

REVIEW FOR ACCREDITATION
OF THE
PUBLIC HEALTH PROGRAM
AT
CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:

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Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the Public Health Program at California State University, San Bernardino (CSUSB). The report assesses the program's compliance with the *Accreditation Criteria for Public Health Programs, amended June 2011*. This accreditation review included the conduct of a self-study process by program constituents, the preparation of a document describing the program and its features in relation to the criteria for accreditation and a visit in May 2017 by a team of external peer reviewers. During the visit, the team had an opportunity to interview program and university officials, administrators, teaching faculty, students, alumni and community representatives and to verify information in the self-study document by reviewing materials provided in a resource file. The team was afforded full cooperation in its efforts to assess the program and verify the self-study document.

California State University (CSU) was established as a system in 1960 by the Donahoe Higher Education Act. A 25-member Board of Trustees is responsible for oversight of CSU, which has 23 campuses including CSUSB. Although each campus is a member of the CSU system, each maintains its independence. CSUSB opened in 1965 as San Bernardino-Riverside State College and serves more than 20,000 students each year with about 4,000 students graduating annually. In fall 2016, there were 20,767 students enrolled at CSUSB: 18,453 undergraduates and 2,314 graduate students.

The university has six colleges: arts and letters; business and public administration; education; natural sciences; social and behavioral sciences; and extended learning. The College of Natural Sciences houses departments of biology; chemistry and biochemistry; computer science & computer engineering; geological sciences; health science & human ecology; kinesiology; mathematics; nursing; and physics. The Department of Health Science and Human Ecology houses the MPH and BS in public health education degree programs as well as BS degree programs in environmental health science, health care management and nutrition and food sciences; a master's program in health services administration; and four certificate programs in audiometry, gerontology, health care management and health science teaching.

The MPH program was established in fall 2006, and the first three students enrolled in the program in fall 2007. The first student graduated in academic year 2011-2012. Most students enrolled in the MPH program are full-time working professionals. The BS degree program has been a long-standing program within the department, and was not included in the unit of accreditation until summer 2015. At the time of the site visit, there were 221 students enrolled in the BS degree program and 34 students in the MPH program.

CEPH accepted the program as an applicant in September 2014. This is the program's first review for accreditation.

Characteristics of a Public Health Program

To be considered eligible for accreditation review by CEPH, a public health program shall demonstrate the following characteristics:

- a. The program shall be a part of an institution of higher education that is accredited by a regional accrediting body recognized by the US Department of Education or its equivalent in other countries.
- b. The program and its faculty and students shall have the same rights, privileges and status as other professional preparation programs that are components of its parent institution.
- c. The program shall function as a collaboration of disciplines, addressing the health of populations and the community through instruction, research and service. Using an ecological perspective, the public health program should provide a special learning environment that supports interdisciplinary communication, promotes a broad intellectual framework for problem solving and fosters the development of professional public health values.
- d. The public health program shall maintain an organizational culture that embraces the vision, goals and values common to public health. The program shall maintain this organizational culture through leadership, institutional rewards and dedication of resources in order to infuse public health values and goals into all aspects of the program's activities.
- e. The program shall have faculty and other human, physical, financial and learning resources to provide both breadth and depth of educational opportunity in the areas of knowledge basic to public health. At a minimum, the program shall offer the Master of Public Health (MPH) degree, or an equivalent professional degree.
- f. The program shall plan, develop and evaluate its instructional, research and service activities in ways that assure sensitivity to the perceptions and needs of its students and that combines educational excellence with applicability to the world of public health practice.

These characteristics are evident in the CSUSB public health program. The program is housed in a regionally accredited university, and its faculty and students enjoy rights, privileges and status equivalent to those of other CSUSB professional degree programs. The program's goal statements emphasize the importance of instruction, research and service, and its organizational culture embraces core public health values and goals. The program plans, develops and evaluates its instructional, research and service activities in ways that assure sensitivity to the perceptions and needs of its students. The program addresses the health and wellness of populations and the community. The program's faculty are trained in a variety of disciplines, and faculty ensure that the environment supports interdisciplinary collaboration.

The program has appropriate resources to offer the two degrees in the unit of accreditation, though balancing the commitment to quality, practice-based instruction with high student demand remains a challenge.

1.0 THE PUBLIC HEALTH PROGRAM.

1.1 Mission.

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

This criterion is met. The program aims to promote public health and to be recognized as a leader in creating health equity and social justice through health education and promotion programs and services in the local community. The program's mission is as follows:

To develop public health professionals who are prepared to assume leadership roles in population-based settings in order to promote, preserve, and restore health of local and global communities as a result of working to reduce health disparities and generate health equity.

The program has eight goals that address instruction, research, service and infrastructure. Each goal has a range of two to nine measurable objectives.

The program's values include diversity, equity, interdisciplinary collaboration, student-centered learning, advocacy, innovation, professionalism and scholarship. The program's mission, goals and objectives are made available to the general public through the department website and to students through program-specific Blackboard pages.

The program faculty developed the original mission, goals and objectives in 2006, and reviewed them in 2015 after adding the undergraduate degree to the unit, to ensure consistency and continuity across the programs and to ensure objectives were measurable and aligned with assessment procedures. The program reviews the mission, goals and objectives every three years to meet the changing population and workforce needs. The graduate program coordinator leads the assessment and incorporates student feedback. The latest program updates were made in May 2016.

1.2 Evaluation and Planning.

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

This criterion is met with commentary. The program has established a variety of ongoing efforts to monitor and evaluate achievement of its vision, mission, goals, objectives and organize efforts toward future planning. Evaluation processes include surveys, faculty annual reviews, course evaluations and informal open discussions with faculty, students, preceptors and community stakeholders.

The program coordinator directs the ongoing process to evaluate and monitor the overall efforts to align program activities to the mission, goals and objectives. The program coordinator and assessment

coordinator oversee the review of student learning outcomes for each required course; previous academic years' fieldwork reports; syllabi for each course; department resources (eg, student-faculty ratio, laboratory space); program collaborations with community organizations, including workforce development; Eta Sigma Gamma activities; and exit, alumni and employer survey data. In fall 2015, the program established the External Advisory Board. The board provides feedback on program goals and objectives.

Overall the program's targets are reasonable, and the program is meeting most of its targets.

During the site visit, community partners, preceptors, alumni and students remarked on their involvement with program monitoring and evaluation activities. A member of the External Advisory Board mentioned her involvement in providing feedback to the program coordinator about the program's curriculum and field experience activities.

The program coordinator reports program updates to the department faculty and holds quarterly meetings with the assessment coordinator. The program completes annual reports for both the undergraduate and graduate programs that summarize data from all surveys along with data related to the program's progress in achieving its goals and objectives. These reports are shared on the department's website and program-specific Blackboard pages.

The program and assessment coordinators took the lead on the self-study process. This comprehensive process included writing and review by several key stakeholders including program faculty, departmental faculty, staff from the Office of Institutional Research, staff from the Offices of the Dean, Associate Provost and Provost, External Advisory Board members, alumni, current students and preceptors. During the site visit, several students discussed their roles in reviewing the draft self-study and providing feedback to the program.

The commentary relates to the current gap in program planning and evaluation for the undergraduate program. Currently, the undergraduate program does not have a designated coordinator, which results in the lack of a fluid process of planning and evaluation for the program. For example, the program has had difficulty in tracking enrolled students in terms of graduation and job placement and, as a result, is unable to assess its performance in these areas, which is discussed in more detail in Criterion 2.7. The program administration mentioned to the site visit team that a full-time program faculty member will begin the role of undergraduate program coordinator in fall 2017.

1.3 Institutional Environment.

The program shall be an integral part of an accredited institution of higher education.

This criterion is met. CSUSB has been accredited by the WASC Senior College and University Commission since 1964. The university had its last review in 2015, and its next accreditation visit is

scheduled for 2021. CSUSB also reports to 16 specialized accreditors in such disciplines as art and design, theater, music, business, teacher education, social work, dietetics, chemistry and environmental health.

CSUSB is part of the 23-campus CSU system. It is located in the Inland Empire of Southern California and enrolls more than 20,000 students. The university consists of six colleges (extended learning, natural sciences, education, social and behavioral sciences, business and public administration and arts and letters) and offers more than 70 bachelor's and master's degrees, an education credential, certificate programs and one doctoral program.

The College of Natural Sciences includes nine divisions: departments of biology, chemistry and biochemistry, geological sciences, health science and human ecology, kinesiology, mathematics, nursing and physics and the School of Computer Science and Engineering. The college offers bachelor's and master's degrees and curricula for pre-professional students in medicine, veterinary medicine, nutrition, physical therapy and dentistry. The public health program is housed in the Department of Health Science and Human Ecology.

The program coordinators report to the department chair, who reports to the dean of the College of Natural Sciences. The dean reports to Graduate Council, who reports to the provost. The provost reports to the president, who reports to the Board of Trustees.

The department chair advocates for the program's fiscal needs when meeting with the dean and associate dean about budget planning. The dean determines the allocation on funds to each department based on programmatic needs. Program coordinators and other department faculty members communicate needs for faculty to the department chair who forwards requests deemed appropriate to the dean. The department chair consults with the program coordinator when part-time faculty needs are identified, and any faculty member can recommend part-time faculty candidates.

The MPH and BS program coordinators are responsible for guiding general program policy development and the program's planning and evaluation efforts. Program coordinators are responsible for ensuring that curricula align with college and university goals. Program coordinators, in collaboration with program faculty, may propose changes to course content or program requirements.

During an on-site meeting with institutional leaders, the provost stated that the university values the public health program because the program directly serves and caters to the needs of the community.

1.4 Organization and Administration.

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

This criterion is met. The program is situated in the Department of Health Science and Human Ecology, which facilitates cross-disciplinary collaboration among faculty and students. The program coordinator reports directly to the chair of the Department of Health Science and Human Ecology and works directly with the graduate school dean and associate dean. The department chair reports directly to the dean of the College of Natural Sciences. The program coordinator receives administrative support from a staff coordinator and from an assistant within the department.

Undergraduate students in the program share several core courses with students in other majors in the department, which allows for interdisciplinary learning. The undergraduate internship course is interdisciplinary, including students from the healthcare management major as well as public health education major. Program faculty collaborate with faculty from nursing and psychology on projects and publications related to health literacy, food security, veteran's health and other topics. Undergraduate students may also complete an interdisciplinary certificate in health equity and health disparities that requires them to take courses in the psychology and sociology departments. Graduate students also have access to elective courses in the psychology and sociology department.

1.5 Governance.

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

This criterion is met. The program operates through a mixture of program-specific and department-wide committees. The MPH Curriculum Sub-Committee meets quarterly to review syllabi, curricular changes and updates, course substitutions, transfer credits and course evaluations. Committee members include the department chair, the MPH program coordinator, an additional primary and adjunct faculty member and a rotating student representative. The adjunct faculty member serves as the program's assessment coordinator.

The Public Health Accreditation Committee meets annually to evaluate accreditation and department standards related to the practice experience and to evaluate data from the student satisfaction survey and the exit survey. Committee members include the department chair, the MPH program coordinator, the assessment coordinator and two MPH student representatives.

The Public Health Professional Development Committee was established after the program's consultation visit with CEPH in an effort to formalize processes for workforce development. The committee meets on

an ad hoc basis and periodically engages with local public health professionals to determine the needs of the workforce. Currently, the committee consists of the same members as the Accreditation Committee and meets via email because community partners are not centrally located.

The program's External Advisory Board includes representatives from community organizations, an MPH student, alumni and the MPH program coordinator. The committee meets annually to provide input regarding curricular changes, internship opportunities, program policies and public health workforce preparedness. There are a total of nine members of the committee including representatives from several health organizations, two alumni and a lecturer from the program.

Program faculty also serve on departmental committees that address program functions and needs. These committees include the Part-time Faculty Evaluation Committee, the Department Evaluation Committee, the Curriculum Committee, the Faculty and/or Chair Search Committee, the Graduate Admissions Committee, the Graduate Research Committee and the Graduate Marketing Committee. MPH students also serve on some of these committees, as appropriate.

In addition to program governance, public health faculty contribute to the operations of the college and university. The self-study shows that primary faculty members are actively involved in institutional service. For example, faculty serve on the Institutional Review Board, the Campus Health Oversight Committee, the Center for Developmental Disabilities Advisory Board, the Gender and Sexuality Studies Scholarship Sub-committee and the University Graduate Council.

Public health students have the opportunity to be involved in the department's chapter of Eta Sigma Gamma, the national health education honorary society. In addition, MPH students are encouraged to join the department's committees related to curriculum, research and marketing. Second-year MPH students are also encouraged to join the program's committees that focus on accreditation and professional development. Both undergraduate and graduate students who met with the site visit team noted that during orientation the program coordinator introduces the various committees and strongly encourages them to join a committee that they are interested in. Both undergraduate and graduate students also noted that faculty members and the program coordinator have an open-door policy, and they said that they feel comfortable providing input to enhance the program. One student gave an example in which he suggested a plan to increase recruitment efforts for the MPH program, and the program coordinator began actively working with him to implement his ideas.

Preceptors, alumni and community partners who met with the site visit team described the high level of comfort they have with expressing concerns about interns and with providing feedback about the curriculum and competencies to the program coordinator. A member of the External Advisory Board noted that although she had not officially attended a committee meeting, she has had several conversations in which she provided feedback about the content of the curriculum and the competencies.

1.6 Fiscal Resources.

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

This criterion is met. Funding for the program comes from tuition and state allocations, collected by the Chancellors' Office. These funds are distributed to each of the 23 campuses based on full-time equivalent (FTE) students and size of the campus. The university also allocates student fees. The total budget and allocations are distributed to each university division (academic affairs, student affairs, administration and finance, information technology services, advancement and the President's Office) with recommendations made by the University Budget Advisory Committee. This committee makes recommendations to the president regarding the distribution of funds; the majority of the budget is allocated to the Division of Academic Affairs, which allocates funds to schools and colleges.

During the site visit, program leadership discussed the process for requesting funding for programs within the college. The dean discussed the process of prioritization and resource allocation at the college and department levels. Since the public health program is part of the Department of Health Science and Human Ecology as a whole, fiscal resources to each program are delineated by the department chair. At the end of the fiscal year, all excess funds are returned to the university.

	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
Source of Funds					
Tuition & Fees	\$13,213	\$13,611	\$13,386	\$13,500	\$11,966
State Appropriations	\$849,022	857,592	\$902,340	\$1,006,118	\$1,087,311
University Funds	\$132,080	\$202,310	\$108,615	\$122,146	\$155,025
Grants/Contracts	\$12,000	\$4,000	\$28,000	\$28,000	\$44,200
Unit 3 Increases*	---	---	\$43,256	---	---
Augmentation**	\$6,967	\$7,863	---	---	---
Benefits	\$420,022	\$434,034	\$483,647	\$506,569	\$419,242
Other Add'l Sections***	\$4,000	\$7,949	\$27,614	\$38,145	\$75,575
Total	\$1,433,304	\$1,505,799	\$1,579,245	\$1,714,480	\$1,793,319
Expenditures					
Faculty Salaries	\$806,159	\$844,179	\$868,266	\$1,020,167	\$907,703
Staff Salaries	\$87,329	\$77,613	\$97,365	\$78,028	\$45,324
Benefits	\$420,022	\$434,034	\$483,647	\$506,569	\$419,242
Operations	\$24,078	\$34,882	\$26,247	\$26,512	\$82,742
Travel	\$5,169	\$2,712	\$8,126	\$20,697	\$470
Total	\$1,342,759	\$1,393,422	\$1,483,653	\$1,651,976	\$1,455,483

*The program added a 3 unit course and received funds from the college.

**Funds received from the state due to enforcing an admissions cap for the undergraduate program.

***Additional funds received from the college to supplement the budget of the program.

The program does not have a separate budget. Funding for the public health program reflects one-third of the department's budget, with each degree level (ie, undergraduate and MPH) receiving one-sixth, as shown in Table 1. Departmental funding pays for program faculty and staff salaries and benefits, travel,

conferences and general operating expenses. General operating expenses include faculty development, teaching supplies, office supplies, repairs and maintenance, technology expenses, printing of marketing/promotional materials and administrative expenses. The program coordinator makes requests to the department chair when additional program resources are needed.

Scholarships to support students are available and are awarded through the university, the Dean's Office and the Office of Graduate Studies. The program coordinator serves as the unit representative who advocates for these scholarships to be awarded to students. The scholarships are awarded based on a variety of criteria including financial need and academic performance.

1.7 Faculty and Other Resources.

The program shall have personnel and other resources adequate to fulfill its stated mission and goals, and its instructional, research and service objectives.

This criterion is met with commentary. As of academic year 2016-2017, the program had four primary faculty with an FTE that totaled 3.02. Primary faculty are complemented by 14 other faculty in the department and adjuncts who each dedicate less than 0.5 FTE to the program. Total faculty FTE has increased slightly over the last three years, and there has been a 33% increase in enrollment of both undergraduate and graduate students. At the time of the site visit, the SFR for total faculty was 30:1 for all undergraduate and graduate students combined, and 20:1 for the MPH program by itself. The program currently has 221 undergraduate and 34 graduate students. The program anticipates that enrollment will continue to increase as the university steps up its efforts to develop its pipeline from San Bernardino County schools.

The commentary relates to the high SFR and the need for additional faculty and staff support with the anticipated growth in student enrollment. University and college leaders have recognized this need and have promised that the program is second in line in the College of Natural Sciences for a new faculty line. The department chair expects to have a new faculty member on board as early as spring 2018. Although the program has a high SFR, students who met with the site visit team expressed satisfaction with the availability of the faculty members, the class size noting that each class has less than 25 students.

An administrative support coordinator and administrative support assistant contribute a total of 1.5 FTE to the department and provide a full range of support services to the six academic degree programs in the department, including the two public health degrees. Their work is supplemented by student assistants. Program leaders have concluded that additional staff support is needed to support the growing numbers of students and plan to increase the staff FTE commitment to 2.0 FTE. The department chair has already requested the additional funding necessary to bring the department's support staff complement to 2.0 FTE.

The department chair, staff and program faculty have offices in the physical sciences building. Several conference and study rooms are available to faculty and students. Three classrooms, a computer lab and two large lecture halls are shared by the department.

Students have access to a computer lab with 30 computers equipped with software for statistics and epidemiology. A study room is available for undergraduates, and two research rooms equipped with personal computers became available in fall 2016.

The university library provides access to over 150 subscribed databases, including PubMed, Biological Abstracts and ScienceDirect. The library has implemented a 'search for full-text' service that links its abstract and index databases with its electronic journals, enabling students to find print and online articles and make interlibrary loan requests. Students and faculty also have access to 20 other libraries that are members of the Reginal Libraries Cooperative in San Bernardino, Riverside and Los Angeles Counties.

Several campus offices provide workshops and technical support to faculty and students in developing skills in Blackboard course development and management, avoiding plagiarism and student counseling.

1.8 Diversity.

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

This criterion is met. The program is dedicated to diversity and cultural competency in its curriculum, service and research activities. The university's strategic plan and core values highlight commitments to diversity and inclusivity. The program's rationale for the designation of under-representation is based on CSUSB's diversity commitment. The majority student population at the university is Latino/Hispanic, and at least 80% of the university's students are first-generation college students. The population of the university mirrors that of the surrounding geographic community. Program recruitment and retention strategies address issues of diversity and are targeted toward underrepresented student populations including the following communities: African-American, Native-American, Latina and DREAM (Development, Relief, and Education for Alien Minors) Act students. The program has developed a systematic approach to addressing diversity. The program recruits DREAMers by partnering with the CSUSB DREAMers Resource and Success Center, and extension of the university's Division of Student Affairs to potential applicants with information about the program and its degree offerings.

Courses, competencies, research and service are aligned with issues related to equity and disparity. Examples of courses that include cultural competence include HSCI 301 Foundations of Public Health Education, which focuses on interrelationships among physical, social and cultural forces in the practice of health promotion and education; HSCI 359 Global Health, which explores the main principles of global health within the social, cultural, geographic, environmental, political and economic contexts that determine population-level health and illness; and HSCI 607 Cross Cultural Aspects of Health, which

focuses on the roles of cultures and their relationships to health status, health practices and health-seeking behaviors. HSCI 607 also examines the influence of culture on research, statistics, interventions and provision of health services.

During the site visit, program leaders discussed their programming and strategies to ensure that they recruit, retain and graduate a diverse student body. Program leaders mentioned that while Latino students are the majority at the university, there is a need to implement strategies that ensure students are retained and graduate from the program. University leaders highlighted university-level outreach activities with school districts for K-12 students, the surrounding community and African-American men via a Black and Brown Conference attended by more than 300 African-American and Latino eighth-grade male students from five Inland Empire school districts. The conference provided early college awareness and college preparedness information to increase the number of African-American and Latino males who enroll and graduate from college.

During the site visit, program leaders described several efforts to ensure a diverse faculty complement, which include recruiting in a variety of venues such as historically black colleges/universities and creating hiring packages to attract junior underrepresented racial/ethnic minority faculty. The program also adheres to the university's recruitment policy, which utilizes affirmative action to ensure a diverse applicant pool during the recruitment process.

Currently 2.9% students are African-American, no students are Native-American, 8.8% are Asian, 58.8% are Latino and 17.7% are Caucasian. Due to confidentiality restraints, the program is unable to note which students are DREAM (Development, Relief, and Education for Alien Minors) Act students and does not have demographic information for this group. For primary faculty, one out of the four (20%) is African American, there are no Native American primary faculty members, one (20%) is Latino, one (20%) is Asian and one (20%) is Caucasian. The program has established four outcome measures with targets of 50% of the faculty representing the diverse population of the community, 50% of students representing the diverse population of the community, 50% of students being first generation college students and implementing two cultural competence courses. The program has met and exceeded its targets for the past three years.

2.0 INSTRUCTIONAL PROGRAMS.

2.1 Degree Offerings.

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

This criterion is met. The program offers a BS and an MPH degree, as shown in Table 2. In addition to core coursework and a field experience, MPH students take seven prescribed courses and one elective.

The required coursework addresses cross-cultural aspects of health, research methods, grant writing, health behavior, health education practice, public health nutrition and advanced topics in health science and human ecology. The elective is chosen in consultation with the MPH graduate coordinator.

Site visitors reviewed the syllabi for the concentration coursework and found that the courses show an appropriate breadth and depth of content.

Table 2. Instructional Matrix		
	Academic	Professional
Bachelor's Degrees		
Public Health Education	BS	
Master's Degrees		
Community Health Education		MPH

2.2 Program Length.

An MPH degree program or equivalent professional public health master's degree must be at least 42 semester-credit units in length.

This criterion is met. MPH students must complete at least 56 quarter-credits of public health coursework with a B or better to earn the degree. No students have been awarded the degree for fewer than 56 credits in the last three years.

CSUSB defines each quarter-credit unit for graduate courses as equivalent to 10 hours of classroom/contact hours.

2.3 Public Health Core Knowledge.

All graduate professional public health degree students must complete sufficient coursework to attain depth and breadth in the five core areas of public health knowledge.

This criterion is met. All MPH students are required to complete the five core courses listed in Table 3. Review of these course syllabi showed that these courses provide students with sufficient knowledge and grounding in the core areas of public health.

The university allows 12 quarter units to be transferred. The program typical does not allow for waivers of core courses unless college-level administration makes a request to the program. In fall 2015, the Dean's Office requested that one student be allowed to substitute the epidemiology and environmental health core courses because of the possibility of not being within good academic standing. However, the program coordinator did not approve this request because it was not justified.

Core Knowledge Area	Course Number & Title	Credits
Biostatistics	HSCI 612: Public Health Statistics	4
Epidemiology	HSCI 617: Epidemiology	4
Environmental Health Sciences	HSCI 616: Environmental and Occupational Health	4
Social & Behavioral Sciences	HSCI 610: Social and Behavioral Influences on Public Health	4
Health Services Administration	HSCI 611: Public Health System Organization and Delivery	4

2.4 Practical Skills.

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

This criterion is met. All MPH students complete a practicum experience that requires them to demonstrate the application of skills acquired through their program of study. All MPH students are required to complete HSCI 689 Field Experience, a 120-hour practicum at a field site approved by the graduate coordinator. The graduate coordinator is the instructor for this course.

Students select a public health site for their practical experience from a list of sites provided by the program in consultation with the graduate coordinator. Students develop a field plan for their field experience using guidelines provided in the field experience course syllabus. Field experience preceptors must be in management positions in their agencies and have a graduate degree in public health or a closely related field. Students may complete a field experience in their workplace as long as their line of supervision is distinct from their day-to-day reporting. The graduate coordinator approves the selection of preceptor and provides an orientation and written expectations for service as a preceptor.

The graduate coordinator supervises students during the field experience to assure that the students complete mid-quarter and end-of-quarter evaluations, field plan reports, bi-weekly logs and an evaluation of the field site. Preceptors complete a written evaluation of students’ ability to complete tasks and demonstrate public health competencies.

In the last two academic years, students have completed field experiences in county health departments, school districts and community hospitals in San Bernardino and Riverside Counties. The self-study provides multiple examples of field experience reports in which the students describe the fieldwork setting, their activities during the practicum, their evaluation of learning outcomes, conclusions, recommendations and overall evaluation of their experience.

The program may allow a comprehensive examination in lieu of a practical experience in rare occasions or the substitution of practical experience gained through active duty service by its students in the military. However, these waivers or substitutions have never occurred in the program.

2.5 Culminating Experience.

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

This criterion is met. Students are required to complete two specific courses and create a professional portfolio as the culminating experience. Grant Writing (HSCI 685 or 609) requires students to prepare a grant proposal to fund a new service or intervention to meet the needs of a target population. Health Research Methods (HSCI 608) requires students to conduct a systematic literature review of a public health topic. Students have completed systematic reviews in areas such as food security and mental health and breastfeeding in relation to autism. Beginning with students admitted in the fall 2015 cohort, students create a graduate portfolio intended to demonstrate their ability to integrate and apply public health competencies.

Taken together, these three requirements are intended to demonstrate that graduates are able to synthesize and integrate knowledge acquired in coursework and other learning experiences and to apply theory and principles that demonstrates professional practice. Course syllabi and the MPH graduate student handbook provide details about the selection of topics for the grant proposal and systematic review, prescribe a format for the written end products and specify the required elements of the student portfolio.

The MPH coordinator, with input from other program faculty, reviews students' portfolios and performance in the two courses to assess the level of competency attainment. The program has continued to improve the culminating experience requirements, a need that has been acknowledged by program faculty. For example, the grant course was added after academic year 2014-2015 in response to student and External Advisory Board members' requests. The graduate student portfolio, introduced for students starting the program in 2015-2016 was a response to the need to showcase students' marketable skills.

Site visitors' review of sample portfolios revealed polished, professionally created electronic curriculum vitae that organize the skills acquired by graduates in areas such as leadership, teamwork, research, motivation, communications and specific skills with analytic software.

2.6 Required Competencies.

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

This criterion is met with commentary. The program defines a set of seven core and five concentration competencies for the MPH and defines nine core and five concentration competencies for the bachelor's degree. The self-study provides mapping that demonstrates the connection between required coursework and core and concentration competencies, and the self-study documentation indicates that all competencies receive primary and reinforcing coverage in the required curriculum.

Some of the competency statements are written at a lower level of assessment; however, the course learning outcomes presented on each course syllabus align with the expected level of mastery. For example, one of the seven MPH core competencies asks students to “understand how information is shaped and changed over time based on the sources, quality, value and perspective.” The choice of verb “understand” is not clearly measurable, nor does it define the expected level of skill associated with a master's degree. However, the courses that address this competency have learning outcomes that require students to discuss key topics, distinguish among study designs, critically evaluate the factors that influence the health status of populations served and summarize the principles of descriptive epidemiology with specific applications to public health and health services delivery settings. Other core MPH competencies (eg, “analyze and apply public health ethics in practice”) more closely align with the expected level of mastery. Faculty who met with the site visit team said that they intentionally developed broader and more general competency statements to ensure that they were easily mapped to the courses, while developing more specific learning outcomes for each course that would align with the overarching competency.

The commentary relates to opportunities to improve the clarity of the presentation and communication of competencies, which may, in turn, facilitate their use as a guide for curriculum and learning assessment. Reviewers were able to validate the minimal coverage of competencies necessary for compliance by comparing the curriculum maps provided in the self-study with the syllabi, but reviewers observed several competencies designated as “core” map exclusively or heavily to courses required for the concentration, and vice versa. Faculty who met with site visitors indicated that the courses considered core by CEPH's standards are not the same as the core courses in the department's health science curriculum matrix. Currently, the program's course offerings are aligned with a quarter system that forces the program to categorize courses in a specific way. The program is in the process of converting to a semester system that will allow it to align the courses more appropriately. Despite the discrepancies in the matrix, students are introduced to the core competencies in the traditionally defined core courses. In sum, while all competencies map to some required component of the curriculum, as required by this criterion, the “muddiness” of the presentation and documentation of competencies and their relationship to the curriculum may inhibit student, faculty and other stakeholders' ability to clearly understand and use the competencies.

Faculty developed the current competency set in 2014, moving from a model in which each course was guided by a distinct set of learning objectives to the current model in which multiple courses work together

to build a single set of competencies. The program coordinator spearheaded the process to develop the competencies and worked with the assessment coordinator, the department chair and all faculty members. Because of the time required to obtain faculty approval for the competency set and update syllabi, the refined competency set and corresponding set of curricular requirements were first implemented for students who entered in fall 2015. The previously required MPH competencies differed from the current set in that they were an extensive list of the NCHEC competencies, and each course had a varying set of competencies. There was not a set of core or concentration competencies.

After the competencies were developed in 2014, the program coordinator solicited feedback from preceptors, students, adjunct faculty, alumni and community partners. Preceptors, community partners via the External Advisory Board and alumni identified skillsets that are needed in the workforce that were not present in the curriculum. Adjunct faculty who are also working in public health settings outside of the program were able to provide similar feedback and orient themselves to the competencies. The program also used data from the student satisfaction survey and the exit survey to identify any gaps in the curriculum as noted by students.

The self-study indicates that competencies are formally evaluated every three years but that adjustments may occur annually in response to student feedback, as needed. Faculty members who met with the site visit team described the review process as being an iterative and systematic process that has been occurring annually. At the beginning of each quarter, the assessment coordinator ensures that all faculty members 1) understand the spirit of the competencies and 2) complete a report describing the different ways in which they assess each competency in their courses. Faculty members also have the opportunity to discuss any changes they would like to make to the competencies. Official changes are discussed at the Curriculum Committee meetings. Competencies are available on the department's website, program Blackboard pages and syllabi.

Graduate students who met with site visitors were familiar with the competencies and their relationship to the curriculum. Graduate students described having access to a competency grid in their courses that clearly illustrates the competencies that they attain in each course. They also described how they demonstrate competency attainment by uploading artifacts from their courses to their portfolio. Students also expressed satisfaction with the competencies and noted that the competency-based curriculum pushed them to develop their professional and leadership skills. They said that they were able to translate their training and use their network to secure employment.

2.7 Assessment Procedures.

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

This criterion is partially met. The program identifies a set of tools through which it assesses students' competency attainment and student outcomes. Tools include activities in courses that are linked to competencies. The self-study indicates that a number of courses, such as the required statistics course for MPH students, include assessments that require application of skills and/or simulate an aspect of public health practice. For example, in the statistics course, students use statistical concepts and methods to create a data brief in the format used by federal agencies.

The graduate fieldwork experience requires that students develop a proposal, with their preceptors, prior to starting their internship that specifically maps the cross-cutting and core competencies to their internship project. Undergraduate students are also required to complete a field experience plan prior to starting their internships. For graduate students, the internship coordinator and preceptor review the student's bi-weekly and final self-assessment evaluations in which students note how they have attained each competency. Undergraduate students are required to complete an internship reflective report summarizing their experiences and the degree to which they achieved the goals that were set forth in their field plan. The MPH culminating experience includes both a project that addresses specific competencies via the grant writing and research methods courses and a portfolio in which students discuss and document competency attainment. For the portfolio, students align the competencies and choose the classes that they feel have allowed them to meet each of the competencies. They also have to write a reflection describing what they did to meet each competency. The program coordinator evaluates the final portfolio. Faculty members also evaluate aspects of the portfolio that are relevant to their courses.

The program tracks graduation rates and employment or enrollment in additional education within one year of graduation as aggregate measures of student outcomes. For the MPH program, graduation rates surpass this criterion's threshold. Although the university allows students seven years to graduate, most students graduate within three years. MPH entering cohorts have been very small (one to eight students). The graduation rates are as follow for the cohorts that entered in 2010, 2011, 2012 and 2013: 100% (n=1), 100% (n=4), 80% (n=5) and 75% (n=8). The program had traditionally relied on a survey to track post-graduation employment or enrollment in additional education, but response rates were very low. In 2016, the program made several changes to its data collection: it began disseminating the survey to students' external (non-CSU) email accounts and supplemented survey data with outreach through social media. For students who graduated in 2014 and 2015, the program reports data on 87-90% of graduates. Of all for whom outcomes were known, nearly all were employed or continuing education and training. One student was not pursuing additional education or employment by choice.

The concern relates to missing or inadequate data on 1) graduation rates and 2) graduates' employment for bachelor's degree students. The self-study does not present any data on graduation rates, noting that current institutional data reporting practices make it impossible to disaggregate the program's students from a larger data set of bachelor's degree students. The data presented in the self-study on employment

or enrollment in additional education includes data for only six students who graduated in 2014 and two who graduated in 2015. Faculty estimate that from academic year 2007-2008 to academic year 2016-2017, a total of 253 students have graduated from the bachelor's degree program, and that a range of 20-50 students graduate from the program each year. Faculty who met with site visitors reported the following plans for future data collection: the program coordinator has requested access to university-level data from the Office of Institutional Research and has discussed making modifications to the exit survey. The program coordinator and the assessment coordinator are considering adding a question to the exit survey that would allow the program to track when students matriculated into the program, which would allow for more accurate calculations of graduation rates.

An additional aggregate measure of student outcomes is pass rates for the CHES credential exam, though the exam is not mandatory. Over the two years of data reported in the self-study, 15 students or graduates took the exam and 73% passed. The data do not distinguish between undergraduate and MPH students, since both are eligible for the exam.

Finally, the program collects information from undergraduate and graduate alumni through an alumni survey administered one year after graduation and from employers of graduates through one-on-one interviews. To date, the program has collected information from 20 undergraduate and five MPH alumni and eight employers since beginning this practice in 2015. The data collection requests information on strengths and opportunities for growth in students' workforce readiness and skill sets, among other topics. Alumni of the undergraduate program spoke of the need for additional seats in required classes as a top concern. They also spoke of opportunities to increase the curricular emphasis on critical thinking skills. Alumni of the MPH program spoke of the need for mandatory orientation and greater evening availability of advisors. Employers of graduates praised their organizational abilities and abilities to work individually and in groups. They suggested opportunities for greater emphasis on critical thinking and improving work-life balance.

Alumni who met with the site visit team stated that they felt very knowledgeable and prepared to enter the workforce upon completion of the program. Community partners and preceptors who work with alumni noted that compared to graduates from other public health programs, the graduates from the CSUSB program—both undergraduate and graduate alumni—were more equipped to work in the community and take on leadership roles.

2.8 Bachelor's Degrees in Public Health.

The overall undergraduate curriculum (eg, general education, liberal learning, essential knowledge and skills, etc.) introduces students to the following domains. The curriculum addresses these domains through any combination of learning experiences throughout the undergraduate curriculum, including general education courses defined by the institution as well as concentration and major requirements or electives.

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

- the foundations of social and behavioral sciences
- basic statistics
- the humanities/fine arts

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

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

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

Students must demonstrate the following skills:

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

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

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

- advocacy for protection and promotion of the public's health at all levels of society
- community dynamics
- critical thinking and creativity
- cultural contexts in which public health professionals work
- ethical decision making as related to self and society

- **independent work and a personal work ethic**
- **networking**
- **organizational dynamics**
- **professionalism**
- **research methods**
- **systems thinking**
- **teamwork and leadership**

This criterion is met. The program requires all students to complete coursework in the four general knowledge domains. In three of the four areas, the program defines one or more required courses associated with the major. In the area of humanities and fine arts, the university's general education requirements ensure coverage.

The program documents coverage of all components of the defined public health domains through the required major-specific coursework, which includes courses such as Health and Society: An Ecological Approach, Principles of Epidemiology, Human Disease Mechanisms, Introduction to Public Health, Global Health, Health Policy and Law, Health Program Planning and Implementation and Health Policy and Law. The self-study splits its mapping of the public health domains across two separate sets of tables, but, when read together, the evidence validates the program's assertion of coverage of all required elements.

The program ensures that all bachelor's degree students demonstrate competencies in the two required domains relating to communicating public health information and locating, using, evaluating and synthesizing public health information. Assessment opportunities embedded in required courses require a number of oral presentations as groups and individuals; work with and use of case studies; literature reviews; research-based papers, including use of PubMed; a policy analytical paper; a social marketing campaign; and media presentations using PowerPoint and/or video, among others.

All students must complete a 120-hour internship after completion of coursework. The internship process involves creation of a field plan with a preceptor and faculty member and requires submission of a reflective report that summarizes the experience and the degree to which the experience aligned with the student's intended goals. The internship is an experiential learning activity, and the professional portfolio and reflective paper, along with other products produced for the internship site, serve as cumulative and integrative experiences.

The self-study documents an array of activities, mostly in required courses, that address cross-cutting concepts necessary for success in further education, the workplace and lifelong learning. For example, during the required pre-fieldwork course, students must conduct informational interviews and network with colleagues. Needs assessment activities in several courses foster understanding of community dynamics, and the health policy and law class addresses key elements of advocacy for public health.

Undergraduate students who met with the site visit team expressed satisfaction with the domains and noted that the competency-based curriculum pushed them to strengthen their skillset and made them feel more confident to enter the workforce after graduation.

2.9 Academic Degrees.

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

This criterion is not applicable.

2.10 Doctoral Degrees.

The program may offer doctoral degree programs, if consistent with its mission and resources.

This criterion is not applicable.

2.11 Joint Degrees.

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

This criterion is not applicable.

2.12 Distance Education or Executive Degree Programs.

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

This criterion is not applicable.

3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE.

3.1 Research.

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

This criterion is met. Research and scholarly activities are valued and encouraged within the department. Junior faculty receive a one course reduction per quarter during their first two years to focus on research. Faculty who provide research mentorship to undergraduate and graduate students also receive a time

reduction. Junior faculty work with experienced faculty mentors across the university to help enhance their scholarship and productivity. At least 50% of the program faculty are expected to be involved in research. Faculty are involved in research and scholarship activities totaling over \$700,000. These activities include participation in intramural funded research programs and submission of extramurally funded research grant applications. Currently two of the four primary faculty members are involved in research and are in the process of publishing.

Faculty participate in research in areas such as mental health, health services administration, epidemiology pedagogy, diabetes, substance use/abuse, sexual health, discrimination, telemedicine and social marketing. During the site visit, faculty described how they share research opportunities with students in specific courses and in advising sessions. Faculty also disseminate their research through a variety of peer and non-peer-reviewed forums.

During the site visit, alumni and undergraduate and graduate students discussed various opportunities to work with faculty on research. Student discussions highlighted their eagerness to be involved in research and the translatable skills they learned through these opportunities. Students discussed learning about research opportunities through orientation, faculty discussions, faculty invites and in the classroom.

Recently, the program supported 16 students to attend a health policy conference in Sacramento. Faculty are able to receive funding to support research and dissemination-related travel on annual and ongoing bases. Funding is provided from a variety of sources including the department, the college, the Teaching Resource Center, the Office of Graduate Studies and the Continuing Education Reserve Funds (generated from lab fees).

3.2 Service.

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

This criterion is met with commentary. Primary faculty were involved in service and consulting activities with a number of national professional organizations, peer-reviewed journals and charitable foundations during academic years 2014-2015 to 2016-2017. The program seeks to have 50% of primary faculty participate in community service each year. In each of the last three years, 100% of faculty reported involvement in service activities.

Faculty are incentivized to participate in service activities by tenure and promotion policies that include a review of service activity as part of the annual faculty review process. Probationary faculty are expected to demonstrate a developing level of participation while non-probationary faculty are expected to demonstrate significant participation and leadership in service activities. Service activities must be consistent with teaching abilities, expertise and leadership qualities and should further foster intellectual

relationships with the community. Part-time faculty are encouraged to work with primary faculty on service activities.

Students participate in a wide range of service activities in San Bernardino County, including service with the Girl Scouts, the American Heart Association, Habitat for Humanity and animal shelters. Students also participate in peer mentoring.

The commentary relates to the need for a better accounting of faculty service activities, especially to public health and other community organizations within the program's own service area. During the course of the site visit, faculty and students cited examples of on-campus and community service activities that were not captured in the self-study. Program leaders acknowledged this reporting gap and have plans to ask faculty for more frequent service activity reporting, perhaps twice a year.

3.3 Workforce Development.

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

This criterion is partially met. The self-study documents that initial workforce development efforts began in summer 2015 following a CEPH consultation visit, when the program became aware of the full expectations of this criterion. The program began its first assessment activities through key informant interviews with four stakeholders in the public health community. Interviewees represented local/county government, employees of community-based organizations and members of professional associations. Program faculty developed a flyer of potential workshop offerings based on faculty expertise. This flyer was distributed to members of the community. Faculty have offered workshops on data visualization, grant writing and evidence-based interventions.

During the site visit, program leaders and faculty described their interest in further developing the program's workforce development objectives in collaboration with the External Advisory Board, preceptors and community stakeholders. Community stakeholders confirmed their participation as key informants and showed enthusiasm for continuing to collaborate with the program as it further develops activities.

The concern relates to the lack of a systematic process for assessing workforce needs and using this data to develop offerings. The workshops that have been offered were based on faculty expertise and availability rather than workforce feedback. The program does not have a process in place for consistently assessing the needs of the workforce to inform its workforce development offerings. During the site visit, program leaders mentioned that plans for implementing a process are in development, and the program is also considering offering a certificate program for local health department staff.

4.0 FACULTY, STAFF AND STUDENTS.

4.1 Faculty Qualifications.

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

This criterion is met. Faculty hold collective expertise and varied educational capabilities with which to implement the program's mission. The self-study, with the confirmation of the site visit, notes faculty involvement in public health education, community practice and research. Faculty members are individually and collectively well qualified to offer breadth and depth of public health at the undergraduate and graduate levels. Adjunct, part-time and classroom-based lecturers bring extensive experience in public health education and community health. All faculty hold terminal degrees and experiences appropriate to the field of public health and relevant core disciplines.

Substantial expertise is evident in community-engaged and applied public health research. Many of the primary faculty members possess wide-ranging experience in health disparities, social epidemiology, health services administration and Latino health. Adjunct and part-time faculty have expertise in grant writing, environmental health, health policy and community health.

During the site visit, faculty remarked about their public health practice and research work with many local, state and national public health organizations. Students and alumni remarked on their awareness of faculty expertise and passion for research. Site visit discussions with community preceptors, External Advisory Board members and alumni highlighted their roles in providing expert lectures and supervision in areas not consistently represented by the program faculty.

The program developed two outcome measures to assess faculty qualifications, with targets of all faculty members having a doctoral degree and 70% of part-time faculty having at least one year of public health experience. The program has met both targets for the last three years.

4.2 Faculty Policies and Procedures.

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

This criterion is met. The university faculty manual is supplemented by department policy guidance, which together contain the policies, rules and regulations for faculty in the department. New faculty members are introduced to these documents at the time of hiring, and the documents and subsequent updates are available in the faculty administrative manual.

Faculty on the tenure track are evaluated through the university's RPT process. This process includes an annual department review led by the department's Evaluation Committee. Part-time faculty are evaluated through a comprehensive system that includes course evaluation review, course observation and an

annual meeting with the department chair. The dean conducts reviews of part-time faculty who are on a three-year contract and assesses their renewal.

Various resources are available for faculty to continually improve their teaching, research and service activities. The university offers workshops and conferences to support faculty development. Workshop topics include Blackboard, online technology and pedagogy. Faculty are also able to engage in learning communities with other faculty across campus. During the site visit, faculty discussed the mentorship and ongoing reviews they receive through various department, college and university mechanisms. Faculty confirmed the availability of these resources to full-time, part-time and adjunct faculty members.

4.3 Student Recruitment and Admissions.

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

This criterion is met. The program has documented policies and procedures for recruitment and admission to its degree programs that provide a full description of degree completion and admissions requirements, an academic calendar and job outlook information.

The Program Marketing Committee is responsible for student recruitment efforts. The MPH coordinator markets the program through contacts with health professionals in the area, part-time faculty, printed promotional materials, the website, the Facebook page and during information sessions and workshops. Undergraduates learn about the public health major through an open house for students newly admitted to the university and through HS 120, a required course for students in the department to introduce them to the disciplines within the department. Students outside of the department may take this course as an elective. Potential undergraduate students also learn about the major through faculty presentations at other campus events such as Men of Color.

The program has undergone sustained growth in the last three years, with undergraduate enrollment increasing by 29% and enrollment in the MPH program more than doubling from 12 to 27 students. Although the number of MPH applicants has increased from 19 in 2014-2015 to 56 in 2016-2017, the acceptance rate has remained about the same at 62%. In 2016-2017, 71% of accepted applicants enrolled in the program, up from 42% in 2014-2015. The program currently has 185 undergraduates and 27 MPH students enrolled. University leadership who spoke with the site visit team cited the university's involvement in a learning alliance with secondary schools in the community as a promising pipeline for bringing more students into public health and other health professions.

The MPH program is targeted to working professionals, with most on-campus classes meeting in the evening. New students are only admitted as a cohort in the fall academic quarter. Applicants are required to have completed an undergraduate major in health sciences or a related field. The GRE requirement

may be waived for applicants from the undergraduate program who achieve grades of 3.0 or higher in at least four core public health-related courses. Undergraduate students are admitted first to the university and then select the public health major. The department may not impose its own requirements for admission to the program; however, all undergraduate students must receive a grade of C or better in upper division courses to graduate from the program. Since academic year 2007-2008, 253 students have graduated with bachelor's degrees from the program.

The program has established outcome measures for admissions standards and academic performance in the program, including average undergraduate GPA for admitted MPH students (3.0 or higher), minimum GPA for MPH students enrolled in the program (3.0 or higher) and undergraduate grades for upper division courses (C or higher). The self-study reports that the program met all targets for the past three academic years.

4.4 Advising and Career Counseling.

There shall be available a clearly explained and accessible academic advising system for students, as well as readily available career and placement advice.

This criterion is met. The program has a clearly explained and accessible academic advising system for students. Undergraduate students are required to meet with their academic advisors every quarter to review their academic and personal goals. Faculty advisors use a progressive advising worksheet and curriculum roadmap to guide students through the process. A hold is placed on student registration for the following quarter until students see their advisors. New faculty receive mentoring from senior faculty to help them develop their advising skills.

The MPH coordinator meets individually with each MPH student at the start of their academic program to create a program plan, develop a timeline for the practical experience, choose elective courses and discuss career development. The MPH coordinator meets with the entire cohort at the beginning of each quarter to discuss progress and concerns.

Student satisfaction surveys are distributed each quarter to undergraduates in one of the required courses (epidemiology) and in the spring to graduate students. Survey responses indicate a high degree of satisfaction among graduate and undergraduate students in two areas in particular: with their preparation for additional formal education or career and with their advisors' presentation of accurate information about program requirements.

Students receive career counseling in required courses such as HSCI 301 Foundations of Public Health Education, where the instructor brings in guest speakers from the workforce. Students also receive career counseling from their assigned faculty advisor. The university's Career Center and the college's nine professional advisors in its Health Professions Advising Center also offer career counseling services, including resume workshops, interviewing skills and job search resources. Students interviewed during

the site visit spoke highly of the faculty as an invaluable resource for information about career and student research opportunities.

Students may communicate concerns or grievances to program leadership informally through faculty or formally through a student grade grievance policy that is available on the university's website. To date, there have been no grievances filed within the program.

Both undergraduate and graduate students who met with the site visit team expressed satisfaction with the availability of faculty and noted that they valued the open-door policy that faculty members have. Students also noted that faculty and the program coordinator go above and beyond to plan out the curriculum and address future career goals.

Agenda

COUNCIL ON EDUCATION FOR PUBLIC HEALTH ACCREDITATION SITE VISIT

California State University, San Bernardino Public Health Program

May 8-9, 2017

Monday, May 8, 2017

- 9:00 am Resource File Review and Request for Additional Documents
- 9:45 am Break
- 10:00 am Meeting with Institutional Leadership
Provost Shari McMahan, Associate Vice Provost Rong Chen, Dean Kirsten Fleming
- 10:45 am Break
- 11:00 am Meeting with Faculty Related to Curriculum and Degree Programs
Dr. Monideepa Becerra, *epidemiology, biostatistics, health policy*
Dr. Nicole Henley, *biostatistics*
Dr. Lal Mian, *environmental health*
Dr. Salome Mishgeni, *epidemiology, health policy*
Prof. Amber Olney, *foundations of public health, assessment*
Dr. Paulchris Okpala, *health policy*
Prof. Laura Sosa, *internship*
Dr. Angie Verissimo, *health behavior*
Dr. Dimitri Tamalis, HSCI chair
- 12:00 pm Break
- 12:15 pm Lunch with Alumni, Community Partners and Preceptors
Devin Arias MPH (also an alumna)
Community Engagement Manager
American Lung Association
2014, MPH
- Maggie Hawkins MPH, CHES
Director, Randall Lewis Health Policy Fellowship
Partners for Better Health
- Diane Podolske PhD
Director, Office of Community Engagement
CSUSB
- Tess Webster-Henry MPH
Lead Health Educator, Wellness Coordinator
CSUSB Student Health Center
- Dulce Becerra BS, MA.Ed, CHES
Health Instructor
Dignity Health
- Celina Su BS (also an alumna)
Project support specialist
Reach Out
2016, Public health education
- Christy Scroggins MPH
2015, MPH
Lecturer, CSUSB
- Ashley Flores MPH
2013, MPH
Medical Emergency Planning Specialist – Preparedness and Response Program
County of San Bernardino, Department of Public Health

Frank Becerra MPH, CHES
2012, MPH
Health Education Specialist II
County of San Bernardino

Tinuade Akinfolarin-Arbouet BS
2008, Public health education
Health Education Specialist II
County of San Bernardino, Arrowhead Regional Medical Center

Denise Ramirez Mosqueda BS, CHES
2008, Public health education
Health Educator/Student Health Specialist
Riverside community college

1:15 pm

Break

1:30 pm

Meeting with Faculty Related to Research, Service, Workforce Development, Faculty Issues

Dr. Monideepa Becerra
Dr. Ted Coleman
Dr. Nicole Henley
Dr. Paulchris Okpala
Dr. Angie Verissimo
Dr. Lal Mian

2:30 pm

Resource File Review and Executive Session

4:00 pm

Meeting and Light Dinner with Students

Itzel Palacios
Mark Kirkland
Alyse Reifer
Julian Corral
Daryien Lee
Isela Fernandez
Alexa Christopher
Brandon Ignatowski
Abigail Lopez
Carolina Gabaldon
Robert Avina
Kaitlin Brehaut
William Vandyke
Connie Marmolejo
Tamara Jreisat
Loren Landeros
Keely Niemeyer
Shadia Adham
Anthony Olivar
Alexa Reyes

5:00 pm

Adjourn

Tuesday, May 9, 2017

8:30 am

Meeting with Program and Department Administration

Dr. Monideepa Becerra, MPH and PHE coordinator
Prof. Amber Olney, Assessment coordinator
Dr. Dimitri Tamalis, Department chair

9:30 am

Executive Session and Report Preparation

12:15 pm

Exit Briefing

1:00 pm

Adjourn