Council on Education for Public Health Adopted on March 28, 2025

REVIEW FOR ACCREDITATION

OF THE

PUBLIC HEALTH PROGRAM

ΑT

LIBERTY UNIVERSITY

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:

November 7-8, 2024

SITE VISIT TEAM:

Amy F. Lee, MD, MPH, MBA, CPH—Chair James Mancuso, MD, DrPH, MPH Christopher Hoff, MPH

SITE VISIT COORDINATOR:

Zeinab Bazzi, MPH, PMP

CRITERIA:

Accreditation Criteria for Schools of Public Health & Public Health Programs, amended August 2021

Table of Contents

INTRODUCTION	
A1. ORGANIZATION & ADMINISTRATIVE PROCESSES	3
A2. MULTI-PARTNER SCHOOLS & PROGRAMS	7
A3. STUDENT ENGAGEMENT	
A4. AUTONOMY FOR SCHOOLS OF PUBLIC HEALTH	8
A5. DEGREE OFFERINGS IN SCHOOLS OF PUBLIC HEALTH	9
B1. GUIDING STATEMENTS	
B2. EVALUATION AND QUALITY IMPROVEMENT	11
B3. GRADUATION RATES	
B4. POST-GRADUATION OUTCOMES	16
B5. ALUMNI PERCEPTIONS OF CURRICULAR EFFECTIVENESS	
C1. FISCAL RESOURCES	
C2. FACULTY RESOURCES	
C3. STAFF AND OTHER PERSONNEL RESOURCES	_
C4. PHYSICAL RESOURCES	
C5. INFORMATION AND TECHNOLOGY RESOURCES	
D1. MPH & DRPH FOUNDATIONAL PUBLIC HEALTH KNOWLEDGE	
D2. MPH FOUNDATIONAL COMPETENCIES	
D3. DRPH FOUNDATIONAL COMPETENCIES	
D4. MPH & DRPH CONCENTRATION COMPETENCIES	
D5. MPH APPLIED PRACTICE EXPERIENCES	
D6. DRPH APPLIED PRACTICE EXPERIENCE	
D7. MPH INTEGRATIVE LEARNING EXPERIENCE	
D8. DRPH INTEGRATIVE LEARNING EXPERIENCE	
D9. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL DOMAINS	
D10. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL COMPETENCIES	
D11. PUBLIC HEALTH BACHELOR'S DEGREE CUMULATIVE AND EXPERIENTIAL ACTIVITIES	
D12. PUBLIC HEALTH BACHELOR'S DEGREE CROSS-CUTTING CONCEPTS AND EXPERIENCES	
D13. MPH PROGRAM LENGTH	
D14. DRPH PROGRAM LENGTH	
D15. BACHELOR'S DEGREE PROGRAM LENGTH	
D16. ACADEMIC AND HIGHLY SPECIALIZED PUBLIC HEALTH MASTER'S DEGREES	
D17. ACADEMIC PUBLIC HEALTH DOCTORAL DEGREES	
D18. ALL REMAINING DEGREES	
D19. DISTANCE EDUCATION	51

E1. FACULTY ALIGNMENT WITH DEGREES OFFE RED	55
E2. INTEGRATION OF FACULTY WITH PRACTICE EXPERIENCE	56
E3. FACULTY INSTRUCTIONAL EFFECTIVENESS	57
E4. FACULTY SCHOLARSHIP	60
E5. FACULTY EXTRAMURAL SERVICE	63
F1. COMMUNITY INVOLVEMENT IN SCHOOL/PROGRAM EVALUATION & ASSESSMENT	66
F2. STUDENT INVOLVEMENT IN COMMUNITY & PROFESSIONAL SERVICE	68
F3. DELIVERY OF PROFESSIONAL DEVELOPMENT OPPORTUNITIES FOR THE WORKFORCE	
G1. DIVERSITY & CULTURAL COMPETENCE	
H1. ACADEMIC ADVISING	75
H2. CAREER ADVISING	
H3. STUDENT COMPLAINT PROCEDURES	80
H4. STUDENT RECRUITMENT & ADMISSIONS	81
H5. PUBLICATION OF EDUCATIONAL OFFERINGS	83
AGENDA	85

INTRODUCTION

Liberty University is a private, not-for-profit Christian university in Lynchburg, Virginia. The university was founded as Lynchburg Baptist College in 1971 and became Liberty Baptist College in 1976 before becoming a university in 1985. The university holds institutional accreditation by the Southern Association of Colleges and Schools Commission on Colleges. In addition to CEPH, the institution responds to approximately 20 specialized accrediting bodies, including the Aviation Accreditation Board International, the Accreditation Council for Business Schools and Programs, the Computing Accreditation Commission of Accreditation Board of Engineering and Technology, the Commission on Accrediting of the Association of Theological Schools, the Council for the Accreditation of Educator Preparation, the Commission on Osteopathic College Accreditation, and the Commission on Collegiate Nursing Education, among others.

The university has 20 schools and colleges including aeronautics, behavioral sciences, art and sciences, divinity, education, engineering, law, nursing, and osteopathic medicine, among others. The university offers over 500 undergraduate residential and online majors and more than 400 graduate residential and online programs and degrees. The student body includes more than 103,000 undergraduate and graduate students. The university employs over 4,800 full- and part-time faculty, over 4,800 full- and part-time staff members, and more than 1,700 student workers.

The public health program is housed in the Department of Public and Community Health in the School of Health Sciences. The school is also home to the Department of Allied Health Professions and the Department of Biology and Chemistry.

The department is made up entirely of the unit of accreditation, which includes both the undergraduate and graduate public health degrees. The department is led by a department chair assisted by three directors: the BS director, the MPH director, and the online MPH director. A single concentration MPH program enrolled Liberty's first public health students in 2011, and the program has grown to offer three BS concentrations, six MPH concentrations, an MSPH in epidemiology, and a BS/MPH joint degree. As of fall 2024, the program enrolled 143 undergraduate students, 400 MPH students (355 online students and 45 residential students), and 11 MSPH students. Most MPH students are in the community health promotion (133 students) and global health (138 students) concentrations; enrollment for the remaining MPH concentrations ranges between 23 and 63 students, with the exception of the public health policy concentration that does not currently have any students. The pre-clinical BS concentration has the highest enrollment (64 students), with the remaining students divided between the nutrition (42 students) and community health promotion (37 students) concentrations.

The program received initial CEPH accreditation in 2019 that resulted in an accreditation term of five years with interim reporting required related to alumni data, MPH learning objectives and foundational competencies, employer feedback on alumni, and online student satisfaction with academic and career advising. The Council accepted these interim reports as evidence of compliance in these areas.

Instructional Matrix - Degrees and Concentrations						
Bachelor's Degrees				Place based	Distance based	
Community Health Promotion			BS	BS		
Pre-Clinical			BS	BS		
Nutrition			BS	BS		
Master's Degrees		Academic	Professional			
Global Health	Global Health			MPH	MPH	
Community Health Promotion			MPH	MPH	MPH	
Nutrition			MPH	MPH	MPH	
Epidemiology			MPH	MPH, MSPH		
Environmental Health			MPH		MPH	
Public Health Policy			MPH	MPH		
Joint Degrees (Dual, Combined, Concurrent, Accelerated Degrees)			Professional			
2nd Degree Area	Public Health Concentration					
4+1	Community Health Promotion		BS/MPH	BS, MPH	MPH	

A1. ORGANIZATION & ADMINISTRATIVE PROCESSES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Designates appropriate committees or individuals for decision making, and implementation Faculty have opportunities for input in all of the following: degree requirements curriculum design student assessment policies & processes admissions policies & decisions faculty recruitment & promotion research & service activities Ensures all faculty regularly interact with colleagues & are engaged in ways that benefit the instructional program		The program's committee structure, organization, and administrative processes are sufficient to enable the program to fulfill its stated mission and goals. In addition to the department chair and the three program directors (the BS director, the MPH director, and the online MPH director), the program is supported by the school's online administrative chair, who oversees online courses across the different departments in the school and serves as a liaison between all online faculty and the program directors. The department has eight standing committees: assessment and evaluation, curriculum, policy, recruitment and retention, student awards and recognitions, executive, health communication and advocacy, and the Committee of the Whole. The Executive Committee includes the department chair, the program directors, the chair of the Accreditation Task Force, and one undergraduate and one graduate student, and the Committee of the Whole includes all department faculty. The Curriculum Committee includes a faculty representative from each concentration and degree program. The remaining committees each include faculty and student representatives from both the undergraduate and graduate programs.		

Department faculty use the Courseleaf online platform to submit suggestions and modifications for program curriculum in both the courses they teach and as feedback for courses taught by other faculty. Faculty who would like input from other faculty on their syllabi send a notification through the platform to alert faculty of this need. All Courseleaf entries must include a rationale for the change. The entries are reviewed by the Curriculum Committee before being submitted for further approvals.

The department's Executive Committee may also propose specific degree requirements that are vetted by the Curriculum Committee and the Committee of the Whole before seeking final approval at the school and university levels.

Student Assessment policies and processes are based largely on institutional policies and guidelines, including grading scales, timelines for grade submissions, academic standing, etc. The program sets additional internal assessment guidelines and policies based on recommendations from faculty. Proposed changes are reviewed by the Curriculum Committee and then follow university processes for integration.

The Policy Committee develops and reviews all policies affecting the department's procedures and operations; prepares and reviews student policy manuals; and reviews policy additions and revisions for consistency and continuity.

The Assessment and Evaluation Committee oversees the preparation, implementation, and the analysis of student, alumni, faculty, and employer surveys; makes

recommendations on the use of assessment and evaluation data for program planning and continuous quality improvement; and prepares and disseminates annual assessment and evaluation reports to the department's administration and faculty.

All students are admitted through the university's centralized admissions process. Admissions are based on policies established at university, graduate school, and department levels. The department's Executive Committee, with approval from the Committee of the Whole, implemented modifications to the university admission policy that defines students as enrolled only after passing through qualifying gates, as described in Criterion B3. These policies allow the program to maintain reasonable retention rates.

For faculty recruitment, the dean, the department chair, and the program directors identify faculty needs based on annual program growth or position vacancies. The department chair calls for an ad hoc Faculty Hiring Committee that is responsible for reviewing and selecting candidates to interview; the committee sends its recommendations to the dean who then works with the chair to coordinate the interview process.

Faculty promotion follows the process outlined in the university's Faculty Handbook. A primary faculty member who meets the criteria and timelines for promotion submits all required documentation to the ad-hoc Promotion Review Committee, which is appointed by the dean and includes a faculty member from each of the departments within the school. The committee reviews the documentation and makes a recommendation to the

dean, who makes a recommendation to the provost before being forwarded for additional approvals as needed.

The Executive Committee uses an inclusive, iterative process to create research and service policies for the program. Faculty revisit and revise the program outcomes annually using both the faculty evaluation and the program outcomes. Research and service activities are embedded into faculty evaluations. Each year, the Assessment and Evaluation Committee reviews progress toward all program outcomes, including those for research and service across the department. This committee reports to the Executive Committee at the end of the academic year, which reports to the dean.

Faculty members contribute to decision-making activities in the broader institutional setting through their involvement in various committees, task forces, and leadership positions. For example, the program's assessment coordinator serves on a workgroup with the university's Institutional Effectiveness and Research Center to advise on matters related to academic policies, curriculum development, and institutional governance. Program faculty also serve on the Faculty Senate, the school's Faculty Promotion Committee, and the university's Diversity Committee.

Residential PIF meet formally for monthly departmental meetings. While all residential PIF are required to attend these meetings, online faculty (all online faculty are hired as adjuncts, even if they are full-time) and non-PIF are encouraged, but not required, to attend based on their

availability. All meeting minutes and recordings are available to all faculty.	
One way the program promotes collaboration between full-time and part-time faculty is through instructor mentors. All online faculty and non-PIF are assigned an experienced faculty member who serves as their mentor. Each instructor mentor works regularly with their small group of faculty (mentees) and holds at least one meeting each semester. These mentoring groups allow faculty the opportunity to work and learn from other faculty. Another example of how faculty interact is through the department's subject-matter experts who are assigned to each course. These faculty serve as the point person for that subject and support all faculty teaching in that area to ensure that course sections are consistent across both modalities.	

A2. MULTI-PARTNER SCHOOLS & PROGRAMS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

A3. STUDENT ENGAGEMENT

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met	<u> </u>		I .
	IVICE			
Students have formal methods to		Students have formal methods to nexticinate in notice	Click have to enter toxt	
Students have formal methods to		Students have formal methods to participate in policy		
participate in policy making &		making and decision making. The program includes		
decision making		residential and online undergraduate and graduate		

Students engaged as members on	students from both the MPH and MSPH programs in the
decision-making bodies, where	Assessment and Evaluation, Curriculum, Policy,
appropriate	Recruitment and Retention, Accreditation Task Force, and
	Health Communication and Advocacy Committees. For
	each committee, the program lists between two and seven
	students as members of the committee, with the Health
	Communication and Advocacy committee including
	13 student members. The program recruits student
	members by sending emails asking for volunteers.
	Students at both degree levels also have the opportunity
	to participate in the university's Public Health Student
	Association (PHSA). Founded in 2013, the PHSA elects
	leaders, develops its agenda, and participates in policy and
	decision making. Students can participate in officer
	positions and impact policy and decision making in the
	program. During the site visit, students also mentioned
	that they participated in the honorary societies, Delta
	Omega and Eta Sigma Gamma.
	Sinco and the significant
	Students who met with reviewers confirmed that they
	have an active voice on the committees and that faculty
	frequently ask for their input.
	riequently ask for their input.

A4. AUTONOMY FOR SCHOOLS OF PUBLIC HEALTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

A5. DEGREE OFFERINGS IN SCHOOLS OF PUBLIC HEALTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

B1. GUIDING STATEMENTS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines a vision, mission statement,		The program's vision is "we envision a cadre of fully		
goals, statement of values		prepared Christian health professionals dedicated to		
Taken as a whole, guiding		addressing health disparities and improving the well-being		
statements address instruction,		of people from every tongue, tribe, and nation, especially		
scholarship, service		the poor and disadvantaged, throughout the world."		
Taken as a whole, guiding				
statements define plans to 1)		The program's mission is "embracing the Christian		
advance the field of public health &		worldview with a commitment to serve the underserved,		
2) promote student success		the public health program prepares individuals through		
Guiding statements reflect		diverse educational, research, and practice experiences to		
aspirations & respond to needs of		enhance community and personal well-being and enable		
intended service area(s)		others to fully experience the embrace of God."		
Guiding statements sufficiently				
specific to rationally allocate		The program's seven values are intelligent faith, servant		
resources & guide evaluation of		leadership, compassionate service, transformational		
outcomes		teaching, creative excellence, personal integrity, and		
		respect for all.		
		These guiding statements reflect the program's		
		aspirations to serve its community and are sufficiently		

specific to rationally allocate resources and guide evaluation outcomes. The program defines three goals, each with three subgoals to advance its mission. These goals and subgoals are as follows: Goal 1 Instruction: prepare graduates with the requisite professional skills to excel in public health practice in diverse settings in the state, the nation, and the world. • Offer practical learning opportunities through curricular and co-curricular experiences to prepare competent public health professionals. • Provide an environment conducive to student learning and professional development. • Recruit and retain a diverse, qualified student body. Goal 2 Research: advancing the field of public health practice through research, scholarship, and other creative endeavors focused on identifying solutions to leading health challenges. • Engage in search and other scholarly activities to advance the knowledge and practice of public health • Nurture student intellectual inquiry in public health knowledge and practice. • Support professional development of primary faculty in research and scholarly activity. Goal 3 Service: using education, advocacy and service by faculty, students, and alumni to facilitate positive health outcomes among diverse populations. • Address health needs of vulnerable, at risk, and underserved populations through local and global service activities.

 Support preparation, training, and professional development of the public health workforce. Promote student participation in community and public health service. 	
During the site visit, the program confirmed that faculty, students, and community partners weighed in on these guiding statements. Additionally, faculty feel that the statements guide what they do and their decision making as well as allocation of resources.	

B2. EVALUATION AND QUALITY IMPROVEMENT

	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Com	mentary		
Collects & reviews all measures in Appendix 1 Measures mission & goals & addresses unit's unique context Reviews & discusses data Makes data-driven quality improvements Consistently implements evaluation plan(s) over time		The program implements an evaluation plan that defines data-driven methods to collect and analyze data and assess its three goals. The program collects data for all required measures and defines additional program-specific measures to address its defined goals. For each goal, the program defines appropriate data sources and parties responsible for review. The various data sources include data from annual reports from analytics and decision support, annual faculty activity reports and performance reviews, the MPH scorecard that the gate coordinator generates, student surveys, alumni surveys, course evaluations, and employer surveys. The program directors, analytics and decision support staff, institutional effectiveness and research data integrity staff, department chair, dean, gate coordinator, Executive	growth, specifically in applying a mixed methodological approach in evaluating our program outcomes and identifying both data sources and improved instruments. Previously, the department had a heavy reliance on heavy reliance on benchmarking foundational competencies. It is our bias that that quantitative data provides measurable, generalizable insights, helping to identify trends, patterns,	The Council appreciates the program's response to the site visit team's report.

Committee, Assessment and Evaluation Committee, and other relevant committees review the data.

Together, the measures track the program's success in achieving its mission by measuring items such as student enrollment, faculty composition, ratios for student advising, professional and community service by students, alumni perceptions, and student satisfaction.

For example, one measure related to the instruction goal is the number of practicum/internship preceptors who rate students as competent in their field of study. The practicum director produces an annual summary report based on preceptor evaluations of the students, and this report is reviewed by the program directors, Executive Committee, and the department chair.

the B.5 Alumni as a part of the self-study and created improved surveys, we improved all the surveys as well as looked and plan to improve focus groups and other qualitative supplements to our work to ensure effective decision-making

The program engages in regular, substantive review of its evaluation findings and uses its findings to inform program improvements. Through a review of the electronic resource file, reviewers saw evidence that the evaluation plan is well-documented. Meeting minutes provided by the program showed how data were discussed at departmental meetings. Faculty, administrators, students, alumni, and external partners contribute to the evaluation process.

policy development. Finally, to improve and ensure future oversight of data collection efforts more consistently the department has elected to craft an Evaluation and Instrumentation Subcommittee. This subcommittee will be focused specifically on reviewing the instrumentation methods and

The program has translated evaluation findings into programmatic changes. For example, the Assessment and Evaluation Committee found that 7% of students were dissatisfied with advising. During the site visit, faculty also recommend indicated that the data showed that online students did not speak to faculty advisors as frequently as they would like. As a result, the program implemented policies to program evaluation findings into program evaluation ongoing data reviewing domain and the students were dissatisfied with advising. During the site visit, faculty also recommend assessment and ongoing data reviewing domain and the students were dissatisfied with advising. During the site visit, faculty also recommend assessment and ongoing data reviewing domain and reviewing domain and the students were dissatisfied with advising. During the site visit, faculty also recommend assessment and ongoing data reviewing domain and review domain and re

fullv mastery. However. we acknowledge realizing through the self-study that that we lacked the necessary information to best understand the participants' experiences, perceptions, and underlying reasons for observed trends. Specifically, while we addressed the deficiency already for the B.5 Alumni as a part of the selfstudy and created improved surveys, we improved all the surveys as well as looked and plan to qualitative supplements to our work to ensure effective decision-making for program improvement and policy development. Finally, to improve and ensure future oversight consistently the department has elected to craft an Evaluation and Instrumentation Subcommittee. This subcommittee will be focused specifically reviewing the instrumentation methods and methodology for CEPH criteria, program evaluation goals, reviewing ongoing data collection efforts, and reviewing data outcomes to make recommendations to the boarder Assessment and Evaluation committee and Executive ensure that online MPH students work with knowledgeable advisors, including the gate system (described in Criterion B3) with two dedicated gate coordinators and an "MPH helper" email dedicated to servicing online students consistently and the addition of an MPH online program director to work in collaboration with the MPH program director.

The commentary relates to the need for more intentional data collection that is focused on collecting information

that is useful to the program and will inform program improvements. During the site visit, the program said they collect an overwhelming amount of data, most of which is quantitative and not always useful; they have found that the limited qualitative data they collect has been more informative than excessive quantitative data. The program also has low response rates across a number of surveys throughout the evaluation plan, especially surveys related to alumni and employers. For example, the program has only received 30 responses from employers in the last three years. These current practices and results limit the program's ability to make data-driven quality improvements in some key areas. To reduce survey fatigue and to improve the quality of data, the program is actively working to revise its data collection to focus on qualitative data.

B3. GRADUATION RATES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			,
Collects, analyzes & accurately		MPH students are allowed five years to graduate. The		
presents graduation rate data for		2019-20 cohort of 301 students reports a final graduation		
each public health degree offered		rate of 80%. For the cohorts entering in 2020-21, 2021-22,		
Achieves graduation rates of at		and 2022-23 (with enrollments between 165 and		
least 70% for bachelor's & master's		388 students), the program reports graduation rates of		
degrees, 60% for doctoral degrees		68%, 64%, and 40%, with remaining students in each year		
		still progressing toward graduation. All three cohorts are		
		on track to meet this criterion's threshold by the maximum		
		time to graduation. For the 2023-24 cohort, 165 students		
		enrolled, four withdrew and five had graduated at the time		
		of the visit.		
		BS students are allowed seven years to graduate. The		
		2017-18 cohort of 81 students reports a final graduation		
		rate of 78%. Cohorts entering 2018-19, 2019-20, and 2020-		
		21 have enrollment between 47-69 students with		
		graduation rates of 80%, 84%, and 75%. The 2021-22 and		
		2022-23 cohorts are on track to meet the criterion's		
		threshold within the maximum time to graduation. For the		
		2023-24 cohort, 47 students enrolled and one had		
		graduated at the time of the visit.		
		The program launched its MSPH program in fall 2024. The		
		program currently has 11 students enrolled, and the		
		maximum time to graduation is five years.		
		In 2022, the program implemented the gate system to		
		ensure that MPH students are successful in completing the		

program. All students who enter the program in a given term are placed in the first gate. After completing 12 MPH credits, students are placed in gate 2 and move on to gate 3 after completing HLTH 511: Research Methods in Public Health. In gate 4, students must pass their competency exam before moving on to gate 5 in which they complete their practicum. In the final gate (6), students apply for graduation. Through the gate system, students are tracked by gate coordinators, who serve as a single point of contact throughout the program, and students take four "administrative" courses designed to ensure that they are set up for successful progress through the program. During the gates, students are tracked for success and progress, and assignments in each course are designed to help them be successful in the program. For example, PHGT 510 (gate 1) is an eight-week orientation course that ensures that students understand what is needed to succeed in the program and are familiar with university resources, residential and online. PHGT512 (gate 2) is an eight-week public health essay course that addresses issues regarding degree alignment and electives, career guidance, career path design, and connecting with the right resources. PHGT 513 (gate 3) is completed after students complete all core classes, houses their student portfolio, and prepares them for the practicum. Finally, in PHGT 514 (gate 4), students take their competency exam and apply for practicum.

B4. POST-GRADUATION OUTCOMES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Collects, analyzes & presents data on graduates' employment or enrollment in further education post-graduation for each public health degree offered Chooses methods explicitly designed to minimize number of students with unknown outcomes Achieves rates of at least 80% employment or enrollment in further education for each public health degree		For MPH graduates, the program reports post-graduation outcomes for cohorts graduating between 2021 and 2023 that indicate 81-97% positive outcomes. Of the 336 graduates in 2021, 269 were employed, one was not seeking employment, 65 were seeking employment, and one was unknown. Of the 296 students who graduated in 2022, 242 were employed, four were continuing education, three were not seeking employment, seven were seeking employment, and 40 were unknown. Of the 279 students who graduated in 2023, 246 were employed, two were continuing education, two were not seeking employment, nine were seeking employment, and 20 were unknown. For BS graduates, the program reports post-graduation outcomes for cohorts graduating between 2021 and 2023 that indicate 92-96% positive outcomes. Of the 43 graduates in 2021, 11 graduates had unknown outcomes. Of the 36 graduates in 2022, eight had		
		unknown outcomes. Of the 25 graduates in 2023, only one had an unknown outcome. The Assessment & Evaluation Committee tracks graduates through its exit survey and annual alumni surveys sent one-year post-graduation for each cohort. The exit survey asks students about their plans after graduation, and the alumni survey serves as follow-up and asks students about		

their employment status and their employer's contact information.	
The program especially keeps track of students who were not employed at the time of the exit survey so that they can ensure follow-up during the alumni survey. For the most recent year, at the time of graduation, 189 of the 279 MPH graduates were employed and 90 were actively seeking employment; follow-up efforts found that 57 of these individuals found employment between graduation and their next survey response.	
The assessment coordinator tracks post-graduation outcomes. In an effort to increase response rates, the program shortened the survey in 2024 and the new gate coordinator has worked with the assessment coordinator to reorganize the data collection process. The program also involves its graduate assistants to use social media to follow up with non-responding graduates. The results of these changes are evident by the decrease in the number of unknowns for BS graduates from 26% in 2021 to 4% in 2023.	

B5. ALUMNI PERCEPTIONS OF CURRICULAR EFFECTIVENESS

Criterion Elements	Compliance	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Finding			
	Partially Met			
Defines qualitative &/or		The self-study presented data from both the alumni survey	As noted in the above response and	The Council appreciates the
quantitative methods designed to		and the exit survey for BS and MPH graduates. As noted in	commentary a deficiency noted in	program's response to the site visit
provide meaningful, useful		Criterion B4, the alumni survey is sent to alumni one year	the section for B.2 Evaluation and	team's report and looks forward to
information on alumni perceptions		after graduation. During the site visit, faculty and staff	Quality Improvement the need for	reviewing evidence of data

Documents & regularly examines its acknowledged gaps in current data collection from alumni, improved measurements that are collection updated using methodology & outcomes to ensure which focuses on quantitative data. They said that the meaningful useful instruments. and acknowledged by the department useful data main issue is that the program collects data in many Data elicit information on skills different surveys, but since the data is all quantitative and was uncovered during the selfstudy. Specific to those the focus of most useful in post-graduation (Likert scale ratings of agreement), it is difficult to placements, areas in which alumni contextualize and use. Faculty and staff said that they are this need for improvement for feel well prepared & areas in which currently working on redesigning surveys to focus on alumni perceptions, our surveys for qualitative data that will be designed to provide them with the bachelor's level and the Master alumni would have benefitted from additional preparation meaningful and useful information on alumni perceptions. level alumni surveys have been redeveloped and reviewed. The 2022-23 alumni survey includes two questions on alumni perceptions of curricular effectiveness: perceived Specifically, to address criterion 1 confidence in the different competency areas and and criterion 3 our surveys now agreement that the program adequately prepared them to include open ended questions that work in public health. For MPH alumni, the survey listed ask whether students have felt prepared, as well the specific areas the eight foundational competency areas and for the BS alumni, the survey listed nine foundational domain areas. students have felt most prepared, The program received 41 responses from MPH alumniand and where they could have been better prepared in addition to which 16 responses from BS alumni. The program sends out this survey each year to all alumni from that given year so this | skills have been most useful to them data represents the 2022-23 cohort. in their post-graduation placement, and then breaking them down The majority of MPH and BS alumni rated their perceived further into a better understanding confidence in all competency areas as highly or of which specific technical skills and moderately confident. For MPH alumni, the areas with the which transferable soft skills were highest perceived confidence are communication, most useful skills. organization and function of public health regulatory systems, and interprofessional practice. For BS alumni, A copy of these updated alumni surveys has been provided. Finally, areas with the highest perceived confidence are addressing population health, role of data in public health, as discussed above in B-2 in to and basic overview of public health. improve and ensure future oversight of data collection efforts more Of the 41 MPH alumni who responded to the second consistently the department has question, 25 indicated that they were very satisfied and elected to craft an Evaluation and

16 alumni indicated they were somewhat satisfied with their preparation for public health careers. Of the 15 BS alumni who responded, four indicated they were very satisfied and 11 alumni indicated they were somewhat satisfied with their preparation.

The concern relates to the lack of useful information collected on alumni perceptions; the survey design does not solicit any information on one of the three areas required by this criterion: what skills are most useful in their post-graduation placements. The survey questions are not well designed to collect meaningful information on the other two areas required by this criterion: areas in which students feel well-prepared and areas in which they would have liked more preparation since the survey does not solicit any open-ended responses.

The program includes an open-ended question about the strengths and weaknesses of the program in the exit survey; however, students complete this survey during their last semester in the program before they have postenrollment experience. Additionally, the survey produced limited responses. Together, these issues mean that the survey does not give the program useful data to make curricular improvements.

and regularly examine the methodological approaches, training, and application of best practices for the evaluation design and plan, as well as reviewing the instruments for the evaluation. The lens and framework of the subcommittee will be the current

Instrumentation Subcommittee within the Assessment and This Evaluation Committee. subcommittee will be focused specifically on reviewing instrumentation methods methodology for CEPH criteria, program evaluation goals, reviewing ongoing data collection efforts, and reviewing data outcomes to make recommendations to the boarder Assessment and Evaluation and committee Executive Committee.

One of the express intentions of this subcommittee is to better review and regularly examine methodological approaches, practices for the evaluation design and plan, as well as reviewing the instruments for the evaluation. The lens and framework of the subcommittee will be the current and ongoing CEPH criteria as well as best practices in mixed methodology for program evaluation to providing recommendations for outcomes to ensure useful data. Members of this subcommittee will include those with subject matter expertise in program evaluation from the

	Department of Public Health, in addition representatives of stakeholders across students, alumni, and the community.	

C1. FISCAL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Financial resources currently adequate to fulfill stated mission & goals & sustain degree offerings Financial support appears sufficiently stable at time of site visit		The program's budget, including personnel, operational costs, and professional development costs, is fully supported by university funds. All tuition and fees are deposited into the university budget and allocated to the program based on each year's budget request. Over the past five years, the program's budget has grown from approximately \$1.38 million in 2019-20 to \$4.06 million in 2023-24. The program shows a balanced budget each year. During the site visit, the program described how the budget had increased in recent years due to increases in compensation to online instructors and the addition of new online faculty when the number of concentrations increased from three to six.		
		The university fully covers the salaries for full-time faculty and staff. Faculty are not dependent on, or expected to secure, external sources to fund salaries. The programmay request additional funds for contracted/benefited or		

contracted, limited benefited faculty or full-time staff during the university's annual budget process. Additional faculty or staff is primarily based on current faculty loads, use of adjunct faculty, and proposed development of new classes or concentrations. Adjunct faculty may be hired based on immediate need and university-level approval is not required.

Operational costs cover day-to-day operations and instruction. These costs are included in the program's annual budget based on number of faculty as well as university baselines and historical trends. Other operational costs for facility use and maintenance, IT support, student transportation services and marking are covered in the university budget and are not included in the program's annual budget. During the site visit, the program described how they incorporate requests for additional funding through the annual budget request form process.

Student support for student-related community service activities or conference travel may be funded from the program's operational budget. Funding may also come from funds raised by students themselves or from university club funds. The university's Center for Research and Scholarship provides funding for student conference travel and research activities through a grant application process for students presenting research at conferences.

The program funds faculty development through professional memberships and conference travel and related costs. Each year, faculty submit requests for professional memberships and conference travel with cost information and if approved, these are included in the

budget. Generally, the budget provides up to \$400 annually for each primary residential faculty's professional development.	
The program may also receive indirect costs via the facility and administration fund for grants and contracts.	
During the site visit, university leaders described the university's commitment to the program as evidenced by the increasing budget resources over the past few years. Leaders noted their support for the program's expansion including a new DrPH program launching in 2025.	

C2. FACULTY RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
School employs at least 21 PIF; or program employs at least 3 PIF 3 faculty members per concentration area for all concentrations; at least 2 are PIF; double-counting of PIF is appropriate, if applicable Additional PIF for each additional degree level in concentration; double-counting of PIF is appropriate, if applicable		The self-study indicates that the program employs 20 PIF and 34 non-PIF. All PIF are dedicated to the program at 1.0 FTE. Reviewers' analysis of the definitions used in the self-study indicate that two of the PIF listed in the self-study should more appropriately be classified as non-PIF, but even with their removal, the program identifies the appropriate number of faculty for each concentration and degree level to satisfy this criterion's minimum quantitative requirements. Three PIF are appropriately double-counted to two concentrations.		
Ratios for general advising & career counseling are appropriate for degree level & type		The program calculates FTE based on the university's definition. All faculty who 1) teach 18 or more credit hours per year and 2) only hold a teaching appointment in public		

			1	T
Ratios for MPH ILE are appropriate		health are considered to dedicate 1.0 FTE to the program.		
for degree level & nature of		When calculating FTE and defining its cadre of PIF, the		
assignment		program does not differentiate between faculty who are		
Ratios for bachelor's cumulative or		hired by the university as "adjunct" and other faculty. In		
experiential activity are		the university definition, adjunct faculty are differentiated		
appropriate, if applicable		from full-time faculty by their contracts; the adjunct		
Ratios for mentoring on doctoral	n/a	contract specifies that their only role is teaching (no		
students' integrative project are		research or advising roles), and adjunct faculty are		
appropriate, if applicable		compensated differently, e.g., they do not receive benefits		
Students' perceptions of class size		from the university. Additionally, the terms of their		
& its relation to quality of learning		employment are different: adjunct faculty are hired based		
are positive (note: evidence may be		on program need and student enrollment. Two of the		
collected intentionally or received		20 PIF documented in the self-study are adjunct faculty.		
as a byproduct of other activities)		CEPH evaluates this criterion's definitions of PIF within		
Students are satisfied with faculty		each university's context and, based on the totality of the		
availability (note: evidence may be		context, concluded that adjunct faculty are not eligible to		
collected intentionally or received		be counted as PIF, regardless of their teaching load.		
as a byproduct of other activities)				
		Thus, in this analysis, CEPH removed the two adjunct		
		faculty listed as PIF in the self-study from the analysis.		
		Even with their removal from the list of PIF, however, the		
		program complies with this criterion's minimum		
		thresholds.		
		During the site visit, reviewers asked the program about		
		how adjunct faculty manage heavy teaching loads while		
		maintaining full-time practice careers outside of the		
		university. The program explained that they continuously		
		monitor the quality of instruction through different		
		mechanisms such as course evaluations and the instructor		
		mentor and subject matter expert systems, both discussed		
		in Criterion A1.		

Four undergraduate students and eight graduate students are assigned per faculty advisor. Ratios for supervision in the MPH integrative learning experience (ILE) are a maximum of 15 students per faculty member, with an average of eight. Ratios for supervision in the bachelor's cumulative experience are a maximum of 10 students per faculty member, with an average of nine.

The program draws on the MPH and BS exit surveys for student feedback on class size and faculty availability. The program presented data from 2023 in the self-study. For class size, 92% of BS students (25 total responses) and 85%

student feedback on class size and faculty availability. The program presented data from 2023 in the self-study. For class size, 92% of BS students (25 total responses) and 85% of MPH students (244 total responses) were very satisfied. For faculty availability, 100% of BS students (25 total responses) and 75% of MPH students (270 total responses) were very satisfied. A few comments from students at both degree levels indicated the need for more office hours with some faculty. The program also collected qualitative feedback from students during a focus group in 2024 related to class size and faculty availability. Site visitors reviewed notes from the focus group, which indicated that both BS and MPH students appear to be satisfied with both class sizes and faculty availability.

During the site visit, students all agreed that faculty are always available and make time to support them before, during, and after class. Students also agreed that the small class sizes allow for rich discussions with their peers.

C3. STAFF AND OTHER PERSONNEL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Staff & other personnel are currently adequate to fulfill the stated mission & goals Staff & other personnel resources appear sufficiently stable		The program reports 4.0 FTE of staff support, as well as six graduate student assistants. Program leaders and faculty indicate that they have adequate staff to meet current operational and instructional obligations. The number of staff positions is determined by the number of program faculty, and the number of graduate student assistants is determined by the number of enrolled students in the program. The full-time staff include the director of practicum, the two gate coordinators, and the administrative assistant. The university also provides student workers to assist faculty with classes, projects, community outreach, and other duties. These include 11 federal work study students who work between 18-20 hours per week. During the site visit, faculty identified the recent addition of the gate coordinator positions as vital to ensuring students meet program requirements and take courses in		
		the appropriate sequence.		

C4. PHYSICAL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Physical resources adequate to fulfill mission & goals & support degree programs Physical resources appear sufficiently stable		The program has adequate physical space to fulfill its mission and goals. While program enrollment has grown significantly, the growth is concentrated in online students, which has not materially impacted the physical space required on campus. The program maintains 17 offices, conference and tutoring rooms, classrooms and administrative spaces in the Center for Medical and Health Sciences facility. The program has been in this space since 2014 and is co-located with the College of Osteopathic Medicine. Primary residential faculty have their own office space within the MPH program suite as well as access to space closer to where undergraduate courses are taught on campus. Each of the full-time program staff have their own assigned workspaces in the MPH suite, including offices. Graduate student assistants and student workers have space in a conference room or in other locations		
		throughout the department offices. There are two large classrooms and a large conference room used by the residential MPH classes. These classrooms are adequate for the existing number of classes and enrollment. Each classroom is enabled with audio/video capability to support hybrid classes for oncampus and online students.		

	The program has one laboratory space used for several	
	courses.	

C5. INFORMATION AND TECHNOLOGY RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Adequate library resources, including personnel, for students & faculty Adequate IT resources, including tech assistance for students & faculty Library & IT resources appear sufficiently stable		The program's library and IT resources are sufficient and stable. The self-study provides examples of positive feedback from faculty and staff about access and availability of IT resources and services. Students, faculty, and staff have access to the Jerry Falwell Library. The library's collection exceeds 400,000 books, media items, and other materials. Digital assets include over 580,000 electronic items and content from over 83,000 unique full-text journals. The library provides access to nearly 470 online research resources from companies such as American Psychological Association, Credo, EBSCO, Elsevier, Emerald, Gale, JSTOR, LexisNexis, Oxford University Press, ProQuest, SAGE, Standard and Poor's, and Wiley.		
		In addition to the library resources, the program has an annual budget from the library for the purchase of public health resources to make available to students and faculty. The library also appoints a liaison for each academic department. The liaison trains students in bibliographic research methods, notifies faculty of new resources, and collaborates with faculty to maintain a research guide specific to the public health program. Students also have		

access to the College of Osteopathic Medicine library holdings and study areas. Through the university's information technology department, students have free access to a large number of software programs including the full Microsoft suite, Dropbox, SPSS, SAS, as well as to other programs with faculty approval (Adobe Creative Cloud, Kaltura, etc.). Faculty are issued a laptop at hire pre-loaded with Microsoft Office and other software. They may request additional software as needed. Laptops are replaced every four years. IT support services are available on campus and within the College of Osteopathic Medicine building itself to assist with technical challenges and to provide assistance. The university ensures access to the same or equivalent resources by online and residential students. IT support is available on an on-demand basis, and faculty and staff report satisfaction with the convenience and effectiveness. During the site visit, students, alumni, and faculty expressed appreciation for how well the available information technology supports met their needs day or night. Students shared examples of requesting support with hardware and software issues and always getting

resolution and follow up to ensure their needs were met.

D1. MPH & DRPH FOUNDATIONAL PUBLIC HEALTH KNOWLEDGE

Criterion Elements	Compliance	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Finding			
	Met			
Ensures grounding in foundational public health knowledge through appropriate methods (see worksheet for detail)		The self-study maps the 12 foundational learning objectives to five of the program's six required courses. The courses include those addressing the following topics: epidemiology; environmental health; public health administration; social and behavioral theory; and research methods.		
		Information provided in the self-study and electronic		
		resource file documents appropriate coverage of all		
		required areas. The D1 worksheet presents reviewers'		
		assessments.		

D1 Worksheet

Foundational Knowledge	Yes/CNV
1. Explain public health history, philosophy & values	Yes
2. Identify the core functions of public health & the 10 Essential Services	Yes
3. Explain the role of quantitative & qualitative methods & sciences in describing & assessing a population's health	Yes
4. List major causes & trends of morbidity & mortality in the US or other community relevant to the school or program	Yes
5. Discuss the science of primary, secondary & tertiary prevention in population health, including health promotion, screening, etc.	Yes
6. Explain the critical importance of evidence in advancing public health knowledge	Yes
7. Explain effects of environmental factors on a population's health	Yes
8. Explain biological & genetic factors that affect a population's health	Yes
9. Explain behavioral & psychological factors that affect a population's health	Yes
10. Explain the social, political & economic determinants of health & how they contribute to population health & health inequities	Yes
11. Explain how globalization affects global burdens of disease	Yes
12. Explain an ecological perspective on the connections among human health, animal health & ecosystem health (e.g., One Health)	Yes

D2. MPH FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Assesses all MPH students, at least once, on their abilities to demonstrate each foundational competency (see worksheet for detail)		The self-study maps the 22 foundational competencies to the same five required courses listed in Criterion D1. The program assesses all MPH students on their ability to demonstrate each foundational competency, as summarized in the D2 worksheet. Didactic coverage and assessment opportunities for residential and online students are identical. The site visit team validated the teaching and assessment of some competencies by reviewing course syllabi and		
		other supporting materials, such as assignment instructions and quiz questions, and validated other competencies through additional details and documents provided during the site visit. Students receive didactic preparation through lectures and		
		readings. Assessment opportunities are varied and include quizzes, data collection and analysis projects, research papers, needs assessments, program plans, policy critiques and evaluations, communication strategy plans, and service-learning activities.		

D2 Worksheet

MPH Foundational Competencies	Yes/CNV
1. Apply epidemiological methods to settings & situations in public health practice	Yes
2. Select quantitative & qualitative data collection methods appropriate for a given public health context	Yes
3. Analyze quantitative & qualitative data using biostatistics, informatics, computer-based programming & software, as appropriate	Yes

4. Interpret results of data analysis for public health research, policy, or practice	Yes
5. Compare the organization, structure & function of health care, public health & regulatory systems across national & international settings	Yes
6. Discuss the means by which structural bias, social inequities & racism undermine health & create challenges to achieving health equity at organizational, community & systemic	Yes
levels	
7. Assess population needs, assets & capacities that affect communities' health	Yes
8. Apply awareness of cultural values & practices to the design, implementation, or critique of public health policies or programs	Yes
9. Design a population-based policy, program, project or intervention	Yes
10. Explain basic principles & tools of budget & resource management	Yes
11. Select methods to evaluate public health programs	Yes
12. Discuss the policy-making process, including the roles of ethics & evidence	Yes
13. Propose strategies to identify stakeholders & build coalitions & partnerships for influencing public health outcomes	Yes
14. Advocate for political, social or economic policies & programs that will improve health in diverse populations	Yes
15. Evaluate policies for their impact on public health & health equity	Yes
16. Apply leadership and/or management principles to address a relevant issue	Yes
17. Apply negotiation & mediation skills to address organizational or community challenges	Yes
18. Select communication strategies for different audiences & sectors	Yes
19. Communicate audience-appropriate (i.e., non-academic, non-peer audience) public health content, both in writing & through oral presentation	Yes
20. Describe the importance of cultural competence in communicating public health content	Yes
21. Integrate perspectives from other sectors and/or professions to promote & advance population health	Yes
22. Apply a systems thinking tool to visually represent a public health issue in a format other than standard narrative	Yes

D3. DRPH FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Finding			
	Not Applicable	e		

D4. MPH & DRPH CONCENTRATION COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines at least five distinct		The program defines six competencies for each of its six	Our program acknowledges a	The Council reviewed the program's
competencies for each		MPH concentrations. Each concentration requires	weakness in the verbiage of the	response to the site visit team's
concentration or generalist degree		students to complete 15 credits of concentration specific	Environmental Health concentration	report and concluded that the
in MPH & DrPH. Competencies		coursework.	competencies 1 and 5. During the	program has addressed the site visit
articulate an appropriate depth or			review it was discussed and agreed	team's concern. Therefore, the
enhancement beyond foundational		Site visitors were able to validate the teaching and	that the wording of the competency	Council acted to change the team's
competencies		assessment of many competencies by reviewing syllabi	did not capture the rigor or	finding of partially met to a finding
Assesses all students at least once		and other supporting materials provided with the self-	robustness of the actual coursework	of met.
on their ability to demonstrate each		study. The team validated most of the remaining	and assessment being done in each	
concentration competency		competencies by reviewing additional materials made	case. Therefore, it was agreed that	
If applicable, covers & assesses	N/A	available during the site visit and from faculty descriptions	the recourse was to reword the	
defined competencies for a specific		of course content and student assignments.	Competencies. Our departmental	
credential (e.g., CHES, MCHES)			team completed a process by which	
, ,		The concern relates to competency statements 1 and 5 for	we met and discussed the	
		the environmental health concentration which do not	rewording, making a motion that	
		articulate an appropriate depth beyond the foundational	included discussion, and a vote to	
		knowledge areas and competencies. In both cases, the	rename the Environmental Health	
		coursework and assessments are robust and clearly build	Concentrations as the following:	
		on the foundational knowledge and competency areas;		
		however, the competency statements do not reflect this.	1. Communicate a risk management	
		Competency 1 overlaps with foundational competency 19	plan that analyzes environmental	
		and does not match the rigor of the assessment it is	health issues and makes	
		mapped to, which requires students to write a research	recommendations to obviate future	
		paper that involves the following: risk analysis of a	environmental risks.	
		selected environmental health issue, creation of a risk	5. Propose an evidence-based	
		management plan, and recommendations for future risks.	program based on an analysis of	
		Competency 5 is nearly identical to foundational	factors that contribute to the	
		knowledge area 7 and also does not match the rigor of the	problems, challenges, and	

assessment: students describe the impact of an environmental issue on population health, and then propose an evidence-based program, accompanied by an	environmental health issue.	
analysis of factors that contribute to the problem and a	We feel this new verbiage much	
discussion of the challenges and limitations of the problem.	better captures the actual assignments and assessments being	
	completed by the students. The	
During the site visit, the faculty said that they are aware of the disconnect between the competency statements and		
the mapped assessments and have plans to revise the	not change, only the verbiage and	
statements. For example, they said that competency 1 needs to be revised to highlight risk assessment	competencies capturing them.	
communication as the advanced skill.	Please find attached the minutes, FIO and vote associated with this	
The D4 worksheet summarizes reviewers' findings.	change.	

D4 Worksheet

MPH in Global Health Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Create a public health intervention to address a population level need for a country outside the US, based on an analysis of the cultural, social, behavioral, and environmental factors that contribute to the problem.	Yes	Yes
2. Design population, health, environmental and/or public nutrition programs/projects in the context of national and international policy.	Yes	Yes
3. Employ evidence-based and culturally appropriate methods to plan, implement, and administer health interventions to address community and population health needs.	Yes	Yes
4. Evaluate development programs/projects in terms of their quality, effectiveness and efficiency using qualitative and quantitative methods.	Yes	Yes
5. Summarize program resources of local, national & international organizations engaged in social service activities.	Yes	Yes
6. Apply the Christian worldview to public health practice in diverse settings and populations.	Yes	Yes

MPH in Community Health Promotion	Comp statement	Comp taught and
Concentration Competencies	acceptable as written?	assessed?
	Yes/No	Yes/CNV
1. Use best practices to assess health needs, assets, and resources for poor, underserved, or vulnerable populations.	Yes	Yes

2. Assess a community health program for cultural appropriateness.	Yes	Yes
3. Employ best practices of program evaluation and community-based participatory research.	Yes	Yes
4. Demonstrate appropriate and effective communication and advocacy skills when interacting with diverse audiences in the context of health promotion activities.	Yes	Yes
5. Employ ethical and effective leadership and management skills to build and maintain work teams, organizational relationships, and community collaborations in support of public health efforts.	Yes	Yes
6. Apply the Christian worldview to public health practice in diverse settings and populations.	Yes	Yes

MPH in Nutrition Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Identify and interpret reliable nutrition sources for health promotion purposes.	Yes	Yes
2. Explain the role of macro and micronutrients for nutritional health and well-being.	Yes	Yes
3. Identify the influence of eating behaviors on disease development and prevention.	Yes	Yes
4. Apply nutrition principles and research findings into intervention strategies for specific populations	Yes	Yes
5. Describe effective measures and policies to prevent food-borne illnesses.	Yes	Yes
6. Apply the Christian worldview to public health nutrition practice in diverse settings and populations.	Yes	Yes

MPH in Epidemiology Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
Draw appropriate inferences from epidemiologic data.	Yes	Yes
2. Identify data need and evaluate analytic methods for calculating standard epidemiology measures.	Yes	Yes
3. Describe effective measures and policies to prevent illness.	Yes	Yes
4. Analyze populations that require specific intervention approaches using demographic and epidemiologic analysis.	Yes	Yes
5. Critically analyze the scientific evidence for best practices in prevention of diseases.	Yes	Yes
6. Apply the Christian worldview to public health practice in diverse settings and populations.	Yes	Yes

MPH in Environmental Health	Comp statement	Comp taught and
Concentration Competencies	acceptable as written?	assessed?
	Yes/No	Yes/CNV
1. Communicate a risk management plan that analyzes environmental health issues and makes recommendations to obviate future environmental risks.	Yes	Yes

2. Identify scientific, cultural, political, and ethical practices and decisions that may have adverse effects on at-risk human populations or sensitive	Yes	Yes
ecosystems		
3. Analyze strategies to preserve health through adequate sanitation and hygiene through the lens of policy.	Yes	Yes
4. Identify, and describe noteworthy environmental health laws, regulations, programs, policies, and guidelines and their implications on activities aimed at protecting environmental health.	Yes	Yes
5. Propose an evidence-based program based on an analysis of factors that contribute to the problems, challenges, and opportunities regarding an environmental health issue.	Yes	Yes
6. Apply the Christian worldview to public health environmental practice in diverse settings and populations.	Yes	Yes

MPH in Public Health Policy Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Produce policy recommendations for diverse stakeholders by reviewing public health issues, policy alternatives, projected outcomes, and communication strategies.	Yes	Yes
2. Advocate for community health programs and policies through media politics agencies and churches	Yes	Yes
3. Analyze the human aspects of maintaining a successful organization and recognize the scope and limits to the activities of public health organizations.	Yes	Yes
4. Construct a personal code of decision-making principles as it relates to health behavior and future healthcare decisions	Yes	Yes
5. Discuss how the political process affects health policy and development	Yes	Yes
6. Apply the Christian worldview to public health practice in diverse settings and populations	Yes	Yes

D5. MPH APPLIED PRACTICE EXPERIENCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met	1		
All MPH students produce at least		Students enroll in HLTH 698: Practicum to fulfill the APE	Click here to enter text.	
two work products that are		requirements. Prior to enrolling in this course, students		
meaningful to an organization in		must complete the PHGT 514 gate course (described in		
appropriate applied practice		Criterion B3) and pass an exam that addresses the		
settings		foundational and concentration competencies.		
Qualified individuals assess each				
work product & determine whether				

		
All MPH students are required to produce at least two		
work products during their APE and must select and		
demonstrate five competencies (three foundational and		
two concentration) through the course of their		
experience, which requires the completion of 120 contact		
hours at a practice site.		
Students complete the practicum agreement document		
which includes the site, their preceptor, competencies to		
be addressed, and their proposed work products. During		
the site visit, faculty described an iterative process with		
the student to draft, review, and refine plans for the APE.		
The practicum director reviews all student practicum		
· · · · · · · · · · · · · · · · · · ·		
products will be delivered at the conclusion of the		
experience.		
, ,		
·		
·		
required steps before completing their APE.		
Students are responsible for identifying an appropriate		
, ,		
, , ,		
previous relationships and connections, the students'		
	work products during their APE and must select and demonstrate five competencies (three foundational and two concentration) through the course of their experience, which requires the completion of 120 contact hours at a practice site. Students complete the practicum agreement document which includes the site, their preceptor, competencies to be addressed, and their proposed work products. During the site visit, faculty described an iterative process with the student to draft, review, and refine plans for the APE. The practicum director reviews all student practicum agreements to ensure the appropriateness of the site, the identification of competencies, and that two work products will be delivered at the conclusion of the experience. During the site visit, faculty described how they use the gate system to help track and monitor student progression through the prerequisites for the APE. Before students can enroll in HLTH 698, they must successfully complete several zero credit PHGT courses that ensure students identify an appropriate site, preceptor, and competencies. Faculty who teach the practicum course receive specific training on the APE requirements and have access to resources that help ensure students complete the required steps before completing their APE. Students are responsible for identifying an appropriate APE site and preceptor on their own or through discussion with faculty. During the site visit, faculty described how they support students in identifying sites based on	work products during their APE and must select and demonstrate five competencies (three foundational and two concentration) through the course of their experience, which requires the completion of 120 contact hours at a practice site. Students complete the practicum agreement document which includes the site, their preceptor, competencies to be addressed, and their proposed work products. During the site visit, faculty described an iterative process with the student to draft, review, and refine plans for the APE. The practicum director reviews all student practicum agreements to ensure the appropriateness of the site, the identification of competencies, and that two work products will be delivered at the conclusion of the experience. During the site visit, faculty described how they use the gate system to help track and monitor student progression through the prerequisites for the APE. Before students can enroll in HLTH 698, they must successfully complete several zero credit PHGT courses that ensure students identify an appropriate site, preceptor, and competencies. Faculty who teach the practicum course receive specific training on the APE requirements and have access to resources that help ensure students complete the required steps before completing their APE. Students are responsible for identifying an appropriate APEsite and preceptor on their own orthrough discussion with faculty. During the site visit, faculty described how they support students in identifying sites based on

interests, and collaboration with the university's career services team. Qualified preceptors for MPH students must hold an MPH degree or another relevant degree if they have public health practice experience. The director of practicum and the program directors evaluate the student's site, preceptor, planned projects, and competencies. The preceptor gives their feedback on student work products, but the course instructor is ultimately responsible for evaluating the deliverables for competency attainment. Site visitors reviewed sample work products from each concentration. A few student portfolio samples included the following: • Give Hope, Fight Poverty focuses on increasing access to sanitary pads and health education for orphaned and vulnerable girls in Eswatini. The student developed, implemented, and evaluated a survey about perceptions of reusable products and developed a monitoring and evaluation plan for the organization to track success in the future. The student developed diabetes health education materials for community health workers in Curacao and created a database template in Excel for the organization. • Sisters in Public Health support professional development of women professionals and students in the public health field. The student developed a membership demographic survey and created materials to be used on social media platforms and virtual professional networks. Virginia Department of Health: the student used statistical tools to determine the relationship

between COVID vaccination status and the type and number of long COVID symptoms experienced by participants and created a report and presentation detailing the findings.	
During the site visit, alumni and preceptors reported how well the APE process works. Alumni shared examples of how their practicum led them to choose particular careers, and several preceptors reported hiring students who completed their APE with them or their organization. Preceptors described how students were well prepared for working in professional settings, including their communication skills and ability to work with others.	

D6. DRPH APPLIED PRACTICE EXPERIENCE

Criterion Elements	Compliance	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Finding			
	Not Applicable			

D7. MPH INTEGRATIVE LEARNING EXPERIENCE

Criterion Elements	Compliance	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Finding			
	Met			
Students complete project explicitly		The ILE is completed in the form of a high-quality written	Click here to enter text.	
designed to demonstrate synthesis		paper that the program calls the project paper and is		
of foundational & concentration		completed as part of the required HLTH 698 practicum		
competencies		course. The project paper must be in the format of a		
Project occurs at or near end of		publishable paper, with sections for background, methods,		
program of study		results, and discussion. Students must integrate the same		

Students produce a high-quality	five competencies demonstrated during their practicum,	
written product	and may identify additional competencies, with approval	
Faculty reviews student project &	from the course instructor.	
validates demonstration &		
ynthesis of specific competencies	The project papers are based on actual implementation of	
	the students' solutions, not hypothetical. The student	
	identifies a specific public health problem within a	
	population that their practicum site is focused on, a	
	desired solution, and actions that they would implement	
	to achieve the desired solution. The student documents	
	the background of the problem along with historical,	
	epidemiological, and developmental data important to	
	understanding the population and problem. Next, the	
	student identifies, in detail, a series of SMART objectives	
	that describe the solution to be implemented and how	
	each step of the project would be achieved. Then the	
	student presents the results and implications of the	
	SMART objective, providing clarity on how the findings tie	
	back to the original desired impact or solution. For	
	example, the last student sample listed above in criterion	
	D5 was related to COVID and their project paper was	
	"Participants and Research Data Management in Clinical	
	Trial of iHealth OTC COVID-19 Testing Kit;" the student's	
	solution was identifying viable suggestions for rapid	
	diagnosis of COVID-19 in the future.	
	Finally, the student must present a discussion explaining	
	how the competencies were implemented throughout the	
	project and tie everything back to the evidence and	
	literature. As part of the discussion section of the paper,	
	students must describe how the deliverables they	
	produced during their practicum impact progress toward	
	the desired solution for the problem. Faculty use a rubric	
	to evaluate the student's project paper.	

The project paper is reviewed and evaluated by the course instructor. Each student sample reviewed by the site visitors included the project paper, the graded rubric, and the instructor's written feedback.	
Student samples provided in the electronic resource file demonstrate high quality work. Student project paper topics included a culturally tailored diabetics prevention program; an evaluation of Anguilla's public health care system and regulatory processes for understanding the HIV/AIDS program challenges; development and implementation of the Spring of Hope community outreach program in Randolph County, North Carolina; exposures and management of endocrine disrupting chemicals in developing countries; Onslow County, North Carolina food security assessment; and effects of nutrition on congenital heart defects.	

D8. DRPH INTEGRATIVE LEARNING EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D9. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL DOMAINS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Curriculum ensures that all elements of all domains are		The foundational domain areas are covered by core courses required by all students.	Click here to enter text.	

covered at least once (see		
worksheet for detail)	Required coursework for the BS include the following	
If curriculum intends to prepare	courses:	
students for a specific credential		
(e.g., CHES), curriculum addresses	BIOL 203: Introductory Microbiology 1	
the areas of instruction required for	BIOL 213: Human Anatomy and Physiology I	
credential eligibility	BIOL 215: Human Anatomy and Physiology II	
	HLTH 216: Personal Health	
	MATH 201: Introduction to Probability and Statistics	
	CRST 290: History of Life	
	HLTH 301: Foundations of Public Health	
	HLTH 350: Introduction to Public and Community	
	Health	
	HLTH 370: Introduction to Environmental Hazards	
	and Response	
	HLTH 420: Principles of Behavior Change and Health	
	Counseling	
	HLTH 444: Principles of Epidemiology and	
	Biostatistics	
	HLTH 453: Program Planning and Evaluation in	
	Health Education	
	HLTH 488: Chronic and Infectious Disease	
	The D9 worksheet summarizes reviewers' findings. For	
	example, HLTH 350 covers comparative health systems	
	and differences in other countries via readings from the	
	assigned textbook and quizzes and exams. HLTH 370	
	covers the use of mass media for health communication	
	through case studies and a PSA group project. HLTH 453	
	covers legal, economic, ethical, regulatory, and	
	governmental agency aspects of health policy through	
	course instruction and has separate modules for each	
	area. These are assessed through quizzes, exams, and the	
	final program planning project.	

D9 Worksheet

Public Health Domains	Yes/CNV
1. Concepts and applications of basic statistics	Yes
2. Foundations of biological and life sciences	Yes
3. History & philosophy of public health as well as its core values, concepts & functions across the globe & in society	Yes
4. Basic concepts, methods & tools of public health data collection, use & analysis & why evidence-based approaches are an essential part of public health practice	Yes
5. Concepts of population health, & the basic processes, approaches & interventions that identify & address the major health-related needs & concerns of populations	Yes
6. Underlying science of human health & disease, including opportunities for promoting & protecting health across the life course	Yes
7. Socioeconomic, behavioral, biological, environmental & other factors that impact human health & contribute to health disparities	Yes
8. Fundamental concepts & features of project implementation, including planning, assessment & evaluation	Yes
9. Fundamental characteristics & organizational structures of the US health system as well as the differences between systems in other countries	Yes
10. Basic concepts of legal, ethical, economic & regulatory dimensions of health care & public health policy & the roles, influences & responsibilities of the different agencies	Yes
& branches of government	
11. Basic concepts of public health-specific communication, including technical & professional writing & the use of mass media & electronic technology	Yes

D10. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Finding			
	Met			
Students demonstrate & are		The program assesses both foundational competencies at	Click here to enter text.	
assessed on each competency & all		least once through required public health courses, as		
its elements:		noted in the D10 worksheet. Site visitors reviewed		
1. ability to communicate public		documentation including syllabi and assessments to		
health information, in both		evaluate the demonstration of the two public health		
oral & written forms, through a		competencies.		
variety of media & to diverse				
audiences		Oral communication is assessed in HLTH 453 through an		
2. ability to locate, use, evaluate		oral presentation of a health promotion program students		
& synthesize public health		develop. Written communication is assessed in HLTH 301		
information		through a paper describing what a philosophy of health		

statement is and why it is important for health educators/public health professionals to develop a philosophy of health. Material provided to validate communication with diverse audiences included an assignment in HLTH 330 that requires students to tailor health education materials to different audiences. Students developed different PSAs about health risks and hazards using social media, radio, and television in HLTH 370. The ability to locate and use information is assessed in HLTH 453 and HLTH 350 in which students use resources like Healthy People and results from county needs assessments to analyze how health issues are being addressed. Students demonstrate the ability to evaluate and synthesize information in HLTH 444 by evaluating data collected from the case-control questionnaires and creating a descriptive epidemiology analysis of the sample for a research project. During the site visit, students indicated a great deal of satisfaction with the quality of instruction and preparation for future careers in public health. The alumniand external partners, such as staff from the Virginia Department of Health and local non-profit agencies, indicated a high level of satisfaction with the competencies demonstrated by graduates.

D10 Worksheet

Competency Elements	Yes/CNV				
Public Health Communication					
Oral communication	Yes				
Written communication	Yes				
Communicate with diverse audiences	Yes				
Communicate through variety of media	Yes				
Information Literacy					
Locate information	Yes				
Use information	Yes				
Evaluate information	Yes				
Synthesize information	Yes				

D11. PUBLIC HEALTH BACHELOR'S DEGREE CUMULATIVE AND EXPERIENTIAL ACTIVITIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students complete cumulative &		All bachelor's degree students are required to complete	Click here to enter text.	
experiential activities		either HLTH 499: Professional Internship or HTLH 498:		
Activities require students to		Public Health Senior Seminar.		
integrate, synthesize & apply				
knowledge & program encourages		Generally, pre-clinical and nutrition students complete		
exposure to local-level		HLTH 498 as their capstone. This course is designed to help		
professionals & agencies		students prepare a publishable paper about a public		
		health issue. Students apply principles of evidence-based		
		research and professional writing to describe how their		
		chosen health issue affects population health and present		
		their findings to the class. Students also complete case		
		studies on current issues in public health including		
		immunization, mammograms, motor vehicle safety, etc.		

and discuss methods to address them. The site visit team reviewed student samples which included the following topics: Efficacy of Human Trafficking Education for Healthcare Professionals; Cash Transfers and Child Development in Low-and-Middle-Income Countries; Sexual Education Teaching Methods for Youth: What is Most Effective; A Literature Review of the Impact of Physical Activity on Geriatric, Memory-Care Patients; and What are the Most Effective Programs to Reduce Binge Drinking Among College Aged Women?

Health promotion students take HLTH 499 and complete an internship; pre-clinical students may also choose to take this course. Students are responsible for securing their internship site and receive guidance on how to identify an appropriate site. Internships must be approved by the BS internship coordinator. Students must have 180 hours of supervised exposure to public health practice and the opportunity to apply at least three of the areas of responsibility of certified health education specialist. Students complete the internship in their last year of the program and must meet GPA, course, community services, and first aid/CPR requirement.

Students submit regular reports describing completed tasks. They also participate in group progress report sessions at the internship mid and endpoint.

Examples of student internship sites and projects include the following:

- WoMen of Connections Ministry: researching hepatitis as well as autism for resource center
- Centers for Disease Control and Prevention, Agency for Toxic Substances and Disease Registry (ATSDR),

Office of Community Health and Hazard Assessment (OCHHA): conducting public health assessments. • Jamerson Family YMCA: creating flyers and internal documents for the YMCA.	
During the site visit, students described the wide variety of sites they interned at and the value of their experiences. Preceptors of interns described how easy it was to work with faculty to coordinate the internship process.	

D12. PUBLIC HEALTH BACHELOR'S DEGREE CROSS-CUTTING CONCEPTS AND EXPERIENCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Program ensures opportunities		The program provides opportunities for exposure to all	Click here to enter text.	
available in all cross-cutting areas		cross-cutting concepts through their coursework. In		
		addition, students have other opportunities that are built		
		on the curriculum at co-op experiences in public health		
		settings and/or have access to many student-run		
		organizations on campus.		
		For example, the program addresses advocacy in the		
		course HLTH 301, in which students review advocacy		
		toolkits, select a public health issue, and write legislators		
		about the issue. In the same course, the students are		
		introduced to the concept of systems thinking and then		
		role play in a class activity to develop a systems approach		
		to a health problem in a local city. Teamwork and		
		leadership are covered and assessed in multiple courses,		
		including HLTH 420, 444, and 453 through group projects		
		that expose students to teamwork and taking on		

leadership roles. They are assessed through peer evaluations.	
Reviewers' findings are presented in the D12 worksheet.	

D12 Worksheet

Cross-cutting Concepts & Experiences	Yes/CNV
1. Advocacy for protection & promotion of the public's health at all levels of society	Yes
2. Community dynamics	Yes
3. Critical thinking & creativity	Yes
4. Cultural contexts in which public health professionals work	Yes
5. Ethical decision making as related to self & society	Yes
6. Independent work & a personal work ethic	Yes
7. Networking	Yes
8. Organizational dynamics	Yes
9. Professionalism	Yes
10. Research methods	Yes
11. Systems thinking	Yes
12. Teamwork & leadership	Yes

D13. MPH PROGRAM LENGTH

Criterion Elements	Compliance	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Finding			
	Met			
MPH requires at least 42 semester credits or equivalent		The program requires 42 semester-credits for completion, including 18 credits of core coursework, 15 credits completed through one of the five concentrations (five courses, three credits each), a three-credit practicum, and six credits of electives.		

A semester hour of credit consists of the equivalent of one	
50-minute period of class work for 15 weeks, with an	
expectation of two hours of outside preparation or two 50-	
minute periods of laboratory work for each semester hour.	
Online courses are equivalent to the number of classroom	
contact hours (750 minutes per credit hour).	

D14. DRPH PROGRAM LENGTH

Criterion Elements	Compliance	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Finding			
	Not Applicable			

D15. BACHELOR'S DEGREE PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Required credit hours commensurate with other similar degrees in institution Clear, public policies on coursework taken elsewhere, including at community colleges		Consistent with university requirements, the college requires bachelor's degree students to complete a minimum of 120 semester credit hours. Students in all concentrations are required to complete 44-47 hours of general education coursework and 56-59 hours to fulfill major degree requirements. Of the 120 credits, 30 must come from upper level (300-400 level) courses.		
		The university requires that all students must earn at least 30 credits and 50% of coursework of their baccalaureate degree requirements in residence at Liberty University. Liberty University has college credit transfer agreements with the Virginia Community College Systemand the North		

Carolina Community College System based on equivalency guides that guarantee the transfer of courses from participating colleges.	
The program's BS requires a similar minimum credit-hour for graduation as other comparable bachelor's degrees. For example, the BS in social work requires 43 credits of general coursework and 69 credits of major specific coursework.	

D16. ACADEMIC AND HIGHLY SPECIALIZED PUBLIC HEALTH MASTER'S DEGREES

Criterion Elements	Compliance	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Finding			
	Met			
Defines specific assessment activity		The program offers an MSPH in epidemiology. This	Click here to enter text	
for each of the foundational public		program was designed for students who were interested		
health learning objectives (see		in the MPH epidemiology concentration but desired a		
worksheet for detail)		research focus, rather than a practice focus.		
Depth of instruction in 12 learning		, '		
objectives is equivalent to 3-		Students take the same required foundational courses as		
semester-credit course		MPH students, described in Criterion D1. Reviewers		
Ensures curriculum is grounded in		validated that the program defines appropriate		
appropriate competencies		assessments for the 12 foundational knowledge areas		
Curriculum addresses scientific &		through these classes.		
analytic approaches to discovery &				
translation of public health		In addition to the required foundational credits, MSPH		
knowledge		students also complete the same 15 credits as		
Instruction in scientific & analytic		epidemiology MPH students. Requirements unique to the		
approaches is at least equivalent to		degree include the EPDM 690: Epidemiology Thesis (three		
a 3-semester-credit course				

Students produce an appropriately rigorous discovery-based paper or project at or near end of program	credits), as well as seven credits of methodology courses and one elective.	
Students have opportunities to engage in research at level appropriate to program's objectives	The curriculum contains courses such as data visualization and spatial analysis, statistical software lab, advanced research methods in epidemiology, chronic disease epidemiology, prevention and control of infectious diseases, field epidemiology, and epidemiologic research methods, which provides scientific and analytic approaches to translate knowledge into public health. Each of these courses is three credits, except for statistical software lab, which is one credit.	
	The program provided a list of six competencies for this degree. The six competencies are unique to this concentration and align with the required courses.	
	The thesis is guided by a thesis handbook. Students complete an MSPH thesis proposal template and apply for enrollment after their topic and thesis chair are approved. After writing the thesis, students also perform a defense. Since the program is new, no examples of the thesis were available to review.	

D16 Worksheet

Foundational Knowledge	Yes/CNV
1. Explain public health history, philosophy & values	Yes
2. Identify the core functions of public health & the 10 Essential Services	Yes
3. Explain the role of quantitative & qualitative methods & sciences in describing & assessing a population's health	Yes
4. List major causes & trends of morbidity & mortality in the US or other community relevant to the school or program	Yes
5. Discuss the science of primary, secondary & tertiary prevention in population health, including health promotion, screening, etc.	Yes
6. Explain the critical importance of evidence in advancing public health knowledge	Yes
7. Explain effects of environmental factors on a population's health	Yes

8. Explain biological & genetic factors that affect a population's health	Yes
9. Explain behavioral & psychological factors that affect a population's health	Yes
10. Explain the social, political & economic determinants of health & how they contribute to population health & health inequities	Yes
11. Explain how globalization affects global burdens of disease	Yes
12. Explain an ecological perspective on the connections among human health, animal health & ecosystem health (e.g., One Health)	Yes

D17. ACADEMIC PUBLIC HEALTH DOCTORAL DEGREES

Criterion Elements	Compliance	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Finding			
	Not Applicable			

D18. ALL REMAINING DEGREES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D19. DISTANCE EDUCATION

Criterion Elements	Compliance	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Finding			
	Met			
Instructional methods support		The program offers four of its six MPH concentrations	Click here to enter text.	
regular & substantive interaction		online. Students have the option of completing the MPH		
between & among students & the		degree online, in the classroom, or in a combination of		
instructor		online and residential courses.		
Curriculum is guided by clearly				
articulated learning outcomes that		The online MPH program is offered through a division of		
are rigorously evaluated		the university known as Liberty University Online (LUO).		

Curriculum is subject to the same	The online administrative chair works closely with LUO	ļ
quality control processes as other	staff to coordinate course delivery, and LUO staff provide	ļ
degree programs in the university	support to faculty through technology maintenance and	ļ
Curriculum includes planned &	training in distance education methodologies. All courses	ļ
evaluated learning experiences that		ļ
are responsive to the needs of	on the same degree requirements as the residential	ļ
online learners	program.	ļ
Provides necessary administrative,		ļ
information technology &	The MPH degree has been offered online from its	ļ
student/faculty support services	inception. The increasing public demand for greater access	ļ
Ongoing effort to evaluate	to courses and degrees outside traditional delivery venues	
academic effectiveness & make	has reinforced the decision. Offering multiple methods of	ļ
program improvements	delivery makes it possible to reach a wider and more	
Processes in place to confirm	diverse student population, including the program's	
student identity & to notify	priority populations of military students and	
students of privacy rights and of	underrepresented minorities.	
any projected charges associated		ļ
with identity verification	At the department level, the online and residential	
·	modalities share a practicum coordinator and two	ļ
	administrative assistants. The online modality has	
	additional support from the administrative chair for online	
	programs, associate dean for online programs, and an	
	online faculty support coordinator. The administrative	
	chair reports to the associate dean who, in turn, reports to	
	the dean of LUO. Instructional mentors, discussed in	
	Criterion A1, are the first tier of the administrative faculty	ļ
	hierarchy; each instructional mentor is a faculty member	
	who acts as a team lead for a group of faculty that teach	
	between 30-40 sections per "sub term" (sub terms are	
	typically eight-week halves of the traditional semester).	1
	The instructional mentor's role is to be the point of contact	
	for faculty regarding policy questions and student issues.	
	They mentor new faculty and maintain connections	1
	through team meetings and yearly evaluations.	

Admission and degree completion requirements for the online programs are identical to those in the residential setting. Residential and online faculty design and/or revise course content and learning activities collaboratively, as described in criterion A1. Online instructors meet the same SACSCOC and university qualifications as residential faculty.

Most online courses in the MPH program are offered in eight-week sub terms; only the practicum course is offered in the traditional 16-week semester format. Despite this difference in length, it is university policy that "all syllabi for a particular course (whether offered residential only, online only, or residential & online) must reflect identical course descriptions, course rationales, and course learning outcomes. Assessments for courses offered in both residential and online formats must also be comparable." This comparability allows for minor variations to accommodate the online delivery venue without compromising student learning outcomes. For example, instead of an in-class oral presentation, online students may complete a recorded presentation. In-class synchronous discussions are replaced with discussion forums facilitated by the instructor.

All online MPH courses are offered asynchronously, allowing students the flexibility to complete assignments at their own pace and at times convenient to them. Online courses may be accessed from anywhere in the world that has internet access. Both residential and online students use the Canvas learning platform to support instruction. Online students receive feedback from the instructor and peers via assigned discussion forums, group

communication, and online conferences. Other methods of interaction may include video announcements, phone conferences, Microsoft Teams meetings, and email.

The Assessment & Evaluation Committee examines educational outcomes in the evaluation of program success. These include student retention, degree completion, and post-graduation outcomes. The program highlights several tools used to evaluate the program, including the faculty assessment report, success rate dashboard, and faculty assessment summary. These tools track faculty responsiveness, student success, and other educational outcomes.

MPH students in the distance-based and campus-based modalities are subject to the same admissions criteria and engage their respective curricula with the same rigor. Academic rigor of the online modality is monitored and evaluated through overall program evaluation processes. Curriculum development is overseen by the MPH program director with input from MPH faculty. Online course content is often developed by faculty who teach both online and residential versions of the same course. In cases where there are different online and residential course directors, there is regular communication and coordination between the two course directors that is overseen by the online chair to ensure consistent academic rigor.

During the site visit, the program explained that the online administrative chair is a key player in ensuring that the curriculum for online courses is clear and that best practices in pedagogy are used. In 2022, the program, guided by the online administrative chair, completed a full

syllabus overhaul for online courses to ensure that verbiage on assessments and competencies was consistent and clear.	
In each online course, students are required to affirm that they will abide by the student expectations. This affirmation is a graded four-question quiz. Within the student expectations is the "Academic Computing Policy" and the "Plagiarism & Academic Dishonesty Policy." Further, there is ongoing use of tools including reporting and tracking tools that monitor for academic dishonesty. While the program does not use remote proctoring during courses, it does use tools to ensure integrity of the student's work such as Turnitin, Al detectors, and password protected accounts.	
During the site visit, faculty noted that they use various methods to ensure that all online students are engaged and have ample opportunities to interact with their peers and with faculty.	

E1. FACULTY ALIGNMENT WITH DEGREES OFFERED

Criterion Elements	Compliance	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Finding			
	Met			
Faculty teach & supervise students		The self-study documents 54 faculty members, all but one	Click here to enter text.	
in areas of knowledge with which		of whom have an advanced degree. Faculty qualifications		
they are thoroughly familiar &		are appropriate to teach and supervise students in the		
qualified by the totality of their		relevant public health degrees and concentrations based		
education & experience		on the site visit team's review of faculty CVs. Faculty have		

Faculty education & experience is appropriate for the degree level (e.g., bachelor's, master's) & nature of program (e.g., research, practice)	graduate degrees in disciplines such health science, behavioral science, health education, epidemiology, public policy, public health, biostatistics, global, and environmental health.	
	The faculty member who does not have an advanced degree, is currently seeking a PhD and has sufficient experience in nutrition that is appropriate to the nature of her teaching role in both the nutrition and health promotion concentrations.	
	During the site visit, students were very satisfied with the quality and alignment of faculty in the program.	

E2. INTEGRATION OF FACULTY WITH PRACTICE EXPERIENCE

Criterion Elements	Compliance	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Finding Met			
Employs faculty who have professional experience in settings outside of academia & have demonstrated competence in public health practice		Over half of primary faculty have current or former experience working in the public health field, and adjunct faculty have a wide range of practice experience. Examples of faculty members' professional positions		
Encourages faculty to maintain ongoing practice links with public health agencies, especially at state & local levels		 include the following: Co-founder/chief science officer, NEMO Biologicals Executive director for Two Rivers Health Clinic in Rincon, Georgia 		
Regularly involves practitioners in instruction through variety of methods & types of affiliation		 Member of State Health Commissioner's Advisory Council on Health Disparity and Health Equity Chief of nutrition and dietetics for the Federal Bureau of Prisons 		

E3. FACULTY INSTRUCTIONAL EFFECTIVENESS

Criterion Elements	Compliance	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Finding			
	Met			

Systems in place to document that	The program has adequate systems in place to ensure that	Click here to enter text.	
all faculty are current in areas of	faculty are current and expert in their teaching. The		
instructional responsibility	program ensures faculty effectiveness through end of		
Systems in place to document that	course assessments, dialogue with instructional mentors,		
all faculty are current in pedagogical	and annual faculty evaluations.		
methods			
Establishes & consistently applies	All primary faculty participate in annual instructional		
procedures for evaluating faculty	development. The Center for Academic Development		
competence & performance in	provides training for residential primary faculty through		
instruction	required workshops. Online faculty complete online		
Supports professional development	training when hired and on an annual basis. The Faculty		
& advancement in instructional	Communication Center delivers information on training		
effectiveness for all faculty	requirements for residential and online faculty.		
	Each primary faculty member has funds to attend one		
	professional conference each year, maintain professional		
	memberships and licensures, and pay for continuing		
	education credits. Faculty can also use funding to		
	purchase books, journals, and other materials to support		
	professional development.		
	The online chair assigns all online faculty to their		
	instructional mentors, who help enhance instructional		
	delivery and promote good communication with students.		
	Online faculty who teach 18 or more credit hours per year		
	receive up to \$200 annually for professional		
	development. Instructional mentors may use up to \$400		
	for professional development.		
	During the site visit, the program described how they		
	formally designated a subject matter expert for each		
	course to ensure the residential and online courses as well		
	as all sections regardless of instructor use materials that		
	are up to date with the field. The designated subject		

matter expert has in depth expertise in that area and is expected to ensure the curriculum remains up to date. Faculty said that their instruction is evaluated by student course evaluations, which are reviewed by the program director and the department chair. Faculty can also request blinded evaluations by students through the Center for Teaching Excellence, which is able to poll students during the course. The faculty who met with site visitors indicated that many of them took advantage of this program. The program presented data for the last four years on six indicators that it cites as demonstrating performance relevant to instructional effectiveness; a number of the indicators relate more closely to scholarship or extramural service, but the program believes that these activities improve instructional quality. The indicators are as follows: 1) percent of primary faculty attending university, regional, national, or international professional meetings (range 82-94%) 2) percent of primary faculty who maintain current human subjects protection certification (range 61-81%; target 80%) 3) percent of primary faculty serving as research mentors for student research projects (range 60-72%) 4) percent of primary faculty utilizing their program funding for professional development (range 22-69%) 5) number of extracurricular training or workforce development opportunities for individuals serving in public health or healthcare functions (range 5-9)

6) percent of faculty engaged in collaborative projects with local regional, national, or international organizations that address the public health needs of vulnerable or at-risk populations (range 35-47%)	
During the site visit, faculty stated that they had excellent	
resources and support for their teaching. They indicated	
that they had adequate funding to attend conferences.	
Students and alumni praised faculty teaching and	
appreciated the experiences and opportunities that	
faculty provided inside and outside of the classroom.	

E4. FACULTY SCHOLARSHIP

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Policies & practices in place to support faculty involvement in		The university earned the Carnegie research intensive classification in 2015, which promoted research campus-		
scholarly activities Faculty are involved in research &		wide. All faculty are expected to contribute to meeting the departments' research goals. The departmental		
scholarly activity, whether funded or		expectations for full-time faculty workload are 70%		
unfunded Type & extent of faculty research		teaching, 20% service, and 10% research.		
aligns with mission & types of		The university's Illuminate Quality Enhancement Plan		
degrees offered		created the Center for Research and Scholarship, which		
Faculty integrate their own experiences with scholarly activities into instructional activities		supports research and scholarly activity among faculty and students. Research funding is available for residential and online undergraduate and graduate students.		
Students have opportunities for				
involvement in faculty research &		Faculty have many sources of support for research and		
scholarly activities		scholarly activity. They have access to workshops and courses offered by the Center for Academic Development,		

the Jerry Falwell Library, the Center for Research and Scholarship, and the Office of Sponsored Programs. The Provost Research Initiative (funds that originate from the Office of the Provost) supports faculty research activities and professional development. The Center for Research and Scholarship provides funding for faculty equipment, supplies, and travel. Faculty scholarship awards support fees associated with publication and research presentations. The Center of Research and Scholarship also supports release time or compensation for faculty research. The Provost Award for Excellence in Research Mentorship recognizes up to five faculty members a year who exemplify a commitment to best practices in teaching and mentoring students. The department provides additional funds for faculty development and professional conference attendance.

The self-study identifies three examples of faculty research activities that have been integrated into teaching. One online faculty member who conducted evaluation research for statewide tobacco projects integrates his experiences in HLTH 644: Program Evaluation by discussing the project's methods. Another faculty member used participatory research methods to develop a workshop, providing health education and health screenings for Hispanic populations in Broward County, Florida. She explains her findings in HLTH 623: Cultural Aspects of Health Behavioral Course, using examples from this participatory research to illustrate health education and behavioral change with a hard-toreach population. Another faculty uses deliverables from a previous research project to show her HLTH 634: Health Communication and Advocacy class how to use tools that health communication researchers produce and use.

Faculty members provide opportunities for student involvement in research. One faculty member had students collect data for a study on the problems of nausea and vomiting in pregnancy. Another faculty member worked with two students on a study to investigate how small-scale mining in Ghana affected the people, environment, and health; students performed a comprehensive literature review and review matrix and developed a poster. A third faculty member worked with students who analyzed health screening data and detailed questionnaires assessing nutrition, hygiene, housing, income and employment status from Guatemala and three underserved communities in Honduras.

To demonstrate its progress in faculty scholarship, the program selected the following indicators: 1) number of primary faculty presenting at regional, national, or international professional meetings (target 10); 2) number of peer-reviewed or other scholarly publications from primary faculty (target 10); and 3) number of primary faculty conducting research on the needs of vulnerable, at risk, or underserved populations (target six). Only the third goal target has been met. In the last three years, the maximum number of presentations and publications were six and seven, respectively.

During the site visit, faculty provided additional examples of students participating on research projects, such as one faculty member who was able take four students to the APHA annual meeting to present two posters on research on illegal mining in Ghana and Nigeria. Another faculty member said that students helped him conduct a community survey on essential oils. Students said that

	faculty inform them of opportunities through email, class	
	announcements, Canvas announcements, and personal	
	contacts. One student obtained a research fellowship at	
	Johns Hopkins university based on research they did with	
	a faculty member.	

E5. FACULTY EXTRAMURAL SERVICE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines expectations for faculty extramural service Faculty are actively engaged with the community through communication, consultation, provision of technical assistance & other means		Extramural service is a core component of the faculty assessment each year and is evaluated as part of the promotion process. The program reports that all faculty are expected to be involved in at least one extramural service activity annually. The program budget provides funds each year for faculty to travel to professional meetings, present research, or to assist in service on professional boards or committees. During the site visit, faculty described how the department includes funding for instruction-based service opportunities into the annual program budget. Faculty also noted that the university supports faculty engagement in service nationally and internationally. Two examples shared were the university's recruitment of public health faculty to support an international project in Eswatini and a new university program that will allow faculty and students to participate in crisis response through the university "Send" program in partnership with Samaritan's Purse, an evangelical Christian humanitarian aid organization serving people across the world.		

Faculty are engaged in many different service activities including the following: • Participation as an academic partner in the Public Health Academic Advisory Network to support development of public recommendations and improve academic-practitioner partnerships. Participation in the State Health Commissioner's Advisory Council on Health Disparity and Health Equity to review and present recommendations on topics of concern related to disparities and inequities which are then presented to the State Commissioner. This experience informs classroom discussions and opportunities to engage students in experiences like lab tours or tabletop exercises. Serving as a journal reviewer for Health Education and Behavior, Journal of Racial and Ethnic Disparities, Dengue Bulletin, and PLoS Neglected Tropical Diseases. This experience informs instruction, helping students become more precise in their writing. Faculty also engage students in service activities such as providing health services, health education, and health screenings in Zacapa, Guatemala and serving at local food pantry programs in Virginia. Annual evaluations of each faculty include consideration of how they engage in professional development and align their experiences with curriculum. During the site visit, faculty described how their annual evaluation process requires them to report not just the hours and location of service but also a reflection of what the service means and how it connects to their work.

During the site visit, students and alumni highlighted the many opportunities they had to serve the community during their time in the program. Students described how they received information from faculty and staff in courses, through emails, and through personal invitations. Faculty shared many examples of how they were engaged on and off campus in activities that serve the community. University leaders reinforced how important service is to the university and the public health program. They reported that the public health program strongly demonstrates the way the university strives to serve the community and the world. The program identifies three measures related to faculty service: 1) Number of collaborative projects with local, regional, national, or international organizations that address the needs of vulnerable or at-risk populations. The target is eight per year, and the program reports six to eight over the last three years. 2) Number of primary faculty participating in community service or health advocacy activities. The target is nine per year, and the program reports between seven and 10 faculty participating in each of the last three years. During the site visit, the program clarified that although this measure captures particular engagement activities, the goal is for all faculty to engage in service to the community. Number of students participating in public health service or advocacy activities addressing the needs of vulnerable or at-risk populations. The target is 100 MPH students and 10 BS students. The program reports 107 MPH and 19 BS students in 2022;

110 MPH and 11 BS students in 2023; and 58 MPH and	
five BS students in spring 2024.	

F1. COMMUNITY INVOLVEMENT IN SCHOOL/PROGRAM EVALUATION & ASSESSMENT

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Engages with community stakeholders, alumni, employers & other relevant community partners. Does not exclusively use data from supervisors of student practice experiences Ensures that constituents provide regular feedback on all of these: • student outcomes • curriculum • overall planning processes • self-study process Defines methods designed to provide useful information & regularly examines methods Regularly reviews findings from constituent feedback		The primary structure for constituent input in the program is the Community Advisory Board (CAB), which serves as a formal mechanism for engaging with community stakeholders, including representatives from local health departments, nonprofit organizations, healthcare facilities, and community-based agencies. The CAB meets quarterly. The program provided meeting minutes from recent CAB meetings that document discussions related to program goals, concentration-specific curricula, improving survey methods, funding opportunities, workforce development opportunities, student recruitment, and student enrollment. The program also provided evidence of CAB involvement in preparation for and review of the self-study document. For example, in the December 2023 meeting, the CAB provided feedback and thoughts on the new MSPH, gave ideas for the developing DrPH program, and reviewed the CEPH annual report. During the May 2023 meeting, the CAB reviewed the self-study draft in a two-hour virtual meeting and then received an electronic copy with discussion prompts via email. In September 2024, the CAB reviewed the final self-study draft and provided feedback via email.		

During the site visit, reviewers asked the program about how they feel about their efforts to involve external partners in the program evaluation. The program said that engaging external partners long-term is challenging. To ensure that they always have external feedback, the program said they rely on their relationship with the Virginia Department of Health, where many of their alumni are employed. Through their communications with alumni, the program is able to gain additional feedback about how current practice needs are evolving and how the program can improve curricula to stay current.

The program also collects feedback from the employers of its graduates every year via the employer survey. The program asks graduates and alumni for their employer contact information both during the exit survey and the alumni surveys for both undergraduate and graduate students. The employer survey includes guestions that focus on graduates' knowledge in competency related areas, soft skills, overall preparedness of graduates, and additional skills the program should focus on. The surveys include both quantitative and qualitative responses. The program shared results from the 2021 through 2024 employer surveys (32 total respondents). Based on the quantitative responses to questions related to competency areas, employers were generally satisfied with almost all areas. In the most recent data from the 2023-24 MPH employer survey, employers highlighted skills including adaptability, communication, planning and management skills, competent writing, and data analytics as strong skills among graduates they employ. Areas that needed more training included knowledge of federal regulations related to public health and application of epidemiology principles to real-world settings. In the most

recent BS employer survey, employers highlighted written and oral communication as areas where graduates were most prepared. The qualitative responses unanimously agreed that the program graduates are well prepared, with several comments mentioning graduates' dependability. Skills needing additional training included grant writing and community engagement.	
During the site visit, the program said that getting responses from employers is challenging but, overall, they have received insightful feedback. To supplement employer feedback, the program looks at data from preceptors to see what skill areas the program should focus more on while students are still in the program.	
Alumni, preceptors, CAB members and other community members who met with the site visit team spoke about the various opportunities they have had to engage with the program and provide feedback. They shared how receptive the program was to their feedback and how involved they felt in decisions. CAB members highlighted their roles in curriculum revision and their involvement in the self-study process.	

F2. STUDENT INVOLVEMENT IN COMMUNITY & PROFESSIONAL SERVICE

Criterion Elements	Compliance	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Finding			
	Met			
Makes community & professional		Students are introduced to service opportunities through	Click here to enter text.	
service opportunities available to all		classes, student clubs, new student orientations, and		
students		regular email announcements. Community service is an		

Opportunities expose students to	expectation and requirement for the undergraduate and	
contexts in which public health work	graduate programs. Undergraduates across the university	
is performed outside of an academic	are required to provide 20 hours of community service per	
setting &/or the importance of	semester. MPH students are required to complete a	
learning & contributing to	minimum of two service projects.	
professional advancement of the		
field	Students have participated in community health fairs	
	locally in Virginia and abroad in Guatemala, sorted	
	clothing to send to various countries, and served food to	
	local community members.	
	,	
	Members of PHSA served at World Help, hosted a booth	
	at the Out of Darkness Suicide Awareness Walk, and	
	created Valentine's Day grams for residents of a local	
	nursing home to support emotional health. During the site	
	visit, students active in PHSA described the many	
	opportunities to engage in service opportunities available	
	to them and ways they have worked with the program to	
	increase the number of professional development	
	opportunities for students. Students shared examples of	
	faculty members connecting directly with the public	
	health honor society and PHSA to share service	
	opportunities, described how many courses require	
	service learning as a component of the course, and	
	highlighted opportunities to participate in the APHA	
	annual meeting.	

F3. DELIVERY OF PROFESSIONAL DEVELOPMENT OPPORTUNITIES FOR THE WORKFORCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			

The program provides offerings that address the Click here to enter text. Provides activities that address professional development needs of the current public professional development needs of the current public health workforce health workforce. The first example provided in the self-study is the annual public health conference, launched in 2023. The conference is free to ensure that all community agencies and smaller non-profits can attend. The conference was established based on feedback from various community agencies who had a desire to learn about current issues in public health and how their organizations can be involved. The conference serves as both professional development and workforce engagement for the community partners as well as a networking opportunity for students and faculty. The conference sessions focus on the application of foundational competencies in public health, evidencebased practices, and interprofessional workshops. The first two conferences each had between 25-35 speakers and over 150 attendees. During the site visit, the program shared several additional examples of professional development opportunities that they deliver to the community in partnership with the Light House Church and Community Center. Several times each semester, program faculty hold talks and workshops with the church staff and members from the local workforce based on topics that have been identified by the leadership in the church and local organizations. The program gave at least five examples of recent workshops covering topics such as diabetes and nutrition, mental health and burnout, mental health during the holidays, program planning and evaluation, and train the trainer.

	Community partners who met with the site visit team	
	shared additional trainings and workshops the program	
	has delivered to their organizations addressing topics such	
	as hygiene and sanitation and managing chronic diseases.	

G1. DIVERSITY & CULTURAL COMPETENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Con	nmentary		
Defines appropriate priority population(s) Identifies goals to advance diversity & cultural competence, as well as strategies to achieve goals Learning environment prepares students with broad competencies regarding diversity & cultural competence Identifies strategies and actions that create and maintain a culturally competent environment Practices support recruitment, retention, promotion of faculty (and staff, if applicable), with attention to priority population(s) Practices support recruitment, retention, graduation of diverse students, with attention to priority		The program defines systemic efforts to incorporate elements of diversity. Until 2024, the program defined its student priority populations as individuals affiliated with the military and underrepresented minorities. Military populations were selected to support the university's dedication to make educational opportunities available to active-duty service members and veterans. Underrepresented minorities were defined based on groups that had low enrollment in the program and low representation in the public health workforce. Currently, in addition to the underrepresented minorities (defined as anyone who is not Caucasian/White), the program added another population, first-generation students, including first to enroll and first to graduate from college. At the time of the site visit, the program was no longer focusing on military populations as a primary area of focus since enrollment among military populations has been stable, and the program has met its goals for this population. The program will focus on collecting quantitative data for the	Once again, our team recognized the need during our self-study for improved data collection mixed methodological approaches for program improvement to add to our current benchmarking standards. Our program remains dedicated to improving recruitment and retention of students, especially those of vulnerable populations and promoting standards that support students with unique barriers. One specific way we have incorporated to improve our program data utility is to adapt entrance surveys that better catch potential unique barriers and identify students that may need any additional supports or resources, such as referrals or information to be successful. Please	
population(s) Regularly collects & reviews quantitative & qualitative data &		first-generation populations and qualitative data on underrepresented minority populations (e.g. "describe	find the entrance survey attached. Further, improving the data	

uses data to inform & adjust	your ethnic identity"); the program will collect graduate	,
strategies	student data in a required gate course.	qualitative and quantitative data
Perceptions of climate regarding		will better help us understand the
diversity & cultural competence are	The program's goal for faculty is to reflect the	
positive	department's student body, which means identifying th	·
	same priority populations for faculty as students.	retention recommendations as we
		continue monitor students through
	The program defines the following goals for increasin	g the entrance surveys (starting Fall
	representation and supporting the ongoing success of it	2026) and our new Gate system,
	underrepresented populations.	launched in the Fall of 2022. Better
	1. Recruit and retain a diverse, qualified student body	understanding of our population
	2. Monitor the number of students who are first in the	• • • • • • • • • • • • • • • • • • • •
	family to attend college and first in the family to	understands patterns and trends by
	graduate	population demographics, that is
	3. Monitor the proportion of underrepresented	• • • • • • • • • • • • • • • • • • • •
	minorities (URM) enrolled	of students through questionnaires
	4. Have a diverse faculty that represents the studen	• •
	population being served.	climate of diversity, inclusion, and
		equity across our program that
	The program describes actions such as meeting with state	
	from other university offices to brainstorm strategies an	
	creating strategic plans to increase priority populations	· ·
	enrollment. For example, the program's Recruitment and	·
	Retention Committee had several meetings with the Office	
	of Military Affairs and Enrollment Management in 2018-19	
	More recently, the program had meetings with the Office	
	of Equity and Inclusion.	
	or Equity and modulon.	
	In the curriculum, students learn about cultura	
	competency skills through several courses, including	
	HLTH 420: Principles and Behavior Change and Healt	
	Counseling (BS), HLTH 507: Public Health Administratio (MPH), and HLTH 623: Cultural Aspects of Health Behavio	
	(MPH). Faculty encourage students to participate in	

activities that involve cultural sharing, and individuals who reflect the racial and cultural diversity of the campus and community are frequent guests in classrooms. These include representatives from Live Healthy Liberty, the Office of Equity and Inclusion, and the Virginia Department of Health Office of Health Equity.

The program collected student feedback on the program climate in 2024. Among BS students, 73% indicated that the program was very or moderately diverse and 93% indicated that the program's climate for cultural competence was very or moderately competent. MPH students also mostly believed that the program is diverse; 89% indicated very or moderately diverse, and 96% indicated that the program's climate of cultural competence was very or moderately competent.

Of the faculty who responded to the climate survey, 16 strongly agreed (17 total responses, one somewhat agreed) to the statement: It is essential for the success of the department of public and community health to integrate curriculum and programs that foster a climate of cultural and racial diversity. They also strongly agreed that the program has diverse leadership, faculty, staff, and students.

The program reported that enrollment of military populations ranged from 25-29% over the last three years. The program cannot currently document enrollment numbers for American Indians, Asian Americans, or Hispanic Americans (the three primary minority populations of interest prior to 2024). During the site visit, faculty said that they know that the program enrolls students from these populations, but data has not been

captured because nearly all students marked "unknown" for their race and ethnicity on the university-based data source that the program has used. Faculty stated that they encountered exceptionally challenging difficulties in capturing student demographics and attributed these difficulties to generational differences, specifically highlighting students declining to respond to demographic questions. Faculty intend to engage in qualitative analysis to help improve recruiting among their evolving priority populations.

The commentary relates to the program's challenges demonstrating that it uses data to inform and adjust strategies to meet its goals. Despite recording zero American Indians, Asian Americans, and Hispanic Americans for the last three years, the program did not develop updated methods and strategies until the months immediately preceding the site visit. Faculty articulated a plan to collect data without relying on university demographic data, and site visitors reviewed the new survey tools that the program will use to collect data in 2025.

During the site visit, faculty and students praised the program climate, indicating that they felt included and welcome. One faculty member stated that he was excited to come to work in the morning and a student said that "we network, we bond, and at the end of the day, we are friends." These sentiments were frequently mentioned throughout the site visit sessions.

H1. ACADEMIC ADVISING

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students have ready access to advisors from the time of enrollment Advisors are actively engaged & knowledgeable about the curricula & about specific courses & programs of study Qualified individuals monitor student progress & identify and support those who may experience		The program makes a wide variety of advising resources available to students. MPH students are enrolled in an eight-week asynchronous online orientation course during their first term. The eight modules include information about how to connect with staff and faculty, what resources are available to students and where to find them, academic misconduct, library resources, as well information about the program, program gates, course offerings, and sequencing.		
difficulty Orientation, including written guidance, is provided to all entering students		BS students are invited to an orientation the Friday before classes begin. This orientation covers an overview of the department, programs of study, and opportunities for recreation and service. All BS students are assigned a professional advisor on campus from the College of Applied Studies and Academic Success (CASAS). Students are required to meet with this advisor twice per year until junior status. At that point, students are referred to a department advisor within their major. The BS program director meets with the CASAS advisor at the beginning of each academic year to discuss program changes, areas needing special attention, and other pertinent issues. The BS program director divides students for advising among undergraduate faculty. University requirements stipulate that all residential faculty designate 10 hours per week as office hours, to be available for advisement and other assistance. Undergraduate advisors send invitations		

for advising at least twice per year. Students may also request advising at any point. The program also offers group advising sessions each semester to review program requirements, course sequencing, and upcoming events.

The MPH program director conducts a half-day mandatory orientation for new MPH students each fall. This orientation covers an overview of the program, an introduction to degree and curriculum requirements, and guidelines for academic success.

MPH residential students are assigned a primary and secondary faculty advisor. Faculty contact their assigned advisees at least twice a year to offer information and assistance specific to student needs. Students are required to meet with their advisor before registering for courses. To prepare MPH faculty advisors for their advising roles, the program director provides resourceson the degree and curriculum requirements, course sequencing, course schedules, and other helpful tips. MSPH students are advised by the MSPH faculty.

MPH online students receive academic advising from the university's online academic advising department. Each advisor is trained to help students with basic logistic concerns such as registration, financial check-in, and setting up their student accounts. Students have access to on-demand advising support by emailing a central MPH helpdesk. During the site visit, faculty and staff shared that any outreach to that service by students is responded to within 36 hours. The online program director provides additional support for students seeking academic or career advice.

During the site visit, faculty described ways they monitor online student performance and course sequencing. By monitoring course grades, GPA, and course registrations, faculty reach out proactively to students who may need additional support. Site visitors reviewed written orientation material that covers BS and MPH degree completion plans, the MPH gate system, and the BS and MPH student handbooks. The advising process and resources for accessing advising resources are appropriately covered in these written materials. Data provided by the program regarding BS and MPH student satisfaction with academic advising generally appears positive. For BS students, the percentage of students somewhat satisfied or very satisfied ranged from 78% to 92% during the last three years. For MPH students, the percentage of students somewhat satisfied or very satisfied ranged from 85% to 93% during the last three years. During the site visit, students were very positive about their experiences with academic advising resources. There was some feedback from online students that while the university advising resources were helpful, they did not feel particularly connected to a specific person who knew about their program requirements. The program may consider reviewing academic advising data broken down by residential vs. online students to ensure that both groups are receiving the appropriate advising

supports.

H2. CAREER ADVISING

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met	,		
Students have access to qualified advisors who are actively engaged & knowledgeable about the workforce & provide career placement advice Variety of resources & services are available to current students Variety of resources & services are available to alumni		Career advising is available to all students throughout their time in the program. Students are introduced to career services resources at academic welcome sessions specific to the School of Health Sciences during each term. Residential and online MPH students are required to meet with career services during HLTH 507 and 509 courses in order to learn resume development skills; BS students are introduced to resume development in HLTH 216. During the site visit, students described how they appreciated that many courses required them to engage with career services and how that prepared them later on. Career coaches are available to students through the university's Career Center. Each department is assigned a career coach. This coach serves students at all stages through individualized consultations, resume workshops, and mock interviews, and by encouraging participation in the career fairs and employer presentations, as well as introducing them to various online job databases, including an exclusive employer relationship database.	Click here to enter text.	
		Career coaches assigned to the program are oriented to public health information via the program directors. Program directors share information about program updates, public health careers, and job marketing links. Career coaches are hired centrally in the university Career Center and receive training on coaching skills, professional resume and cover letter writing, career		

assessment tools, networking, interviewing, internship, and job searching tools. During the site visit, faculty described how two of the career coaches assigned to the program have health-related backgrounds, which has been very helpful in connecting students to appropriate resources.

In addition to career coaching professionals, all primary faculty encourage students to consult with them about career opportunities. During the site visit, students and alumni identified that faculty were always available as needed to support their career pursuits, including providing resume help, connections to individuals or organizations, or support in preparing for the workforce.

All alumni have access to career coaches at any time upon request.

Data regarding satisfaction with career advising is generally positive. For BS students, the percentage of students who report being somewhat satisfied or very satisfied ranges from 80% to 96% over the past three years. For MPH students, the percentage of students who report being somewhat satisfied or very satisfied ranges from 75% to 84% over the past three years. During the site visit, reviewers asked about the data and the program directors said that they are making the survey questions more specific so that students know what specific career advising the survey is asking about (university vs. program) to ensure that the data are representative of the students' experiences.

H3. STUDENT COMPLAINT PROCEDURES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defined set of policies & procedures govern informal complaint resolution & formal student complaints & grievances Procedures are clearly articulated & communicated to students Depending on the nature & level of each complaint, students are encouraged to voice concerns to unit officials or other appropriate personnel Designated administrators are charged with reviewing & resolving formal complaints All complaints are processed & documented		Student complaint procedures are clearly articulated in the undergraduate student handbook, the graduate catalog, and on the university's webpages. For academic complaints and appeals, students are encouraged to communicate concerns directly with any faculty member with whom there may be an issue. Residential students may also contact the Student Advocate Office. Online students file complaints and appeals through the LUO Advocate Office. The university has a Student Complaint Review Committee to enhance monitoring and tracking of student complaints. This committee oversees and coordinates a monthly review of complaints and provides recommendations to the university to respond to and resolve these complaints. These policies and procedures are communicated in a variety of ways to both residential and online students, including via orientation, program handbooks, and the consumer information disclosure emails sent to all	Click here to enter text.	
		The program provided a list of over 70 formal complaints over the past three years. The program must use the university-wide system to handle these complaints and grievances; therefore, the only way to generate the list of entries is to also include entries related to university issues such as payments, fees, and health waivers, and other areas outside the department's control. Upon		

review of the list of complaints, site visitors noted that most of the complaints were grade appeals and extension requests, all of which were resolved at the program level through the established process. The other complaints were related to financial aid, academic withdrawals, and course section changes, all of which were resolved through the defined processes.	
During the site visit, students told the site visit team that they were very comfortable with bringing concerns to faculty, and none had any experience with or knew others who had filed complaints.	

H4. STUDENT RECRUITMENT & ADMISSIONS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Implements recruitment policies designed to locate qualified individuals capable of taking advantage of program of study & developing competence for public health careers		The program implements recruitment policies designed to locate qualified individuals capable of taking advantage of the programs of study and developing competence for public health careers. Student recruitment for the BS and MPH degrees is largely		
Implements admissions policies designed to select & enroll qualified individuals capable of taking advantage of program of study & developing competence for public health careers		accomplished through the marketing mechanisms of the university. These include both general and targeted promotional efforts. In general efforts, the university produces special and ongoing outreach activities on campus and through various media and publication outlets off campus to reach prospective students.		
		The department participates several times a year in oncampus university-wide recruiting events, the largest		

being College for a Weekend, held twice each semester. These events mainly target undergraduate students. Through faculty, the department also recruits undergraduate public health students for the MPH degree program. LUO engages in active recruitment through telemarketing and internet-based efforts. LUO's efforts have successfully recruited older students, often employed, throughout the country, in the U.S. military, and around the world.

The department chair and the MPH and BS program directors engage in targeted student recruitment through publications and meetings of national and state professional associations including the APHA, the Virginia Public Health Association, and Christian Connections for International Health. They work closely with the marketing team to prepare appropriate print and electronic materials used in these and other venues.

The program also targets high school seniors for the BS program and college juniors and seniors or community college students through traveling recruiters of the University Visitors Center.

Undergraduate students can apply online or via a phone call to an admissions counselor. Decisions for admission are based on cumulative high school (or college if applicable) GPA or GED scores, trends and consistency of grades, ACT or SAT scores, and essay writing.

The MPH program is designed for flexibility for students, including a rolling admission process. Successful applicants must have a bachelor's degree from an accredited college or university with a minimum cumulative GPA of 3.0 for

regular, or 2.5 for cautionary status. International students must also provide evidence of adequate financial support and proficiency in English if it is not their primary language. All admission decisions are made at the university level by an admissions committee, based on department standards.	
The program tracks enrollment of its priority student populations (military students and underrepresented minorities) as measures of success in recruitment and admissions. The program documented fairly stable enrollment of these populations over the last three-year period.	
During the site visit, students were pleased with the diversity of students and corresponding viewpoints.	

H5. PUBLICATION OF EDUCATIONAL OFFERINGS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Catalogs & bulletins used to		The program's catalog and bulletins are available online.	Click here to enter text.	
describe educational offerings are		The academic calendar, admissions policies, grading		
publicly available		policies, academic integrity standards, and degree		
Catalogs & bulletins accurately		completion requirements are included on the university's		
describe the academic calendar,		website are up to date.		
admissions policies, grading				
policies, academic integrity		The advertising and promotional recruitment materials		
standards & degree completion		available online accurately reflect current program		
requirements		requirements.		

Advertising, promotional &		
recruitment materials contain	Site visitors reviewed all links provided by the program for	
accurate information	alignment with current requirements.	

AGENDA

Wednesday, November 6, 2024

5:00 pm Site Visit Team Executive Session

Thursday, November 7, 2024

8:20 am **Team Setup on Campus**

8:30 am **Program Evaluation**

Participants	Topics on which participants are prepared to answer team questions
L. Linnaya Graf- PhD, MSPH, MPH & MSPH Program Director, Assoc. Prof.	Decision- and policymaking within program (Criterion A1)
Robyn Anderson- PhD, MS, MPH, B.S in Public Health Program Director, Prof.	Student engagement in program operations (Criterion A3)
. Gineska Castillo- MD, MPH, Online MPH Program Director, Asst. Prof	Guiding statements – process of development and review? (Criterion B1)
. Oswald (Ozzy) Attin- PhD, MSHS, Department Chair, Prof.	Evaluation processes – how does a program collect and use input/data? (Criterion B2)
. Benjamin Forrest- PhD, Online Administrative Chair, Prof.	Data related to grad rates, post-grad outcomes, alumni perceptions (Criteria B3-B5)
. Emmanuel Clottey- PhD, DrPH, MPH, Assessment Coordinator, Prof.	Resources (personnel, physical, IT) — who determines sufficiency? Acts when additional resources are needed? (Criteria C2-C5)
	Budget – who develops and makes decisions? (Criterion C1)
	Diversity and cultural competence — who monitors goals, actions, strategies, who reviews the data and how
	changes are made based on the data? (Criterion G1)
	Recruitment and admissions (Criterion H4)

9:30 am Break

9:45 am Curriculum 1

<u> </u>	Carredon 1	
	Participants	Topics on which participants are prepared to answer team questions
:	L. Benjamin Forrest- PhD, Online Administrative Chair, Prof	Foundational knowledge (Criterion D1)
:	2. Oswald (Ozzy) Attin- PhD, MSHS, Department Chair, Prof	Foundational competencies – didactic coverage and assessment (Criteria D2 & D3)
3	3. Robyn Anderson- PhD, MS, MPH, B.S in Public Health Program Director, Prof. (Undergrad)	Concentration competencies – development, didactic coverage, and assessment (Criterion D4)
4	Linnaya Graf- PhD, MSPH, MPH & MSPH Program Director, Assoc. Prof.	
!	5. Gineska Castillo- MD, MPH, Online MPH Program Director, Asst. Prof.	
(5. Emmanuel Clottey- PhD, DrPH, MPH, Assessment Coordinator, Prof.	
-	7. Jonathan Giles- DHSc, MPH, Policy Community Chair, Assoc. Prof.	

11:00 am Break

11:15 am Curriculum 2

Participants	Topics on which participants are prepared to answer team questions
1. Oswald (Ozzy) Attin- PhD, MSHS, Department Chair, Prof (MS)	Applied practice experiences (Criteria D5 & D6)
2. Linnaya Graf- PhD, MSPH, MPH & MSPH Program Director, Assoc. Prof. (APE/ILE)	Integrative learning experiences (Criteria D7 & D8)
3. Gineska Castillo- MD, Online MPH Program Director, Asst. Prof. (APE/ILE)	Public health bachelor's degrees (Criteria D9-D12)
4. Samantha Leigh- MPH, Director of Practicum (APE/ILE)	Academic public health degrees (Criteria D16 & D17)
5. Benjamin Forrest- PhD, Online Administrative Chair, Prof. (Distance Ed)	Distance education (Criterion D19)
6. Robyn Anderson- PhD, MS, MPH, B.S in Public Health Program Director, Prof. (Undergrad)	
7. Darlene Martin- D.H.Ed, M.Ed, Curriculum Committee Chair, Assoc. Prof. (Undergrad)	
8. Giordana Morales-Spiers- MPH, Asst. Prof. (Undergrad)	

12:15 pm Break & Lunch in Executive Session

1:00 pm Instructional Effectiveness

Participants	Topics on which participants are prepared to answer team questions
 Emmanuel Clottey- PhD, DrPH, MPH, Assessment Coordinator, Prof. Jonathan Giles- DHSc, MPH, Policy Community Chair, Assoc. Prof. Darlene Martin- D.H.Ed, M.Ed, Curriculum Committee Chair, Assoc. Prof. Giordana Morales-Spiers- MPH, Asst. Prof. Catherine Anna Kebles, PhD, RD, CHES, LDN, Associate Professor Jeffery Lennon, PhD, M.D., MSPH, MPH, Prof. Kenneth Christopher, PhD, MPH, MeD, Asst. Prof. (Online) 	Currency in areas of instruction & pedagogical methods (Criteria E1 & E3) Scholarship and integration in instruction (Criteria E4) Extramural service and integration in instruction (Criterion E5) Integration of practice perspectives (Criterion E2) Professional development of community (Criteria F1-F3) Academic and career advising (Criteria H1 & H2) Complaint procedures (Criterion H3)
	Accurate publication of offerings (Criterion H5)

2:00 pm Break

2:15 pm Transport to Hotel

3:00 pm Students via Zoom Meeting

	5.00 pm Statemes via Loom Meeting	
	Participants	Topics on which participants are prepared to answer team questions
1	. Katelyn McCleary, MPH Global Health, LUPHSA President, Graduating Spring 2025,	Student engagement in program operations (Criterion A3)
	Residential	Curriculum (Criterion D)
2	. Ginika Muomah, MSPH Epidemiology, John's Hopkins Fellowship, Graduating Spring	Resources (physical, faculty/staff, IT) (Criteria C2-C5)
	2025, Residential	Involvement in scholarship and service (Criteria E4, E5, F2)
3	. Lauren Coco, 4+1, Graduate Student Assistant, Graduating Summer 2025, Residential	Academic and career advising (Criteria H1 & H2)

4.	Raymond Suonyir, MPH Epidemiology, Graduate Student Assistant, Spring 2026,	Diversity and cultural competence (Criterion G1)
	Residential	Complaint procedures (Criterion H3)
5.	Faith Magwenzi, MPH Community Health Promotion, John's Hopkins fellowship 2023-	
	24, Graduating Spring 2025, Residential	
6.	Grace Sibert, 4+1, Guatemala Mission trips, Graduating Spring 2026, Residential	
7.	Michelle McNabb, MPH Environmental Health, Graduating Spring 2025, Online	
8.	Mary Blanchard, MPH Environmental Health, Graduating Spring 2026, Online	
9.	Kayla Hagerman, MPH Nutrition, Graduating Spring 2025, Online	
10	. Sarah Baker, MPH Community Health Promotion, Graduating Summer 2024, Online	
11	. Isabella Distefano, UG Nutrition, Graduating Spring 2025, Residential	
12	. Katherine Colavito, UG Community Health Promotion, Graduating Spring 2025,	
	Residential	
1.3	. Lia Woliver, UG Pre-clinical, Graduatina Sprina 2025, Residential	

4:00 pm Break

4:15 pm External Partner/Alumni Feedback & Input via Zoom Meeting

	Participants	Topics on which participants are prepared to answer team questions
1	Cali Nelson, MPH, Alumni, Preceptor, Senior Epidemiologist at Virginia Dept of Health,	Involvement in program evaluation & assessment (Criterion F1)
2	Andrea Mackenzie, MPH, RN, Alumni, Delta Omega, Research Fellow John Hopkins	Perceptions of current students & school graduates (Criteria D5, D6, F1)
3	Jack Jones, EFO, MA President of Community Advisory Board, Occupational Health and	Alumni perceptions of curricular effectiveness (Criterion B5)
	Safety Specialist at Virginia Department of Health	Applied practice experiences (Criteria D5 & D6)
4	Kristen Williams, MPH, Alumni, Health and Disabilities Manager Humankind,	Integration of practice perspectives (Criterion E2)
5	Sara Briley, MPH, Alumni, Preceptor, Director of Grants Administration & Community	Program delivery of professional development opportunities (Criterion F3)
	Health, Blue Ridge Medical Center	
6	David Abafi, DVM, MVPH, MPH, Alumni, Informatics Epidemiologist Maine Center for	
	Disease Control and Prevention	
7	Annie Todt, PhD, MPH CEO Give Hope & Figh Poverty, Preceptor and Community Advisory	
	Board Member	
8	Veronica Cosby, MAHS, MS, Preceptor, Virginia Dept of Health, VAP3, Program Manager.	
	Community Advisory Board Member	
9	Maj. Richard Hunter, US Army CDID Medical. Community Advisory Board Member	
1	D. Ryan Boyce, Texas Association of School Boards, Risk Solutions Consultant II, Alumni,	
	Community Advisory Board Member	

5:15 pm Site Visit Team Executive Session

6:00 pm **Adjourn**

Friday, November 8, 2024

8:30 am University Leaders via Zoom Meeting

Participants	Topics on which participants are prepared to answer team questions
1. Heidi DiFrancesca, School of Health Sciences	Program's position within larger institution (Criterion A1)
2. Chris Kennedy, Vice Provost	Provision of program-level resources (Criterion C)
	Institutional priorities

9:00 am	Break
9:30 am	Site Visit Team Hotel Pickup
10:00 am	Site Visit Team Executive Session
12:00 pm	Exit Briefing