

REVIEW FOR ACCREDITATION
OF THE
PUBLIC HEALTH PROGRAM
AT
TEACHERS COLLEGE, COLUMBIA UNIVERSITY

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:

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SITE VISIT TEAM:

Kelly L. Bishop, MA, MCHES, FASHA, Chair
David I. Gregorio, PhD, MS

SITE VISIT COORDINATOR:

Alisha O'Connell, MPH

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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 Teachers College, Columbia University. The report assesses the program's compliance with the *Accreditation Criteria for Public Health Programs, amended June 2011*. This accreditation review included the conduct of a self-study process by program constituents, the preparation of a document describing the program and its features in relation to the criteria for accreditation and a visit in March 2017 by a team of external peer reviewers. During the visit, the team had an opportunity to interview program and university officials, administrators, teaching faculty, students, alumni and community representatives and to verify information in the self-study document by reviewing materials provided in a resource file. The team was afforded full cooperation in its efforts to assess the program and verify the self-study document.

Founded in 1887, Teachers College, Columbia University is an urban, independent, graduate and professional school of education located in New York, New York. The college is affiliated with Columbia University but retains its legal and financial independence. For the academic year 2016-2017, Teachers College enrolled about 5,000 students, with approximately 72% seeking a master's degree, 26% seeking a doctoral degree and the remainder enrolled in non-degree courses. The college offers degrees from 10 academic departments that include arts and humanities; biobehavioral sciences; counseling and clinical psychology; curriculum and teaching; education policy and social analysis; health and behavior studies; human development; international and transcultural studies; mathematics, science and technology; and organization and leadership.

The MS in community health education at Teachers College enrolled its first cohort in 2012. The program is housed in the Department of Health and Behavior Studies. The Council accepted the program's application for CEPH accreditation in June 2015, and this is the program's initial review.

Characteristics of a Public Health Program

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

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

These characteristics are evident in the public health program at Teachers College. The program is located in a regionally accredited college and has the same rights and privileges as other professional programs on campus.

Faculty are trained in a variety of disciplines, and the program's environment supports interdisciplinary collaboration. Faculty and student connections with public health practitioners and local community members ensure that the program fosters the development of professional public health concepts and values. The program has a defined mission, with supporting goals and adequate resources to offer the MS in community health education degree.

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 CEPH Accreditation Summer Taskforce developed the mission, values, goals and objectives and presented these statements to faculty for discussion in fall 2011. The faculty approved the final draft after a year of deliberations and revisions. Once approved, program leaders shared the draft with the the Community Health Education Program Joint Advisory Committee on Growth, Quality, and Development (Joint Committee) at its first meeting in November 2013. The Joint Committee made recommendations for improvement, and a subcommittee of faculty made those final revisions. The program's mission is as follows:

The program's mission is to address the health of the public through the preparation of specialists in health education who focus on the community as the setting for analysis, assessment, program planning, intervention, evaluation, and research. This mission includes promoting health, preventing disease, and advancing health equity, while training exceptional leaders for the delivery of significant contributions to diverse regional, national, and international communities through teaching, research and service.

The program's values include excellence; well-rounded preparation; establishing the evidence base; diversity, health equity and multicultural competence.

The program has 10 goal statements related to the areas of education, research, service and diversity. The success of the goal statements is measured through objectives and associated performance indicators: nine relate to student performance under the educational goal; six relate to the research goals; five relate to service; and nine relate to the diversity goal.

The mission, values, goals and objectives are reviewed annually, and program faculty and members of the Joint Committee can suggest recommendations for changes. The program director told site visitors that no changes have been made to the mission, values since their adoption, except for minor revisions to language. In August, 2017 the faculty approved revision of the goals and objectives.

The self-study indicates that the mission, values and goals are made available through the program's website, prospectus, Teachers College academic catalog and student guidebook.

1.2 Evaluation and Planning.

The program shall have an explicit process for monitoring and evaluating its overall efforts against its mission, goals and objectives; for assessing the program's effectiveness in serving its various constituencies; and for using evaluation results in ongoing planning and decision making to

achieve its mission. As part of the evaluation process, the program must conduct an analytical self-study that analyzes performance against the accreditation criteria.

This criterion is met with commentary. The program monitors its evaluation plan using various data sources such as course grades, scoring rubrics, curriculum evaluation forms, employment surveys, exit surveys, faculty CVs, colloquia attendance records, course syllabi and human resources-provided demographics. The program director is responsible for administering the exit and employment surveys; collecting attendance records at colloquia sessions and continuing education events; and tracking student enrollment, graduation rates, student engagement in research and service activities and students authoring publications and presentations. The program director receives student enrollment and demographic data from the Registrar's Office; faculty demographics from human resources; faculty research, service and diversity-related projects from faculty CVs and reports; and attendance records and materials from colloquia and continuing education events from the event organizer.

The commentary relates to the need for continuing, ongoing attention to ensuring that there is a systematic process to monitor, analyze and use data. Data collected annually allows the program to assess progress toward its mission, goals and objectives as well as to make programmatic adjustments or to enhance the quality of the program. During on site discussions, program representatives explained that data have been collected but had not always been systematically reviewed or documented as clearly as possible.

A small committee comprising the program director, one additional primary faculty member and the college's director of accreditation created the self-study document. The committee requested information for the self-study document from primary and adjunct faculty members, students and graduates. The draft report was shared with all primary faculty members in summer 2016. Following a consultation visit with CEPH representatives, the committee revised the document and shared it with faculty prior to submission of the preliminary self-study to CEPH. The preliminary self-study was shared with members of the Joint Committee at its annual meeting in 2016. The final self-study incorporates feedback from the preliminary review, Joint Committee members, members of the MS Student Committee as well as university and academic leadership. During the site visit, current students, alumni, community members and preceptors reported having seen and reviewed the self-study document. One student noted that he was required to read the document.

1.3 Institutional Environment.

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

This criterion is met. Teachers College has been accredited by the Middle States Commission on Higher Education since 1921. The college was last reviewed in July 2016 and received an accreditation term of 10 years. The college also responds to 20 specialized accreditors in fields such as psychology, communication sciences and disorders, education, nutrition and physical education.

Teachers College is an urban, independent, graduate and professional school of education located in New York, New York. The college is affiliated with Columbia University but retains its legal and financial independence. PhD degrees are conferred through the Columbia University Graduate School of Arts and Sciences, but all other degrees are conferred directly by Teachers College. The college is organized into 10 academic departments in the areas of arts and humanities; biobehavioral sciences; counseling and clinical psychology; curriculum and teaching; education policy and social analysis; health and behavior studies; human development; international and transcultural studies; mathematics, science and technology; and organization and leadership. The college augments academic departments with 25 different centers, institutes and projects that complement instructional areas.

The community health education program is housed in the Department of Health and Behavior Studies along with graduate programs in applied education psychology, special education and other health studies. The program also offers an MA and EdD degree in health education. The department chair reports to the dean of the college (who is also the provost), who in turn reports to the president of Teachers College. The president reports to the Board of Trustees.

The program's budget is part of the college's operating budget and based on tuition revenue generated by the program. The the president, vice presidents and Trustee Committee on Business and Finance develop the annual college operating budget. Before the budget is adopted by the Board of Trustees, the full college faculty discusses and votes on the budget resolution, and the Board incorporates faculty's feedback into its deliberations. The program director receives a discretionary budget of \$3,000 to cover program-related expenses.

The program must request a formal Permission to Recruit (PTR) for full-time faculty recruitment. Need for faculty originates from the program, and the program's primary faculty must collectively agree on the requirements for the new position. A vote of approval at the program level moves through subsequent steps that align with Teachers College's policies and processes. For adjunct faculty, the program director selects, hires and evaluates the work of adjunct faculty. All adjuncts must have a doctoral degree and experience in the area in which they are assigned to teach. The process is the same for recruiting staff members. While creating the annual budget, college leaders assign staff and administrative help to programs based on program size and needs. The department chair reports to the provost and advocates for priorities and expresses concerns regarding the Department of Health and Behavior Studies and the public health program.

The program's primary faculty complement is collectively responsible for curriculum development. Substantive changes to required courses or to the program must be approved by a majority vote during faculty meetings. New course proposals are approved by faculty before moving to the Department and

Academic Program Subcommittee and finally to the registrar. Some substantive program revisions may also require New York State Department of Education approval. This process was followed when the community health education degree was created in 2012.

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 department chair guides and manages the academic unit that houses the program. The chair manages all aspects of department business, has a central role in shaping academic programs, participates as part of an advisory group to college leadership, helps to meet the needs of students, facilitates relationships with external groups and alumni and acts as a liaison among department and program personnel. All academic issues concerning department faculty must be brought to the department chair for action. The program director, who reports to the department chair, is responsible for oversight of program goals, objectives, outcomes, curriculum revisions, monitoring of assessment activities, student recruitment and retention, student application approval, general advising and clearance for graduation in addition to regular instructional duties. The program director position has recently been redefined as a two-year-term position, although no initiation date has been established.

Faculty and students have ample exposure to interdisciplinary collaboration in the program. Faculty members engage in interdisciplinary collaboration through research and service activities across the college. Faculty members have received multiple provost grants that have allowed for collaboration with colleagues in other departments. For example, a provost grant on gun violence that incorporates the expertise of public health, clinical psychology, criminal justice and adolescent health. In addition, program faculty engage in research collaborations with local medical schools, dental schools, a cancer center and an educational economist. All of the program's faculty members are involved in some capacity with national or local organizations and committees that further establish interdisciplinary collaboration on research and service. Within the curriculum, students are able to take two courses outside of the program and/or department. This opportunity allows them to work with students and faculty from areas outside of their own study to broaden their perspective of community health and its impacts.

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 with commentary. The program has clearly defined rights and responsibilities concerning program governance and academic policies. Governance of the program is overseen by the

Joint Committee, Program Committee, Scholarship Committee, the MS Student Committee and the ad-hoc CEPH Accreditation Self-Study Committee.

The Joint Committee meets annually to engage in evaluation activities and to contribute to the program's efforts around growth, quality assurance and development of the program. The committee reviews the extent to which the program is achieving its mission, goals and objectives and provides feedback on developments within the field of community health education. The Joint Committee has formal voting approval on most changes made in the program. The Joint Committee comprises program faculty, students, alumni and representatives from the local community that include both practitioners and academics.

The Program Committee includes all faculty and up to four representatives from the MS Student Committee. Key responsibilities include curriculum planning and development, curricular reviews and improvements, review of new course or program offerings, oversight of the admissions process, award of scholarship points and collaboration with other committees for program growth and development. The Program Committee meets at least once a month.

The Scholarship Committee, which includes all primary faculty, meets annually after admissions decisions are made to disburse scholarship funds allotted by the college. The committee assigns scholarship points, the unit of college credit, to both new and continuing students. Points are given on a needs basis; if a student transfers or withdraws from the program, the Scholarship Committee will reassign the scholarship points based on financial needs requested by students. The committee also awards the Sacks Scholarship to one student in the program each academic year, which could also be an MA or EdD student. An MS student has received this scholarship in three of the last five years.

The commentary relates to the small number of community health practitioners involved in program governance. While the Joint Committee has six members representing the community, five of those members are affiliated with academia and hold faculty positions at various universities in the area. Given that thoughtful deliberation takes place during Joint Committee meetings, site visitors determined that more practitioner input would contribute to the success of the program in preparing students for professional roles in the community after graduation. The program plans to extend invitations to five new fieldwork supervisors to increase the number of community health practitioners involved in governance.

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. All program finances are handled centrally by Teachers College administration, which determines appropriation to departments and programs and monitors all expenditures. Each year, the

Department of Health and Behavior Studies receives an allocation of support regarding personnel, curriculum and administration. Allocation of resources within the department to the program is based largely on a centrally determined tuition revenue formula. The formula is based on the number of tuition points taken by students in the program and shifts with program enrollment.

Table 1 presents the revenue and partial expenditures for the program for the past five years. The expenditures for FY15-16 and FY16-17 are incomplete. The program stated during on site meetings that budgets are done on a department level and they could not provide a programmatic level breakdown for those two years. Upon request, site visitors received additional information regarding total faculty salaries and operating expenses from the Vice Provost's office, though it only covered FY17-18 and not the previous requested years.

The program receives a sizable operating subsidy from Teachers College that underwrites the costs of faculty, staff, equipment and other resources needed for continued operation. Supplemental information from the Vice Provost's Office estimated the subsidy to be approximately \$1.1 million. That subsidy includes primary faculty salaries and benefits (estimated to be \$501,733 for 2017-2018) and secondary faculty salaries (\$102,943). Four tenured/tenure-track faculty collectively contribute 2.5 FTE to the program and receive guaranteed salaries through the college. An additional subsidy to the program includes salaries and benefits for administrative staff, travel allocations for faculty that amount to \$1,000 per individual per year, professional development funds that are \$1,200 for untenured faculty and \$1,000 for tenured faculty per year and professional development awards to junior faculty through the Provost's Office. A relatively small amount of discretionary support is allocated to the program to cover costs of administration, marketing and other program-related activities. Operating expenses of the program related to mailing and photocopying are shared by the program with the other nine programs in the Department of Health and Behavior Studies.

Table 1. Sources of Funds and Expenditures by Major Category, 2012-2013 to 2016-2017					
	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
Source of Funds					
Tuition per credit/point	\$1286	\$1344	\$1398	\$1454	\$1512
Sacks Scholarship	\$0	\$8,375	\$12,222	\$13,051	\$0
Total					
Expenditures					
Primary Faculty Salaries & Benefits	\$701,429	\$733,775	\$758,410	---	---
Adjunct Faculty Salaries & Benefits	\$40,850	\$35,900	\$63,100	\$45,350	---
Staff Salaries & Benefits	\$53,207	\$54,365	\$55,487	---	---
Travel	\$4,000	\$4,000	\$4,000	\$4,000	\$4,000
Total	\$799,486	\$828,040	\$880,997	\$49,350	\$4,000

The program is not a recipient of grants or philanthropy, although it does have access to one graduate scholarship, the Sacks Scholarship. The amount of the Sacks Scholarship varies from year to year

depending on the investment performance of the endowment fund. Over the past five years, the Sacks Scholarship was awarded to three MS candidates. On site discussions with students indicated the need for greater financial support, especially for those recruited from underserved and underrepresented populations who struggle with the high tuition and related costs of education.

At the time of the site visit, reviewers identified concerns related to the lack of transparency in the program budget. Program and institutional leaders were unable to provide the site visit team with a clear description of how the funds for the program calculated. Table 1 provides a general overview of the revenue, but does not provide total calculations. Faculty and staff salaries are not presented for the last two fiscal years though repeated attempts were made to obtain this information. Some expenses, such as the discontinued annual health disparities conference, are not accounted for in the budget table provided by the program. Program support to students in the forms of tuition waivers, scholarships, work-study or graduate assistantships are also not included. While institutional leaders pledged financial support to the public health program in meetings with site visitors, the sustainability of the program cannot be determined due to the incomplete presentation of fiscal resources. In the program's response, greater clarity was provided on program funding.

Throughout the self-study and during the site visit, faculty, institutional administration and students expressed anticipation that enrollment will increase in coming years with CEPH accreditation and continuing demand for health educators. Increased enrollment is expected to provide greater resources, most notably financial resources, to the program, which will allow the program to address some of the current issues, such as scholarship availability and work-study opportunities. While future enrollment growth stemming from CEPH accreditation may help to address some challenges, greater enrollment will also demand additional fiscal and other resources.

1.7 Faculty and Other Resources.

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

This criterion is met with commentary. The program has identified four primary faculty along with two part-time instructors who contribute to the program's instructional and other operations. Full-time faculty include three tenured members and one tenure-track individual. The program has received approval to hire one of the part-time instructors as a full-time lecturer for the next academic year. At the time of the site visit, the primary faculty FTE was 2.5 and the non-primary faculty FTE was 0.8. Site visitors verified that all primary faculty members dedicate at least 50% time and effort to the program. Program activities are supported by one full-time academic assistant and one work-study student.

The program has one academic assistant who provides a small amount of support. The assistant is responsible for providing clerical assistance to the faculty of the MS in community health education, the MA and EdD in health education. The assistant maintains all MS student files.

Program enrollment over the past several years has varied from 10 to 17 students per year, or 8.5 to 13 student FTEs. The student-faculty ratios (SFR) have varied from 3:1 to 5:1 based on primary faculty and 3:1 to 4:1 based on total faculty in the last three years. As such, these ratios are well within the expected standard.

The commentary pertains to the uneven workload the program director maintained during the accreditation process. The program director is the responsible party in almost all facets of the program including gathering data for evaluation purposes, developing various documents related to curriculum assessment, advising, student recruitment, diversity initiatives, continuing education conference series, external constituent communication and budgetary requests. In addition to administrative duties, the program director also maintains a course load of at least two courses a semester. During on site meetings, site visitors' conversations suggested that the program director does not receive adequate time to perform the administrative duties necessary for the program's development, evaluation and sustainability. The self-study states that institutional leadership discontinued the program's very successful annual health disparities conference in order to reduce the workload of the program director, who also coordinated this workforce development activity. The program director's uneven workload appears to be related to two other program faculty members' competing travel and time commitments which made it difficult for them to fully participate in the accreditation process. The program director's workload may need to be monitored to ensure that there is adequate time to perform the administrative duties necessary for the program's development, evaluation and sustainability.

The program operates within facilities maintained by Teachers College, which include faculty offices, access to a department conference room and classrooms. A new technology facility, conference center, small conference space and auditorium are available for program use. The program does not have, nor requires, program-specific laboratory space or special equipment.

Students and faculty have access to Teachers College Computing and Information Services that provides computer equipment facilities for workshops and 24-hour help. Media services are supported through this resource, which also maintains online learning platforms (eg, Moodle, Blackboard and Skype). Teachers College's Gottesman Library maintains a substantial collection of materials relevant for education. Students and faculty also have access to the Columbia University Libraries. During on site discussions, site visitors confirmed that the college's library capacity regarding core public health disciplines is adequate for student and faculty needs.

Technology services available to the program include an Academic Technology Fellow and a new Technology Specialist to support online course delivery. Students who met with site visitors did not report any issues with accessing lectures or course materials and faculty did not report problems with posting course material online.

1.8 Diversity.

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

This criterion is met. The program is committed to diversity, as evidenced by its inclusion as an overarching goal for the program along with goals related to instruction, research and service. The program has also created a diversity plan that is included in its prospectus booklet.

The program describes in the self-study that it follows the designations of the US Office of Management and Budget for race and ethnicity as definitions of its under-represented populations. In addition, the program identifies under-represented populations based on disability, citizenship status, socio-economic status, gender, religion and sexual orientation.

The program's diversity goals are consistent with the college's diversity mission statement: "Teachers College, Columbia University strives to establish an institution that actively attracts, supports, and retains diverse students, faculty, and staff, demonstrated through its commitment to social justice, its respectful and vibrant community, and its encouragement and support of each individual in the achievement of his or her full potential." Three diversity objectives measure race and ethnicity, gender and immigration status of students.

The program's diversity plan incorporates the college's existing policies related to harassment and discrimination. The college has a relatively new Office of the Vice President for Diversity and Community that addresses issues concerning community, diversity, civility, equity and anti-discrimination for faculty, staff, students and alumni. The self-study provides links to policies that address such issues as non-discrimination, protection from harassment, sexual harassment/assault, student conduct and gender-based misconduct as well as Columbia University's student policies on discrimination and harassment. The policies are found in the program's prospectus booklet and on the program website.

Diversity and cultural competence is introduced and covered throughout the curriculum. An example is HBSS 4114 Competence with Multicultural Populations: Research and Practice, which a required course in the MS plan of study. This course provides students with the skills and knowledge to work with vulnerable multicultural populations in their fieldwork experience or in the workplace after graduation. The program also stresses that fieldwork sites for the student practicum include experience with urban, minority and/or

vulnerable populations. Discussions with students indicated that they are exposed to a wide range of cultural issues and feel that the program pushes them to consider diverse perspectives in their coursework; alumni also reinforced this sentiment. Students can also receive exposure to issues of diversity through the colloquia series offered by the program.

The program follows the college’s policies when recruiting, hiring, promoting and retaining a diverse faculty. Teachers College is an equal opportunity employer and is committed to expanding employment opportunities to persons of color, women and persons with disabilities.

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 an MS in community health education, as shown in Table 2. This MS degree is considered equivalent to a professional MPH degree. In addition to basic coursework in the five core public health knowledge areas, the practicum and a capstone, students take additional coursework in program evaluation; research and practice with multicultural populations; planning health education programs; and social marketing and health communications. Students must take two courses outside of the program or department as part of the plan of study, and the program provides guidelines on the types of classes those can be. With recommendations from their advisors, students can choose courses related to clinical psychology; counseling; human development; organization and leadership; nutrition; computing and technology in education; or instructional technology and media. On site discussions indicated that advisors are familiar with faculty members in other departments and review course syllabi to ensure that content is appropriate for students in the MS program. Site visitors reviewed student grades associated with the non-program or non-department courses and found that students succeed in these areas with high marks.

Table 2. Instructional Matrix – Degree & Specialization		
	Academic	Professional
Master’s Degree		
Community Health Education		MS

Site visitors also reviewed syllabi for coursework beyond the core and found them to contain an appropriate breadth and depth of content for MS students. Students who met with site visitors indicated that the curriculum is rigorous but said that they feel supported by the faculty and program director if they have any issues or need extra help with course content.

When site visitors met with students, they also learned that nine out of 16 courses can be taken completely online through the use of platforms like Blackboard and Skype. While the degree cannot be completed 100% online, more than half of the curriculum can be. The program director described to site visitors that the program is testing the ability to offer this degree online. If the program does pursue this modality and begins to offer a fully distance-based option, a substantive change notice must be sent to CEPH for review.

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. All students must complete at least 42 credit hours of coursework to earn the MS in community health education degree. The program has not granted any degrees for fewer than 42 credit hours in the last three years.

The program defines a credit as equivalent to one semester hour, which includes a minimum of 15 contact hours with the expectation that students will spend at least 30 contact hours on out-of-class assignments. All courses in the community health education program are three credits. The MS degree is designed to be completed in two years for full-time students.

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. Coursework in the five core disciplines of public health are required for all MS students for graduation. Teachers College MS students receive a broad understanding of the areas of knowledge basic to public health through 18 credits of required coursework. Table 3 summarizes the required courses addressing public health knowledge areas.

Table 3. Required Courses Addressing Public Health Core Knowledge Areas for MS Degree		
Core Knowledge Area	Course Number & Title	Credits
Biostatistics	HBSS 4160 Introduction to Biostatistics for Community Health Educators	3
Epidemiology	HBSS 4102 Principles of Epidemiology in Health Promotion	3
Environmental Health Sciences	HBSS 4161 Environmental Health	3
Social & Behavioral Sciences	HBSS 4100 Behavioral and Social Science Foundations of Health Education	3
	HBSS 4118 Principles of Health-Related Behavioral & Social Change	3
Health Services Administration	HBSS 4162 Health Services Administration	3
	Total Credits	18

Upon review of the syllabi for each of the required courses, the site visit team concluded that these courses do provide the fundamental knowledge at an appropriate level of depth and rigor and assess competence in the five basic areas of public health.

2.4 Practical Skills.

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

This criterion is met. Students complete a practicum experience that is 180 hours in length, generally occurring over a 15-week period. Students may take the practicum experience in the fall, spring or summer semester. They must take a minimum of 18 credits before they are able to enroll in HBSS 5410 Practicum in Health Education.

Students are provided a fieldwork guidebook that outlines items such as key requirements, required forms and samples of expected work. In the summer prior to the fieldwork assignment, students complete a formal inquiry of where they would like to conduct their fieldwork. Students may seek out fieldwork assignments or accept one recommended by their field coordinator or program director. After the field coordinator approves the site, the student contacts the agency to determine whether opportunities exist for field placement. If an opportunity exists, the coordinator/instructor, student and preceptor work on finalizing an agreement of work to be completed at the field site. If a formal agreement is required, a memorandum of understanding (MOU) is generated.

The program follows two key principles for the selection of sites. The first is that the focus of the fieldwork must be in public health. Clinical, direct provision of services to clients and pure administrative work is not acceptable. The second key principle is that if a fieldwork experience is in a student's place of employment, then it must include a public health focus above and beyond the student's ordinary work experience. The fieldwork experience must not be a part of the student's ordinary work responsibilities.

The field coordinator must approve all preceptors. Potential preceptors are evaluated based on a review of their resume and a one- to two-paragraph description of their site and the training opportunities they can provide. All preceptors should have a master's degree in a health-related field. The program also recommends that preceptors possess the CHES or MCHES certification, though it is not required. At the time of the site visit, there was no formal education/training program for preceptors; however, the program director recently created a new guidebook for preceptors that 1) describes how one can become a preceptor, 2) defines the preceptor's responsibilities, 3) includes required forms and 4) presents a timeline for proposing and accepting fieldwork assignments. In addition, the program will now have calls with preceptors, students and the field coordinator in September and December.

Once students have identified a fieldwork site, it is recommended that they meet with their preceptors face-to-face to develop the scope of work. The field coordinator makes the final approval on the fieldwork experience. The scope of work and a letter of confirmation are completed before the first week of the semester.

The fieldwork assignment is supervised by the field coordinator or course instructor. Several standardized forms have been created to evaluate student performance. Students are responsible for tracking their hours and activities. Preceptors are required to meet face-to-face with the interns at least once per week. Students are required to document their weekly supervision meetings.

A conference call between the student, preceptor and field coordinator is held early in the semester to provide clarifications or discuss concerns; in addition, calls at any other time can be scheduled as needed. Another call is scheduled at the end of the semester to determine how the intern performed and whether the scope of work was accomplished.

As part of the assessment process, preceptors rate students on their competencies and provide an overall rating for the fieldwork assignment. In addition, preceptors are asked to rate their current intern compared with their prior interns. One preceptor declined to rate their intern against previous ones, which was allowed by the program.

While on site, the site visit team met with alumni who had completed the internship process. All expressed gratitude for the experience, the supervision and the development provided by the preceptor. In turn, the preceptors who met with the site visit team expressed great appreciation for the content knowledge, skills, professionalism, knowledge of diverse populations and leadership students brought to the fieldwork assignments. Preceptors noted that the materials and curricula produced by the interns are still used by the agencies and that the work performed by interns exists as the foundation for current efforts.

Discussions with preceptors provided some feedback about the practical experience. One preceptor stated that she'd like to see more recognition for student contributions through internships. Given that the MS is considered a professional degree, she said that there could be greater recognition of students' critical involvement in and impact on agencies in which they've interned. Examples provided included students who have created and piloted curricula and other materials that are still used today in the agencies and the impact a student had helping implement the Affordable Care Act by enrolling individuals from underserved populations in the healthcare marketplace.

Agencies that have provided practical experiences in the past three years include Mount Sinai Adolescent Center, East and Central Harlem District Public Health Office, YMCA of Greater New York, Healthy and

Ready to Learn Initiative Children's Health Fund, the Emma L. Bowen Community Service Center, Latino Commissions on AIDS and the New York City Department of Health and Mental Hygiene. Waivers are not allowed for the fieldwork assignment, and no waivers have been issued in the past three years.

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. Students completing the MS in community health education are expected to complete two requirements as their culminating experience. First, the culminating project requires students to integrate knowledge and skills acquired through their matriculation in the program. The culminating project may address health education or promotion topics that range from curriculum development to program implementation to analysis of health data and grant writing. The culminating project is typically 25 pages in length and must thoroughly review the literature on a case study or emergent model of intervention. The project must be formally approved by the student's advisor. Students may incorporate their culminating project within the fieldwork experience. Thus far, students who have finished the MS degree program have completed culminating projects in the form of research papers.

Procedures for selecting and completing a culminating project involve repeated interaction with a program advisor. At the time of a student's mid-program evaluation, the student's advisor begins a discussion about potential culminating project topics. Students are encouraged to bring project outlines forward and advisors will recommend modifications until there is agreement about a final outline. Practicum activities often serve as a jump start to selecting a project topic. Faculty expressed preference for students to identify projects that will lead to peer-reviewed publications. Drafts of the completed project are reviewed by the faculty advisor before a final version is accepted; normally, one to three revisions occur. At the completion of the culminating project, the student's advisor scores the project on a scale of excellent, very good, good, fair, poor or very poor and offers brief commentary about the project's quality and relevance to the field.

The second component of the culminating experience is preparation of a capstone portfolio, for which students compile examples of work completed in required courses. This compilation, digitally prepared, includes an introductory overview of the portfolio's contents, course competency evaluations associated with every required program course, a copy of the student's culminating project, a copy of the advisor's evaluation of the culminating project and a synthesizing summary that reflects what students perceive their accomplishments to be within the prescribed course of study.

The commentary pertains to the program's emphasis on work leading to peer-reviewed publications over the integration of practice in student work. While it is appropriate to expect that the culminating project will reflect high-quality work by students, the program may be limiting itself and its students with a reduced

focus on projects oriented to the health education profession. The opportunity to implement programs that can impact the health of communities, regardless of the innovative or generalizable nature of the project, should not be undervalued.

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. Using requirements from CEPH and other accrediting bodies, the program generated and adopted a list of five core competencies that are consistent with the public health core knowledge areas. In addition to the core competencies, the program has 11 concentration-specific competencies that are organized into domain areas. Examples of these domains are behavioral and social science, planning and administration, system and critical thinking, ethical principles in research, professional identity, collaboration and leadership, health inequities and advocacy. Competencies are at a level appropriate to the degree, demonstrating breadth and depth of the community health education field in which students are required to apply skills.

The program created a CEPH Accreditation Taskforce in summer 2012 to develop program competencies. Program faculty reviewed the taskforce's list and then forwarded it to the Joint Committee for formal approval. The Joint Committee voted at its inaugural meeting in fall 2013 to approve the core and concentration competencies.

Relevance of competencies is monitored by the program director and primary faculty annually through curriculum revisions as well as through recommendations and feedback solicited from preceptors, alumni and the Joint Committee. There have been minor changes to competencies since 2013, including reclassifying a domain from law and ethics to ethical principles. The most recent change, which revised language under the health inequalities competency domain, came in summer 2015 as a result of the CEPH-sponsored Accreditation Orientation Workshop. All changes are approved by the faculty and the Joint Committee.

Competencies are made available to students via course syllabi, the annual *Health Ed News* newsletter, student guidebook and prospectus booklet. During the on site meeting, site visitors found students to be well informed of the program competencies. Students stated that during the first week of classes, faculty members explain the competencies that students are expected to demonstrate. Site visitors verified that course syllabi list and describe program competencies and provide clear links to learning 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 met. The program uses numerous procedures to assess student demonstration of competencies. These processes include grades, mid-point evaluation, the fieldwork experience, the course competency evaluation project, the culminating project and the capstone portfolio.

Students enrolled in the program must maintain a minimum GPA of 3.0 and achieve a grade of B or higher in all of the required courses. Faculty are asked to notify the program director if any student does not perform to the level that is required. At the end of each semester, as a second way of verifying grades, the academic assistant also enters final grades into the student database and alerts the director if a student does not earn at least a B. In such cases, the program director works with the student to identify the type of assistance that would be most beneficial.

The program mid-point evaluation is a formal review of student progress between the individual and his or her advisor. Typically completed after half of the credits have been earned, the faculty advisor reviews the student's program of study and rates the academic progress. The student's progress is rated on a scale of 1-5 with 1 as very poor progress and 5 as excellent progress. The faculty advisor must sign off on the form before the student can continue with courses in the program. The program director reaches out to students to provide assistance if they are making fair, poor or very poor progress.

The course competency evaluation project is part of each required course in the department. This project provides students with the opportunity to demonstrate the degree to which they achieved the program competencies. Students answer key questions that assess the degree of achievement of program competencies covered in each specific course. The course instructor scores the individual's response using a standard rubric. Each syllabus states the competencies that the course addresses as well as the accompanying scoring rubric so students know what they are expected to demonstrate. At the end of each semester, the course instructor sends a data summary to the program director who then reviews it and monitors students' progress in the program.

The program director reviews advisors' evaluations of students' culminating projects and the extent to which students are achieving set goals in the culminating experience project. This is the opportunity for students to demonstrate skills, competencies and integration of knowledge.

The final assessment related to competency attainment is a three-step review of the capstone portfolio. A three-month process, beginning in the final semester of the student's program, entails an evaluation of the

compilation of the student's work while enrolled in the program. The program director uses a standard form and presents a summative evaluation of the students' achievement of the program competencies. This is a required clearance for graduation.

The program has graduated three cohorts since 2012-2013. In accordance with Teachers College policy, the maximum time to graduate with a master's degree is five years. The graduation rates were 71%, 60% and 75% for academic years 2012-2013, 2013-2014 and 2014-2015, respectively. Two students remain in the program as part-time students in the 2013-2014 cohort, but the site visit team was informed that one is set to graduate in spring 2017, which would increase the cohort's graduation rate to 80%.

The program reports successful post-graduation outcomes. The program sent a post-graduation employment survey in September 2016 that surveyed all of the program's graduates (starting from the 2012-2013 cohort) and received a 100% response rate (n=11). Ten graduates reported being employed; one program graduate reported continuing education as the post-graduation destination.

The program does not have any data on certification rates for national exams such as CHES and MCHES. The program has developed an alumni survey that includes questions pertaining to certification exams. Program leaders told site visitors they intend to send the alumni survey in October 2017.

The program solicited feedback from employers on program graduates in September 2016. With an 83% response rate, employers generally rated the program's graduates as "excellent" for both "preparation, education and training to function in their position as an employee" and "the overall rating of our MS graduates as employees." Employers did not identify any weaknesses among the graduates they employ.

Constituent input is important not only in the process of evaluating student competencies and skill sets, but also for the curriculum as a whole. The program's initial effort has yielded promising feedback with a high response rate; these results are a useful foundation for ongoing data collection processes. The program states it intends to collect employer and alumni data on an annual basis moving forward.

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 program and the college are committed to a robust research program that supports high quality inquiry and dissemination of new knowledge that has the potential to affect the health of communities. The focus of this work—human development across the life span—is consistent with a broad public health agenda.

The Teachers College policies for research and scholarly growth guide the research activities of the program's faculty. All faculty are encouraged and expected to obtain extramural grant funding. Faculty have strong incentives to pursue a vigorous extramural research program. Promotion and tenure demand evidence of research performance that encompasses an ability to secure extramural grants and contracts. Faculty have opportunities to supplement their incomes through grants and contracts. Additionally, a revenue-sharing formula returns 1.5% of indirect costs from grants and/or contracts to faculty for discretionary spending, along with an equivalent percentage to their home department for miscellaneous departmental expenditures.

The college's Office of Sponsored Programs assists faculty in pre- and post-award activities. Established faculty who secure extramural support may purchase release time from teaching to work on funded projects while more junior faculty are provided course release time to develop a research agenda necessary for applying for internal and external funding. Faculty also receive professional development funds for travel, organizational membership and other professional development activities. Additional funding for research-related activities can be obtained through direct negotiation by faculty with the Provost's Office. Research by program faculty includes collaborations with local, state, national and international agencies.

Consistent with Teachers College policies, program faculty are permitted to spend the equivalent of one day per week on non-teaching activities. This time may be used for unfunded research, meetings, travel and training.

Junior faculty are supported in research through senior faculty mentoring and annual performance review by the program director and department chair. The program's three tenured faculty members have substantial experience obtaining extramural research funding.

At the time of the site visit, reviewers noted that opportunities for MS student participation in faculty-led research projects have been limited. On site discussions with students and alumni indicated that research

opportunities (paid or unpaid) are limited and difficult to obtain. Students noted that there is no mechanism through the Program Office for soliciting student participants, but rather, students must proactively seek out opportunities themselves. Faculty who met with site visitors confirmed this reality and expressed their disappointment that more cannot be done with students given resource limits on most projects. Faculty also stated they prefer to use EdD students as opposed to MS students with research projects due to the longer length of time a doctoral student is enrolled at the college. More recently, the program has identified new research opportunities for MS students as part of workforce development plans. The program does try to involve students in research with required coursework such as Principles of Epidemiology in Health Promotion, Introduction to Biostatistics for Community Health Educators and the capstone. Two student papers that are a product of the culminating experience have been accepted in peer-reviewed journals.

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. Service activities are fully supported by the department and the college, and service to the community is included in the definition of institutional service. Faculty are expected to provide expertise as journal editorial board members, speakers, workshop trainers and keynote presenters. Faculty can use their one non-teaching day to engage in service activities.

The self-study describes 21 service activities over the past three years that involved primary faculty members. Of the 21 activities, eight were ongoing at the time of the site visit. These activities represent service to state, local and international agencies. One faculty member is recognized for his editorial board service and has served as a scholar in France, Germany and Iceland; he was also a Fulbright Scholar. Another primary faculty member is recognized for his work with the American Cancer Society and his work on adolescent and school health. The program director is known for her service activities related to health equity, motivational interviewing, mindfulness and health and psychological well being.

The promotion and tenure manual does not quantify the amount of service required for promotion and tenure. Faculty assured the site visit team that service is absolutely expected and required for promotion and tenure. One faculty member currently serves on the college's Promotion and Tenure Committee. In his role on the committee, he stated that there is not an expectation that all faculty will perform service at the same level, but the expectation is that service has to be substantive.

Students informed site visitors that there are sufficient opportunities for participation in service activities. Students receive announcements through emails from the program and from faculty. The bulletin board by the program's offices is also updated with current service opportunities.

3.3 Workforce Development.

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

This criterion is partially met. For seven years, the program hosted an annual health disparities conference that brought together recognized and respected leaders working to eliminate health disparities. From 2013 to 2015, the conference grew from 305 to 460 to 1,215 attendees for the keynote address and from 215 to 230 to 270 attendees for the remainder of the conference. The conference provided continuing education contact hours for 139, 211 and 142 attendees, respectively. However, in September 2015, the provost ended the multicultural conference to reduce the service workload of the program director, who was also the founding conference director. The self-study also expressed the provost's desire that the program offer smaller seminars, conferences and events where students could take on organizational and leadership roles as opposed to the large annual conference. As a result, the program sponsored two continuing education events during the 2015-2016 academic year. The conferences drew more than 225 participants in person and via live webinar, and 13 participants earned continuing education contact hours.

The program has also offered an eight-session colloquia series for the past four years. In the last four years, there were 65, 72, 81 and 59 attendees. Students are encouraged to attend the colloquia series, but it is not required.

The program has collaborated in the past with the New York State Psychological Association Division on Neuropsychology, Pediatric Committee and the Center for Health Equity and Urban Studies Education at Teachers College.

The concern relates to the program's reliance on perceived needs to determine workforce development offerings rather than an assessment of the needs of its target community of practitioners, health educators and public health outreach professionals. The program has primarily relied on feedback provided by conference and webinar evaluation forms, direction and guidance from members of the Joint Committee, review of the National Commission for Health Education Credentialing, Inc.'s seven areas of responsibility and faculty members' own knowledge based on their leadership roles in the community health education field. While these mechanisms may be used to gather feedback on perceived needs, they may not accurately capture the needs of the target workforce. The Joint Committee does provide important feedback; however, the majority of committee members are individuals from academic settings whose opinions may not reflect the needs of community health education practitioners.

A new workforce development policy for determining the needs and evaluation offerings has been developed and is subject to review and vote of approval by the Joint Committee members in December 2017. The new policy includes conducting telephone survey research with past, current, and future fieldwork

preceptors and supervisors on their perceptions of current workforce development needs. A program sponsored Facebook community for health education and public health education is expected to be launched by the program in 2017-2018. This community would provide online workforce development for health education specialist, public health professions and community health workers. Faculty, students, alumni and prior conference participants are expected to be involved in the community.

The program does not offer any certificate or other non-degree offerings.

4.0 FACULTY, STAFF AND STUDENTS.

4.1 Faculty Qualifications.

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

This criterion is met. The faculty complement is well qualified to support the program's mission, goals and objectives for the MS in community health education. By virtue of the primary faculty's training, experience and research perspectives, they address topics of epidemiology, biostatistics, environmental health and behavioral and social sciences in their teaching responsibilities. Primary faculty members hold doctoral degrees in health education, psychology and applied statistics. All hold appointments within the Department of Health and Behavior Studies. Additional faculty members hold doctoral degrees in health education and are well qualified to teach in the areas of health services administration and social and behavioral sciences.

Non-primary faculty integrate perspectives from the field of practice by also serving in leadership positions within the community. These individuals provide not only expertise in the area of community health education, but also increase a students' network for employment opportunities after graduation.

The program has identified four performance measures to assess faculty qualification: 1) core faculty will author at least two publications annually; 2) receiving teacher ratings in the good and very good range; 3) engage in research projects that enrich their teaching; and 4) engage in service projects that enrich their teaching. All but one area was met in the last three years. The first measure of faculty qualification was not met in the academic year 2014-2015.

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. Teachers College has an extensive handbook of policies and procedures regarding organization and administration of academic units. The self-study outlines a number of faculty development and support opportunities. Financial support exists for faculty professional development that amounts to

\$1,200 for non-tenured and \$1,000 for tenured faculty per year. Separate professional development awards are available through the Provost's Office. Non-tenured faculty may apply for an additional \$2,500 to support their research efforts.

A range of faculty development programs, such as new faculty orientation and faculty workshops, are provided through the college. A Faculty Development Advisory Committee is in charge of mentoring plans for all pre-tenured faculty members. These new faculty members also have the option to receive a one-course release during the first year, which is intended to support their professional development. The department chair has discretion to make additional modifications to the teaching load of junior faculty to support their career development efforts. Sabbatical leave is available for program faculty.

Performance evaluation of faculty is governed by the college's guidelines on appointment and tenure. Standing committees on appointment and tenure are responsible for review of candidates at appropriate intervals. Annual review of program faculty is the responsibility of the department chair and program director. The annual faculty reports are prepared and shared with the provost.

The policy on course evaluations is included in the Faculty Handbook. The college routinely collects online evaluations of all lectures or presentations with five or more students. The course evaluation process is managed centrally by the college's Office of Institutional Studies. Results are shared with faculty members and department chairs.

4.3 Student Recruitment and Admissions.

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

This criterion is met. The program has been recruiting students for the MS in community health education for five years. Initial recruitment efforts focused on students considering transfers from other graduate programs within the college and from Columbia University's Mailman School of Public Health. More recent efforts have sought candidates directly through program marketing. The program developed an extensive prospectus that details program goals, employment opportunities and job placements. This prospectus is available for prospective students and applicants to review. The program director maintains major responsibility for responding to program inquiries. The program director also meets regularly with the college's Admissions Office to coordinate recruitment events and individual inquiries.

The program requires an applicant to hold or be in the process of obtaining a baccalaureate degree. Applicants are also responsible for submitting a statement of purpose, official transcripts, letters of reference, a resume and standardized tests (TOEFL and/or GRE). The program indicates that it prioritizes

applications of students with undergraduate training in specific fields of study such as social and behavioral studies, education, nursing, public health, social work or allied health sciences. The qualitative expectations regarding the adequacy and relevance of an applicant's previous academic preparation, relevance of professional experience and potential to benefit from additional graduate study are noted; however, there are not specific criteria for evaluating those expectations.

The structure and process for reviewing applications was recently approved by the faculty and added to the 2017 Guidebook to increase transparency and to inform students. An additional review and vote for approval by the Joint Committee will occur in December 2017.

The program has an outcome measure to attract a qualified pool of applicants through recruitment activities and the target is to attract at least seven qualified applicants. The program has met this measure in the last four years and greatly exceeded it in academic year 2016-2017 by receiving 15 applications from potential students. The program also has a target to enroll at least six new students per year in the public health program. This target has not been met until the most recent academic year, in which the program enrolled 11 new students. The last outcome measure is to retain academically and professionally promising students and set a target of retaining 100% of its enrolled students. This goal has been met in 2013-2014 and 2014-2015, but was not met in 2015-2016.

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. All primary faculty members have advising responsibilities for enrolled students. The program complies with the college's policies and guidelines on advising.

Faculty members are required to have regular office hours each semester that the faculty member is teaching, and a minimum of three hours must be split over two days. Adjunct faculty must also have office hours, equivalent to one hour for every course taught. Faculty members are expected to provide advisement on campus during orientation, and advisement opportunities must be available during the change-of-program period, which is when students can transfer to and from programs within the college.

The program director assigns students to a faculty advisor. Advising services include group advising, individual advising, advisor assessment of student performance, course-related advising and mid-point advising to monitor student progress through the program. Two weeks before each semester, an email is sent to students encouraging them to meet with their advisor prior to registering for classes.

Advisors also serve as mentors for students. Career counseling for students and alumni is available from faculty advisors as well as from Teachers College Career Services. The program has an e-list tailored

specifically to the field of community health educators and college career services offers one-on-one meetings, career document reviews, mock interviews, networking groups, workshops, career fairs and job postings.

Students are able to provide feedback on their advisors directly to their advisor, program director, department chair, student representatives on the MS Student Committee or via the program exit survey. If students are unhappy with their advisor, they may request a change.

The program provides data on student satisfaction with advising and career counseling. An undated exit survey in the program's resource file showed 90% of students responded positively to receiving adequate faculty advising and mentoring support to complete their studies in a timely fashion. A spring 2016 Community Health Education Enrolled Student Survey also provided data on student satisfaction related to advising. Even though the sample size was small (n=4), 50% of the respondents rated academic advising as excellent, 25% as good and 25% as poor. Of the four respondents, 75% were either satisfied or highly satisfied with the availability of advisors. The program does not have any plans to make changes to the current advising procedures.

The policies and procedures for student complaints are available in the Teacher's College Policy Library and are outlined in the Teachers College Grievance Procedures. Links to the policy are also found in the academic catalog and the student guidebook. The policies and procedures may differ depending on the complaint with available formal and informal resolution procedures. Students in the MS program have not filed any formal complaints in the past three years.

During the site visit, students expressed satisfaction with their faculty advisors and expressed appreciation for the personal attention they receive from faculty. Students said that advisors take the time to get to know them and their interests. Students also expressed gratitude for the breadth of knowledge and experience, areas of interest and exposure in the field that the faculty bring to the program.

Agenda

COUNCIL ON EDUCATION FOR PUBLIC HEALTH ACCREDITATION SITE VISIT

Teachers College, Columbia University Public Health Program

March 6-7, 2017

Monday, March 6, 2017

- 8:30 am Request for Additional Documents
Barbara Wallace
- 8:45 am Executive Session
- 9:45 am Meeting with Program and Department Administration
Barbara Wallace
Dolores Perin
Steven Peverly
Omar Mayyasi
Katie Embree
- 10:45 am Break
- 11:05 am Meeting with Faculty Related to Curriculum and Degree Programs
Barbara Wallace
John Allegante
Charles Basch
Sonali Rajan
Ray Marks
Nicole Harris-Hollingsworth
- 12:00 pm Break
- 12:15 pm Lunch with Students
Rosa Arenas
Elizabeth Bonomo
Alberto Jacinto
Mickelder Kercy
Megan Mahedy
Rachel Paikoff
Jessica Rebaza
Sacha Parchment
Chandra Simmons
Vanna Som
Sabena Soman
Laura Williams
- 1:15 pm Break
- 1:30 pm Meeting with Faculty Related to Research, Service, Workforce Development, Faculty Issues
Barbara Wallace
John Allegante
Charles Basch
Sonali Rajan
- 2:30 pm Resource File Review/Executive Session
- 4:00 pm Meeting with Alumni, Community Representatives, Preceptors
Alejandrina Canelo-Villafana
Stephane Labossiere
Haley Nelson
Nicole Harris-Hollingsworth
Katherine Roberts
Naasolo Tetley

Millicent Freeman
Mara Minguez
Kelly Moltzen
Tanya Pagan Raggio
Wenimo Okoya

5:00 pm Adjourn

Tuesday, March 7, 2017

8:30 am Meeting with Institutional Academic Leadership
Thomas James
Katie Embree
Alexandria Gribovskaya

9:15 am Executive Session and Report Preparation

12:30 pm Exit Briefing
Barbara Wallace
John Allegrante
Sonali Rajan
Charles Basch
Alexandria Gribovskaya