

REVIEW FOR ACCREDITATION
OF THE
PUBLIC HEALTH GRADUATE PROGRAM
AT
PURDUE UNIVERSITY

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:

October 12-13, 2017

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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 Purdue University. 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 October 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.

Founded in 1869, Purdue University is the state of Indiana's land-grant university and a Carnegie Foundation tier one research institution. The university has a main campus in West Lafayette, Indiana that is situated on 2,660 acres of land and enrolls more than 30,000 undergraduate and 10,000 graduate and professional students. Purdue University also has a 10-acre complex and \$1 billion Discovery Park enterprise for interdisciplinary research and learning. The university is home to ten colleges, one of which is the newly created College of Health and Human Sciences.

The college was formed to bring together nine academic units to foster the mission of improving the health and well-being of people. The college consists of nine academic units, all of which contribute to the Public Health Graduate Program. As the program is an open-campus program, meaning that the program pulls from many different departments across campus for faculty and instruction, faculty from each department of the college are used to instruct courses within the program. The program's structure promotes cross disciplinary collaboration among both faculty and students. While the public health graduate program is in its infancy, program leaders expect student enrollment to grow tremendously in the coming years.

The Council on Education for Public Health accepted Purdue University's application on October 24, 2015. This is Purdue's initial accreditation by the Council on Education for Public Health.

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 public health graduate program at Purdue University. The program is situated in a regionally accredited university and extends to its students and faculty the same rights and privileges as other professional programs on campus. The program is housed in a college with a mission to improve the health and well-being of people. The program is organized as an open-campus format, meaning that the program pulls from many different departments across campus for faculty and instruction, thus interdisciplinary collaboration between faculty and students is evident and prominent. The college maintains cross-disciplinary collaboration through the process of cluster hiring. This enables the program to infuse the values and goals of public health into activities of the college as a whole.

The university boasts a prominent research facility and focus. The university, along with the program, promotes and encourages active research participation between faculty, students and community stakeholders. The program has a strong connection with the Purdue Cooperative Extension Service, which enables service and research opportunities in each of the state's 92 counties. The mission, vision,

goals and values of the public health graduate program at Purdue are defined and promote success among faculty, students and the community.

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 mission of the Public Health Graduate Program (PHGP) in the College of Health and Human Sciences at Purdue University is as follows: “to discover, disseminate, and apply knowledge to promote the public’s health at home and abroad.” The mission statement is expanded by the vision: “to achieve equitable, sustainable global health” and by the stated values: “professional integrity; respect for diversity; multidisciplinary and collaborative training, research and practice; and excellence in research, learning, and service.”

The program in its current form officially launched in 2014 with support from all units of the College of Health and Human Sciences. The development of its mission and goals in the succeeding two years engaged the participation and skills of the faculty and administration of the college, the faculty and students of the new program and two external advisory groups.

The goals established by the program address student needs for knowledge and skills to enable them to promote population health, both locally and globally, to design and interpret research and use findings to promote population health and work with others to carry out and evaluate interventions within communities. Five objectives address student learning outcomes, faculty training and responsibilities and administrative responsibilities, such as recruiting a diverse student body and assuring quality courses and faculty. Three research objectives address student engagement in faculty-led research, student and faculty research presentations and dissemination activities and several learning opportunities, with eight measures. Two service objectives address faculty and student participation in community-based work, with six measures. The measures are specific and quantified. One service measure addresses success in retaining graduates in Indiana after they have graduated.

The program reviews its guiding statements regularly through multiple mechanisms. The External Advisory Committee reviews the guiding statements at each meeting and the program’s Journal Club also reviews the guiding statements at each monthly meeting. The Journal Club is open to all, both affiliated and unaffiliated with Purdue University. Each meeting has a portion of its time dedicated to a review of the program. Through either mechanism, if recommendations for revisions occur, the Executive Committee makes decisions accordingly.

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 partially met. Program leaders collect data for each of the twenty-nine outcome measures. The PHGP Director and staff distribute data on the outcome measures to the External Advisory Committee, the External Advisory Team, the Curriculum Committee, the Admissions Committee and the Practicum Committee as appropriate to their areas of responsibility. With the coordinator, the PHGP director works with these five committees to obtain feedback and develop potential improvements to better program performance. The self-study cites specific examples of programmatic changes that resulted from the deliberation of the committees and their resulting recommendations. Examples include the introduction of a public health-focused statistics course as opposed to the statistics course offered by the statistics department. Students expressed interest in the option of a more public health-focused course and as a result, a statistics course that uses public health data sets and examples was created and implemented. Another example includes the adoption of strong English proficiency score requirements in the admissions process for international applicants as a result of external stakeholder feedback.

Specific evaluation activities include: course evaluations, alumni surveys, exit surveys, annual faculty reviews and culminating project evaluation forms.

The concern relates to the limited data available due to the recent inception of the program. Site visitors were not able to validate the program's use of data or see full evidence of a feedback loop. Although the self-study does provide examples of program changes based on stakeholder feedback, these changes have not directly related to the program's outcome measures or data collected.

1.3 Institutional Environment.

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

This criterion is met. Purdue University is the state of Indiana's land-grant university and a Carnegie Foundation tier one research institution for very high research activity. Combined, Purdue's four regional campuses enroll nearly 69,000 students in 200 undergraduate majors, 80 master's and doctoral programs, and professional degree programs in pharmacy and veterinary medicine. Purdue University has been accredited since 1913, and in 2010 the Higher Learning Commission in the north central region continued the university's full accreditation status. Along with regional accreditation, Purdue University holds accreditation from specialized accreditors in fields such as occupational health sciences, audiology, school counseling, nursing and veterinary studies.

The university houses ten colleges: agriculture, Purdue Polytechnic, management, engineering, honors, veterinary medicine, liberal arts, education, pharmacy and health and human sciences. The College Of Health And Human sciences is home to the (PHGP). The program solely includes the MPH and the joint degrees that make up the unit of accreditation. The dean of the College of Health and Human Sciences provides vision and executes the strategic plan for the college. The director of the program has primary administrative responsibility for the program, including supervision over the program coordinator, the online degree coordinator, the part-time secretary and all full-time faculty financially supported through the program. The director of the program is equivalent to the heads of the nine other departments in the College of Health and Human Sciences. The dean directly oversees the work of the program director and the overall performance of the program. The dean reports directly to the provost of the university, who in turn reports directly to the president. The president is the chief executive officer of the institution and reports to the Board of Trustees.

The provost allocates funds to support the College of Health and Human Sciences to the dean of the college, who then determines the budget for the program with input from the program director and the college's business office. The dean has also authorized the development office of the college to seek funds to support the program. If special needs arise, the director brings this to the attention of the dean.

Recruitment, selection, and advancement of personnel is driven by the heads of the departments. The department heads consult with the dean, who in turn submits a request for faculty hires to the provost. If a new position is approved, the charge shifts to the director, who puts together a search committee made up of faculty with a breadth and depth of knowledge to identify the most qualified candidates. This committee then generates a list of the top candidates and refers this list to the director, who then consults with the dean to determine the best candidates to invite to campus for interviews and ultimately offer the position.

Tenure and promotion policies reside at the university level; the Public Health Graduate Program is not authorized to grant tenure or promotion to faculty. The director does, however have input into the promotion and tenure of faculty members. When faculty are up for promotion and tenure, the director of the program provides direct feedback to the department heads regarding the respective faculty.

Curricular oversight is housed in the program itself, as it has considerable autonomy in setting standards, policies and curriculum. The program is required to submit proposals for curricular changes documents to the Graduate School to ensure alignment with the university as a whole.

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 internal organizational structure of the Public Health Graduate Program is led by the program director. Operating under the program director is the External Advisory Committee, the External Advisory Team, the program coordinator, the online degree coordinator and the Executive Committee. The director has primary administrative responsibility for the program, and program responsibilities include curriculum oversight, practicum activities, admissions, budget, adherence to accreditation policies and procedures, adherence to university policies and procedures, interactions with internal and external stakeholders and fundraising. The director is also the chair of the Executive Committee and convenes the External Advisory Committee.

The assistant director has four areas of responsibility: coordinating student practicum experiences, providing student academic and career counseling, recruiting and managing the application process and general program administration. A program coordinator reports to the assistant director. The coordinator provides basic administrative support for the assistant director. Equivalent to the assistant director is an online program coordinator. The online coordinator will initially act as liaison between the program, Wiley Education Services and Purdue's Office of Digital Education. The online version of the program has not yet been initiated. Once the online program is fully launched, the online coordinator will address faculty, student and curriculum issues related to online learning. The program has hired four limited-term lecturers to begin course development for the online MPH program. They are being guided by the instructors from the on-campus courses while adapting course content for online learning.

As an open-campus program, the PHGP draws faculty from 13 departments in five colleges across campus. The self-study provides examples of interdisciplinary engagement such as the PHGP journal club and the practice of cluster hiring.

The PHGP journal club enables learning outside of the classroom and fosters interdisciplinary interactions. The journal club takes different forms and incorporates different approaches to interactive learning. The journal club uses both faculty-led research discussions and open discussions on selected topics. Students and faculty attend all journal club sessions to boost interaction outside of the classroom. These sessions are also open to individuals that are not affiliated with Purdue. Many of the special topics discussed in the journal club pertain to issues specific to Indiana, such as the pervasive opioid crisis.

Another area that enhances interdisciplinary cooperation is Purdue's practice of cluster hiring of faculty. A cluster hire includes a hiring of typically six individuals within one to three years who will complement each

other and provide a basis for growth in interdisciplinary research. Once on campus, these hires are encouraged to cooperate, and there are funds available from the provost to support such activities. Both faculty and administration cited cluster hiring as a strong way to build collaboration as well as expertise in a subject area. For example, the most recent cluster hires held a health symposium on campus that was open to students, other faculty and community stakeholders.

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 has six committees and one advisory team that make up its governing structure: Admissions Committee; Curriculum Committee; Practicum Committee; Awards Committee; Executive Committee; External Advisory Committee and the External Advisory Team. Prior to 2016, an Accreditation Committee existed but was disbanded after the hiring of the initial online degree coordinator, as it was established that the online degree coordinator would take over the duties of the committee prior to the initiation of the online degree program. Each committee includes faculty members with diverse areas of expertise to ensure that a broad base of perspectives is available for deliberations and votes. The program coordinator serves as a non-voting member on all committees, with the exception of the Awards Committee, and student members are included where appropriate. For instance, due to the sensitive nature of student applications, no student member is included in the Admissions Committee.

The Executive Committee is chaired by the program director and is composed of assistant director; online degree coordinator; program coordinator; the chairs of the Admissions, Curriculum, and Practicum Committees; an at-large faculty member; a student; and an alumnus/community member. The charge of this committee is to review all facets of the program and provide recommendations to the director to inform programmatic decisions. The Evaluation Committee is a sub-committee of the Executive Committee.

The Admissions Committee is comprised of faculty with diverse areas of expertise. The committee is charged with formulating admissions policies to ensure program standards are met, practices are fair and efficient and program goals are achieved. Applications to the program are first reviewed by the program coordinator to assure completeness and are then forwarded to the committee for a recommendation. The Executive Committee approves admissions criteria as proposed by the Admissions Committee.

The Curriculum Committee is responsible for developing and monitoring competencies for all tracks and concentrations in the program. This committee meets at least twice annually to review syllabi and course evaluations, as well as stakeholder recommendations about curricular matters and competencies.

The Practicum Committee develops the policies and procedures for meeting the competencies and other educational goals for the practicum project. This committee evaluates, approves or denies each student's proposed practicum experience to ensure proper alignment with the stipulated guidelines.

The Awards Committee, a sub-committee of the Executive Committee, sets policies and procedures to govern application processes and review criteria for the various awards offered through the program. The committee also reviews applications and determines awardees. This committee is composed of three faculty members from different departments and a student.

The Accreditation Committee existed to guide the program through the accreditation process, however, once the online degree coordinator was hired, program leaders determined that she would facilitate the remainder of the accreditation process prior to the implementation of the online degree program and therefore, the Accreditation Committee was disbanded in 2016.

The External Advisory Committee has a primary function of providing scientific and administrative advice and guidance aimed at promoting the ethics, quality, operation and growth of the program. This committee is comprised of 10 individuals of local, state and national leaders in the field of public health.

The External Advisory Team is comprised of representatives of various stakeholders of the program. The team provides ongoing review and advice on the policies and practices of the program. Along with the program coordinators, the External Advisory Team works underneath the program director to provide scientific and administrative advice and guidance aimed at promoting the ethics, quality, operation and growth of the program. The composition of the team is alumni, practicum supervisors, public health practitioners and community leaders. This team is contacted by the Assistant Director for feedback at approximately monthly intervals.

Students, the program coordinator, or the committee chairs are typically the first to identify needs for program policy development. These needs are placed on the Executive Committee agenda and discussed at the next meeting. Each committee is responsible for developing policies that govern activities in its purview, and the Executive Committee then reviews the policy recommendations. The committee can also develop new policies but confers with appropriate committees when matters are related to a given committee's domain, as well as with relevant college and university offices.

The program's Executive Committee is the primary planning body of the program and deliberates on programmatic matters, develops courses of action and seeks input when necessary. Evaluation occurs at all levels of the program and works both in the top-down and bottom-up directions. The committee also reviews survey data and uses these data to provide suggested programmatic changes. The committee is comprised of the program director, coordinators, chairs of all current committees, a faculty at-large member, the PHGP student president and a member of the External Advisory Team. The Executive Committee provides recommendations to the director to inform programmatic decisions.

The dean of the college determines the resources that will be available to the program annually to cover fixed and discretionary expenditures. The director is primarily responsible for maintaining the program's operations within the annual budget and does so by approving expenditures and working in consultation with the Executive Committee and the dean, when appropriate.

Student recruitment and admissions policies are developed by the Admissions Committee, which uses a rubric to review each applicant and make recommendations to the director. At the end of each term, the program coordinator creates an admissions report that includes the average test scores, GPA and diversity information and sends to the director for review. The director then disperses this information to Admissions Committee. Based on this information, the committee discusses approaches to enhance recruitment practices.

Faculty recruitment, retention, promotion and tenure are governed by the provost, who determines the total number and distribution of faculty across campus. The dean of the college submits a request for faculty hires to the provost, and once approved, the dean delegates responsibility to the program director, who assembles a search committee.

Academic Standards and policies including curriculum development is the charge of the Curriculum Committee. Each year an open curriculum discussion is held at the last Curriculum Committee meeting. This meeting is held between all faculty and students and enables them to speak openly and directly with each other regarding ideas for the program curriculum.

Purdue's status as a land grant university guides research and service expectation policies for faculty. The policies are driven by the tripartite mission of promotion of discovery, learning and engagement. Faculty are expected to be engaged in all areas and these expectations are made clear at the outset of hiring as well as covered periodically with the unit head and the director.

Students are involved in governance by active participation in committees and through individual student associations. Many students stated that the Public Health Student Association was a great way to be

involved and to feel included in the community at Purdue. Students are also involved in all faculty and staff search committees.

It was evident through interviews that faculty are heavily involved in committees and decision making. Both students and faculty noted that they feel valued and free to share feedback related to all aspects of the program. Faculty noted in meetings how much respect and admiration they have for program leaders.

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. The program has adequate financial resources, and its projections for increased resources from growth in the on-campus MPH and future online MPH program appear to enhance the ability of the program to fulfill its stated mission and goals in the future.

The provost emphasized the importance that Purdue is placing on professional degree programs. The online program is offered in partnership with Wiley Education Services, which is backed by strong marketing research and experience with other Purdue online programs, such as those in education and communication. The online program will be financed through a 50% split of tuition between the MPH program and Wiley. Combined with the shared faculty arrangements within the college, the program expects a strong financial base for the MPH program in the next five years. Table 1 reflects past and projected revenue and expenses for the years 2015-20. Table 2 reflects on campus program projected growth and Table 3 reflects online program projected to growth.

Table 1. Source of Funds and Expenditures by Major Category, 2015 to 2020					
	2015–16 Actual	2016–17 Actual	2017–18 Estimate¹	2018–19 Estimate	2019–20 Estimate
Source of Funds					
Tuition & Fees ²	\$289,661	\$388,667	\$533,712	\$583,066	\$613,306
Other ³	\$30,000	\$30,000	\$30,000	\$30,000	\$30,000
Total	\$319,661	\$420,909	\$530,479	\$599,116	\$629,007
Expenditures					
Faculty Salaries & Benefits	\$198,551	\$218,832	\$343,912	\$352,509	\$361,322
Staff Salaries & Benefits	\$57,639	\$112,786	\$125,828	\$128,974	\$132,198
Operations ⁴	\$35,700	\$44,988	\$75,000	\$60,000	\$67,500
Total	\$291,891	\$376,607	\$544,740	\$541,483	\$561,020
Net	\$27,770	\$42,061	\$18,972	\$71,582	\$82,286

¹Program began operations in fiscal year 2014–15 with first students enrolled in 2015–16. Therefore, fiscal years 2017–18 through 2019–20 are estimates.

²Includes annual university budget allocation for program operations as well as income from tuition specific to the program less university revenue share, foregone revenue, and fees for technology, repair and rehabilitation, student activity, fitness and wellness, and facilities and administration.

³\$30,000 discretionary fund allocation provided annually.

⁴Includes supplies, printing and advertising, travel and entertainment, memberships, consulting, and technology equipment.

Table 2. PHGP 5-Year Projection (Campus Program)							
		2015–16 Actual	2016–17	2017–18	2018–19	2019–20	2020–21
Enrollment	Resident	6	14	14	17	20	23
	Non-Resident	0	4	4	5	6	7
	Part-Time Resident	4	8	8	10	12	14
	Part-Time Non-Resident	2	1	1	2	2	2
	Total Enrollment	12	27	27	34	40	45
	Income	\$118,070	\$276,270	\$276,270	\$347,895	\$409,289	\$460,450
	Expenses		\$185,987	\$185,987	\$259,405	\$320,247	\$355,051
	Net Income / (Loss)	\$(16,631)	\$90,283	\$90,283	\$88,490	\$89,042	\$105,399

Table 3. PHGP 5-Year Projection (Online Program)						
		2017–18	2018–19	2019–20	2020–21	2021–22
Enrollment	Resident	8	15	21	22	23
	Non-Resident	18	36	48	50	55
	Resident Corporate				2	3
	Non-Resident Corporate				6	6
	Total Enrollment FTE	26	52	68	80	87
	Income	\$379,000	\$748,000	\$992,000	\$1,148,000	\$1,244,000
	Expenses	\$403,313	\$713,496	\$940,059	\$1,036,295	\$1,100,191
	Net Income / (Loss)	\$(24,313)	\$34,504	\$51,941	\$111,705	\$143,809

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. The program has sufficient faculty, staff and other resources to support the current size and scope of the program.

For the 2017-18 Academic Year, the PHGP has 32 faculty members who dedicate at least 50% time to the program: 18 in family and community health, six in environmental health and eight in health statistics. These faculty members are housed in 13 departments within five colleges across the Purdue campus, with most in the College of Health and Human Sciences. Due to the open campus format of the program, each faculty member has a specific academic and administrative home, which is not the PGHP. However,

the faculty dedicate a portion of their time, at least 50%, to the PGHP in terms of instruction, mentorship of students and participation in internal governance. These faculty instruct students of the program through program specific courses but students of the home department are also able to take these courses. For instance, a communications professor in the College of Liberal Arts allots 50% of his time to his duties within the public health program and the rest of that time is allotted to his home college. Another example is a faculty member from the Department of Consumer Science who allots 100% of her time to the program of public health. This faculty member teaches the required family and community health concentration course design and analysis of public health interventions and is also heavily involved in program governance and mentorship of students. Students noted that they were involved in research activities with this faculty member and that they were traveling abroad to present on this research.

At the time of the site visit, the PHGP staff consisted of one full-time program coordinator and one half-time office administrator. There were two active recruitments, one for a full-time assistant coordinator and one for a full-time online degree coordinator. Both positions were filled after the site visit.

Faculty office space is distributed around the campus depending on the college affiliation of the faculty member. Classrooms, meeting spaces and laboratories are scheduled on an “as-needed” basis, but appear adequate, although not consolidated. Research facilities, libraries and computer equipment and support for faculty and students are extensive and adequately meet the needs of public health students and faculty.

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 demonstrates a commitment to, awareness of and sensitivity towards diversity. The program has written goals for diversity and cultural competency, which are as follows:

- Examine racial, ethnic, and cultural influences on health outcomes in program coursework, research, and projects
- Invest in community programs and cross-institutional initiatives that address causes of health disparities and promote health equity among minority populations
- Develop ongoing service learning opportunities for students with community organizations that serve diverse populations

The university has robust inclusive language in its mission statement and has operationalized that mission through the establishment of a Division of Diversity and Inclusion on campus. The university also

has established cultural and resource centers on campus. Events are held throughout the year to engage the Purdue community in learning about the heritage of various populations.

The university has formal policies that mandate equal opportunity, equal access and affirmative action and that define and forbid harassment, and these policies are available to students, faculty and applicants online. Program goals on diversity and cultural competency are a consistent operationalization of university policy and federal law. The program has a regular schedule to review its goals on diversity.

The program follows university policies in its recruitment of faculty and staff. During phone interviews of prospective faculty, applicants are asked how they would contribute to diversity and inclusion if hired. During the site visit, current students discussed their participation in recent recruiting interviews for faculty and noted that participation provided them with opportunities to provide input on their perceptions of a faculty candidate's fit with the program, including commitment to diversity and inclusion.

In recruiting students, the program makes presentations to minority clubs on campus and participates in graduate school functions that recruit from African American and Latino constituencies, in addition to engaging in informal networking. Minority students are connected with clubs and associations available on campus to foster a welcoming environment and promote a successful student experience. The Office of International Students and Scholars assists with full support for international students' issues.

The program tracks its categories of diversity on a year-by-year basis and reviews the data annually. A summary of demographic data on matriculating MPH students over the past four academic years shows no definite trends, but a sustainment of diversity. As of spring 2017, 29% of the program's student body identified as one or more of the following: international status, indigenous identity (American Indian, Native Alaskan, Native Hawaiian, or other Pacific Islander), ethnicity (Hispanic/Latino) and by racial group (non-white).

Males are underrepresented in the program, making up only 14% of the PHGP student body, in striking contrast to the rest of the university where recruitment of female students is an ongoing effort. Other measures of student diversity such as applicants from rural counties is not formally tracked, but faculty showed a depth of knowledge not only of the status of rural counties, but current estimates of demographics of the state, including recently arrived Central American immigrants, southeast Asian immigrants and other constituencies.

Student culminating experiences involving rural counties are included in the sample, indicating that the importance of public health in rural populations is available in the student experience. Student international experiences, including a practicum in Tanzania, showed program commitment to global

health and diverse populations. During interviews, minority students who met with site visitors shared experiences beginning with their initial recruitment and early encounters that made them feel welcome in the program.

There is an opportunity for more detailed prospective study of under-represented and underserved potential student constituencies in order to develop strategies to recruit them into the program.

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. Table 4 presents the program's degree offerings. The program offers an MPH degree with concentrations in family and community health, environmental health and health statistics. Students in the program can enter the MPH program through three different tracks: standalone, dual degree or combined 4+1 degree. The dual degree track is open to students pursuing an MS, MA or PhD degree who also would like to earn an MPH. The combined degree option is for students pursuing a BA or BS degree who wish to graduate with an MPH degree as well. Through the combined degree option, students take 12 MPH credits in their senior year of their bachelor's degree and then complete the MPH in one additional year.

The curriculum includes 18 credits of core courses, which include the five core public health areas along with a sixth course that provides training on public health ethics and gives an overview of the field.

In the family and community health concentration, all students take one required course in design and analysis of public health interventions and are required to take three credits from a list of seven courses relating to health communications. Students are also required to take six credits from a list of 10 courses pertaining to health disparities and social determinants. In addition, students have the option of taking their remaining three credit hours from a list of seven courses that have been preapproved for this concentration, or students can take the remaining three credits within the previously listed course groupings. The final three credits are mapped to each student's culminating experience.

In the environmental health concentration, students are required to take three credits in toxicology and one credit in advanced topics in exposure assessment. Students then take three credits from a group of seven courses that pertain to environmental agents/occupational health/ industrial hygiene and students also take three credits from a group of four courses related to environmental management. Students then

have five remaining credits that can be selected from any of the concentration courses while considering competency training and career objectives.

Students in the health statistics concentration take nine required credits in applied regression analysis, design of experiments and sampling and survey techniques. Students then take three credits from a group of seven courses related to geographic information systems, geospatial modeling and analysis, design, conduct, and analysis of clinical trials, clinical biostatistics, design and analysis of epidemiologic studies, family and couple interventions in health problems and structural equation modeling. The remaining course credits are chosen between a list of three preapproved courses or from the grouping listed previously. The final concentration credits are mapped to the culminating experience.

Students take 15 credit hours of concentration coursework. Site visitors reviewed the coursework required in each concentration and found it to be appropriate for master's-level study. Site visitors also found the concentration coursework to provide a depth of knowledge in each discipline and this was backed by student accounts of application of coursework. Three hours of practicum and three hours of culminating experience leave three hours for elective course work.

The program does have an established process for approving course substitutions. Students must submit a course substitution petition to the Curriculum Committee, which must include the alternate course's syllabus; a description of the skills, knowledge and competencies covered; and if needed, a memo from the instructor. The Curriculum Committee then approves or denies the request. At present, three students have received approval for a higher level statistics course to be used in place of the introductory statistics course.

Table 4. Instructional Matrix – Degrees & Specializations		
	Academic	Professional
Master's Degrees		
Family and Community Health		MPH
Environmental Health		MPH
Health Statistics		MPH
Joint Degrees*		
Combined (4+1)	BS/BA	MPH
Dual Master's	MS/MA	MPH
Dual PhD and Master's	PhD	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. The PGHP requires all professional master’s degree students to complete 42 credit hours.

The program follows university guidelines for the definition of credit/contact hour with a one hour lecture per week equivalent to one credit hour. No degrees have been awarded for fewer than 42 credit 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. The five public health core areas are addressed through five separate courses consisting of three credit hours each for a total of 15 credit hours. Those five courses are listed in Table 5:

Core Knowledge Area	Course Number & Title	Credit
Biostatistics	HK510 Introduction to Quantitative Methods of Public Health/STAT 503 Biostatistics	3
Epidemiology	HSCI 547 Fundamentals of Epidemiology	3
Environmental Health Sciences	HSCI 575 Introduction to Environmental Health	3
Health Services Administration	CSR 590 Public Health Administration	3
Social and Behavioral Sciences	HK 576 Theoretical Foundations of Health Behavior	3

The competencies identified and the learning objectives listed in all five core course syllabi are appropriate in each area for students to acquire the skills needed for understanding and engaging in the practice of public health.

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. The practicum provides the opportunity in the program for students to apply core public health skills, tools and knowledge. The requirement is 400 contact hours. There is a process for students who are currently employed in public health practice or have past public health career experience to apply to reduce the contact hour requirement--a maximum of 200 contact hours can be waived. To date, no student has waived any practicum hours. With the rollout of the online program, more non-traditional students are anticipated, and many of these may be persons already employed in the public health workforce. The waiver may become more common when these students are enrolled.

Written guidance includes a student handbook and a site supervisor handbook. There are standard forms to guide students and site preceptors through the practicum experience. The written guidance and processes in place were satisfactory in supporting one student's overseas practicum, and that student noted ample support through this practicum.

The Practicum Committee is charged with the review and approval of the student's site and preceptor selection. Currently, the program coordinator plays a central role in administering the practicum. Students register for HHS 592, and are graded on a scale of 100 possible points by the practicum coordinator. Students complete and submit a practicum report after every 80-hour segment of the practicum, equating five written reports. Final grades are based on a portfolio including five practicum reports, midterm and final preceptor reports and the completion of a practicum presentation.

A review of available practicum portfolios demonstrates robust opportunities to exercise competencies learned in the classroom to the public health workplace. Student interviews validated the workings of the practicum component of 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 with commentary. Each MPH student is required to complete a culminating project during his or her final semester. Students who matriculated prior to August 2017 must submit a project with two components: a written report and accompanying poster presentation describing a solution to a public health problem, and a comprehensive professional portfolio.

Copies of the reports and posters were presented in the resource file. Students identify a public health problem, document the nature and extent of the problem, provide information on potential actions to improve the resulting public health outcomes and define their own proposal for action. Sample portfolios included coursework completed in core, concentration, practicum and ethics courses, as well as professional materials and each respective student's public health problem report and poster presentation. The public health reports ranged in topic from teenage pregnancy in a nearby county, to reducing stress in children to feminine hygiene behaviors. Each report had a corresponding poster presentation.

The program has determined that a stronger public health learning opportunity would be created by engaging students with existing community programs, teaching grant-writing skills and creating a product of value to the community. Therefore, effective with the class matriculating in August 2017, the

culminating experience will include completion of a non-profit grant-writing workshop sponsored by the program, then working with a partnering agency (or a researcher) and a faculty mentor to develop a grant proposal to carry out an intervention to improve community health outcomes for the population served by the agency or researcher. The deliverables will include a grant proposal (that also serves as a written report) and a poster presentation of the intervention project. The final grade for the culminating experience project will be assigned by the faculty mentor and will reflect the student's demonstration of mastery of the required competencies.

The commentary relates to the steep increase in student workload in regard to prior planning with the transition to the newly defined experience. The new design will require more advanced planning by the students, including choosing a community partner before settling on a problem definition and intervention plan, completing the grant-writing workshop and then designing the intervention collaboratively with the community partner. The current administrative support for this culminating experience project is thin in the absence of a fully trained assistant coordinator.

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 has developed nine core competencies for the MPH degree. These competencies address the five core areas of public health as well as additional skills related to ethics and global health. The program has also identified five competencies each for the three concentrations offered.

Prior to the 2015 accreditation application, the program used the Council on Linkages Between Academia and Public Health Practice's competencies. After the application was submitted, the PHGP Curriculum Committee was established and reviewed, revised and drafted new core and concentration competencies. The revised competencies were sent to the Executive Committee and returned to the Curriculum Committee for final approval. This process will continue to occur every two years to assure relevance in competencies. Since the Executive Committee is composed of external partners in practice and academia, stakeholders were, and will continue to be, actively involved in the development of core and concentration competencies. Students are also involved in the review of competencies through evaluations to ensure stated competencies are being adequately covered in core courses. The program recently implemented a similar process for concentration competencies. Core and concentration competencies are widely available to students through the student handbook as well as the program website.

The commentary relates to the lack of advanced skills identified within the concentration competencies. Through a review of concentration course syllabi, it is noted that the skills gained through the courses are not accurately captured by the listed competencies. The concentration competencies, as written, do demonstrate a more specialized area of knowledge but do not always define a more advanced set of skills. In both the core competencies and the concentration competencies, the skills listed are similar in nature, such as “identify and critically evaluate,” “develop” and “describe.” Although in the concentration competencies these skills focus on more acute subject matter and the skills attained are more advanced. For example, in a health statistics course students are given patient data to analyze and are taught how to stratify risk and health outcomes. The students also noted that they were able to translate their statistical software programming skills to their practice experiences to develop and run statistical tests for the practice placement site. These skills are not defined by the concentration competency set put forth.

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 met. The program has clear, well-documented assessment methods for student performance and competency attainment. Student progress in achieving competencies is monitored in four different ways: course grades and competency completion, practicum assessment, culminating project assessment and student self-assessment of competency attainment.

Students receive a degree status report after each completed semester that documents the competencies covered in each course taken. Students must also earn a 3.0 (B) or better in each core course, or they must retake the course, and students may earn a 2.0 (C) in only two concentration courses while maintaining a 3.0 overall GPA. Students are required to meet with the program coordinator every semester to discuss degree progression, including competency completion and attainment. During this conversation, if a student identifies areas or competencies they feel they have not mastered, coursework and experiential learning targeting that competency is prioritized.

Students stated that they felt comfortable approaching the coordinator about any issues they may run into, especially when it relates to a course. Students stated that they felt their feedback was heard and valued and noted several instances where their feedback was taken into consideration by administration and promptly implemented. For example, as many of the courses are held in respective departments, students were taking a biological sciences health statistics course. Many students felt as though this course was not grounded in public health and that they needed a more public health focused course as their foundation into statistics. Students quickly shared this feedback and faculty developed a new course with a more focused topic area on public health.

During the practicum portion of the program, students are required to provide five written reports, each representing 80 hours of work completed, and detailing activities addressing each core competency the student has chosen from the list of nine. At the end of the 400-hour practicum, a summary report that demonstrates mastery of core competencies is submitted to the program coordinator. The coordinator reviews and identifies any gaps in training or understanding and prompts discussions if needed. Preceptors are also required to submit midterm and final evaluations indicating coverage of competencies. During the midterm and final evaluations, the preceptor, student and the program coordinator all meet to discuss progress, goals and future plans during the practicum. Students stated that this was a valued component of the practicum.

For the culminating projects, a three-person committee comprised of either three faculty members or two faculty members and one practitioner evaluates each student. This team of individuals utilizes a Likert scale evaluation to assess how well students demonstrate their proficiency in each of the core and concentration competencies. Each member of the committee submits an evaluation on the student's culminating project products.

Since the program has only been in operation since academic year 2015-2016, no student has reached the maximum time to graduation of seven years. The program is on track to reach the threshold graduation rates in the given seven years maximum. While the program anticipates a wide variability of the average time it takes to graduate based on factors such as enrollment in a dual degree program, the program is still on track to meet the required threshold of a graduation rate of 70%. This is evidenced by the fact that over the last three years, across all degree types only one student has withdrawn from the program.

Since the program has produced only 20 graduates to date, current job placement rates do not provide a robust set of data to analyze; however, on-site discussions made it clear to reviewers that Purdue graduates are highly desired in the surrounding areas, as well as nationally. The program coordinator reported that she is continually contacted about recent graduates, and one alumnus reported that he was offered employment prior to his graduation from the MPH program. Similarly, alumni and employer surveys are thin and only received four and three responses, respectively. While the program has surveys and processes in place, there are few graduates from the program, so few surveys have been sent. Based upon the feedback presented, however, both alumni and employers both have reported high satisfaction with the education provided in the PHGP at Purdue.

2.8 Bachelor's Degrees in Public Health.

If the program offers baccalaureate public health degrees, they shall include the following elements:

Required Coursework in Public Health Core Knowledge: students must complete courses that provide a basic understanding of the five core public health knowledge areas defined in Criterion 2.1, including one course that focuses on epidemiology. Collectively, this coursework should be at least the equivalent of 12 semester-credit hours.

Elective Public Health Coursework: in addition to the required public health core knowledge courses, students must complete additional public health-related courses.

Public health-related courses may include those addressing social, economic, quantitative, geographic, educational and other issues that impact the health of populations and health disparities within and across populations.

Capstone Experience: students must complete an experience that provides opportunities to apply public health principles outside of a typical classroom setting and builds on public health coursework. This experience should be at least equivalent to three semester-credit hours or sufficient to satisfy the typical capstone requirement for a bachelor's degree at the parent university. The experience may be tailored to students' expected post-baccalaureate goals (eg, graduate and/or professional school, entry-level employment), and a variety of experiences that meet university requirements may be appropriate. Acceptable capstone experiences might include one or more of the following: internship, service-learning project, senior seminar, portfolio project, research paper or honors thesis.

The required public health core coursework and capstone experience must be taught (in the case of coursework) and supervised (in the case of capstone experiences) by faculty documented in Criteria 4.1.a and 4.1.b.

This criterion is not applicable.

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 met. There are two graduate joint degree options, an MS or MA combined with the MPH and a PhD combined with the MPH. There is also an accelerated BA/BS to MH program that is five years in duration.

For both dual degree programs, the students require the same curriculum and grading criteria as the standalone MPH students and they also consult with the program coordinator for academic advising. For the joint MPH/PhD program, up to 30 credit hours can be shared between the two degrees. Students are able to use their MPH coursework to fulfill requirements of their PhD program. For the joint master's program, up to nine credit hours can be shared. Students in the program are also able to use their MPH coursework to fulfill requirements of their other master's degree. The ability to do so is due to the interdisciplinary nature of the programs, given that the MPH program utilizes faculty from across different departments and colleges.

For students pursuing the combined BA/BA and MPH degrees, up to 12 graduate credits can be completed during their senior undergraduate year. These students complete their practicum at the end of their program rather than between years one and two of the standalone MPH.

Advising, curriculum and degree audit sheets are the same for all tracks as for the standalone MPH.

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 partially met. The program will launch its online MPH degree in May of 2018. The program has formally partnered with Wiley Education Services to develop and integrate current courses into an online format. The online MPH degree will offer only one concentration, family and community health. At the time of the site visit, program administration stated that the online program will meet the same competencies as the on-campus program. Program and college administration note that they are actively recruiting highly qualified faculty to teach the courses, and the expectations of the practicum will be identical to that of the on-campus program.

Program administration stated on-site that student projections were developed in conjunction with Wiley Education Services, an organization that Purdue has worked with successfully in other capacities. The

program stated that they believe there is a strong demand for the online degree both in Indiana and globally among working individuals and individuals in rural areas.

A member of the Executive Committee has previously worked with Wiley to create an online degree in a different college and will continue to be a resource for the program as it moves forward with its integration of the online MPH.

The concern relates to the fact that the online program's current stage of implementation means that it was not possible for site visitors to verify this degree offering's alignment with accreditation criteria. At the time of the site visit, the program was still developing courses and determining the requirements for the practicum. Therefore, the site visit team could not confirm that the curricular expectations meet the standards for accreditation. Similarly, the program was still engaged in its efforts to recruit faculty members. It has not yet fully articulated or developed plans to ensure that distance-based faculty are actively engaged in program operations, other than teaching their assigned courses, in a manner that complies with CEPH's expectations. Finally, the program has not yet defined clear procedures for providing advising and career services to online students, though program leaders do plan to hire additional staff for these functions, as discussed in Criterion 4.4.

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. The program draws both primary and secondary public health faculty affiliated with the PHGP from many departments across the campus, and the research areas they address are highly diverse. There is a particularly strong cluster of faculty working in the area of women's health. Current research activity in this area focuses on maternal and child nutrition, birthing practices, local teen pregnancy rates among Hispanic groups, intimate partner violence and decisions about healthcare. Several researchers are exploring healthcare issues related to patient-provider communications, creating a patient-centered system and assessing healthcare quality. Others are exploring the factors that cause health disparities and effective interventions. This includes work in the area of Latino youth and families, tackling food insecurity, increasing community participation of marginalized groups and reducing early childhood educational gaps. Additionally, environmental health researchers are studying the effects of toxins on human health and designing new vector-control methods. This includes metal-induced neurotoxicity, environmental causes of Parkinson's disease and epigenetic mechanisms of toxicity.

The PHGP estimates that the program has received research awards directly related to public health amounting to \$22 million. Student participation in research is highest among the PhD/MPH joint degree students, but standalone MPH students have been engaged in research as well. Several newer faculty members have engaged students in research at the community level, and students are encouraged to present and/or publish research results. During the site visit, students described active participation in faculty research that addressed their primary public health interests and provided opportunities for developing their skills. Students also shared that they will be traveling internationally to present research completed with a faculty member.

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. Broad and ongoing participation of faculty in service at local, state and national levels is evident through a review of the self-study as well as on-site discussions. A number of faculty members have won awards for their service to Indiana public health in recent years. Five faculty members serve on the Indiana Public Health Practice Council as part of a collection of leaders with the mission to tackle Indiana's public health problems cooperatively. Faculty also are engaged in the Indiana Public Health Association (IPHA), serving as committee members and chairs within the organization and Purdue University serves as a host on a rotating basis for the annual conference. A public health entomologist maintains an educational website for the general population, and a consumer science professor continually partners with local health departments on service learning projects.

Purdue University's land grant status promotes and supports local requests for advice and expertise to engage in shaping the public health landscape in Indiana. The promotion and tenure process for faculty defines and requires service as one of its five key areas upon which a candidate is considered. Discussions with faculty validated enthusiasm for service, both locally and globally. Faculty encourage student involvement in service, and students expressed satisfaction with opportunities for service.

Faculty who met with site visitors noted that one of the program's primary faculty members, whose full-time appointment is in consumer science, leads class service-learning projects through multiple county health departments. These projects pertain to barriers, strategic planning, performance management and social marketing in each health departments' efforts to become accredited.

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 met. The program solicits input from its Advisory Board and Advisory Team on needs and opportunities in the surrounding areas. The program works with several statewide organizations such as the Indiana Public Health Association (IPHA), the Indiana Board of Health and the Indiana Public Health Practice Council (IHPHC) to identify and fulfill needs in the Indiana public health workforce. The MPH program director serves on the IHPHC taskforce devoted to workforce development. Practicum supervisors also provide ongoing communication to the program to express pertinent educational and workforce needs.

A collaboration with the Purdue Cooperative Extension Service enables the program to identify needs in all 92 counties of the state, as the service has education specialists administering community-based services in each county. The PHGP also utilizes these sites as practicum placements for students in the program and has developed a program for training in grant writing, which is a much needed skill especially in rural regions of the state.

The program offers no certificate programs at this time. Faculty stated that the rollout of the online MPH is expected to help meet workforce development needs of those who cannot come to campus for traditional classroom instruction.

The program reports successful offerings to the community workforce including lectures, symposia, and guest lecturers. Interviews on-site reinforced ideas presented in the self-study of the program offering training and educational opportunities to the surrounding workforce, such as providing emergency and disaster preparedness training to local health departments. Faculty of the program provide ad hoc training to practitioners in the form of symposia and guest speaking, for example, a nutrition faculty member provided training to the Purdue Extension education meeting on the new nutritional guidelines and how they should be incorporated into nutrition education in the field. Also, in the spring of 2017 a faculty member provided a statewide training called Advocacy 101 through her post as chair of the Policy Committee at the IPHA. The program also plans to explore opportunities to gather feedback from the general practicing community on webinar training interests. Many of the development opportunities are geared toward the practitioner community within Indiana, speaking to the university's land grant status.

The program has plans to explore opportunities to gather additional data, including feedback from the general practicing community on webinar training interests, but it does not yet have a method of doing so.

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. The faculty complement is well qualified through its education and training to support the program's educational offerings, mission and goals. During the site visit, the team met with many faculty and heard about their research, service and teaching activities in the program. Students spoke about their own engagement with faculty, obtaining mentors for research and advisors for practicums and culminating experiences. There was a strong positive tone in these discussions.

The self-study documents the high level of public health preparation and expertise through education, research, regular publication of work in major journals and at major professional meetings by faculty.

The program capitalizes on faculty qualifications during intentional cluster hires. Focusing on the specific qualifications of faculty allows the program to enhance teaching and research in areas of identified gaps.

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. University policies govern the PHGP faculty and these policies are compiled in the faculty and staff handbook posted online. On site discussions noted a recent change in the promotion and tenure process as it pertains to input from the program director. In past years, promotion and tenure was the sole charge of each faculty member's home department. Beginning this year, however, the program director will provide input to the department heads when promotion and tenure is being considered for a faculty member.

Each relevant college/department carries out its own faculty recruiting. Recruitment has recently been enhanced by the university through a cluster hiring process, in which two or more departments agree on hiring a group of faculty members, allowing them to focus on key areas of concentration and maximize the pedagogic and research potential of the faculty complement in the college. Faculty and administration noted this process as a major benefit for the program and the university as a whole. At faculty sessions, this opportunity was described enthusiastically, particularly in relation to the statistics cluster.

The faculty of the future online program are being recruited currently and will be hired for limited-term lecturer positions. The university policies for this type of faculty are clearly set out in the faculty and staff handbook, and are updated regularly.

There is an overall College of Health and Human Sciences policy for the annual review of tenure-track assistant professors. Faculty are assessed using indices such as course evaluations by students and other faculty, service to the unit, college, and university (eg, participation on committees and administrative assignments) sources and amount of funding, number of publications and their impact, professional recognition (eg, invited lectures, awards) and special considerations. The flexibility of this evaluation is purposeful and designed to recognize the different demands and expectations placed on individual faculty members as they progress professionally and the program evolves. More specifically, there is an annual “merit review,” conducted by department heads. The review is used to facilitate dialogue with faculty about their performance and serves as the basis for annual merit raises. Participation in the college evaluation of primary faculty of the PHGP by the program director is an important enhancement of the process.

Purdue offers many different resources for faculty development and support. Some of these resources are: The Big Ten Academic Alliance: Academic Leadership Program, Entrepreneurial Leadership Academy, American Council on Education Fellows Program, sabbatical leaves, dual career assistance, teaching and learning technologies and other fellowship opportunities. College wide resources are as follows: HHS Research Achievement Award, Spirit of Land Grant Award, HHS Program for Faculty Assistance in External Grant Writing, HHS Early Career Research Achievement Award and many others. Faculty are also supported through recognition at the national, international, university and college wide level.

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 leverages numerous conventional platforms for internal recruitment, including presentations to student organizations and undergraduate classes, publishing flyers, connecting with undergraduate advisors and maintaining a presence with university graduate recruitment programs. The program is increasing its visibility online and in the public health practice community. Some students reported participating in recruitment efforts for the program, while other students reported being enthusiastic proponents of the program when having informal conversations with prospective applicants.

Candidates for admission to the standalone or joint graduate programs are required to hold a baccalaureate degree from an accredited institution of higher learning. Three letters of recommendation, a

personal goal statement, a CV or resume and GRE/GMAT/MCAT scores are required. A GPA of 3.0 is the minimum threshold for grades. The TOEFL is required of international applicants.

Students applying for the BA/BS to MPH degrees need to be Purdue University undergraduates with a GPA of at least 3.5 and at least 89 credit hours of undergraduate coursework, which is the same as the university requirement for senior status. They must have all undergraduate course work completed within one year after starting the dual enrollment program.

University-branded recruitment materials and career field information are contemporary and well-designed. Complete information on the program and its concentrations is readily available on the internet.

Data provided show that the program has increased its number of matriculating students over the past three years, with fluctuations in number of students choosing each concentration without discernable trends. The standalone MPH continues to matriculate the majority of students, even as there has been growth in joint programs. In the last three years, the standalone degree has grown from 12 to 32 students. Student numbers in the dual degree programs have grown from five to 15 students in the last three years and student numbers in the BA/BS to MPH program have grown from four to nine students in the same time frame. Competitiveness of incoming students suggests an increase in academic readiness among accepted applicants. Matriculating students are also exceeding the program's set targets in terms of grade point average, GRE scores and English proficiency testing.

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 coordinator is the linchpin of the advising process. Advising often precedes actual enrollment for potential dual enrollment BA/BS to MPH students, and recruiting assistance transitions into academic advising for many of the standalone MPH applicants.

The program coordinator meets with all students at least once per semester, during which time they review the advising checklist. Students enthusiastically expressed admiration for the program coordinator in her advising role. Students noted many times throughout on-site interviews how critical the program coordinator's role is in student success. Students also noted that other faculty members were also very useful in terms of advising and mentoring when sought out by students, particularly as the students moved into their concentration courses and culminating projects. The Curriculum Committee advises and supports the program coordinator including reviewing student plans of study towards degree completion.

The student handbook clearly details the roadmap through degree completion. It explains expectations from orientation through deadlines for graduation requirements. As the number of students increases, the program plans to add additional MPH-trained staff positions to fulfill the advising role.

Student career advising takes form through three different avenues: university services, program services, and individualized services. Through university services, students have access to career fairs, resume reviews, interview practice sessions and other career related workshops for graduate and undergraduates. MPH students have access to these services both before and after graduation from the program. The program offers opportunities for students to network with practitioners and build connections and an understanding of the field for future career placement. The program offers financial assistance to students to attend local health conferences and symposia and the program invites practitioners to campus to meet with students in the program. In terms of individualized counseling, the program coordinator, who has an MPH and has worked in the field, provides students with individualized career counseling during which career aspirations and goals are identified and become the foundation from which the plan of study is built. The program coordinator has connections with Indiana-based organizations and has built a database of public health organizations locally and globally for internships and job searching.

Student satisfaction with career and academic advising is getting better as the program settles into its new format. The initial class that was transferred from the Department of Health and Kinesiology reported mild dissatisfaction with career and academic advising. The program reported that the students felt lost in the transition from the Department of Health and Kinesiology to the college-level program that now exists. The program administration took the exit surveys and used the results to make improvements for future classes and the improvements are evidenced by the following years exit surveys. Career counseling and resourced dropped from a dissatisfaction score of 44% to 11% and all other areas were reported as neutral, satisfied or very satisfied, as opposed to six out of nine categories being reported as dissatisfied in the previous year.

Students who spoke with the site visit team noted no problems in approaching and communicating with faculty about any problems they encounter during their degree. Students have three ways to submit grievances: through a meeting with the program director, through meeting with the program coordinator or through providing anonymous feedback through end-of-semester surveys. If any grievance is not adequately addressed at the program level, students may pursue it at the university level through the University Policy Office. Since the program's inception in its current state, there has been one complaint related to a political comment made by an instructor. The program director worked with that instructor and their department chair to resolve the concerns.

Agenda

COUNCIL ON EDUCATION FOR PUBLIC HEALTH ACCREDITATION SITE VISIT

Purdue University Public Health Graduate Program

October 12-13, 2017

Thursday, October 12, 2017

- 9:45 am Meeting with Program Academic Leadership
T. Berndt
M. Holdcraft
C. Ladisch
C. Martin
R. Mattes
J. Street
D. Teagarden
- 10:45 am Break
- 11:00 am Meeting with Alumni, Community Representatives and Preceptors
B. Connolly
A. Abbott
S. Elwazeer
J. King
J. Layman
T. McGowen
A. Rehberg
C. Rich
J. Street
S. Swearingen
O. Wasel
E. Wtzel
- 12:00 pm Break
- 12:15 pm Lunch with Students
K. Higgins
C. Horton
S. Rivera
D. Rolle-McFarland
C. Mahaptra
Z. Naoum
A. Rupp
T. Temkar
T. Wilmanski
K. Zafar
- 1:15 pm Break
- 1:30 pm Meeting with Faculty Related to Curriculum and Degree Programs
L. Acharya
S. Chang Alexander
B. Collins
A. DeMaria
R. Duncan
J. Freeman
N. Gunaratna
G. Hyner
G. McCabe
E. Perrault
Y. Ruiz
C. Shields

E. Wells
S. Stapleton

2:30 pm Break

2:45 pm Meeting with Faculty Related to Research, Service, Workforce Development and Faculty Issues
P. Aaltonen
G. Arling
J. Cannon
A. DeMaria
M. Franks
N. Gunaratna
S. Liu
E. Perrault
E. Richards
D. Savaiano
L. Schwab-Reese
V. Simpson
S. Stapleton

3:45 pm Break

4:00 pm Meeting with University Provost
J. Akridge

4:45 pm Executive Session

5:15 pm Adjourn

Friday October 13, 2017

8:30 am Executive Session

11:30 pm Working Lunch

12:30 pm Exit Briefing

1:15 pm Team Departs