and student input, external colleagues, and student assessments to evaluate programmatic success toward instructional effectiveness.

E4. Faculty Scholarship

The program has policies and practices in place to support faculty involvement in scholarly activities. As many faculty as possible are involved in research and scholarly activity in some form, whether funded or unfunded. Ongoing participation in research and scholarly activity ensures that faculty are relevant and current in their field of expertise, that their work is peer reviewed and that they are content experts.

The types and extent of faculty research align with university and program missions and relate to the types of degrees offered.

Faculty integrate research and scholarship with their instructional activities. Research allows faculty to bring real-world examples into the classroom to update and inspire teaching and provides opportunities for students to engage in research activities, if desired or appropriate for the degree program.

1) Describe the program's definition of and expectations regarding faculty research and scholarly activity.

The program is enriched by faculty research and scholarly activity. As an interdisciplinary program, the MPH program does not have a separate support structure in terms of financial support for faculty research and scholarly activity. However, the program's faculty and student research activities are linked with that of the supporting colleges and departments. The program expectation is of excellence and commitment to research and scholarship in the specific emphasis areas of public health of the program.

2) Describe available university and program support for research and scholarly activities.

Interdisciplinary public health graduate faculty, lead multi and interdisciplinary efforts across four academic colleges and 12 departments to study public health challenges. Outstanding graduate faculty are committed to advancing scholarship in the specific domains of public health including nutrition, physical activity, infectious diseases/zoonoses, and food safety/biosecurity. MPH students enjoy being co-mentored by multiple faculty from these different disciplines.

For example, in the area of food safety/biosecurity, faculty and students from 4 academic colleges (K-State's Colleges of Agriculture, Arts and Sciences, Human Ecology, and Veterinary Medicine) and 12 departments (K-State's Departments of Agricultural Economics, Animal Sciences and Industry, Communications, Entomology, Grain Science and Industry, Biochemistry, Geography, Industrial and Manufacturing Systems Engineering, Journalism and Mass Communications, Food Nutrition Dietetics and Health, Hospitality Managements, and Diagnostic Medicine/Pathobiology) study the safety of the food supply. These research activities involve a number of funding relationships with the U.S. Departments of Agriculture (USDA), Homeland Security, and Defense. In a second example of critical public health research, faculty and public health students in nutrition and kinesiology have examined childhood obesity with a particular focus on media, environmental and psychosocial influences. These activities have been funded by agencies such as the USDA and National Institutes for Health.

While multiple colleges and departments are involved, Kansas State University's offices of Sponsored Programs (<http://www.k-state.edu/finsvcs/sponsoredprograms/>) and Pre-Award Services (<http://www.k-state.edu/research/preaward/>) provide central support in the administration of all research activities involving extramurally sponsored programs. In addition to providing assistance for funding proposals, both offices counsel faculty on such important issues as intellectual property, research compliance, and other policies and procedures that ensure the ongoing operation of a major research university.

3) Describe and provide three to five examples of faculty research activities and how faculty integrate research and scholarly activities and experience into their instruction of students.

Faculty involved in Kansas State University's public health program routinely benefit from partnerships with community-based research organizations, public health oriented government agencies, and other strategic partners. Faculty integrate research activities and experience into instruction and coursework to improve the quality and content of their courses, and to expose students to research methodology. As an example of integration, faculty utilize real-life scenarios and datasets, obtained from their research programs in epidemiology courses to illustrate the application of statistical and epidemiological concepts and tools, such as statistical validation of diagnostic tests used in surveillance programs. Recent examples of faculty research projects and interests in the last three years include, but are not limited to:

1. Characterization of biomarkers for Malaria in Central and South America.
2. Rabies serology and its role in Rabies control and prevention.
3. Basic Research in Diet and Cancer.
4. Spatio-temporal evaluations of infectious diseases.
5. Obesity Prevention, settings-based health programs and physical activity.
6. Validation and applicability of diagnostic tests for detection and quantification of Shiga toxin-producing *E. coli* in different animal matrices.

For a complete list of faculty research activities, current curriculum vitae are in the ERF "E1-3." In addition, links to faculty research and scholarship activity are found on the MPH program website.

4) Describe and provide three to five examples of student opportunities for involvement in faculty research and scholarly activities.

Students involved in Kansas State University's public health program routinely benefit from partnerships with community-based research organizations, public health oriented government agencies, and other strategic partners. MPH students are afforded opportunities by the partnering colleges and departments

to engage in research projects. The students are informed of opportunities through the faculty, and the degree of involvement ranges from part-time (hourly) employment to full-time graduate research assistantships in public health. Examples of student involvement in faculty research projects in the last three years include, but are not limited to:

1. Improve accessibility to veterinary care for disabled community members.
2. Engaging Public Health Practice and Academia: a model for public health partnership.
3. Effects of an intervention to reduce sitting at work on energy, fatigue, and mood among sedentary female employees.
4. Changes in intake of CVD-related food components associated with an intervention to reduce sedentary time.
5. Dietary Intake and Cardiovascular Risk Factors in Special Olympics Athletes from 2015 World Games.
6. Community service learning project on obesity reduction among minority children, 6th-8th grade.
7. Prevalence and concentration of Shiga toxin-producing *E. coli* top 7 (O157 and non-O157) serogroups in feces of cull dairy cattle processed in commercial slaughter plants.

5) Describe the role of research and scholarly activity in decisions about faculty advancement.

The academic departmental home of each faculty member has specific documents related to the role of research and scholarly activity in promotion and tenure, based on the university requirements. As an interdisciplinary graduate program, the MPH program does not have a separate set of standards; however, department heads and deans, as a part of the program governance, acknowledge the importance of such public health-related research and scholarly activity.

6) Select at least three of the measures that are meaningful to the program and demonstrate its success in research and scholarly activities. Provide a target for each measure and data from the last three years in the format of Template E4-1. In addition to at least three from the list that follows, the program may add measures that are significant to its own mission and context.

The measures that are meaningful to the program and demonstrate its success in research and scholarly activity related to faculty (total MPH faculty) participating in research activities are:

1. Number of faculty-initiated IRB applications
2. Number of articles published in peer-reviewed journals
3. Presentations at professional meetings

Table 27. Template E4-1. Outcome Measures for Faculty Research and Scholarly Activity.

Outcome Measure	Target	Primary Instructional Faculty			Non-primary Instructional Faculty			3 Year Average
		2016	2017	2018*	2016	2017	2018*	
Number of faculty-initiated IRB applications	30	24	22	16	15	15	6	33
Number of articles published in peer-reviewed journals	100	116	107	48	84	73	47	158
Presentations at professional meetings	100	113	133	65	89	72	17	163

*Still in progress.

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The range of public health research on this campus, related to the program's four areas of emphasis, is both broad and varied in topic and focus. The opportunities to collaborate across departmental and collegiate levels are enhanced by the interdisciplinary nature of the program.

Weaknesses: Since the research is closely aligned with the department/college infrastructure and within traditional models of faculty-led research, MPH students generally engage in research projects when they perform a thesis.

Plan for improvement: Continue using the governance structure to improve communication and collaboration opportunities and to encourage all aspects of public health research. Continue to offer MPH students interested in research opportunities to pursue research in their area of emphasis, whether or not they are conducting thesis research.

E5. Faculty Extramural Service

The program defines expectations regarding faculty extramural service activity. Participation in internal university committees is not within the definition of this section. Service as described here refers to contributions of professional expertise to the community, including professional practice. It is an explicit activity undertaken for the benefit of the greater society, over and beyond what is accomplished through instruction and research.

As many faculty as possible are actively engaged with the community through communication, collaboration, consultation, provision of technical assistance and other means of sharing the program's professional knowledge and skills. While these activities may generate revenue, the value of faculty service is not measured in financial terms.

1) Describe the program's definition and expectations regarding faculty extramural service activity. Explain how these relate/compare to university definitions and expectations.

As the nation's oldest land-grant institution of higher learning, established under the Morrill Act, Kansas State University prides itself in supporting service as one of its three main tenants. All colleges and departments encourage faculty to participate in programs which serve groups in communities in Kansas and elsewhere. Through the governance structure, established with the MPH Program Agreement of Support, the program is able to encourage public health-related service as part of each partnering college and department, and its service may be utilized as part of faculty promotion, tenure and evaluation process. The program has no formal contracts or agreements with external agencies for service.

The academic departmental home of each faculty member has specific documents related to promotion and tenure, based on the university requirements. As part of a land-grant institution, emphasis is placed on all service activities, depending on the individual faculty member's appointment. As an interdisciplinary graduate program, the MPH program does not have a separate set of standards; however, department heads and deans, as a part of the program governance, acknowledge the importance of such public health-related activities

2) Describe available university and program support for extramural service activities

As an interdisciplinary graduate program, the MPH program does not have a separate support structure in terms of financial support for extramural service activities. However, MPH faculty regularly engage in extramural service activities and include students in their extramural service activities. See parts 3) and 4) below for examples.

3) Describe and provide three to five examples of faculty extramural service activities and how faculty integrate service experiences into their instruction of students.

Faculty involved in Kansas State University's public health program are active in extramural service. Faculty integrate extramural service activities and experience into instruction and coursework to improve the quality and content of their courses, and to bring real life experiences into the classroom. As an example of integration, faculty discuss development of programming (such as food safety programs), educational interventions (such as breast cancer and nutrition), and advocacy activity (such as Tobacco free initiatives), experienced in extramural service activities to illustrate the how service impacts both the community members benefiting from and the individuals engaged in service. Recent examples of faculty extramural service activities in the last three years include, but are not limited to:

1. K-12 Engagement
2. Kansas 2 Kenya nutrition education
3. Smoke-Free Education Committee
4. Food safety programming for local Extension agents
5. Breast Cancer Awareness education

4) Describe and provide three to five examples of student opportunities for involvement in faculty extramural service.

Student involvement in faculty extramural service is key to both engage students in their community and to also recognize the social capital and experiences that students bring with them into the program from their own lives. Many students are drawn to public health to become leaders for change and problem-solvers for real-world authentic issues. Therefore, it is important to offer opportunities for students to engage with their communities through service activities. As examples of opportunities for involvement in faculty extramural service, faculty include students in planning, educational development and staffing for community events (such as Okt-FLU-ber Fest, Bug-a-palooza, Everybody Counts), community-wide coalitions and projects dedicated to equity (Flint Hills Wellness Coalition, Improving Health Equity in Riley County), and fostering multidisciplinary skills for future public health leaders (such as Frontiers Field Trips). Recent examples of student involvement faculty extramural service activities in the last three years include, but are not limited to:

1. Okt-FLU-ber Fest (Annual community event to provide vaccination and education)
2. Bug-a-palooza (Annual community event to provide education on vector-borne diseases)
3. Improving Health Equity in Riley County (Community Project)
4. Flint Hills Wellness Coalition (Community Coalition)
5. Frontiers Field Trips (Faculty led activity)
6. Everybody Counts (Annual community event to provide back-to-school supplies and resources, including care for companion animals)

5) Select at least three of the indicators that are meaningful to the program and relate to service. Describe the program's approach and progress over the last three years for each of the chosen indicators. In addition to at least three from the list that follows, the program may add indicators that are significant to its own mission and context.

Engaging students and faculty in service and partnership with community members is vital to ensure the public health workforce is adaptive to changing practice needs and is grounded in the immediacy of community needs. Our approach is to support our community partners in service and uniquely provide our students with challenges that can be tackled by service-minded teams of student, faculty and community. Therefore, we assert that service for all program members is central to building public health into solutions and all problem-solving conversations. The following indicators that are meaningful to the program and relate to MPH students and all MPH faculty participating in service activities are:

1. Number of faculty-student service collaborations
2. Number of community-based service projects
3. Public/private or cross-sector partnerships for engagement and service

The table below gives examples of faculty involvement in service related activities for the last three years. Specific examples from each category are given after the table.

Table 28. Section E5-5. Faculty Service Activity.

Indicator	2016	2017	2018
Number of faculty-student service collaborations	34	45	38
Number of community-based service projects	16	17	19
Public/private or cross-sector partnerships for engagement and service	19	16	24

Examples of faculty-student service collaborations include:

1. Kansas City One Health Day
2. One Health Newsletter (OHNL)
3. Student outbreak response team (SORT)
4. Promoting a Healthy Community in Saline County
5. HPV prevention among young adults
6. Social media and mental health
7. Examining factors associated with flu vaccination among older adults

Examples of community-based service projects include:

1. Cats Cupboard Service learning project
2. Flint Hills Breadbasket Service learning project
3. Harvester’s Food Bank Service learning project
4. Manhattan Parks and Recreation Service learning project
5. Towards a Culture of Health education and training for Extension agents
6. Participation in KAWSE STEM, tick and tick-borne disease public awareness presentations
7. Participation in Everybody Counts with the City of Manhattan and other community agencies

Examples of public/private or cross-sector partnership include:

1. Agreements with State and Local public health agencies
2. Partnership with BioKansas
3. Partnership with Kansas City Area Life Sciences Institute
4. HIFT Army study with Command and General Staff College at Fort Leavenworth
5. Adaptive Athletes study with personal trainers and physical therapist
6. Cochran Fellows training to promote public-private partnerships in agricultural and food trades
7. Research support from public entities and private industry for tick-borne disease research

6) Describe the role of service in decisions about faculty advancement.

The academic departmental home of each faculty member has specific documents related to the role of service in promotion and tenure, based on the university requirements. As an interdisciplinary graduate program, the MPH program does not have a separate set of standards; however, department heads and deans, as a part of the program governance, acknowledge the importance of such public health-related service.

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: Extraordinary connection to communities throughout the state, particularly through extension faculty and faculty participating in VDL service.

Weaknesses: All incentives for service must go through the department heads and deans.

Plans for improvement: Continue to use the governance structure, under the MPH Program Agreement of Support, to encourage more service.

F1. Community Involvement in Program Evaluation and Assessment

The program engages constituents, including community stakeholders, alumni, employers and other relevant community partners. Stakeholders may include professionals in sectors other than health (e.g., attorneys, architects, parks and recreation personnel).

Specifically, the program ensures that constituents provide regular feedback on its student outcomes, curriculum and overall planning processes, including the self-study process.

- 1) Describe any formal structures for constituent input (e.g., community advisory board, alumni association, etc.). List members and/or officers as applicable, with their credentials and professional affiliations.

Community involvement and input in program evaluation and assessment is formally received from members of the MPH community advisory board. This advisory board comprises public health stakeholders and the program director, and meets once annually to discuss program practice, and program evaluation and assessment. The members of the MPH community advisory board represent a combination of MPH program alumni, employers of MPH graduates, and MPH program preceptors. In addition, constituents are engaged and their input is received from survey data collected from questionnaires sent to preceptors, alumni and employers.

The members of the MPH community advisory board, their credentials and professional affiliations are listed below in in the table below.

Table 29. Section F1-1. MPH Community Advisory Board.

Committee Member	Academic Credentials	Professional Title	Public Health Institution
Green, Jennifer	PhD, MPH	Administrative Director and Local Health Officer	Riley County Health Department
Lightner, Joseph	PhD, MPH	Health Commission Liaison	City of Kansas City, Missouri Health Department
Orr, Jason	MPH	Analyst	Kansas Health Institute
Raybern, Chelsea	MPH	Senior Epidemiologist	Kansas Department of Health and Environment
Tedford, Shari	RN, BAN	Workforce Development/ Student Intern Coordinator	Johnson County Department of Health and Environment
Tiller, Jason	MS	Director	Saline County Health Department
Von Busch, Tammy	DVM, MPH	Director	Geary County Health Department
Worthington, Amie	MPH	Epidemiologist	Kansas Department of Health and Environment

- 2) Describe how the program engages external constituents in regular assessment of the content and currency of public health curricula and their relevance to current practice and future directions.

The program engages external constituents in regular assessment of the curricular content and currency and the relevance of the program curricula to current practice. This engagement occurs using two major processes:

The MPH community advisory board is comprises public health stakeholders from a variety of public health institutions in the states of Kansas and Missouri. The program director and program assistant meets with the community advisory board once annually to discuss program practice, program evaluation

and assessment, and the program curricula. In addition, the community advisory board also discusses the direction of the program, and potential areas for improvement workforce development for public health graduates. The community advisory board members provided input into the content of courses that is appropriate to their practice, and additionally discussed other skills that are important to be included in the overall program including communication skills. (See ERF "F1-4" for meeting minutes). The community advisory board members also provided input into the incorporation of feedback to be provided to site mentors and used to improve the process and role of the site in the APE. This process will be initiated into the next round of surveys sent to site preceptors and students after completion of their APE.

External constituent input is received from survey data collected from questionnaires sent to preceptors, alumni and employers. Assessment is performed via analysis of survey questionnaire responses sent to preceptors at the completion of students' practice (the APE), and to alumni and employers annually. Employers are asked to report which content areas are important to an MPH program (See ERF "F1-4").

For example, content of public health curricula was discussed in survey questions regarding important topics to be included:

- 61% and 36% of employers reported that Epidemiology was extremely important or very important, respectively as a topic to include in the program curricula.
- 25% and 47% of employers reported that Biostatistics was extremely important or very important, respectively as a topic to include in the program curricula.
- 16% and 64% of employers reported that Environmental Health was extremely important or very important, respectively as a topic to include in the program curricula.
- 38% and 36% of employers reported that Health Services Administration was extremely important or very important, respectively as a topic to include in the program curricula.
- 13% and 61% of employers reported that Social and Behavioral Sciences was extremely important or very important, respectively as a topic to include in the program curricula.

Employers also reported which skills were important for hiring new employees in their organization (See ERF "F1-4" for a list of skills). These survey responses are reviewed by the program director and program assistant and discussed at the FAC meetings to guide the improvement and currency of the program.

3) Describe how the program's external partners contribute to the ongoing operations of the program. At a minimum, this discussion should include community engagement in the following:

a) Development of the vision, mission, values, goals and evaluation measures

The program's external constituents are valuable partners in the ongoing operation and improvement of the program. Development of the vision, mission, values, goals and evaluation measures has been performed with the solicitation of input and incorporation of feedback from external constituents. A draft of the self-study document including the vision, mission, values, goals and evaluation measures was shared with community partners. This draft document was posted on the program website in September 2018 before the self-study was sent to CEPH in October 2018 (see ERF "F1-3"). In addition, an email was sent to all partners including the community advisory board, the Council on the Future of Public Health in Kansas, the Kansas Public Health Systems Group, and Kansas local health departments, which included a link to the draft document, and partners were asked to provide substantive feedback. Feedback was gathered from external partners and was incorporated into the final document.

b) Development of the self-study document

Development of the self-study document was performed with input from external partners. A draft of the document was posted on the program's website before it was submitted to CEPH, and all external partners including alumni, employers and community advisory members were informed of the availability to read and comment on the document as it was being prepared for submission prior to the site visit, and before submission of the final self-study document. All current MPH students, alumni, faculty and

university administrators were also invited to provide feedback using this methodology. Feedback was requested in the form of comments, suggestions via email or telephone. This feedback was incorporated into the final document. In addition, development of the self-study document was performed with the solicitation of specific input and incorporation of feedback from external constituents. The self-study document was discussed at the annual meeting the community advisory board and at meetings of the statewide public health agencies. All feedback was incorporated into the final document.

c) Assessment of changing practice and research needs

Assessment of changing practice and research needs is performed through thoughtful discussion with the MPH program community advisory board at the annual meeting of this group of external constituents. In addition, the MPH director is a member of the Council on the Future of Public Health in Kansas, and the Kansas Public Health Systems Group that meet quarterly to discuss public health and academic needs in Kansas. Assessment of changing practice and research needs is also performed via analysis of survey questionnaire responses sent to preceptors at the completion of students' field experiences, and to alumni and employers annually.

d) Assessment of program graduates' ability to perform competencies in an employment setting

Assessment of program graduates' ability to perform competencies in an employment setting is performed through discussion with the MPH program community advisory board at the annual meeting of this group of external constituents. In addition, the MPH director is a member of the Kansas Public Health Workforce Development Coordinating Council that meets quarterly to discuss public health workforce needs in Kansas with public health partners. Assessment of program graduates' ability to perform competencies in an employment setting is performed via analysis of survey questionnaire responses sent to preceptors at the completion of students' field experiences, and to alumni and employers annually.

4) Provide documentation (eg, minutes, notes, committee reports, etc.) of external contribution in at least two of the areas noted in documentation request 3.

Documentation of external contribution for F1-3, including community advisory board meeting minutes, and employer and Alumni Survey responses, are provided in the ERF "F1-4."

5) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: A combination of survey analysis to collect quantitative and qualitative measures, and a community advisory board are utilized to engage and capture the contribution of important program partners and stakeholders. This allows the program to ensure that students are appropriately trained and achieve skills important to current practice and workforce needs. In addition, the program director meets regularly with public health practitioners and academicians in Kansas to continually receive and provide input regarding graduate career readiness, changing practice needs and other public health professional needs. The MPH Program Office therefore engages and shares the contribution of program partners and stakeholders, and is very responsive to their input and needs.

Weaknesses: To continually improve and adapt to changing public health needs will always be a challenge in a field that is both dynamic and dependent upon outside influences such as state and federal funding and priorities. Finding efficient and effective methods to capture, incorporate and implement change based on external feedback in a timely manner is a challenge in an educational system.

Plans for improvement: Routinely consider and incorporate feedback from external constituents to improve and adapt to changing public health needs. Provide feedback to site mentors and community advisory board from annual surveys to improve the process and role of the site in the APE.

F2. Student Involvement in Community and Professional Service

Community and professional service opportunities, in addition to those used to satisfy Criterion D4, are available to all students. Experiences should help students to gain an understanding of the contexts in which public health work is performed outside of an academic setting and the importance of learning and contributing to professional advancement in the field.

- 1) Describe how students are introduced to service, community engagement and professional development activities and how they are encouraged to participate.**

MPH students are introduced to service, community engagement and professional development activities through regular interaction with the MPH program office, community stakeholders and their graduate faculty committee members. Students are encouraged to participate in service, community engagement and professional development activities through communication with the MPH program office. The MPH program office regularly informs students of upcoming events that students may participate in via email and announcements at semester meetings with students. This includes local, state and regional events that the program is involved with on an annual or semi-annual basis, and other events that are not consistently or regularly scheduled.

Students are supported to attend professional development events such as professional meetings or trainings and can apply for financial support to the MPH program office in addition to travel funding from the K-State Graduate. Students are also supported to attend service and community engagement events as part of the Core Public Health Group semester activities and can apply for financial support to the MPH program office. Service learning and community planning and engagement are also embedded into graduate courses that MPH students are enrolled in, such as KIN 612, Program Planning and Evaluation.

The Student Outbreak Response Team (SORT) is another student organization, whereby, as members, students can participate in community outreach and engagement opportunities and networking opportunities with public health professionals within Riley County. SORT provides students with an opportunity to gain a better understanding of public health practice, outside of the academic setting, in the workplace. As part of SORT, MPH students train and work alongside DVM students to provide surge capacity to the Riley County Health Department during a disease outbreak. SORT application materials and training documents are located in the ERF "F2-1").

Regular activities and events that the program partners with to engage students in service and community partnership include:

1. Students volunteering to organize and participate in Bug-a-palooza, an annual event to educate the Riley County community about insects and vector-borne diseases;
2. Students volunteering to organize and participate in Flu-fest, an annual event to educate the Riley County community about Influenza, and to promote annual childhood and adult vaccinations;
3. Students volunteering to organize and participate in One Health Day, an annual event to educate Kansans about one health.

In addition, students also serve their community at local events that are not regularly scheduled (see Table below). Regular activities and events that the program partners with to engage students in professional development include:

1. Student organization, event attendance and presentation during the annual National Public Health Week, an annual event that educates and promotes public health locally, statewide and nationally.
2. A public health poster presentation to the community and academic audiences held annually during Bug-a-palooza;
3. Student attendance and presentation at the annual meeting of the Kansas Public Health Association (KPHA);

4. A public health and one health poster presentation to the community and academic audiences held annually during International One Health Day as part of the One Health Commission. https://www.onehealthcommission.org/en/events/one_health_day/
5. A graduate student research forum presentation to academic audiences held bi-annually on campus at K-State;
6. Student attendance at the annual meeting of the Kansas Governor's Public Health Conference.

A summary of the regularly scheduled and partnered service, community engagement and professional development activities is in Table 30. A list of specific student examples of to service, community engagement and professional development activities is in Table 31.

Table 30. Section F2-1. Examples of Opportunities for Professional and Community Service for Public Health Students (2016-2018).

Year	Event	Community Service Event	Professional Event
2016, 2017, 2018	KPHA booth for MPH program and/or Poster Session		X
2016, 2017, 2018	Kansas Governor's Public Health Conference		X
2016, 2017, 2018	K-State Graduate Student Research Forum Competition		X
2017, 2018	K-State Open House booth (healthy snacks and public health education)		X
2017, 2018	Bug-a-palooza, partnered with Riley County Health Department	X	
2017, 2018	Flu-fest partnered with Riley County Health Department	X	
2016, 2017, 2018	International One Health Day		X
2017, 2018	NPHW, partnered with Riley County Health Department	X	X
2016, 2017, 2018	Phi Zeta Research Day and Poster Competition		X
2016, 2017, 2018	One Health Day in Olathe		X
2018	Everybody Counts	x	

At the university level, MPH students have access to and are encouraged to attend professional and leadership training activities sponsored by the K-State Graduate Student Council (GSC). The GSC strives to provide informational meetings, workshops, and forums that enhance the professional development of graduate students. The council promotes interdisciplinary activities to enrich graduate students' education beyond their own disciplines. The council also sends out information on various seminars held across campus. K-State graduate students and post-docs who attend at least five professional development events hosted by GSC during the academic year will be recognized with a GSC Professional Development Certificate. <http://www.k-state.edu/grad/students/studentcouncil/leaderopportunities.html> <http://www.k-state.edu/grad/students/studentcouncil/professional-development/>. At the university level, students are encouraged to participate in service through university-wide service learning and leadership. <http://www.k-state.edu/leadership/appliedlearning/>

- 2) Provide examples of professional and community service opportunities in which public health students have participated in the last three years.

Table 31. Section F2-2. Examples of Professional and Community Service Opportunities in which Public Health Students have participated (2016-2018)*.

Student	Year	Event	Community Service Event	Professional Event
Armstrong, Marie	2016,	KPHA booth for MPH program and/or		X
Aronson, Elena	2017	Poster Session		

Student	Year	Event	Community Service Event	Professional Event
Noviyanti				
Aronson, Elena	2017	Kansas Governor's Public Health Conference		X
Noviyanti	2017	Indonesia Focus Conference, University of Kentucky		X
Noviyanti	2018	K-State Graduate Student Poster Competition		X
Noviyanti	2018	Kentucky Conference on Health Communication		X
Futrell, Crystal	2017, 2018	Walk Kansas	X	
Futrell, Crystal	2017, 2018	Extension Master Food Volunteer Training		X
Futrell, Crystal	2017, 2018	K-State Open House booth (healthy snacks)	X	
Futrell, Crystal	2017	CHAMPS and Childhood Hunger Coalition		X
Futrell, Crystal	2017	Kansas Nutrition Council Meeting		X
Futrell, Crystal	2017	Johnson County Take Your Child to Work (healthy snacks and health hand washing class)		X
Futrell, Crystal	2017	BOC Commissioner Mike Brown's Meet & Greet (healthy snacks booth)		X
Futrell, Crystal	2017	Overland Park Farmers Market demonstrations		X
Futrell, Crystal	2017	Summer Reading & Meals Kick-Off		X
Futrell, Crystal	2017, 2018	Deanna Rose June Bug Ball		X
Futrell, Crystal	2017, 2018	4-H Cooking Camp		X
Futrell, Crystal	2017, 2018	Deanna Rose's Georgia Chicken Run (poultry food safety)		X
Futrell, Crystal	2017, 2018	Johnson County Fair (foods judge)		X
Futrell, Crystal	2017	Kansas Food Safety Task Force		X
Futrell, Crystal	2017	DHE Strategic Planning Focus Group		X
Futrell, Crystal	2017	Overland Park Arboretum Wine Tasting (Mediterranean Diet)		X
Futrell, Crystal	2017	Extension Centennial Celebration (healthy snacks and knife skills presentation)		X
Futrell, Crystal	2017, 2018	HACCP Workshop		X
Futrell, Crystal	2017	Family Fun Night at Tender Hearts Day Care (My Plate and picky eaters presentation)		X
Futrell, Crystal	2018	4-H Food Fare (Mediterranean diet)		X
Futrell, Crystal	2018	Chinese Culinary Workshop		X
Futrell, Crystal	2018	Johnson County Hunger Summit		X
Futrell, Crystal	2018	Health Services Advisory Committee		X

Student	Year	Event	Community Service Event	Professional Event
Futrell, Crystal	2018	Tomahawk Elementary Science Fair (the science of how to make butter and cheese)		X
Futrell, Crystal	2018	Wasted Screening (food waste film and panel discussion)		X
Futrell, Crystal	2018	Healthy Communities Meeting		X
Futrell, Crystal	2018	Kansas Nutrition Council Meeting		X
Futrell, Crystal	2018	Farmers Market Demos		X
Futrell, Crystal	2018	Deanna Rose's Safety Days (hand washing)		X
Comprehensive Public Health Group	2016	Harvesters Volunteering	X	
Comprehensive Public Health Group	2016,2017 and 2018	National Public Health Week		X
Omni, Chris	2017	One Health Day Poster Competition at Olathe		X
Braun, Kyle	2017	Kansas Health Extension Focus Groups		X
Braun, Kyle	2017	Ok-Flu-Fest Flu Shot Volunteer	X	
Templon, Andrew	2016	K-State Student's Fall Activities Carnival	X	
Templon, Andrew	2017	One Heart Source in South Africa	X	
Banks, Kaitlyn	2018	Mental Health Awareness for Medical Professionals	X	
Tomasek, Rebecca	2018	Higher Education Day		X
Tomasek, Rebecca	2018	Winter KVMA Booth for MPH Program		X
Tomasek, Rebecca	2018	Bug-A-Palooza	X	
Tomasek, Rebecca	2017	World Healthcare Student Symposium		X
Tomasek, Rebecca	2017	KPHA Meeting & Booth for MPH Program		X
Tomasek, Rebecca	2017	Graduate Student Forum		X
Tomasek, Rebecca	2017	One Health Innovations Symposium		X

*Self-report by students.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: MPH students are strongly encouraged and supported in their professional development by the MPH program and the K-State Graduate School, in addition to specific support provided by their graduate major advisor. In addition, service and community partnership is encouraged and facilitated by the MPH program office for both regularly scheduled events and activities and other events that occur in the community. The MPH program office regularly communicates with students about upcoming events and activities and partners with local and state agencies to ensure that MPH students have access to and are able to participate in public health service during their graduate program.

Weaknesses: Building a community of public health practice across state and local boundaries is a challenge for planning and maintaining strong partner relationships. It is also challenging for financial and time resources of students to be able to travel to and attend activities and events outside of their graduate program schedule. However, it is vital to facilitate service learning and community partnership for future public health practitioners, and to bring perspective on leading change, engaging community, and leadership development practice.

Plans for improvement: The program will continue to identify next steps to continue local and regional opportunities for our students to ensure that students are able to include such events and activities in

their weekly schedules. The program will continue to partner with local and state agencies to support public health in our community and across the state of Kansas, and facilitate service learning and community partnership for MPH students. Support for MPH students as members of the CPHG to participate in community service and partnership will be maintained to ensure students are financially able to attend and travel to such events and activities. In addition, support for MPH students to attend public health professional development conferences and trainings will be maintained to ensure students are financially able to attend and travel to conferences and trainings.

F3. Assessment of the Community's Professional Development Needs

The program periodically assesses the professional development needs of individuals currently serving public health functions in its self-defined priority community or communities.

1) Define the program's professional community or communities of interest and the rationale for this choice.

The program's professional community of interest is that of public health practitioners and public health workers in need of further training in the State of Kansas and the region. The program considers public health practitioners as a multidisciplinary group of professionals employed in the four public health areas of emphasis that students are trained in at K-State. Public health workers in need of further training represents another section of public health employees in Kansas and regionally that are part of the public health workforce but may not be formally trained or educated in public health. Public health in the State of Kansas that is supported and represented by community health workers is also a professional community of interest to the program faculty.

Public health in Kansas is structured with a decentralized governance model and carried out locally by the state health agency, Kansas Department of Health and Environment (KDHE), Local Health Departments (LHDs), and various other public health community partners. With local health units primarily led by local governments, the local governments are making most fiscal decisions.

Public health agencies in Kansas consist of 100 LHDs that serve the 105 counties in Kansas. The main focus of public health in Kansas includes community health systems, disease control and prevention, epidemiology and public health informatics, family health, and health promotion. As of 2015, the educational attainment for top public health professionals in local Kansas health departments fell far below the national average. Therefore, the program's professional community of interest is located within this workforce.

2) Describe how the program periodically assesses the professional development needs of its priority community or communities, and provide summary results of these assessments. Describe how often assessment occurs.

The program director plays an active part in the Kansas Public Health Systems Group (KPHSG) and the Kansas Public Health Workforce Development Coordinating Council (KPHWDCC). These groups meet quarterly. Through these groups, the program gets feedback directly from public health colleagues from local health departments, the state health department, the state public health association, other universities and other public health-related institutions and organizations. These groups have also collaborated toward efficient and effective workforce development initiatives. In addition to participating in those groups at the state level, annual surveys of this community (e.g., alumni, employers, and students) help in identifying professional development needs of its priority community. The program director and staff discuss the professional development needs of its priority communities with the community advisory board as these members are employers of public health employees within their own communities in Kansas and Missouri. The program director has also participated in a regional analysis of public health programs, including employer needs and demands, to understand and assess regional employment needs and professional development preparation for these needs. (See ERF "F1-4" and "F3-2" for meeting minutes and notes.) The program director is also a member of the Public Health Advisory Council

and Strategic Planning for Riley County. This council, in addition to discussing public health needs of Riley County, also discusses workforce needs related to health and wellness. (See “F3-2” for meeting notes and minutes)

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: Participation in the Graduate Certificate in Public Health Core Concepts is important for workforce development in Kansas. The state’s Public Health Systems Group is a unique entity, bringing public health expertise together in a consistent manner and helping raise awareness of available programs and of needs in the workforce.

Weaknesses: As a non-degree program, the certificate program costs are high for some students, and in most cases, non-degree graduate students do not qualify for loans and other financial assistance.

Plans for improvement: The program will continue to offer the certificate program to facilitate training and entry into the public health workforce, and seek other ways to help the workforce across the state. The program will continue to support community partners with workforce needs, training, and professional development.

F4. Delivery of Professional Development Opportunities for the Workforce

The program advances public health by addressing the professional development needs of the current public health workforce, broadly defined, based on assessment activities described in Criterion F3. Professional development offerings can be for-credit or not-for-credit and can be one-time or sustained offerings.

1) Describe the program’s process for developing and implementing professional development activities for the workforce and ensuring that these activities align with needs identified in Criterion F3.

The MPH program director is part of the state’s Public Health Workforce Development Coordinating Council, and that entity is working to assess the needs of public health personnel throughout the state. Our program will work with this council, other universities and agencies toward collective solutions to meet those needs. In addition, the program director engaged local health department staff and extension agents through survey and in-person interviews across the state of Kansas to determine their professional development needs for their workforce. The program also responds to requests from the community to provide expertise in training and education in an as-needed manner for specific topics such as vaccination; social determinants of health; policy, systems & environment, one health, and other topics.

MPH faculty are also encouraged to assist in other workforce development and professional development opportunities, and department heads consider such efforts in their promotion and tenure process as directed or non-directed service. Extension faculty specifically play an important role in workforce development and professional development for public health training in Kansas. K-State leads the statewide network of educators, K-State Research and Extension (KSRE), to share unbiased, research-based information and expertise on important issues in Kansas. KSRE holds a mission of providing “safe, sustainable, competitive food and fiber system and to strong, healthy communities, families, and youth through integrated research, analysis and education”. While KSRE as a system is not solely focused on public health, their mission supports that of public health professionals, and some KSRE faculty are entirely focused on public health. Some of the topics that KSRE is currently addressing include issues with global food systems, water, health, and nutrition, which are all aspects of public health.

2) Provide two to three examples of education/training activities offered by the program in the last three years in response to community-identified needs. For each activity, include the number of external participants served (i.e., individuals who are not faculty or students at the institution that houses the program).

Table 32. Section F4-2. Example of Educational/Training Activities Offered in Response to Community-identified Needs.

Date	Faculty Member	Event	# participants
February 2017 May 2017	Johannes, Elaine; Mulcahy, Ellyn; Yelland, Erin	Public Health and Policy, Systems & Environment training for Kansas Research & Extension (KSRE) agent training update	100+ at 5 different sessions
June 2017	Ellyn Mulcahy	Meningococcal vaccine updates for Johnson County Health Department.	50
June 2018	Ellyn Mulcahy	Public Health Ethics training for Riley County Health Department	42

See ERF “F4” for training materials provided at these events.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: KSRE faculty represent an immense strength in the MPH program to provide training and workforce development across the state to extension agents. In addition, the state’s Public Health Systems Group is an important committee to participate in to ensure needs in the workforce are being assessed and met. The MPH program’s faculty meet the professional and educational needs of the community.

Weaknesses: Building a community of skilled public health workers is a challenge and requires continual planning and maintenance of strong partner relationships. It is also challenging for financial and time resources of faculty and the public health workforce to be able to travel to and attend activities and training. However, it is crucial to facilitate training and workforce development for current and future public health practitioners.

Plans for improvement: Continue to assess and enhance the program’s process for developing and implementing professional development activities for the workforce. Continue to participate on statewide workforce committees and stay abreast of changing public health needs and required skills for the public health workforce. Continue to participate in training sessions for public health workers and extension agents.

G1. Diversity and Cultural Competence

Aspects of diversity may include age, country of birth, disability, ethnicity, gender, gender identity, language, national origin, race, historical under-representation, 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 criterion's context, refers to competencies for working with diverse individuals and communities in ways that are appropriate and responsive to relevant cultural factors. Requisite competencies include self-awareness, open-minded inquiry and assessment and the ability to recognize and adapt to cultural differences, especially as these differences may vary from the program's dominant culture. Reflecting on the public health context, recognizing that cultural differences affect all aspects of health and health systems, cultural competence refers to the competencies for recognizing and adapting to cultural differences and being conscious of these differences in the program's scholarship and/or community engagement.

- 1) List the program's self-defined, priority under-represented populations; explain why these groups are of particular interest and importance to the program; and describe the process used to define the priority population(s). These populations must include both faculty and students and may include staff, if appropriate. Populations may differ among these groups.

The program's under-represented populations include students and faculty members that identify as American Indian, Black, First-Generation, Hawaiian Pacific Islander, Hispanic, and Multi-racial. These self-defined, priority under-represented populations are of particular interest and importance to the program based on the low historical numbers of each group in our program. The process used to define these priority populations included review of the self-reported data for students and faculty to determine which groups are under-represented groups within the program (see Tables 33 to 38). In addition, a discussion of the process of the completion of Section G1 of the self-study report was carried out with a group of current MPH students in February 2018. Following this meeting, a subset of the MPH student body further provided input into the completion and writing of section G1 in March 2018. Section G was then reviewed and edited by the program FAC for completion before submission of the document. These groups are of particular interest and importance to the program to ensure that both faculty and students see their own identity, both as a mentor and mentee, represented and reflected within the faculty and student body.

- 2) List the program's specific goals for increasing the representation and supporting the persistence (if applicable) and ongoing success of the specific populations defined in documentation request 1.

Goal Statement 1. Increase the recruitment of new MPH students from the program's self-defined, priority under-represented groups, through targeted engagement locally and nationally of students from diverse backgrounds.

Goal Statement 2. Support the retention of MPH students in the program's self-defined, priority under-represented groups, through targeted engagement and mentoring of students from diverse backgrounds during their graduate program.

Goal Statement 3. Increase the recruitment of faculty from the program's self-defined, priority under-represented groups from existing K-State faculty.

3) List the actions and strategies identified to advance the goals defined in documentation request 2, and describe the process used to define the actions and strategies. The process may include collection and/or analysis of program-specific data; convening stakeholder discussions and documenting their results; and other appropriate tools and strategies.

The policies, actions, and strategies to increase the representation and supporting the ongoing success of the program's self-defined, priority under-represented populations were identified and defined using a process to focus on the (1) engagement and recruitment of students; (2) retention of students; and (3) recruitment of faculty from the program's self-defined, priority under-represented groups. The process used to define these actions and strategies included analysis of program-specific data, review of programmatic prior actions and strategies for engagement of students from diverse backgrounds, discussion with other departments and units to investigate their diversity and inclusion actions and strategies, and convening community partners to select appropriate processes to engage students of diverse backgrounds.

These current and future actions and strategies include:

Engagement and recruitment of students: Faculty from the MPH program are involved in initiatives that aim to engage students from underrepresented populations to participate in public health education. MPH faculty, students and the program director have taught educational activities coordinated with the K-State Office for the Advancement of Women in Science and Engineering (KAWSE) on STEM topics such as vector-borne diseases for K-12 students from Kansas. MPH faculty also engage high-school students at schools in the State of Kansas to discuss public health career pathways.

The program director attends undergraduate course sessions and career planning course sessions to engage and recruit K-State undergraduate students, including; Public Health Biology, BIOL 330; Animal Sciences Career Preparations, ASI 580; and Orientation to Health Careers, DAS 115.

The program director has collaborated with programs at K-State on education and training proposals to recruit undergraduate students from the undergraduate population, including:

1. The Developing Scholars Program (DSP) which engages underrepresented undergraduate students, by providing financial, academic and personal support, and research opportunities with K-State faculty;
2. The McNair Scholars program which supports underrepresented and first-generation students, who have identified research as a primary focus of their education, with financial support, summer internships, and career planning; and
3. The Kansas Louis Stokes Alliance for Minority Participation (KS-LSAMP), a National Science Foundation program, which promotes diversity in students entering science, technology, engineering and math (STEM) fields.

The program engages a wide group of eligible undergraduates with information about the program, in an effort to attract members of under-represented groups. Program representatives attend and participate in conferences and recruitment events locally and nationally to meet with students from diverse backgrounds, including: the McNair Heartland Research Conference and Graduate School Recruitment Fair, the Society for Advancement of Chicanos/Hispanics and Native Americans in Science (SACNAS) National Diversity in STEM Conference, the Out in Science, Technology, Engineering, and Mathematics (oSTEM) National Conference, and the Recruitment Fair and Minorities in Agriculture, Natural Resources and Related Sciences (MANRRS).

Retention of students: For retention and persistence of students in the program, policies regarding admissions of students to the program are the first point of process. The program follows the K-State Graduate School guidelines, which include consistent non-discrimination policies. All student applications are reviewed equally with absolute non-discrimination regarding diversity. The program director, faculty and staff also recognize the importance of mentors reflecting the students' own identity in terms of diversity. Therefore, the program strives to offer students opportunities to learn from and interact with

invited speakers of diversity, learn about topics of diversity and inclusion, and attend events to support their community. Examples of recent opportunities and more detailed strategies for student persistence are outlined below in section G1-4.

Faculty recruitment: The actions and strategies for faculty recruitment were identified and defined using a process to focus on the engagement and recruitment of faculty from underrepresented groups of faculty already employed at K-State. New faculty in public health-related fields, and faculty that possess the academic degree of MPH upon their arrival at K-State, are invited to apply for MPH faculty status by the program director. New faculty are also encouraged to apply for MPH faculty status by their department chair, college Dean and the Dean of the Graduate School. Existing faculty already at K-State are also encouraged to apply if their research aligns with public health emphasis areas offered by the program, or other public health-related research and teaching that students may be interested in at a later date.

In addition, in order to be cost efficient, the program aligns itself with the university and partnering colleges' diversity planning and recruitment processes. New faculty recruitment and hiring is managed at the college and department levels, and therefore traditional recruitment of faculty falls outside the authority of this program. Oversight of all employment of faculty is centralized, and departments and colleges must follow guidelines relating to diversity. The Kansas State University Affirmative Action Program, as mandated by Executive Order 11246, requires that the recruiting unit makes vigorous good-faith efforts to recruit minorities and women for positions in which they are not represented to the extent they are deemed to be available in the pool of qualified persons. The university's affirmative action plan can be found at: http://www.k-state.edu/affact/plan/AAP%20MFNarrative_October%201_2013.pdf

Each of the partnering colleges within the program has their own diversity plans, including; The College of Agriculture <http://www.ag.k-state.edu/about/diversity/>. The College of Veterinary Medicine <http://www.vet.k-state.edu/about/diversity/>. The College of Human Ecology <http://www.he.k-state.edu/about/diversity/>. The university's Office of Diversity and Associate Provost for Diversity aims to provide the leadership toward building an inclusive campus climate that will foster mutual understanding among diverse groups <http://www.k-state.edu/diversity/>. At the University level, KSUnite strives to unite and reaffirm the K-State dedication to foster an inclusive and welcoming atmosphere <http://www.k-state.edu/ksunite/>. Diversity is also a priority for the University strategic planning for 2025 <http://www.k-state.edu/2025/initiatives/diversity/> and for hiring practices within Human Capital Services <http://www.k-state.edu/hcs/diversity-inclusion/>.

The strategies that are focused on the engagement and recruitment of students, and the retention of students, were discussed with the community advisory board members at the annual meeting of the community advisory board to seek input from the communities they represent that are diverse in many factors including geographical location and socioeconomic status. The community advisory board provided feedback on the current strategies in place for the program, and also recommended a mentorship process for students in the target categories. This mentorship for public health practice would match students with mentors in public health practice who are concordant with the students' identity. This recommendation was met with support by all board members and will be implemented in 2019. This mentorship will assist with the program goal of persistence and retention of our students.

- 4) List the actions and strategies identified that create and maintain a culturally competent environment and describe the process used to develop them. The description addresses curricular requirements; assurance that students are exposed to faculty, staff, preceptors, guest lecturers and community agencies reflective of the diversity in their communities; and faculty and student scholarship and/or community engagement activities.**

The policies, actions, and strategies to create and maintain a culturally competent environment and the process used to develop these are a combination of university, college and departmental actions and strategies, in addition to program-specific actions and strategies.

At the program level, students are exposed to community agencies reflective of the diversity in their communities. Through community engagement activities, MPH students have the opportunity to interact

with and serve their community. These community engagement activities include events organized by the Riley County Health Department, the Flint Hills Wellness Coalition, and the City of Manhattan. These community events are held regularly each year and partner with the community's social service agencies to focus on and assist with access to needed services including vaccination and educational resources. MPH students are engaged at many levels of these community events including event planning, volunteering at the events, and being responsible for educational content areas of the events.

At the program level, students are given opportunities to interact with mentors that are reflective of their diversity, such as guest lecturers of diversity who are invited to speak on topics of diversity and inclusion, and preceptors active in public health practice in the region. These interactions with public health mentors of diverse backgrounds creates and maintains an environment in which culturally competence is thoughtfully part of the planning process.

The college and department faculty control the curriculum, and they follow the guidance and the continuing efforts of the university, through the Provost's Office of Diversity for diversity and cultural competency within courses. The MPH program faculty, starting with its curriculum committee, strives to address and build competency in diversity and cultural considerations.

Policies that value the contributions of all forms of diversity and that support a climate free of harassment and discrimination are included in the University Handbook and the university's Policies and Procedures Manual. The MPH Program, with its home in the College of Veterinary Medicine and as a graduate program under the Graduate School, is committed to maintaining these university policies.

The Policy prohibiting discrimination, harassment, and sexual violence and the procedure for reviewing complaints is found at: <http://www.k-state.edu/policies/ppm/3000/3010.html#policy>. Furthermore, a separate and distinct Affirmative Action Plan has been proposed for the Policy and Procedures Manual, Section 4100.

The program and its faculty and administration work collectively with the Provost's Office of Diversity and Office of Affirmative Action in monitoring and enhancing diversity-related programs. The President's Commission on Multicultural Affairs (PCMA), in the Office of Diversity, maintains reports from throughout the university. The most recent demographic reports for students, faculty and staff can be viewed on the PCMA webpage (<http://www.k-state.edu/diversity/pcma/>).

5) Provide quantitative and qualitative data that document the program's approaches, successes and/or challenges in increasing representation and supporting persistence and ongoing success of the priority population(s) defined in documentation request 1.

Enrollment and retention data of programmatically underrepresented and first generation students demonstrate that the K-State MPH program is committed to the education of traditionally underserved students in the program. Summary data for self-defined priority student enrollment in the MPH program for the last three years are reported below in Table 33. Table 34 shows all MPH graduates and their self-reported first generation status and/or their ethnicity. These data demonstrate the MPH student population has ranged from 15% to 30% of underrepresented students (mean = 23%) in the last three years and 5% to 15% of first generation students (mean = 10%) in the last three years.

Table 35 shows the GPA and GRE scores in addition to retention rates for self-defined priority students. Enrollment and retention data of self-defined priority student groups indicate that these students have similar enrollment scores (GPA, GRE, see Table 35) and similar retention rates compared to all MPH students (Table 34 and 35). This demonstrates the program's success in supporting the persistence and success of our students.

Table 33. Section G1-5. Diversity – Summary Data for Student Acceptance/Enrollment and Faculty Recruited.

Category/Definition	Method of Collection	Data Source	2016	2017	2018
Students - Under-represented (American Indian, Black, Hawaiian Pacific Islander, Hispanic, Multi-racial)	Graduate Application	Self-reporting	25% (5/20)	30% (9/30)	15% (3/21)
Students – 1 st Generation*	Undergrad Application	Self-reporting	15% (3/20)	10% (3/30)	5% (1/21)
Faculty – New under-represented faculty recruited.	MPH Data Call	Self-reporting	29% (5/17)	50% (2/4)	25% (1/4)

*Information collected from KSIS for students that have an undergraduate record at K-State.

Table 34. Section G1-5. K-State MPH Student Population.

Year	# Grads	Female	Male	White	Black	AI	Asian	HPI	Hispanic	Multi	1 st Gen	Int
2014	21	14	7	19	1						6	1
2015	16	12	4	14					1		2	1
2016	19	13	6	18					1		3	
2017	21	18	3	15	1		1		3		3	1
2018	22	18	4	15	1		2		2	2	2	
Total	99	75	24	81	3	0	3	0	7	2	16	3

Key: AI: American Indian; HPI: Hawaiian Pacific Islander; Multi: Multi-racial; 1st Gen: First Generation Students. Int: International Student. Note: International, White, Asian students are not included in underrepresented students.

Table 35. Section G1-5. K-State MPH Student GPA, Mean Standardized Exam Scores, and Retention Rate.

Group	GPA	GRE verbal	GRE quantitative	Retention Rate
All MPH 2014-2018	3.35	150	149	90.0%
Under-represented 2014-2018 (subset of above)	3.33	147	148	89.4%

KEY: GPA: Entering Grade Point Average; GRE: Graduate Record Exam; Retention Rate: Students making adequate progress or have completed the program;

Also included in Table 33 are data collected from MPH faculty to determine the under-represented faculty populations. Data collected from MPH faculty to determine the under-represented faculty populations are represented in more detail below in Tables 36 and 37. The tables are stratified by emphasis area (Table 36) and by the year of when the faculty member was recruited by the program (Table 37). The program's approach to increasing underrepresented groups in the MPH faculty body has been successful, with 25% to 50% of new faculty recruited in the last three years, and 34% of the total current faculty self-reporting as one or more of the defined priority groups.

Table 36. Section G1-5. K-State MPH Graduate Faculty by Emphasis Area.

Emphasis	Female	Male	White	Black	AI	Asian	HPI	Hispanic	Multi	1 st Gen	Int
FSB	4	2	6							1	1
IDZ	16	13	19	1		6		2	2	5	6
PHN	3	5	6	1		1				3	1
PHPA	4		4								
Other	6	3	6	1		1			1	1	2
Total	33	23	41	3		8		2	3	11	10

Table 37. Section G1-5. K-State MPH Graduate Faculty Recruitment.

Year	# Faculty	Female	Male	White	Black	AI	Asian	HPI	Hispanic	Multi	1 st Gen	Int
Before	31	14	17	21	2		6		1	1	5	5
2016	17	12	5	13			2			2	4	3
2017	4	3	1	3	1				1		1	2
2018	4	4		4							1	
2019												
Total	56	33	23	41	3		8		2	3	11	10

6) Provide student and faculty (and staff, if applicable) perceptions of the program’s climate regarding diversity and cultural competence.

Students have been engaged in discussions about the program’s climate regarding diversity and cultural competence during the Fall 2018 semester. Students attended a focus group on 9/13/2018 to capture their perceptions of Diversity, Inclusion, and Cultural Competence. This focus group was facilitated by a staff member of the K-State Center for Engagement and Community Development (See ERF “G1” for the focus group planning document and a report from the facilitator). The objectives of the student focus group were to:

1. Determine MPH student understanding of concepts related to diversity, cultural competence, and inclusion.
2. Develop MPH student definitions of these concepts.
3. Identify evidence of how the MPH program puts these concepts into practice.
4. Identify resources, tools, and other benefits that would be of student interest for the MPH program to provide.

Students shared their perceptions and definitions of diversity, cultural competency, and inclusion. Students also shared their perceptions of what the MPH program has done to demonstrate their commitment to diversity, cultural competency, and inclusion, in addition to suggestions of resources that the program could provide in the future. A report of the focus group themes and findings is located in the ERF (See ERF “G1”). The findings from this focus group will be used to inform the process moving forward for how the program approaches increasing representation and supporting persistence and ongoing success of our priority population. The report from this focus group was shared with students and feedback was sought at the next in person meeting with students. The report from this focus group was also shared with MPH faculty at the following FAC meeting. A second focus group is planned for 2019.

Student perceptions of the program’s climate regarding diversity and cultural competence are surveyed annually and have been positive. Students are surveyed each semester upon graduation regarding the

integration of diverse perspectives into the program. From these surveys, eight (27.6%) and 16 (55.2%) students reported the integration of diverse perspectives into the program was excellent or good, respectively.

Table 38. Section G1-6. Student Perceptions of Program Integration of Diverse Perspectives.

Number	Answer	%	Count
1	Poor	0.00%	0
2	Fair	17.24%	5
3	Good	55.17%	16
4	Excellent	27.59%	8
9	Not Applicable	0.00%	0
	Total	100%	29

Faculty perceptions of the program’s climate regarding diversity and cultural competence have also been captured using a survey distributed to MPH faculty in Fall 2018. Faculty perceptions of the program’s climate regarding diversity and cultural competence have been positive. MPH faculty were asked to provide commentary on the MPH program’s climate regarding diversity and cultural competence, and to report their level of agreement or disagreement with the following statements:

1. The MPH program demonstrates the concepts of diversity, cultural competence, and inclusion.
2. The MPH program strives to create an open environment that promotes awareness of diversity among individuals and transparency between individuals.
3. The K-State MPH program has an inclusive work environment where diversity at all levels is valued and encouraged.
4. I am treated fairly within the K-State MPH program without regard to my age, race, ethnic background, religion, gender, disability, sexual orientation, or veteran status.

In this survey, 94% of faculty reported they strongly agreed or somewhat agreed with these statements. Only 6% neither agreed nor disagreed with the statements. (See the ERF “G1” for the survey and survey responses).

At a college level, the program director is a committee member for strategic planning for the College of Veterinary medicine, and is involved in planning for college-wide climate surveying of diversity and inclusion perceptions of students and faculty <http://www.vet.k-state.edu/StrategicPlan/index.html>.

At a university wide level, all university graduate students’ perceptions regarding diversity and cultural competence have been captured in a university-wide climate survey last performed in 2014 <http://www.k-state.edu/2025/initiatives/climate-survey/>. Of this group of graduate students, eight reported they were MPH students. Faculty perceptions regarding diversity and cultural competence has been captured in a number of ways including a university-wide climate survey last performed in 2014 <http://www.k-state.edu/2025/initiatives/climate-survey/> , and college-specific surveys carried out at regular intervals.

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The program has consistently attracted students from multiple cultures, races, and backgrounds. The program faculty are diverse in background, culture and ethnicity. Students’ diverse backgrounds are reflected in their peers and faculty mentors.

Weaknesses: There are no perceived weaknesses with the process of persistence and support of students, recruitment of faculty from the existing K-State faculty, and student success in this area. The program can increase the representation of underrepresented students and faculty, however, this is limited due to budgetary limits to hire new faculty.

Plans for improvement: Continue to improve in identifying MPH student and faculty perceptions of the program's climate regarding diversity, inclusion and cultural competence. Continue to work closely with the university and its colleges and departments toward the university's goals and objectives related to diversity and cultural competence. Support students through mentorship for public health practice to provide students with a mentor for their programmatic success. Work to improve processes of data collection during the admission process to collect data regarding first generation students to attend graduate school. To measure our progress moving forward, specific questions regarding perceptions of diversity, inclusion, and cultural competence will be added to surveys distributed to students, a focus group for students will be conducted annually, and faculty will be surveyed regularly for their perceptions of diversity, inclusion, and cultural competence.

H1. Academic Advising

The program provides an accessible and supportive academic advising system for students. Each student has access, from the time of enrollment, to advisors who are actively engaged and knowledgeable about the program's curricula and about specific courses and programs of study. Qualified faculty and/or staff serve as advisors in monitoring student progress and identifying and supporting those who may experience difficulty in progressing through courses or completing other degree requirements. Orientation, including written guidance, is provided to all entering students.

- 1) Describe the program's academic advising services. If services differ by degree and/or concentration, a description should be provided for each public health degree offering.

It is the philosophy and expectation of the faculty that each student will discover that their education is enriched in a number of ways outside the classroom or laboratory. One of the major opportunities available for graduate students is the chance to be mentored by experienced faculty members who can contribute to their professional development. An advisor is named for each MPH student when admitted. During the first year, each MPH student is encouraged to assist in determining their major professor and committee members. They are expected to meet regularly with their major advisor and their supervisory committee after it is formed. Graduate students demonstrate independence, initiative, and motivation in the formation of a thesis proposal, a report topic, or a major field experience project. Everyone is encouraged to join a professional organization either in public health and/or in the area of emphasis, attend professional meetings and on-campus seminars, and publish the results of their scholarly work.

In the advisor/mentor relationship, the graduate student also has a number of key responsibilities. These include the following:

- Learning and adhering to the Graduate School and MPH Program rules, procedures, and policies applicable to graduate study and scholarly activity.
- Meeting university and program requirements for degree completion.
- Forming a supervisory committee that meets Graduate School requirements as well as requirements that are outlined in the Graduate Student Handbook for the MPH Program.
- Following disciplinary and scholarly codes of ethics in course work, thesis research, and field experience project.
- Practicing uncompromising honesty and integrity according to K-State and federal guidelines in collecting and managing data from human subjects.
- Seeking Institutional Review Board approval for research with human subjects where applicable.
- Keeping the major professor and supervisory committee apprised on a regular basis of the progress toward completion of the degree requirements, including progress on the thesis research or approval of the field experience placement.

Activities that are the responsibility of the major advisor include: Ensuring that graduate students receive information about requirements, policies, and procedures of the MPH degree program.

- Advising graduate students on the selection of courses for the POS and selection of the capstone experience option.
- Advising graduate students on the selection of members of the supervisory committee.
- Providing training and supervision in scholarly activities, including selection of a research problem if the thesis option is chosen, development of the research design, theoretical and technical aspects of data collection, management, and analysis, and preparation of the final written document.
- Encouraging graduate students to stay abreast of the literature and cutting-edge ideas in the area of emphasis.
- Helping graduate students to develop professional skills in writing papers, reports, or grant proposals, making professional presentations, establishing professional networks, interviewing for positions, and evaluating manuscripts or reports for publication.

2) Explain how advisors are selected and oriented to their roles and responsibilities.

An advisor is named for each MPH student when admitted. This initial advisor is determined in advance for each emphasis area, based upon the area of interest of the students. Once the student has started their graduate program, they may choose a new advisor or remain with the pre-determined advisor. During the first semester, each MPH student is encouraged to assist in determining their major professor and then committee members. All MPH faculty self-identify as being available and willing to mentor advisees. Each member of the MPH faculty, as they join the faculty body, receive the MPH handbook which outlines their orientation to their roles and responsibilities. All MPH faculty are invited to attend the annual sessions of MPH orientation and all other orientation and organizational meetings. In addition, the program director and program assistant provide in-person orientation to their roles and responsibilities.

3) Provide a sample of advising materials and resources, such as student handbooks and plans of study, which provide additional guidance to students.

All advising materials and resources are initially provided to students via the MPH student orientation for all incoming students and returning MPH students. This orientation is video-recorded and provided online so that any students unable to attend are able to view the orientation at a later date. In addition, the MPH student handbook and other advising resources are provided on the MPH program website, and links to the Graduate School site are also provided.

Sample forms that are required for student progress, such as the POS, MPH checklist and other student progress tracking documents are supplied to all students at the MPH orientation, and are available at the MPH program website <http://www.k-state.edu/mphealth/current/> and <http://www.k-state.edu/mphealth/areas/>.

All coursework information is provided and updated regularly via the MPH program website <http://www.k-state.edu/mphealth/about/courses/>. Any changes to the courses listings as a result of time changes, faculty hires etc. are communicated directly from the MPH program office via e-mail. All degree completion requirements and graduation requirements are provided to students via the MPH program website <http://www.k-state.edu/grad/students/graduation/>. These requirements are also communicated directly to each student that is graduating via an email including the graduation checklist of items that students should follow in order to be ready for graduation. This email is sent from the MPH program office each semester to students expected to graduate in advance of all graduation deadlines. (See the ERF for the MPH Graduate Handbook (A1-3) and the POS (H1-3) and Emphasis Area documents (H1-3)).

4) Provide data reflecting the level of student satisfaction with academic advising during each of the last three years. Include survey response rates, if applicable.

The MPH program collects data regarding the level of student satisfaction with academic advising during their graduate programs in surveys distributed to students after one year of graduate study, and upon graduation.

The following questions are utilized to measure the level of student satisfaction with academic advising:

1. Provide your overall rating of the following: Your first year of advising
2. Please rate the quality of advising for your research.
3. Please rate the quality of advising in your field experience.
4. How satisfied were you with the quality of academic advising that you received?
5. How satisfied were you with the availability of your academic advisor?
6. How satisfied were you with the assistance of your academic advisor?
7. Please provide comments related to academic advising.
 - The high level of MPH student satisfaction with advising is evident in the responses to these questions: 46% and 43% of students were very satisfied or satisfied, respectively, with the quality of academic advising they received.
 - 50% and 39% of students were very satisfied or satisfied, respectively, with the availability of their academic advisor.

- 43% and 46% of students very satisfied or satisfied, respectively, with the assistance of their academic advisor.
- 54% and 25% of students were very satisfied or satisfied, respectively, with the quality of advising they received for their field experience.
- 15% and 50% of students were very satisfied or satisfied, respectively, with the quality of advising they received for their research (note: not all MPH student conduct original thesis research projects).

The response rate for these questions for AY16, AY17, AY18, and the average response rate for this time period is shown below:

Table 39. Section H1-4. Student Satisfaction with Academic Advising.

Academic Year	Response Rate
AY16	63%
AY17	83%
AY18	75%
AY16-18*	74.5%

*AY16-18 is the average of the Fall, Spring, and Summer semesters of AY16, AY17, AY18.

5) Describe the orientation processes. If these differ by degree and/or concentration, provide a brief overview of each.

All MPH students are oriented using the same process. The orientation processes do not differ by concentration. The MPH student orientation occurs in person, on campus in August of each year. The date is chosen to co-ordinate with the week before the Fall semester classes begin, and also is planned to co-ordinate with orientations offered by the Graduate School <http://www.k-state.edu/grad/admissions/campus-orientation/> and by International Programs <http://www.k-state.edu/isss/orientation/index.html>.

All new and returning MPH students are invited to attend. All new and existing MPH faculty are also invited to attend. All orientation resources and materials are provided to students during the MPH student orientation for all incoming students and returning MPH students. During orientation, each student and faculty member present introduce themselves to the group, the program director presents the orientation package, and invited guests also give a presentation. Invited speakers include staff members from student resource centers on campus including; the writing center, the library, and the Graduate School.

The orientation is video-recorded and provided online so that any students unable to attend are able to view the orientation at a later date. These orientation recordings are archived, and the most current orientation is available at: <http://www.k-state.edu/mphealth/current/orientation.html>
In addition, any student not able to attend in person is invited to meet with the program director when they arrive on campus. At this point, the student receives written orientation resources and is also oriented in person. The 2018 MPH orientation recording will be available during the Fall 2018 semester.

A separate orientation meeting is scheduled each November for the APE and ILE. The APE and ILE orientation is also video-recorded and provided online so that any students unable to attend are able to view the orientation at a later date. At this orientation, the MPH program director reviews the requirements for the APE and ILE. The 2018 APE and ILE orientation recording will be available during the Fall 2018 semester.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The MPH Program Office provides a variety of support to students and graduates from survey data, and is very responsive to their needs. Academic and research advising is available from a very broad mixture of public health-related expertise.

Weaknesses: This program attracts a wide variety of students of different educational, geographical and cultural backgrounds. Finding efficient and effective methods of communication for all students in different departments is challenging but not insurmountable.

Plans for Improvement: Routinely consider feedback from students and faculty, and implement responsive and careful improvements, to improve advising and communication throughout the program.

H2. Career Advising

The program provides accessible and supportive career advising services for students. Each student, including those who may be currently employed, has access to qualified faculty and/or staff who are actively engaged, knowledgeable about the workforce and sensitive to his or her professional development needs and can provide appropriate career placement advice. Career advising services may take a variety of forms, including but not limited to individualized consultations, resume workshops, mock interviews, career fairs, professional panels, networking events, employer presentations and online job databases.

The program provides such resources for both currently enrolled students and alumni. The program may accomplish this through a variety of formal or informal mechanisms including connecting graduates with professional associations, making faculty and other alumni available for networking and advice, etc.

1) Describe the program's career advising and services. If services differ by degree and/or concentration, a brief description should be provided for each. Include an explanation of efforts to tailor services to meet students' specific needs.

All MPH students receive career advising and services using the same process. The career advising and services processes do not differ by concentration. The MPH student career advising and services occur in person (by appointment and walk-in), via e-mail, via telephone, and using conferencing software such as Zoom or Skype. Career advising and services are tailored specifically to each student based on their career goals, their area of interest and expertise and their employment plans for before and after graduation.

Career advising services include; a complete resume and cover letter review with the student and in conjunction with the K-State Career Center liaison, review and discussion of strategies for resume and cover letter layout and content to ensure that the cover letter and resume will be reviewed by human resources personnel at the target employment site, and a targeted application search in specific geographical areas, specific agencies, specific employment titles based on the individual student.

The program director discusses the type of employment that is of interest, and the appropriate listings and titles that these positions would be listed as with the student/alumnus. The program director liaises with MPH faculty, public health professionals, and other colleagues who would be able to assist the particular student with networking and career advice. The program director and MPH faculty members also serve as references for future employment and future education. In addition, the program director ensures that students are aware of the services provided by the K-State Career Center and connects individual students with the center liaison for the MPH program.

The program director also liaises and co-operates with career advising carried out in individual colleges. For example, the College of Human Ecology operates a career mentoring program for students, of which the program director participates as a mentor.

The program provides career advising resources for students and alumni through formal mechanisms, including; connecting graduates with professional associations such as KPHA, and interacting with alumni for networking during a career alumni lunch event. The program also provides career advising resources for students and alumni through informal mechanisms including pairing students with faculty and alumni of shared interests, as well as matching newly matriculated students with returning students with similar interests.

2) Explain how individuals providing career advising are selected and oriented to their roles and responsibilities.

The MPH program director, MPH program assistant and MPH faculty all provide career advising to MPH students and alumni. The MPH program director and MPH program assistant are selected for career advising due to their close academic relationship with MPH students, and the appropriateness of their position to connect students with potential employers and potential employment applications. The MPH program director and MPH program assistant regularly receive employment information from local and state agencies including (but not limited to) the Riley County Health Department, Kansas Department of Health and the Environment, and the Kansas Association of Local Health Departments. Program alumni and state public health colleagues also share employment information. This career and employment information is communicated directly to students and alumni via email. The MPH program director and MPH program assistant are also responsible for tracking graduation and career data, which assists with career advising to demonstrate current hiring practices to current students and alumni. In addition, the K-State Career Center liaisons provides career advising to MPH students. K-State Career Center liaisons are specifically hired for their educational backgrounds, training, and expertise in career services.

3) Provide three examples from the last three years of career advising services provided to students and one example of career advising provided to an alumnus/a. For each category, indicate the number of individuals participating.

Table 40. Section H2-3. Examples of Career Advising Services Provided to Students and Alumni.

Academic Year	Student or Alumnus	Career advising
2019	Student	Strategies for resume and cover letter layout and content, targeted application search in specific geographical area and content area to match student goal to remain in home state, introduction to program alumni currently employed in this content area to assist and network.
2018	Student	Strategies for concurrent student to utilize MPH program in future DVM career, including DVM program required rotations.
2018	Student	Resume and cover letter review, targeted application search in specific geographical areas to match student goal to relocate, introduction to colleagues to assist and network.
2018	Alumnus	Resume and cover letter review, strategies for resume and cover letter layout and content, targeted application search in specific geographical area, introduction to colleagues to assist and network, follow-up with program alumni to expand network.

4) Provide data reflecting the level of student satisfaction with career advising during each of the last three years. Include survey response rates, if applicable.

The MPH program collects data regarding the level of student satisfaction with career advising and career preparation during their graduate programs in surveys distributed to students upon graduation (Exit Survey) and at one year post-graduation (Alumni Survey).

The following questions are currently utilized to measure the level of student satisfaction with career advising:

1. How well did the K-State MPH program prepare you for your current career? (Alumni Survey)
2. Please rate the MPH Program's preparation of students for future employment. (Exit Survey)

The high level of MPH student satisfaction with career advising is evident in the responses to these questions. Twenty-five percent and 46% of students indicated that their career preparation was excellent or good, respectively. Sixty-seven percent of alumni indicated that the preparation for their current career was adequate.

The average response rates for these questions for AY16, AY17, AY18, is 74.5 % for the Exit Survey and 27.1% for the Alumni Survey.

5) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: MPH students report satisfaction career advising and career preparation. Students are able to access excellent career advising in the MPH program office, with MPH faculty, and at the K-State Career Center. This is a comprehensive approach to meet the needs of all students and alumni. In addition, the MPH program focuses on career planning discussions that start early in the graduate program to ensure that students are planning for a future career simultaneously with planning for their APE and elective coursework.

Weaknesses: Data collection has focused on satisfaction with academic advising and has not fully focused on satisfaction with career advising that is not career preparation and readiness.

Plans for improvement: The MPH program has begun to engage students in career advising and planning at earlier time points in the graduate program. This process of engagement began in AY 2017. This strategy will be maintained to enable students to identify career paths earlier in their graduate studies. In addition, mentorship public health practice that will be initiated in 2019 by public health practice members will be utilized to provide MPH students with practical career advising and mentoring. Data collection will be updated to include questions on the exit and Alumni Surveys that are specific to student satisfaction on career advising provided during their graduate program.

The following questions will be incorporated into the next cycle of exit and Alumni Surveys.

1. How well did the K-State MPH program provide you with career advising? (Exit Survey)
2. Was the MPH program sensitive to your professional development needs? (Exit Survey)
3. Did the K-State MPH program provide appropriate career placement advice? (Exit Survey)
4. Did the K-State MPH program provide opportunities to network with professional associations, faculty and other alumni? (Exit Survey)
5. Did the K-State MPH program provide you with appropriate advising for career placement? (Alumni Survey)
6. Did the K-State MPH program mentorship for public health practice provide you with advising for career placement? (Alumni and Exit Survey for students matriculated after the K-State MPH program's mentorship is initiated)
7. Please provide comments on the K-State MPH program career advising. (Alumni and Exit Survey)
8. Please provide comments on the K-State MPH program's mentorship for public health practice. (Alumni and Exit Survey for students matriculated after the K-State MPH program's mentorship is initiated)

H3. Student Complaint Procedures

The program enforces a set of policies and procedures that govern formal student complaints/grievances. Such procedures are clearly articulated and communicated to students. Depending on the nature and level of each complaint, students are encouraged to voice their concerns to program officials or other appropriate personnel. Designated administrators are charged with reviewing and resolving formal complaints. All complaints are processed through appropriate channels.

- 1) Describe the procedures by which students may communicate any formal complaints and/or grievances to program officials, and about how these procedures are publicized.

Students are encouraged to communicate any concerns related to the MPH program and are informed about procedures for communicating concerns both in Section 9: Student Conduct and Conflict Resolution of the MPH graduate handbook (<http://www.k-state.edu/mphealth/handbook/index.html>) as well as in Appendix A: Graduate Student Rights and Grievance Procedure of the K-State's graduate handbook (http://www.k-state.edu/grad/graduate_handbook/). The general grievance procedure is outlined below:

The Graduate Handbook contains general rules and procedures governing graduate education developed by the Graduate Council. If departmental or program policies are inconsistent with Graduate School policy, the Graduate School policy is the overriding policy.

The policy is designed to resolve concerns and grievances brought by graduate students related to their graduate level academic program as more fully defined below. This policy does not address concerns or grievances related to courses taken from instructors associated with consortiums or groups external to Kansas State University. In such cases, the grievance procedures of the external consortiums or groups should be used.

The formal grievance must be initiated within 90 working days of the time that the graduate student knows of the matter prompting the grievance, or the graduate student relinquishes any opportunity to pursue the grievance. Non-academic conduct of graduate students is governed by the K-State Student Code of Conduct in the Student Life Handbook and the hearing procedures therein.

- 2) Briefly summarize the steps for how a complaint or grievance filed through official university processes progresses. Include information on all levels of review/appeal.

Guidelines for Administrative Review and Conflict Resolution

- a. The graduate student should attempt to resolve any conflict first with the faculty member, supervisory committee, or administrator involved.
- b. If the conflict remains unresolved, the graduate student should discuss the conflict with the department head/chairperson, or other immediate administrative superior of the respondent, the Academic Dean or designee and, if pertinent, with any relevant departmental faculty member or committee. The outcome of this conflict resolution process shall be a written document. The document should be signed by all participating parties to confirm their receipt. Copies of the signed document will be provided to the graduate student, respondent, administrative superior, and Academic Dean involved in the conflict resolution session. The official copy shall be sent to the Graduate School to be retained in the student's file.
- c. If the conflict resolution process is not successful, the Academic Dean and the Associate Dean of the Graduate School will confer within 10 working days following receipt of the conflict resolution process document to determine if further conflict resolution steps should be pursued. The outcome of this conference will be shared in writing with all parties participating in 3b.

Formal Grievance Procedure

- a. If the grievance is not resolved by the above discussions and the graduate student chooses to pursue the matter further, the graduate student must submit a written statement and the Notice of Grievance form to the Associate Dean of the Graduate School within 10 working days after the receipt of the outcome. A Notice of Grievance form is available in the Graduate School or on the Graduate School website. The written grievance shall include a clear, concise statement regarding the nature of the academic matter to be resolved, which may include the policy or policies/procedures thought to be violated, and the redress requested. The Associate Dean of the Graduate School shall forward a copy of the grievance to the respondent. Within 10 working days after receipt of the grievance, the respondent shall provide the Associate Dean of the Graduate School with a copy of the written response.
- b. The grievant or respondent may request a one-time extension for 10 working days for good cause. A written request for an extension must be filed with the Grievance Chair, who will review and rule on the request after consultation with both parties and may consult with the Associate Dean of the Graduate School. Grounds for an extension may include but not be limited to a) Dispute resolution in process; b) Affirmative Action complaint and investigation is in process c) Extenuating personal circumstances.
- c. Upon receipt of the written response, the Associate Dean of the Graduate School shall, within 10 working days, appoint an ad hoc grievance committee to hear and make a recommendation regarding the grievance. The Associate Dean of the Graduate School shall appoint, from the membership of the Graduate Council, a committee chair (without vote, unless there is a tie), and two committee members. A member of the Graduate School staff will be selected as secretary (without vote). Two graduate students will be appointed as committee members from a slate of nominees selected by the Graduate Student Council.
- d. The hearing shall be scheduled within 30 working days after the appointment of the ad hoc grievance committee barring extenuating circumstances.
- e. The hearing is not a legal process; however, either party may arrange for a court certified reporter to record the hearing at the party's expense. If recorded the transcription is the property of the party paying for the service. The transcription will not be used by the committee in their deliberations.
- f. A student with a disability requiring special accommodations should communicate the specific needs to the Associate Dean at least five working days prior to the scheduled hearing.

3) List any formal complaints and/or student grievances submitted in the last three years. Briefly describe the general nature or content of each complaint and the current status or progress toward resolution.

There have been no formal complaints submitted to the Graduate School in any of the last three years from MPH degree students.

- 4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The MPH Program Office provides a variety of support to students and graduates, and from survey data, is very responsive to their needs. Academic and research advising is available from a very broad mixture of public health-related expertise.

Weaknesses: This program attracts a wide variety of students of different educational, geographical and cultural backgrounds. Finding efficient and effective methods of communication for all will always be a challenge.

Plans for Improvement: Routinely consider feedback from students and faculty, to improve advising and communication throughout the program.

H4. Student Recruitment and Admissions

The program implements student recruitment and admissions policies and procedures designed to locate and select qualified individuals capable of taking advantage of the program's various

learning activities, which will enable each of them to develop competence for a career in public health.

1) Describe the program's recruitment activities. If these differ by degree (eg, bachelor's vs. graduate degrees), a description should be provided for each.

Student recruitment is designed to locate and select students academically prepared for a graduate program in public health, interested in a career in public health. Recruitment activities include recruitment both within the state of Kansas (currently 65% of enrolled students) and other states, and internationally (currently 4% of enrolled students). Recruitment of undergraduate students currently or formerly matriculated at K-State (currently 49% of enrolled students) is carried out at K-State by attending undergraduate career courses in Biology, Animal Sciences and Industry, and other undergraduate career pathway courses. The program recruits incoming DVM students through orientation webinars and in-class presentations during the first year of the DVM program. The program also recruits at Kansas Public Health conferences and events including the KPHA annual conference, the annual Kansas Infectious Disease Symposium and other local and regional conferences.

For national recruitment, the program collaborates with the K-State Graduate School to recruit academically outstanding students, and represent the MPH program at national conferences including the McNair Heartland Research Conference and Graduate School Recruitment Fair, the SACNAS National Diversity in STEM Conference, and the oSTEM National Conference and Recruitment Fair. The program also collaborates with the College of Agriculture and the College of Veterinary Medicine to recruit nationally at conferences including the Minorities in Agriculture, Natural Resources, and Related Sciences (MANRRS) Conference. The program also recruits at the annual American Public Health Association conference.

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

The MPH program admits students via following the policies and procedures of the Graduate School. The application is reviewed for completeness and accuracy of all Graduate School required items plus submission of current GRE scores (see list below). If a student meets these minimum requirements, the application is shared with MPH faculty members within the admissions platform used by the Graduate School. MPH faculty members then review the admission application and make a recommendation to admit or deny. If admit is recommended, the MPH program office shares this recommendation with the Graduate School. The Graduate School makes the final decision of admittance.

The MPH program follows the policies and procedures of the Graduate School who, after a recommendation from the department/program, completes the final review and determines the admission status. The requirements from the Graduate Handbook, Section 1-B state:

An applicant to the Graduate School at Kansas State University must have a bachelor's degree substantially the same as the ones granted by Kansas State University. That is, it must represent a broad range of courses in the basic academic disciplines. Applicants whose degrees do not meet these standards may be denied admission to graduate degree programs at Kansas State University. Admission is denied to applicants holding bachelor's degrees with a significant amount of credit for work that was not supervised by a faculty member of an accredited college or university or evaluated in units that identify the academic content. A limited amount of credit for experience, when awarded as an acceptable part of a bachelor's degree for internships, fieldwork, or the like, is not a cause for denial but must be clearly identified as graded work.

All students admitted to the Graduate School must meet the following requirements:

1. Graduates from colleges and universities in the United States
 - a. A bachelor's degree from a college or university accredited by a regional or national institutional accrediting agency recognized by the U.S. Department of Education.

- b. Undergraduate preparation in the proposed major field equivalent to that acquired by a graduate of Kansas State University, or evidence of an appropriate background for undertaking an advanced degree program, and
- c. Cumulative grade point average (GPA) of 3.0 or higher on a 4.0 scale or GPA of 3.0 in the last 60 hours of coursework. This GPA is based only on courses graded on a multi-level scale, usually A, B, C, D, F.

2. Graduates of foreign colleges and universities

All international students admitted to the Graduate School must demonstrate the same level of achievement as U.S. students. That is, they must hold a degree from an established institution comparable to a college or university in the United States, have an outstanding undergraduate record, have the demonstrated ability to do graduate work, and provide evidence of language proficiency sufficient for the pursuit of a graduate degree. Admission may be denied to students from technical schools, which may provide excellent training in special areas, but do not offer degrees equivalent to those of colleges and universities. Questions about the qualifications of international students should be directed to the Graduate School.

- 3) **Select at least one of the measures that is meaningful to the program and demonstrates its success in enrolling a qualified student body. Provide a target and data from the last three years in the format of Template H4-1. In addition to at least one from the list, the program may add measures that are significant to its own mission and context.**

The program seeks to admit students that will be successful in completing the MPH degree, and reviews several factors to predict success in a graduate program. In addition to letters of recommendation and the student’s statement of objectives, the program reviews GPA and GRE scores. All of these factors are taken into consideration when applications are reviewed. Table 42 outlines MPH students admitted AY 2017 to 2019, their quantitative scores for both the GPA and GRE, and the targets for these measures. Table 42 also outlines targets for measures that are significant to the recruitment of health professionals and health professional students.

Table 41. Template H4-1. Outcome Measures for Recruitment and Admissions.

Outcome Measure	Target	2017	2018	2019
Average GPA (Range 2.65 to 4.0)	3.00	3.37	3.44	3.29
Average GRE (Verbal + Quantitate added) (Range 275 to 316)	300	299.90	300.64	303
Attract health professionals and health professional students (MD, DO, DDS, RS, DVM and DVM students)	5-8 students/year	7 students	4 students	2 students

- 4) **If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.**

Strengths: Enthusiasm for public health education remains high and application numbers remain strong. Qualified applicants continue to apply to our program

Weaknesses: Other than an under target recruitment of health professions, there are no perceived weaknesses in this area.

Plans for improvement: Continue to admit students looking for factors of interest in Public Health, also including the academic ability using the GPA and GRE scores.

H5. Publication of Educational Offerings

Catalogs and bulletins used by the program to describe its educational offerings must be publicly available and must accurately describe its academic calendar, admissions 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, must contain accurate information.

- 1) Provide direct links to information and descriptions of all degree programs and concentrations in the unit of accreditation. The information must describe all of the following: academic calendar, admissions policies, grading policies, academic integrity standards and degree completion requirements.

[University Academic Calendar](#)

[Graduate School Admissions Policies](#)

[MPH Admissions Policies](#)

[Graduate Grading Policies](#)

[Academic Integrity Standards](#)

[Graduate Degree Completion Requirements](#)

[MPH Degree Completion Requirements](#)

Additional Materials requested in the Accreditation Procedures, Section 10 for the ERF (See ERF “Other Additional Requested Materials”) are as follows:

- documentation that allows reviewers to verify that the unit solicited third-party comments. See this document’s discussion on the third-party comment requirement
- a schedule of courses offered, with instructor identified, for the last three years
- a copy, or link to, the official university catalog or bulletin that presents degree offerings
- for SPH and PHP only, a freestanding MS Word document that presents the budget table as requested in the criterion on fiscal resources
- for SPH and PHP only, a freestanding MS Word document that presents the instructional matrix (Template Intro-1) included in the introduction to the self-study

Appendix – Electronic Resource File Mapping

Approx Pg #	ERF Folder	Subfolder or File	File type
7	1-Intro	Grad Faculty Application 2018 + MPH Org Chart	PDF + Word
8	1-Intro	MPH Support Agreement 2018	PDF
11	1-Intro	MPH Support Agreement 2018	PDF
12	A1-1B Curriculum Comm	Curriculum Committee Reports	Word
12	1-Intro	Grad Faculty Application 2018	PDF
13	A1-3 MPH Grad Handbook	2018-2019 MPH Graduate Handbook	PDF
15	A1-5 Faculty Mtgs Agendas Minutes	Many examples	Word & PDF
16	A3-1 Student Engagement	A3-1 Student Engagement	Word & PNG
22	D5 APEs	MPH Checklist	Excel
25	B4-2 Alumni Data Collection	B4-2 Alumni perceptions documentation	Word
27	H1-3 Student Advising	Student Progress Tracking	File Folder
27	B5-3 Mtgs Survey Data	Mtg agendas & minutes + Survey Data by folder	File Folders
30	1-Intro	MPH Support Agreement 2018	PDF
34	C2 Faculty	CEPH Call for Data Original + MPH Primary & Other Faculty spreadsheet + MPH Grad Faculty Application	Word
35	C2 Faculty	Sample MPH POS	Word
37	C2-6 Qualitative Data	C2-6 Qual data on student perceptions	Word
46	D1-2 Core Syllabi	Core Syllabi	PDF
56	D1-2 Core Syllabi	Core Syllabi	PDF
65	D4-3	Emphasis Area Required Course Syllabi + Approved Elective Courses for MPH Students	Word
65	D4-3	Emphasis Area Required Course Syllabi + Approved Elective Courses for MPH Students	Word
67	D5 APEs	MPH Degree Assessment 2018	Word
67	D5 APEs + A1-3	Student APE products + MPH 840 Syllabus + MPH Checklists	File Folders Word & PDF
68	D5 APEs	MPH Checklist (all areas)	Folder
68	D5 APEs	APE items	Folder

Approx Pg #	ERF Folder	Subfolder or File	File type
69	D7 ILE	MPH ILE Template 2018	Word
69	D5 APEs	MPH Checklist (all areas) + MPH Degree Assessment	Folder & Word
70	D5 APEs	MPH Degree Assessment 2018	Word
71	D5 APEs	MPH Degree Assessment 2018	Word
71	D7 ILE	Graded ILEs + ILE Template 2018	Folders of ILEs by year + Template in Word
77	E1-3	Faculty CVs	Folders
77	C2 Faculty	CEPH Call for Data Original	Word
78	E2-1 Integration	Guest Lectures	Word + PDF
80	E3-2	Faculty Instructional Effectiveness	Word
81	E3-2	Faculty Instructional Effectiveness	Word
82	A1-1B Curriculum Comm	Curriculum Committee Reports	Word
82	A3-1 Student Engagement	Survey Results	Word
84	E1-3	Faculty CVs	Folders
90	F1-4	Self-Study doc	Word + PDF
90	F1-3	External partners + Community Board Minutes	Word
91	F1-4	External partners	Word
91	F2-1	Student Involvement	Word
96	F1-4 + F3-2	Refer to F1-4 and F3-2	Word
98	F4 Prof Development	Public Health Training	PowerPoint
104	G1 Diversity	Notes, Survey Questions, Faculty Survey	Word + PDF
104	G1 Diversity	Notes, Survey Questions, Faculty Survey	Word + PDF
105	G1 Diversity	Notes, Survey Questions, Faculty Survey	Word + PDF
108	A1-3 & H1-3	Handbook + POS + Emphasis Area handouts + Emphasis Area documents used for advising	PDF + Word
117	Other Additional Requested Materials	Items requested in Accreditation Procedures, Section 10	Word + Excel