REVIEW FOR ACCREDITATION

OF THE

PUBLIC HEALTH PROGRAM

AT

CALIFORNIA STATE UNIVERSITY, FULLERTON

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:
April 29 - 30, 2013

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Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the Public Health Program at California State University, Fullerton (CSUF). The report assesses the program’s compliance with the Accreditation Criteria for Public Health Programs, amended June 2011. This accreditation review included the conduct of a self-study process by program constituents, the preparation of a document describing the program and its features in relation to the criteria for accreditation, and a visit in April 2013 by a team of external peer reviewers. During the visit, the team had an opportunity to interview program and university officials, administrators, teaching faculty, students, alumni and community representatives and to verify information in the self-study document by reviewing materials provided in a resource file. The team was afforded full cooperation in its efforts to assess the program and verify the self-study document.

CSUF was founded in 1957 as the 12th state college in California. It was originally named Orange County State College and the first class of 452 full and part-time students began studies in September 1959 in leased space at Fullerton’s Sunny Hills High School. In the fall of 1960, the college opened classes on its own campus, which consisted of 12 temporary buildings. As of fall 2012 there were 37,677 students enrolled at the university which includes international students from 79 nations.

Today the university offers undergraduate, master’s and doctorate degrees. The university is made up of eight colleges: (1) arts; (2) communication; (3) education; (4) humanities and social sciences; (5) natural sciences and mathematics; (6) health and human development; (7) business and economics; and (8) engineering and computer science.

The MPH program was approved by the California State University Chancellor’s office in 2003. The first cohort of MPH students entered in fall 2004.

The MPH program is housed in the Department of Health Science, within the College of Health and Human Development (CHHD). This college also contains the following departments: (1) child and adolescent studies; (2) counseling; (3) human services; (4) kinesiology; and (5) social work. The college also is home to the military science program and the nursing school. The program offers professional MPH degrees in three concentrations: (1) health promotion and disease prevention; (2) environmental and occupational health and safety; and (3) gerontological health.

This is the program’s second review for accreditation. The MPH program received its first CEPH accreditation in spring 2008 for a term of five years, with interim reporting required in spring 2010.
Characteristics of a Public Health Program

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

a. The program shall be a part of an institution of higher education that is accredited by a regional accrediting body recognized by the US Department of Education or its equivalent in other countries.

b. The program and its faculty and students shall have the same rights, privileges and status as other professional preparation programs that are components of its parent institution.

c. The program shall function as a collaboration of disciplines, addressing the health of populations and the community through instruction, research and service. Using an ecological perspective, the public health program should provide a special learning environment that supports interdisciplinary communication, promotes a broad intellectual framework for problem solving and fosters the development of professional public health values.

d. The public health program shall maintain an organizational culture that embraces the vision, goals and values common to public health. The program shall maintain this organizational culture through leadership, institutional rewards and dedication of resources in order to infuse public health values and goals into all aspects of the program's activities.

e. The program shall have faculty and other human, physical, financial and learning resources to provide both breadth and depth of educational opportunity in the areas of knowledge basic to public health. At a minimum, the program shall offer the Master of Public Health (MPH) degree, or an equivalent professional degree.

f. The program shall plan, develop and evaluate its instructional, research and service activities in ways that assure sensitivity to the perceptions and needs of its students and that combines educational excellence with applicability to the world of public health practice.

These characteristics are evident in the CSUF MPH program. CSUF has been continuously accredited by the Western Association of Schools and Colleges (WASC) since 1961. The program is structured with an ecological perspective. The strong link between graduate level education and public health practice, community-based research efforts, interdisciplinary faculty and cross-disciplinary interaction with other colleges, research centers/institutes and training center are evidence of the program’s aims to promote collaboration and foster professional public health values. The program’s funding consists of a general fund allocation that is supported by student tuition and fees, and a state appropriation. Other sources of income include external grants and contracts, intramural grants, gifts and “open-university” fees which are collected from non-matriculated students. The program continues to develop and implement new evaluation methods to ensure the professional preparation of its graduates. The program faculty and leadership share a passionate commitment to the students and community, which as evidenced by the collaborative efforts and mentoring that occur both inside and outside of the classroom.
1.0 THE PUBLIC HEALTH PROGRAM.

1.1 Mission.

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

This criterion is met. The CSUF MPH program has a mission statement that includes the three aspects of public health: education, research and service. The mission statement of the MPH program is:

To develop knowledgeable, skillful health professionals who are proficient in disseminating and applying knowledge to prevent disease and promote health in the human population. Students of various academic and career backgrounds are brought together to receive advanced education in disease prevention and health promotion topics, with specialized emphasis on research and practice that improves the lives of diverse groups, organizations and communities.

The program has 17 goals for instruction, research, service and the institution. Each goal statement is supported by two to eight measurable objectives. The program aims to achieve excellence in education, research and service in an institutional environment that promotes and reinforces creativity, collaboration and interdisciplinary research. The CSUF MPH program developed its mission, goals and objectives collaboratively with faculty, the MPH Campus Advisory Committee and MPH Community Advisory Board. The review process for the mission, goals and objectives is conducted by the MPH Program Committee. Strategies to monitor and revise the mission, goals and objectives consist of fall and spring faculty retreats (which include MPH student representatives), biannual meetings of the MPH Campus Advisory Committee, biannual meetings of the Community Advisory Board, the MPH current student survey, MPH graduate exit survey and MPH alumni survey. An MPH alumni focus group was held in spring 2012 to provide the MPH Program Committee with input, feedback and suggested changes to the program’s mission, values, goals, objectives, curriculum, advising, internships and culminating experiences. The mission, goals and objectives are found on the Health Science Department website and in the MPH Student Handbook.

The program lists five values that were determined by the Department of Health Science faculty during a department retreat in 2006. These values were vetted with the MPH faculty and Community Advisory Board. The values were also embedded in the introductory public health course (HESC 500) as part of the learning process and expectations. The values are specific and numerous declarative sentences provide detail and further explanation of each value. The values are:

1. An engaged learning environment
2. High degree of professionalism and integrity
3. Compassion and community responsibility
4. Discovery
5. Respect for diversity
1.2 Evaluation and Planning.

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

This criterion is met. The program has a clear and focused evaluation approach involving a range of CSUF stakeholders including faculty, the MPH Advisory Committee, support staff, current and former students and community members, including both the Community Advisory Board and the internship supervisors. These groups provide both formal and informal evaluation information to the program. Evaluation results prior to 2011 were reviewed by the MPH graduate coordinator and shared in the department annual report. Beginning in 2011, the MPH Assessment Committee and MPH Graduate Committee reviewed the evaluation results. The committees and other stakeholders noted that they are looking forward to conducting a lengthy and thorough revision to the objectives and updating targets and metrics after the accreditation site visit. The self-study includes a list of MPH program changes (course changes and infrastructure changes or improvements) over the past five years that were made in part as a result of the evaluation data. The self-study notes a number of instances where specific feedback led to changes such as elimination of the nursing leadership concentration, increased workforce development strategies and development of standing committees to improve governance and regular feedback and to facilitate continued program improvements. The committee structure provides one of the key vehicles for monitoring and analyzing the evaluation information.

In part, due to the evaluation approach the program will be able to develop a formal MPH annual summary report rather than simply contributing to the department’s annual summary report. A detailed table in the self-study describes the goals, measurable indicators for the goals, sources, targets and results for the last three academic years. The report details focused and extensive tracking for 17 goals and 76 objectives. This detailed approach includes measurable objectives and targets and allows the program to clearly delineate met and unmet objectives for the self-study. It also helps to facilitate the ability to systematically think about revisions to objectives, targets and tracking to better reflect the program needs going into the future.

The program provides strong detail on the unmet objectives and thoughtful discussion of how the objectives can be addressed by strengthening the evaluation process, refining objectives to better reflect program goals or improving the program to meet the objective targets. The program clearly lists weaknesses and improvements to be made as they revise and strengthen objectives.
The report metrics describe the survey response rates for current students and alumni, providing a measure of involvement in the evaluation process in terms of the surveys. There is a good description of the breadth of stakeholders who receive the evaluation information in the context of meetings.

### 1.3 Institutional Environment

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

This criterion is met. CSUF is accredited by the Western Association of Schools and Colleges (WASC). The university has been accredited since 1961. CSUF was founded in 1957 as the 12th state college in California. It was originally named Orange County State College. The first class of 452 full and part-time students began studies in September 1959 in leased space at Fullerton’s Sunny Hills High School. In the fall of 1960, the college opened classes on its own campus, which consisted of 12 temporary buildings. The college’s name has changed several times over the years from Orange State College in July 1962, to California State College at Fullerton in July 1964, to California State College, Fullerton in July 1968 and finally to CSUF in June 1972. As of fall 2012 there were 37,677 students enrolled at the university, including international students from 79 nations.

Today the university offers undergraduate, master’s and doctorate degrees. The university is made up of eight colleges: (1) arts; (2) communication; (3) education; (4) humanities and social sciences; (5) natural sciences and mathematics; (6) health and human development; (7) business and economics; and (8) engineering and computer science.

The president is the university’s chief executive officer and has responsibility for the operation of the university in conformity with the policies determined by the Board of Trustees. The MPH program is housed in the Department of Health Science, within the College of Health and Human Development (CHHD). This college also contains the following departments: (1) child and adolescent studies; (2) counseling; (3) human services; (4) kinesiology; and (5) social work. The college also is home to the military science program and the nursing school. The program is headed by the MPH program coordinator. The MPH program coordinator reports to the chair of the Department of Health Science (DHS), who reports to the dean and associate dean of the CHHD. The dean of the CHHD reports to the provost and vice president for academic affairs.

CSUF receives funding from the state of California general fund allocations that originate from the Chancellor's Office and include each of the 22 other universities in the California State University (CSU) system. CSU funding is tied to enrollments (full-time equivalent students); with annual budget allocations based on the previous year's baseline budget plus new enrollment targets. The CSU Chancellor's Office is the repository for budget requests from all campuses and negotiates with the governor and state legislature to receive approval for this target amount and for the system-wide budget allocation.
The CSUF president, with input from the President's Advisory Board and the Academic Senate's Planning, Resource and Budget Committee, determines final budgetary allocations to major campus units including academic affairs. The vice president for academic affairs works with all the deans to allocate funds to the colleges based primarily on the full-time equivalent student target and assigned student/faculty ratios. All deans are responsible for establishing and managing college budgets, with department allocations based primarily on full-time equivalent student targets and assigned student/faculty ratios.

All recruitment at CSUF is conducted at the department level and is subject to university regulations and guidelines. Faculty may be hired as part-time lecturers, full-time lecturers or tenure-track faculty, and the department follows all university policies and procedures for recruitment and selection of faculty. All faculty and staff recruitment follows existing federal, state and university policies regarding non-discrimination and equal opportunity.

The Academic Senate of CSUF reviews and monitors all university policies to ensure they are fair, equitable and in agreement with the mission, goals and expected outcomes of the university. All MPH program policies meet the university policy standards. The college and university curriculum committees monitor, review and revise all policies regarding instruction.

1.4 Organization and Administration.

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

This criterion is met. The MPH coordinator is responsible for the daily operation of the MPH program, including providing leadership for the program and overseeing student advisement, schedules and its evaluation components. The DHS chair is ultimately responsible for the program’s curriculum, budgeting, planning and personnel management. Interdisciplinary collaboration is assured through the 25 member Campus Advisory Committee containing faculty members from eight different departments. These committee members assist with the program’s curriculum development, act as guest speakers in classes, teach elective program courses and serve as advisors and mentors for student research projects.

Housed within the department, but not directly affiliated with the MPH program are six research and training centers or institutes that include the following: (1) Health Promotion Research Institute (2) Center for Successful Aging (3) Center for Research in Cancer Disparities (4) Fibromyalgia and Chronic Pain Center (5) Center for the Promotion of Healthy Lifestyles and Obesity Prevention; and (6) California-Nevada Public Health Training Center. These entities help to foster a culture of interdisciplinary
coordination, cooperation and collaboration between and among primary program faculty and other faculty members in the CHHD and 18 other departments on campus. Site visitors noted the high degree of collaboration and interdisciplinary work of the MPH faculty, as well as the enthusiasm for such collaboration among all faculty members and current students.

1.5 Governance.

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

This criterion is met. The program has a well-defined governance structure that supports faculty, staff and student involvement in decision making. The MPH program has six standing and two ad-hoc committees that give program stakeholders formal opportunities to contribute to program policy development. The program coordinator and department chair guide policy development and assure ultimate compliance with all academic standards and policies. The MPH Accreditation Committee, co-chaired by the program coordinator and the department chair, is currently a standing committee, formed two years ago, which is responsible for the academic and programmatic oversight of the MPH program and its other committees. Other members include the graduate admissions coordinator and administrative analyst, one faculty member and a student representative. This committee’s broad and overarching responsibilities include: reviewing long-range plans for student enrollment, faculty recruitment, and financial planning; evaluating all general academic and program policies; submitting an annual report on the program’s measureable objectives and targeted outcomes; writing and submitting annual accreditation reports to CEPH; and preparing the CEPH self-study. In order to complete these tasks the committee requests recommendations for policy and curriculum revisions from faculty and other constituents annually; and meets at least annually with the MPH Program Committee to review recommendations for changes in curriculum, competencies and mission, goals and objectives. The committee meets approximately once a month. During the site visit program administrators told the site visit team that this committee, formed principally to manage the self-study and other accreditation issues, would likely be disbanded during the coming year and its functions folded into those of the MPH Program Committee.

The five other standing committees are:

MPH Program Committee: Also just two years old, this committee meets monthly and is made up of seven faculty/staff persons and five student representatives. It is charged with recommending all educational policy and curriculum changes, systematically reviewing all elements of the MPH program, maintaining accreditation standards, reviewing collaborative opportunities with others, recommending workshops and seminars, reviewing MPH websites annually and keeping the MPH student handbook current and appropriately distributed.
**MPH Assessment Committee:** This committee meets one to two times annually and is made up of three faculty members. It is charged with reviewing and revising MPH surveys; preparing an annual summary report from the on-line faculty satisfaction, current student, student exit, alumni and Community Advisory Board MPH surveys. Using these results, the committee revises surveys as needed and makes recommendations for change to the department chair, MPH Program Committee, MPH Accreditation Committee and faculty members.

**MPH Colloquia/Workshop Committee:** This committee is made up of five faculty and three student representatives. It meets approximately once per semester to plan the MPH “Meet and Greet” event, plan one MPH colloquium per semester, plan at least one workshop each semester and then work with staff to implement these events.

**MPH Campus Advisory Committee:** This interdisciplinary 25 member group contains full-time faculty members from nine different academic departments, the majority of whom teach in the MPH program, and one MPH student representative. The committee meets approximately one to two times annually to submit ideas for course and other curriculum changes; recommend candidates for faculty positions; develop ideas for research projects; promote community partnerships and assist with colloquia, symposia and workshops.

**MPH Community Advisory Board:** This committee is charged with meeting annually to review the overall program in terms of community needs and future directions in public health, this group is made up of 15 community practitioners and one MPH student representative. Members also help plan workshops, make recommendations about continuing education and provide internships and career advice for MPH students.

The two ad-hoc committees are as follow:

**MPH Admissions Committee:** This three member committee meets about two times a semester to develop strategies for MPH student recruitment, develop and update MPH admission criteria and procedures, and make admission recommendations to the department chair. There are no student representatives.

**MPH Comprehensive Exam Committee:** This five member committee meets approximately twice annually to plan for implementation of the comprehensive exam by developing new exam questions, proctoring and scoring the examination. There are no student representatives.
Faculty input is valued and they have sufficient prerogatives to assure the integrity of the MPH program as it seeks to accomplish its stated mission, goals and objectives. Their broad representation in the governance structure of the institution in general and the MPH program in particular allows for formal opportunities to influence decisions affecting admissions, resource allocation, faculty recruitment and promotion, curriculum design and evaluation, research and service activities and degree requirements.

Students also have many opportunities to participate in MPH program and institutional governance, although gaining student participation can be difficult since most students are mature, working health professionals with little extra time beyond that required to complete curricular assignments. In addition to serving on five of the program’s committees, students are represented on the University’s Institutional Review Board, Graduate Education Committee, Committees of the Academic Senate and Associate Students, Inc. Students also contribute through membership in the student honorary society (Eta Sigma Gamma); although students interviewed by the site visit team note that this organization is made up mostly of undergraduate public health students. Additionally, students complete the current student, exit and alumni surveys, meet faculty search candidates; join social network communities and evaluate the quality of faculty teaching at the end of every course. Students and alumni with whom the site visit team met were very pleased to report that their input to faculty about program issues was listened to and acted on.

1.6 Fiscal Resources.

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

This criterion is met. The MPH program is funded principally through a general fund allocation that is supported by student tuition and fees, and a state appropriation. Other sources of income include external grants and contracts, intramural grants, gifts and “open-university” fees, which are collected from non-matriculated students. General fund allocations that come to the department and program are based upon past and projected student enrollment. Full time equivalent (FTE) student numbers are used to define the number of faculty positions that should be supported at the level of a student to faculty ratio of 20. This approach has allowed the program to increase faculty as student enrollment has increased over the years such that faculty positions have doubled (from seven to 14) since 2007. After existing full-time faculty positions are subtracted from the faculty full-time equivalent allocation, the remaining funds can be used to fund part-time faculty, graduate assistants and assigned time for major departmental service. The MPH program accounts for approximately 20% of the department’s total resources. Fifteen percent of indirect costs from grants recovered by the university are returned to the colleges, which, in turn, distribute a portion back to departments. The program’s funds and expenditures are shown in Table 1. During academic years 2009-2010 and 2010-2011 when income was less than expenditures, the college made up the shortfall. The budget for travel is modest, but the site visit team was assured the amount
was sufficient because many faculty with research grants use them for travel support, and there are other funds available at the university that can be tapped for travel to conferences.

| Table 1. Sources of Funds and Expenditures by Major Category, Fiscal Years 07-08 to 11-12 |
|----------------------------------------|--------|--------|--------|--------|--------|
| Source of Funds                        | FY07-08| FY08-09| FY09-10| FY10-11| FY11-12|
| General Fund Allocation*              | $324,807| $336,955| $317,342| $370,188| $374,969|
| External Grants/Contracts**           | 102,761| 117,232| 78,735  | 69,994  | 81,496  |
| Intramural Grants**                   | 10,000 | 10,747 | 15,994  | 20,999  | 60,328  |
| Indirect Cost Recovery                | 22,401 | 28,968 | 17,176  | 18,939  | 34,233  |
| Gifts                                 | 25     | 54,029 | 1,798   | 7,405   | 11,594  |
| Open University Fees to MPH Program   | 9,032  | 7,613  | 5,198   | 8,311   | 7,301   |
| **Total**                             | $469,026| $555,544| $436,243| $495,836| $569,921|

<table>
<thead>
<tr>
<th>Expenditures</th>
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<td>Faculty Salaries &amp; Benefits</td>
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<td>24,961</td>
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<td>Operating Expenses*</td>
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<td>3,238</td>
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<td>Other: Consultants, stipends, proposal development, advisory board expenses, etc.*</td>
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<td>13,619</td>
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<td><strong>Total</strong></td>
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<td>$484,617</td>
<td>$466,178</td>
<td>$505,796</td>
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</table>

* MPH program allocation is calculated at 25% of overall funds to or expenditures by the Department.

**Pertains to Health Science primary faculty only. It is estimated that 4% of yearly grants & contracts funds are used for faculty salaries from the following total external grants/contracts for each of the following years:

- FY07-08: $2,283,577
- FY08-09: $2,930,802
- FY09-10: $1,968,370
- FY10-11: $1,749,861
- FY11-12: $2,037,405

***Does not include student support on research grants and contracts, which is managed separately by the CSUF Auxiliary Services Corporation.

Most of the funds listed under “External Grants/Contracts” are not under the control of the Program, but rather are used to pay for direct costs (e.g., subcontracts, supplies, travel) and indirect costs (approximately 35% for post-award support, facilities, etc.) related to implementation of the funded studies. Only approximately 4% of grant incomes are used for the program; namely, to pay for faculty salaries. For instance, in FY07-08 only approximately $106,000 of the $2,283,577 were used to support salaries of MPH faculty.

In the years where MPH program total income was greater than the expenditures (FY07-08, FY08-09, and FY11-12), monies were spent on costs not necessarily related to the MPH program exclusively (such as discretionary costs related to other faculty travel or special projects). In the years where MPH program income was less than expenditures (FY09-10, and FY10-11), the college helped to fund extra costs.

Each university in the CSU system receives annual state general fund allocations from the Chancellor’s Office that are based on the previous year’s budget plus new enrollment targets. Once CSUF receives its budget allocation the president determines final allocations to university units. Deans then allocate funds to colleges and maintain overall responsibility for establishing and managing college budgets. The college deans and department chairs consult regularly regarding budgetary and other college matters with input from the MPH program coordinator.
Outcome measures used by the program to judge adequacy of fiscal resources have indicated performance above targets, with the exception of having fewer than 30 students in graduate courses last year due to higher than expected admissions and a one-time blending of public health certificate and MPH students in the core classes. Financial support is sufficient to achieve the program's mission, goals and objectives.

1.7 Faculty and Other Resources.

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

This criterion is met. The program has 13 primary faculty who are members of the department and three additional faculty from other departments who contribute 50% of their time to the MPH program. A fourteenth departmental faculty member has just been hired and will start work in fall 2013. In addition, the program counts eight other faculty who participate in program activities as well as three full-time and one part-time lecturer. A total of 94 students are enrolled across the three MPH specialty areas, over 60% of them in Health Promotion/Disease Prevention (HPDP). Student/faculty ratios for primary faculty FTE in AY 2011-2012 were 8.8 in HPDP, 4.5 in Environmental and Occupation Health Safety (EOHS) and 3.4 in Gerontological Health (GERO). Student/faculty ratios for total faculty FTE (primary faculty plus other faculty) were 7.6 in HPDP, 4.0 in EOHS and 2.6 in GERO. Student/faculty ratios are very healthy, although the diminishing number of students enrolling in GERO is of some concern. The department chair reported to the team that the new faculty member just hired is going to work in gerontology and is charged with creating two new courses in the track in an effort to attract more students. The university continues to hire faculty as the number of students enrolled in the department increase – a trend distinct from many other locations where the economic slowdown has impacted faculty numbers.

The department has six administrative staff that support MPH primary faculty activities related to instruction, service and research. These include one administrative analyst who serves as the MPH admissions coordinator, two administrative support coordinators, one administrative assistant, one equipment systems specialist and one instructional support technician.

The program is housed in the 72,000 square foot Kinesiology and Health Sciences building, an older and somewhat time-worn, but functional structure. This facility contains 42 faculty offices, a large lecture hall and 13 additional classrooms equipped with “smart classroom” technologies, six of which are “owned” by the department. The building also contains a wellness center, a media lab and other research/teaching labs detailed below. All faculty members have their own offices, computers and printers. Facilities specifically for students include a suite of research offices for student research assistants and an MPH student lounge containing three computers, one printer, and a long conference table for students to use to
study and work on group projects. There are also four instructional labs that contain computers, printers and software.

Laboratory spaces maintained by the MPH program for the conduct of faculty and student research include the following:

- Public Health Research Suite with six smaller offices that houses the Fibromyalgia and Chronic Pain Center, the Center for Healthy Lifestyles and Obesity, the Center for Cancer Disparities Research, and the California-Nevada Public Health Training Center.
- Health Promotion Research Institute Suite with nine smaller offices and one large common area that houses the Health Promotion Research Institute and research project staff.

Laboratory space shared with the Department of Kinesiology includes the following:

- Exercise Physiology Lab
- Fitness Assessment Laboratory
- Blood Laboratory
- Media Room
- The Center for Successful Aging

Faculty and staff computers are all connected to the university’s network and portals, and faculty members have access to a fax machine, a networked laser printer and two networked copy machines. There is an instructional support service and a technology support center that provides access to scanning, multimedia production services, video recorders, a color printer, etc. Students get hands-on experience with data analysis software in a lab with 37 computers and two printers. A newly renovated student lounge and study area has three computer workstations with printers, and a university computer lab with 213 personal computers is also available to MPH students.

The university’s Pollack Library is located in the center of the campus and contains over 1.2 million volumes of print items, 60,000 eBooks and over 50,000 journals accessible through subscriptions and database aggregators. The program estimates that somewhere between 30,000 and 40,000 of the books on hand are related to the health sciences. The library has full text access (mostly electronic) to more than 7,700 health science journals. Students have both remote and on-campus access to approximately 200 databases which provide access to bibliographic information from large numbers of journals. Library services include a reference team that responds to about 12,000 questions per semester, research consultants who assist both students and faculty and who are willing to develop course specific research guides for instructional purposes and library use instructional sessions. Materials not available locally can be acquired through interlibrary loan/reciprocal borrowing without the payment of fees. Over 500 personal computers equipped with the Microsoft Office Suite available for student use are housed in the library, and 235 of these computers have access to more specialized software such as SPSS. Multimedia presentations can be created by students using the library’s three “high tech” rooms, and two podcasting studios are also available along with technical support staff.
Additional resources available to MPH faculty, staff and students include:

- A dedicated information technology staff member to maintain and upgrade computer equipment.
- A college information technology team that offers web hosting facilities and website design support.
- The Faculty Development Center, which offers support for faculty research, teaching and service. Major areas of activity include the use of technology in instruction, training on quantitative and qualitative methods, writing and publication and the provision of intramural faculty-student travel grants.
- The Center for Internships and Community Engagement, which maintains formal agreements between the university and hundreds of community sites for internships and other student collaborations.

The MPH program tracks 17 outcome measures for resources and it has consistently met all the past three academic years.

It was clear to site visitors that the university’s senior administration values and supports the program. The new provost and vice president for academic affairs and dean of the CHHD, formerly chair of the department, were enthusiastic in their support for the MPH program. They pointed out the importance of the leadership role the program has assumed across the campus through the Health Promotion Research Institute, which fosters interdisciplinary collaboration and mentorship, through the program’s emphasis of social justice (which supports the university’s strategic plan), through the acquisition of external grants and contracts (35% of the university total) and through community engagement. The dean described the department as the “community engagement engine” of the university. Both leaders agreed that the success of the program is at the core of the university’s future and it would continue to receive their full support. In the future they expect to see efforts to collaborate further with the MPH program at the University of California at Irvine to address health problems in Orange County and perhaps develop a joint doctoral degree.

The program has adequate personnel and other resources to fulfill its stated mission and goals, along with associated instructional, research and service objectives. Facilities, equipment and services to support educational activities of the program are in place, functional and appropriately financed.

1.8 Diversity.

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

This criterion is met with commentary. The program has built its definitions and systems to support diversity around the CSUF-wide commitment to diversity and cultural competence. The CSUF mission and goals define diversity in terms of the university’s commitment to “provide experiences in and out of the classroom that attend to issues of culture, ethnicity and gender and promote global perspective; and capitalize on the uniqueness of the region”. CSUF further defines diversity as providing the opportunity
for all students to succeed by ensuring students of varying “age, ethnicity, culture, academic experience and economic circumstances” are well served.

Policies at CSUF promote diversity of thought and discourage language and other forms of expression that insults persons on the “basis of race, ethnicity, national origin, ancestry, citizenship, religion, creed, gender, sexual orientation, marital status, age, disability or veteran’s status.” The program includes respect for diversity as one of its statement of values guiding the program. Interviews with faculty, students, program and university leadership all mentioned a value in addressing diversity and even social justice issues.

The program’s data on the gender and ethnic/cultural diversity of students, faculty and staff demonstrates a range of ethnic backgrounds among students, faculty and staff. Outcome measures focus on ethnic, cultural and gender diversity both in student recruitment and acceptance into the program. In the past three years, the program has met its goal of accepting at least 50% of students into each cohort that are minority students and at least 50% of students accepted into each cohort are female. The program notes that the new faculty hires since the program’s inception have increased ethnic/racial diversity and indicates an interest in increasing the program’s reputation for attracting students from other countries. Program faculty described efforts to recruit more diverse staff by reaching out to special interest groups in APHA that address a wide range of diversity, including racial and ethnic diversity.

Community partners, students, faculty and alumni all mentioned the value of diversity and the specific projects and coursework that address health disparities and health equality. Several members of the Community Advisory Board work in organizations with a mission related specifically to reaching diverse, high risk and vulnerable populations. The program notes that a core competency of diversity/culture is addressed by two core MPH courses as well as a number of elective courses in the health promotion/disease prevention and the gerontological health tracks.

The commentary relates to the fact that the program needs to assess its processes and structures to intentionally identify diversity needs and to implement plans to purposefully address those needs. The program would be well served to explicitly address the criterion to fully describe the under-represented populations, including a rational for why those populations are identified as under-represented for the program; to develop a list of goals or a plan for achieving diversity and increasing representation; and to define practices for how the plan is used, how diversity will be monitored and how often the plan is reviewed. No mention is made in the self-study about African Americans, and the CSUF definition used by the program would indicate a need to monitor a wider range of diversity issues such as disability, economic circumstance, gender preference and age. The program’s commitment to diversity is strong and impressive.
2.0 INSTRUCTIONAL PROGRAMS.

2.1 Degree Offerings.

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

This criterion is met. The program offers professional MPH degrees in three concentrations. Table 2 presents the program’s degree offerings. The program of study for the MPH requires the completion of 42 credit hours of coursework. The curricular requirements include 15 credit hours of core public health courses, six credit hours of required courses (HESC 500: Issues in Public Health and HESC 510: Research Methods in Health Science), 12 to 15 credit hours of electives, six credit hours of practicum experience and three credits of culminating experience. The number of credit hour electives is based on the format of the culminating experience, which is further discussed in Criterion 2.5 of this report. A review of the curricular requirements shows a sufficient depth and level of required coursework for the MPH concentrations. Although this criterion is met, the MPH program must update the MPH Student Handbook, which contains references to outdated MPH track information.

<table>
<thead>
<tr>
<th>Table 2. Degree Offered</th>
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<tbody>
<tr>
<td></td>
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<tr>
<td><strong>Master’s Degrees</strong></td>
</tr>
<tr>
<td>Health Promotion and Disease Prevention</td>
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<tr>
<td>Environmental and Occupational Health and Safety</td>
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<tr>
<td>Gerontological Health</td>
</tr>
</tbody>
</table>

2.2 Program Length.

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

This criterion is met. The program of study for all three MPH concentrations requires the completion of 42 credit hours. The program follows a semester academic year with courses offered in fall, spring and summer. One credit is equivalent to 15 contact course hours. Most MPH courses are three units and carry 45 contact course hours.

Over the last three years, no MPH degrees were awarded for fewer than 42 credit hours of coursework.
2.3 Public Health Core Knowledge.

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

This criterion is met. All MPH students are required to complete five core courses. The core courses address the five core disciplines in public health and total 15 credit hours. All core courses must be successfully completed with a B average or higher. The five core discipline courses are listed in Table 3.

<table>
<thead>
<tr>
<th>Core Knowledge Area</th>
<th>Course Number &amp; Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biostatistics</td>
<td>HESC 508: Statistical Methods in Kinesiology and Health Science</td>
<td>3</td>
</tr>
<tr>
<td>Epidemiology</td>
<td>HESC 501: Principles of Epidemiology</td>
<td>3</td>
</tr>
<tr>
<td>Environmental Health Sciences</td>
<td>HESC 515: Advanced Environmental Health</td>
<td>3</td>
</tr>
<tr>
<td>Social &amp; Behavioral Sciences</td>
<td>HESC 540: Advanced Study in Health Promotion and Disease Prevention</td>
<td>3</td>
</tr>
<tr>
<td>Health Services Administration</td>
<td>HESC 524: Public Health Administration</td>
<td>3</td>
</tr>
</tbody>
</table>

The site visit team reviewed syllabi, and core courses are appropriate for master’s level study.

2.4 Practical Skills.

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

This criterion is met with commentary. The MPH program requires a field experience that places students in a practice-based situation. Sites for field experiences include community-based public health organizations, clinical or school-based settings, federal/state/local public health agencies and research institutions. Practice experience sites are located domestically and internationally and some include financial compensation. Most students in consultation with the MPH internship coordinator identify field experience sites. The primary source of field experience opportunities is a searchable database of internships called Titan Connection, which is accessible at the CSUF Career Center. The MPH program also maintains a database on the MPH program Titanium (MOODLE) Community site that lists current internship opportunities and past student internship sites. Field placement sites may also be contacted by CSUF faculty, or sites may contact the department directly.

MPH students must complete a formal placement process before beginning their practicum experience. Students must first register with the Center for Internships and Community Engagement (CICE) via the online website. CICE conducts an online risk assessment, after which a formal learning agreement is developed and executed between CSUF and the site. Students are required to complete several forms of documentation before beginning their fieldwork. Students complete an internship contract which contains contact and logistical information for the internship and is signed by the student, preceptor and MPH
internship coordinator. Students work with their preceptors to develop a general job description. Students also work with their preceptors to develop lists of learning objectives and activities. The learning objectives and activities must be pre-approved by the MPH internship coordinator. The student, preceptor and MPH internship coordinator all sign-off on the learning objectives and activities before the start of the practicum.

Working students may complete their practicum in their primary place of employment as long as it is above and beyond their normal work duties and does not include reporting to their regular supervisor. This type of practicum must be approved by the MPH internship coordinator.

The practicum experience consists of a total of 240 hours for six credits. Students have the option to complete their fieldwork at two different sites, which requires the completion of 120 hours at each location. The program does not grant waivers for the field experience.

Practicum preceptors must possess the following: (1) master's degree in public health or a related field (MD, MS, MSW); (2) availability and accessibility to the student throughout the internship timeframe; (3) willingness to provide support to the student; (4) ability to serve as a role model; and (5) ability to answer student questions.

Students interact regularly with their preceptors and the MPH internship coordinator during their field experience. In addition to completing their learning objectives and activities at their practicum site students are also required to complete three assignments: (1) a strengths-weaknesses-opportunities-threats (SWOT) analysis of their role in the site; (2) an updated resume; and (3) a networking exercise that asks students to identify whom they will maintain contact with from the many professionals they have met during their internship experience, and how they plan to maintain the contact.

The MPH internship coordinator and preceptor work closely to evaluate student performance. This evaluation process includes: (1) portfolio of activities completed during the field experience, linked to the student's learning objects; (2) preceptor evaluation form; and (3) student evaluation of internship. The MPH internship coordinator, in consultation with the preceptor, assigns the final grade for the practicum experience.

The commentary relates to the completion of core and elective courses before a student enrolls in the practicum experience. Currently, students are only required to complete the core public health courses before commencing their fieldwork. This class sequencing may prevent students from applying competencies, skills and knowledge in their fieldwork since practicum experiences occur at various points in academic study instead of when students have completed core and elective courses.
Preceptors spoke enthusiastically about student field experiences and the knowledge that students bring to their experiences. Preceptors shared with the site visit team that Fullerton MPH students are well rounded, well informed, honest and mature. Site preceptors felt that Fullerton MPH students have tremendous integrity and are great representatives of the university and the MPH program. Preceptors also praised MPH students for their critical thinking skills, autonomous capabilities and strong initiative to “hit the ground running” when placed within a field placement site. Site visitors learned from alumni and students that their practice experiences reinforced their knowledge of public health and expanded their knowledge and abilities to work in the field of public health.

2.5 Culminating Experience.

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

This criterion is met with commentary. All MPH students are required to complete a culminating experience which consists of one of the following: (1) thesis; (2) project; or (3) comprehensive exam. As part of the culminating experience and research policies and protocol of the DHS, students are required to prepare and submit a proposal to the Institutional Review Board (IRB) for review and approval. During the preparation of this proposal, students learn the definition of research, the definition of a human subject and the three types of IRB review.

Students who elect to complete the thesis option enroll in HESC 598 for a total of three credits. Students are required to plan, develop and complete a five-chapter thesis that includes an introduction, literature review, methods, results and discussion section. The thesis presents and tests a novel research idea utilizing either primary or secondary data. Students must form a thesis committee consisting of a thesis chairperson and two thesis committee members. The committee must include a chair who is a tenure-track faculty member in the DHS, and the other two committee members must be tenure-track faculty from departments with expertise in the content area of the student’s thesis. Students are required to prepare their thesis proposal and review it with the committee chair for practicality of completion and approval before having an oral thesis proposal meeting with their entire thesis committee. Students receive feedback from the committee, which is implemented as they conduct their research. Students must successfully present the completed thesis at a defense meeting, which includes faculty members and other MPH students. Students are required to include all suggestions and final edits from the committee in their thesis before presenting for binding. The committee chair assigns the final grade for the thesis.

Students who choose to complete the project option enroll in HESC 597 for a total of three credits. Students are required to plan, develop and complete a project that fills a gap in public health practice.
The project requires a binder with four chapters: background and significance, methods, results and discussion. Students must form a project committee, which consists of a chairperson and the MPH graduate coordinator. Additional members of a committee can be added if the need for additional expertise is identified. Only tenure-track faculty members are allowed to serve on project committees. Students have two options to present their final product: poster or journal manuscript. The poster must be prepared in conference style and presented at the Health Science Department’s spring symposium, which is held in late April or early May. The journal manuscript follows the guidelines for a specific peer-reviewed journal that is appropriate for the project topic. Journal selection and advisement is provided by the committee chairperson. The committee chair assigns the final grade for the project.

The comprehensive exam assesses the understanding and application of core MPH coursework knowledge and the student’s chosen MPH study track. No total credit hour is given for the completion of the exam. Students who elect to complete the exam are required to complete an additional three credit hours of elective coursework for a total of 15 credit hours, instead of the 12 credit hours that students complete for the thesis and project options. Students are required to have completed a minimum of 36 credit hours of approved coursework with a GPA of 3.0 or better to sit for the exam during the 13th week of the semester. The exam consists of questions from three areas: (1) statistics/research methods; (2) epidemiology; and (3) the student’s MPH track. The Exam Committee is comprised of three tenure-track faculty members (one member from each of the three areas) and is chaired by a member of the Graduate Committee. The Exam Committee designs, schedules, proctors and evaluates the exam. Final scores are submitted to the graduate advisor. Students are given 4.5 hours to answer the questions in the three areas of assessment. The exam includes open and closed book/note sections which the student is made aware of prior to the taking of the exam. The MPH Student Handbook provides a comprehensive examination study guide for preparation of the exam. Students are required to pass all three sections of the exam to complete their culminating experience. Students who fail one or more sections of the exam are allowed to retake that portion of the exam before the close of the semester. The questions on a re-take exam may or may not be the same as the original questions. Students who fail one or more sections during the second attempt fail the exam and forfeit the awarding of the MPH degree.

The commentary refers to the fact that a standard rubric for the evaluation of the thesis and project does not exist. Although thesis topics and projects vary, it would be beneficial for both students and committee members to have some degree of standardized evaluation of the culminating experience of student learning and competency attainment.

Site visitors reviewed several culminating experiences, and they showed rigor, professionalism and creativity. Site visitors heard positive feedback from alumni regarding their culminating experiences, which were varied in topic area.
2.6 Required Competencies.

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

This criterion is met. The MPH program has adopted a set of nine categories of core competencies with a total of 64 specific competencies that MPH students gain in the program. All MPH students must attain competency in five areas: biostatistics, environmental health, epidemiology, health services administration and social and behavioral sciences. In addition, the program includes four cross-cutting competencies: diversity and culture, leadership, professionalism and program planning.

Each of the MPH program’s three tracks has clearly identified competencies. All competencies were developed approximately six years ago for the first CEPH accreditation visit. Originally, the competencies were developed through a review of competencies from other similar programs. Competencies were based on the recommendations of the CSUF MPH Advisory Committee, the MPH Program Committee, the MPH coordinator and the track advisors. Learning objectives to address the competencies are based on the ASPH competencies, the framework for professional development of Certified Health Education Specialists from NCHEC and information from national organizations in environmental health and gerontology professional education. The Community Advisory Board met in August 2012 to review the program competencies as they relate to community needs.

Faculty reported that they frequently refer to competencies and ensure that they are linked to syllabi and course learner objectives. Faculty were asked to review competencies at a full day retreat, including scoring competencies to indicate relevance and what works and to ensure that the courses adequately cover the competencies.

The self-study provided a detailed matrix of how each competency is addressed through coursework, noting coursework that reinforces the competency. Students reported they were familiar with competencies through course syllabi and objectives.

2.7 Assessment Procedures.

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

This criterion is partially met. The MPH program uses various methods of assessing student performance: exams, quizzes, papers, class presentations, group activities, projects, practica and culminating experiences. All students are required to complete an MPH study plan by the end of the first semester.
This form is completed in consultation with the MPH graduate coordinator and faculty advisor and is required by the Office of Graduate Studies. The form is signed by the student’s faculty advisor and a member of the Office of Graduate Studies and lists the completed courses to date with grade. The associate vice president, signs the form prior to graduation to ensure all requirements have been met for the MPH degree. Students are required to maintain a 3.0 grade point average (on a four-point scale) at all times. Students whose grade point average falls below the required standard are placed on academic probation and notified in writing by the Office of Graduate Studies. Students are given two semesters to improve their grade point average to the standard. Students who remain on academic probation are subject to dismissal from the program. Site visitors learned that in the last three years four students were placed on academic probation and zero students have been expelled from the program.

The program assesses student progress in achieving competencies through the following activities and indicators: (1) core and elective coursework; (2) faculty advising; (3) grade point average; and (4) preceptor evaluation form.

The first concern relates to the fact that the program does not consistently document that students are meeting all competencies through methods other than tracking satisfactory completion of courses. The preceptor evaluation form assesses the cross-cutting competencies of leadership and professionalism but does not assess competencies related to diversity and culture and program planning. Also, the project and thesis options do not require competency assessment while the comprehensive exam, to some extent, assess certain competencies deemed important by the MPH program, however, this culminating experience is not mandatory to all students since students may choose to complete a thesis or project or comprehensive exam.

The MPH program has both full and part-time students. All requirements for the MPH degree normally should be completed within five years. Students may request an extension to the five-year term limit based on extenuating circumstances. Extensions are filed by petition to the Graduate Studies Office and must contain a full explanation of the circumstances that prevent completion of the degree within the five-year limit. The graduate program advisor, chair of the appropriate graduate committee and director of Graduate Studies reviews and approves petitions. Students must complete and attain approval of a petition prior to the expiration of the five-year limit. The self-study provides graduation rates for academic years 2007 – 2012 as 88%, 79%, 66%, 70% and 0%. The rate of 66% was caused by several students experiencing financial difficulties due to the downturn in the state economy. The rate of 0% was caused by students being in the early stages of their study cohort.

The self-study presented graduate employment data for the years 2009 – 2012. The MPH program utilized three surveys to collect this data: (1) current MPH students upon completion of their first year; (2)
exit survey of MPH graduates; and (3) alumni survey. All surveys were implemented online with response rates of 45%-60%. The MPH program also maintains contact with its graduates via the MPH program’s LinkedIn.com and Facebook pages.

The program tracks the number of students who take national exams. Over the last three years, a total of eight students have taken the Certified Health Education Specialist (CHES) exam. The passing rates for these students have been 100% (5/5) in 2009, 50% (1/2) in 2010 and 0% (0/1) in 2011. No students have reported taking the Certified in Public Health (CPH) exam.

The second concern relates to the lack of the implementation of a systematic process for tracking employer assessments of MPH graduates. At the time of the site visit, the MPH program had not created an employer survey that measures alumni capabilities. The program conducts an annual assessment of alumni one year after graduation and asks questions regarding competencies and job skills. However, the program must implement a system of tracking employers so that the program may understand how graduates are being seen by employers and may identify needed changes.

2.8 Bachelor’s Degrees in Public Health.

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

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

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

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

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

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

This criterion is not applicable.
2.9 Academic Degrees.

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

This criterion is not applicable.

2.10 Doctoral Degrees.

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

This criterion is not applicable.

2.11 Joint Degrees.

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

This criterion is not applicable.

2.12 Distance Education or Executive Degree Programs.

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

This criterion is not applicable.

3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE.

3.1 Research.

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

This criterion is met. The MPH program’s research efforts focus on the prevention of disease and promotion of health in a manner that is consistent with its mission and that facilitates student and faculty
collaborations. The program follows university research-related policies and procedures and benefits from a number of university based support systems that include:

- Travel support and sabbatical leave opportunities.
- An Office of Research Development that provides guidance and consultation with the aim of developing high quality, competitive research proposals.
- An Office of Grants and Contracts that assists faculty in all aspects of grant seeking and submission including the administration of the campus Institutional Review Board.
- The Auxiliary Services Corporation that oversees education grants and contracts for the university and provides post-award administration and support services for awarded grants.
- A University Advancement Office that administers and accounts for all foundation and donor gifts and seeks new donors.
- The provision by the college of three units of release time per semester for the first four semesters after employment for all new tenure-track faculty in order to provide new faculty with additional time for course preparation and initial efforts to meet tenure-track obligations for research and service.
- The Health Promotion Research Institute with 50 faculty members from eight colleges focused on research that promotes the well-being of diverse populations in Orange County, California and provides support to the five other research centers mentioned in Criterion 1.4.
- The Office of Graduate Studies that, among other activities, recruits faculty members to mentor students in research and administers the Graduate Student Research Fund, which provides compensation for student research travel and materials.

During the past three academic years, most primary and most secondary faculty members have been involved in a comprehensive array of intramural and/or extramurally funded research. Most activities involved community partners, and all but one included student participation. Three new junior faculty have not yet generated research portfolios, but program leaders expect that to change during the coming year. Formal research agreements are in place in the form of subcontracts between the university and each collaborative partner that can be initiated by either party. Research topics include breastfeeding, obesity reduction in adults and children, breast cancer risk factors and survivorship, fibromyalgia and chronic pain, energy drink consumption patterns, childhood bullying, fall prevention in the elderly, exercise intervention for those with Prader Willi Syndrome, Pap test decision-making among Pacific Islander women, screening in minority populations, HIV/AIDS, emotional response to earthquakes and understanding and coping with stress. Two tenured full professors have large NIH funded research grants, and one assistant professor has significant funding from the U.S. Army. Other research funders include the California Department of Public Health, the California Wellness Foundation, Sepulveda Research Corporation, St. Barnabas Senior Services, St. Joseph Hospital, SAIC-Frederick, Altamed, the Centers for Disease Control and Prevention, the California Seismic Safety Commission. CSUF has also provided a number of smaller start-up grants.

MPH students have multiple opportunities to participate in research. Many class projects, practica, theses and independent study courses include a research component. The many funded faculty research projects with student participation provide a wide variety of opportunities for experience in study and survey design, data collection, data management and analysis and dissemination of findings. Students
have been co-authors on papers and presentations, and those students and alumni interviewed by the site visit team were uniformly enthusiastic about the quantity and quality of research opportunities open to them.

The program has consistently met almost all of its outcome targets for research. The only target that has been difficult to achieve is the expectation that at least 20% of student research efforts are presented at conferences. Over the past three years, however, between two and seven student projects have resulted in a published journal article. The faculty has averaged between 1.6 and 3.2 peer reviewed published articles during the same time period. Faculty members are currently averaging more than five students each in a research mentoring relationship, and last year 80% of submitted grant proposals were awarded.

3.2 Service.

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

This criterion is met. Faculty and students are involved in a wide range of service activities. Faculty expectations regarding service are integrated into the university policies around faculty retention, tenure and promotion, and faculty spoke of the strong value the program and department places on teaching and service to the community. University and college leadership underscored that community hours and outreach were built into the retention, tenure and promotion infrastructure and were perceived as a critical part of the faculty role at CSUF.

Faculty participation in service is documented in the self-study for both primary faculty and secondary faculty indicating a range of work including the following: working with community organizations as an evaluator; serving on community organization committees; reviewing and editing roles with professional journals; services a consultant with a range of national and local initiatives. Outcomes measured for faculty involvement include targets for faculty community involvement; linkages between funded projects and work relating to public health practice and health equality as well as professional service through organizations and community/professional leadership roles. The program self-study notes that faculty have organized colloquia on various public health topics that are open to the community but also accessible to the university. The faculty community involvement through symposia and colloquia often takes place through the Health Promotion Research Institute and its affiliated centers.

Members of the Community Advisory Board spoke highly of the program's engagement with community programs and initiatives, noting that faculty were highly accessible and would devote time to assist and support a wide range of community needs. They noted that if you “asked faculty” to assist they almost always came with a student or students who would also be able to help. Students and alumni confirmed this observation by commenting how approachable the faculty was and how faculty would frequently
focus on how to involve students in community-based research or in supporting community needs. Faculty conversations frequently addressed the value of engaging students in a wide range of learning experiences outside the classroom.

The student chapter of Eta Sigma Gamma at CSUF is active with a range of campus and community activity, although MPH students indicated that the current Eta Sigma Gamma chapter worked well primarily for undergraduates. Several students expressed an interest in the creation of a graduate group that would meet during times that were more accessible for the MPH students who often have full-time jobs. They indicated that the graduate group would be another way to engage in service as MPH students as well as to foster connections among students.

3.3 Workforce Development.

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

This criterion is met. The program engages in a range of activities that support professional development in the public health workforce including specific continuing education workshops and symposia, funded training activities and a public health certificate program approved by CSUF in 2009. The leadership and guidance of the program’s Community Advisory Board has been central to determining the needed programs and implementing the professional development activities. The new California-Nevada Public Health Training Center, which is a collaborative effort with several other universities, has targeted a number of workforce development needs through webinars, workshops and online trainings.

Assessment of community needs is done through discussions, meetings and recommendations. The self-study provides an example of how a recommendation around obesity rates led to conferences related to obesity in subsequent years. In 2012, the California-Nevada Public Health Training Center was able to conduct an assessment centered on the Orange County Public Health Workforce capacity and the 10 essential public health services. These assessment results will be able to guide the development of future professional development offerings. Faculty, alumni and community members all discussed the need for growth of additional ways to increase an understanding of the needs for professional development, the needs for increasing outreach and access to professional development and the need for evaluation and feedback.

The report provides both a list of professional development offerings and attendance for the last three years with topics that are broad and diverse and a list of funded training activities through MPH primary and secondary faculty.
The recently-introduced public health certificate program trained an initial cohort of 22 professionals from the Orange County Health Care Agency. Seventeen of these students chose to enter the MPH program in the fall of 2011. In addition to the certificate program, several additional systems are driving the development of a strong professional development effort within the program: designation as a multiple event provider, by NCHEC for CHES and MCHES; partnership as a funded institution for the California-Nevada Public Health Training Center; development of the Health Promotion Research Institute; and leadership for the California Journal of Health Promotion which offers CEUs for CHES.

4.0 FACULTY, STAFF AND STUDENTS.

4.1 Faculty Qualifications.

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

This criterion is met. The program’s primary faculty complement is robust in both quantity (as discussed in Criterion 1.7) and public health expertise. Faculty members are individually well qualified and collectively offer both breadth and depth in relevant public health disciplines to support the three MPH tracks offered by the program. They also bring a collective expertise and involvement in research, including research in practice settings. Only one primary faculty member has worked as a public health practitioner, however.

All have terminal degrees appropriate to the field of public health or relevant core disciplines. The majority received graduate degrees from CEPH-accredited public health schools and programs. The primary faculty are assisted by a secondary faculty complement of nine individuals from other university departments who also demonstrate breadth and depth in relevant skill areas.

Substantial expertise is evident in community-engaged and applied public health, with particular strengths in the social and behavioral sciences, environmental health and gerontology. Community-based research, consulting and continuing education relationships of the primary faculty members with practice organizations helps assure the relevance of course work to practice. A number of secondary and part-time faculty members have practice experience, and the liberal use of guest speakers from practice organizations further helps the program integrate perspectives from the field into the curriculum.

The program’s targeted outcomes for faculty indicate the program is meeting its goals for the recruitment, retention and advancement of qualified faculty. In addition, the program indicates that all faculty research has applications to directly benefit underserved communities and that almost all research projects involve direct input from community groups and/or other academic institutions.
4.2 Faculty Policies and Procedures.

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

This criterion is met. Faculty recruitment follows institutional guidelines and policies. All tenure-track faculty members, in addition to teaching, are expected to establish a research agenda that produces high quality peer reviewed publications, and to provide service to their profession, the institution and the community.

Program faculty members are governed by institutional faculty rights and responsibilities. Faculty responsibilities related to teaching, scholarship and service are based on a collective bargaining agreement, university policy statements and department personnel standards. The combination of the union agreement and faculty handbook provides information to faculty about university policies and procedures pertaining to conditions of employment, benefits, faculty rights and responsibilities, governance, appointments and promotions, contracts and workload, orientation and development, employment and grievances/complaints. The manual is provided at the time of employment and is normally available online. The handbook is currently undergoing revision, however, a full copy of the new document was not available for review by the site visit team.

Faculty development is provided in support of teaching, research/scholarship and service excellence in a variety of ways. New tenure-track faculty in the department are granted a diminished workload for two years in order to give them time to acclimatize themselves to the institution and department, develop new courses and develop a research focus. They are carefully mentored by the department chair and the leader of their specialty track. Any faculty member who does a great deal of student mentoring can earn course release time to enable that activity. The Faculty Development Center, discussed in Criterion 1.7, is tasked with building a stimulating environment to support faculty as teachers, researchers and engaged community members. The center does this by enhancing teaching excellence, understanding and assessing student learning, enhancing the effective use of technology in teaching, promoting scholarly research and creative activities, enhancing professional and service activities and sponsoring support programs for special faculty constituencies. In addition the university offers the Office of Research Development, information technology services, the University Learning Center that supports faculty in tutoring students in difficult subjects and the Faculty Writing Assistance Program.

In addition to tenure-track appointments, the department has three full-time and one part-time lecturer faculty members. These are non-tenure track appointments with no expectation that a research focus will be developed. Full-time lecturer positions are competitive and advertised nationally. Part-time lecturer positions are typically filled by program graduates seeking work experience to assist them in finding full-
time employment. According to university policy, part-time lecturers who accumulate six sequential semesters of work are "entitled" to ongoing work at the same level of activity. The department also appoints guest speakers who are unpaid volunteers, usually public health practitioners, who participate in classroom teaching and internship site supervisors who must have a graduate degree in public health or related field and who register as an internship site with the university Center for Internships and Community Engagement.

Tenure-track faculty members, when first appointed, are normally given a probationary two-year appointment. Probationary faculty members are subject to reviews by the department chair before being appointed to subsequent third, fourth, fifth or sixth probationary years or given tenure. Continued probationary appointments imply that tenure will be eventually granted if performance continues to match standards. Those faculty members in a tenure-track understand they will be terminated if they do not acquire tenure. Tenure application portfolios are evaluated independently by the Department Personnel Committee, the department chair and the dean of the college.

Students evaluate faculty at the end of each course using the student opinion questionnaires. These course evaluations are reviewed at the end of each semester by the department chair, who then discusses problematic evaluations with the involved faculty member. Referrals are made to the Faculty Development Center when faculty members need to improve their teaching.

There is excellent evidence that well-defined policies and procedures are in place to recruit, appoint and promote qualified faculty, to evaluate competence and performance of faculty and to support their professional development and advancement.

Each faculty member has several committee appointments within the program as well as with the college and university. The site visit team noted that faculty members chafed good heartedly at the many committee assignments, but were pleased that their input was sought and carefully considered by those managing the program.

4.3 Student Recruitment and Admissions.

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

This criterion is met. The MPH program recruits students in a variety of ways that include a program brochure, the MPH website and on-line course catalog, the MPH handbook, campus community forums, program banners and booth displays at professional meetings, promotional items and MPH announcement boards. Institutional policies and procedures are closely followed as recruitment focuses
on underrepresented minorities, employees of public health practice agencies and recently graduated CSUF health science students. Quantitative information on students applied, accepted and enrolled are provided in the self-study with overarching measures tracked as part of the program’s ongoing evaluation. The majority of applicants are in the health promotion/disease prevention track (196 in 2011-2012, compared to 16 in environmental and occupational health and safety and four in gerontological health).

Admissions policies include in part a baccalaureate degree, a cumulative GPA of 3.0, completion of six units of statistics and research methods, appropriate education and experience and English language skills. Many applicants work full-time jobs and have experience in a public health related field. Applicants who do not meet requirements may demonstrate academic abilities by taking one or two elective courses through open enrollment. The faculty and the program’s Admissions Committee are clear on how admissions decisions are made and how applications through open enrollment are considered.

The self-study includes examples of recruitment materials, a table of applicants accepted and enrolled and student enrollment data by track. The data indicates a large number of applicants and the ability of the program to attract and accept highly qualified students.

4.4 Advising and Career Counseling.

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

This criterion is met. The self-study provides detailed descriptions of the initial orientation for students and the means through students are linked with advising. The activities seem comprehensive and robust for the program, especially given the newness of the program and recent changes in leadership. Current students and alumni expressed strong satisfaction with advising within the program and clearly felt comfortable with both the formal advising, support resources such as the student handbook and the informal advising provided by a wide range of faculty. Students are presented with faculty backgrounds and research and then are able to approach faculty with similar interests to be advisors. Students shared with the site visit team that they have discussions with faculty about interests, and faculty and staff have directed and introduced students to other faculty members who might be a suitable advisor. All students were aware of the potential to change advisors, and the process appears to be healthy and transparent.

New faculty are mentored in their advising duties and more senior faculty and program leadership were mindful of the need to balance faculty workloads and ensure both strong student and new faculty support.

Career advising is less structured, but students and alumni were also positive about career counseling options. Much career advising occurs through linkages with university and college systems. Students also mentioned e-mails from faculty describing potential jobs and internships, and alumni mentioned
being on the lookout for jobs that they could forward to faculty to send to current students. A number of alumni mentioned the ways that internships evolved into jobs, and many of the Community Advisory Board members indicated a strong support for hiring interns when possible and the proven high quality of the program graduates.

The self-study describes the university wide grievance systems and procedures. The program has had no formal complaints since its inception.
Agenda

COUNCIL ON EDUCATION FOR PUBLIC HEALTH
ACCREDITATION SITE VISIT

California State University, Fullerton
MPH Program

April 29 – 30, 2013

Monday, April 29, 2013

7:45 am  Site Visit Team Pick-Up from Hotel
          Michele Mouttapa

8:00 am  Brief Tour
          Jessie Jones

8:20 am  Breakfast
          Jordan Aquino
          Mary Aboud
          Jessie Jones
          Michele Mouttapa
          Sora Tanjasiri

8:45 am  Site Visit Team Request for Additional Documents
          Jordan Aquino
          Mary Aboud
          Jessie Jones
          Michele Mouttapa
          Sora Tanjasiri

9:00 am  Meeting with Program and Department Administration
          Jordan Aquino
          Mary Aboud
          Jessie Jones
          Michele Mouttapa
          Sora Tanjasiri
          Lauren Wilson
          Mandy Villagram

10:20 am Team Resource File Review

11:15 am Break

11:30 am Meeting with Faculty Related to Curriculum and Degree Programs
          Michele Mouttapa
          Jie Weiss
          Archana McEligot
          Lilia Espinoza
          Jasmeet Gill
          Danny Kim
          Jennifer Piazza
          Michele Wood
          Josh Yang
          Jaclyn Blyleven
          Rachel Roberts
          Dominick Sturz
          Melanie Horn Mallers
          Gail Love
          Debra Rose
          John Bach
          Daniela Rubin
          Dana Rutledge
          Penny Weismuller

12:30 pm Break

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12:45 pm    Lunch with Community Representatives (Community Advisory Board and Preceptors)
    Barry Ross
    Donna Fleming
    Laura Gil-Trejo
    Nahe Kayali
    Ellen Lee
    John Ralls
    Irene Salazar

1:30 pm    Break

1:45 pm    Meeting with Faculty Related to Research, Service, Faculty Issues
    Sora Tanjasiri
    Jie Weiss
    Jasmeet Gill
    Jessie Jones
    Archana McEligot
    Debra Rose
    Michele Wood

2:30 pm    Break

2:45 pm    Meeting with Alumni
    Mary Becerra
    Alysia Ransons
    Jackie Blyleven
    Anna Hanlon
    Janette Hernandez
    Radhika Kumar
    Michael Li
    Justine Scott
    Amalita Vega

3:30 pm    Break

3:45 pm    Meeting with Students
    Joseph Domingo
    Angela Gutierrez
    Lizette Martinez
    Tiffany Miller
    Muhammad Nasir
    Hanh-tien Nguyen
    Dinara Nussipov
    Lyanna Pillazar

4:45 pm    Resource File Review and Executive Session

5:30 pm    Adjourn

Tuesday, April 30, 2013

8:00 am    Site Visit Team Pick-Up from Hotel
    Jordan Aquino

8:30 am    Meeting with Institutional Academic Leadership/University Officials
    Jose L. Cruz
    Shari McMahan

9:00 am    Break

9:15 am    Executive Session and Report Preparation

11:30 am    Working Lunch, Executive Session and Report Preparation

12:30 pm    Exit Interview