

**WSU Five-Year Program Review
Self-Study**

Cover Page

Department/Program: Health Promotion and Human Performance/Health Promotion

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Introductory Statement

The Health Promotion Program (HPP) is a robust program serving thousands of students each academic year (e.g., >400 declared majors and minors, >600 students taking HPP general education courses). The program is the largest contributor of school credit hours (SCHs) in the Department of Health Promotion and Human Performance (HPPH) and the enrollment trends, based on data for the last several years and market demand for HPP students, are expected to increase for the foreseeable future. Multiple indicators (e.g., assessment data, student completion rates, time needed to earn degrees, student exit surveys, pass rates on national certification exams) demonstrate that HPP is effective and efficient in advancing its program mission and goals.

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Standard A: Mission Statement

HPP Mission

The Health Promotion Program (HPP) primarily serves Weber State University (WSU), and other stakeholders (e.g., community partners, employers, etc.), by providing academic courses (a) to prepare students to work as health education specialists in health-related settings (e.g., hospitals, community health agencies, worksites, schools, etc.), and (b) to assist students to acquire knowledge, attitudes, and skills needed to adopt and maintain health behaviors.

HPP Roles

The academic courses for the Health Promotion Program include general education (e.g., healthy lifestyles) and varied content/topic courses (e.g., stress management, human sexuality, adolescent health issues, etc.) and, in particular, professional-preparation courses (e.g., program planning, research methods, methods in health promotion, etc.). The academic program offers a bachelor's degree in health promotion (BS, Health Promotion), a minor in health promotion, and an emphasis area to support the Bachelor of Integrated Studies (BIS) program.

HPP Goal 1: Provide students with a foundation in all Seven Areas of Responsibility for Health Education Specialists.

To advance the HPP mission and identified roles, the program has identified three primary goals. The first is to provide students with academic training based on the standards of professional preparation and practice in health education/promotion forwarded by the National Commission for Health Education Credentialing (NCHEC). Through decades of research (e.g., Competencies Update Project, 2004; Health Education Job Analysis, 2010; Health Education Specialist Practice Analysis, 2015)¹ NCHEC has scientifically validated the "Seven Areas of Responsibility" for the contemporary practice of entry- and advanced-level health education specialists:

¹ A review of the research to establish the roles and competencies needed to practice health education can be found at <https://www.nchec.org/responsibilities-and-competencies>.

1. **Responsibility 1:** Assess needs, resources, and capacity for health education/promotion
2. **Responsibility 2:** Plan health education/promotion
3. **Responsibility 3:** Implement health education promotion
4. **Responsibility 4:** Conduct evaluation and research related to health education/promotion
5. **Responsibility 5:** Administer and manage health education/promotion
6. **Responsibility 6:** Serve as a health education/promotion resource person
7. **Responsibility 7:** Communicate, promote, and advocate for health, health education/promotion, and the profession.

The Seven Areas of Responsibility promoted by NCHEC are deemed the essential elements for professional preparation (i.e., academic curriculum), credentialing (i.e., to become a Certified Health Education Specialist; CHES), and professional development of all health education specialists regardless of employment setting (e.g., health care, school, worksite, etc.). Consistent with NCHEC standards, the WSU Health Promotion Program has developed student-learning outcomes to prepare students/graduates to perform skills in each of the Seven Areas of Responsibility (see Standards B and C).

HPP Goal 2: Provide a Social Science General Education (SSGE) course (i.e., HLTH 1030, Healthy Lifestyles) for the University.

The second goal of HPP is to provide WSU with a general education course, HLTH 1030 (Healthy Lifestyles), that counts as a social science elective for students. The standards for this course are prescribed by the University² and include the following learning outcomes:

² The standards for general education courses in the social science breadth can be found at <https://www.weber.edu/GenEd/default.html>

- 1. Interactions between individuals and society:** Students will describe how individuals and groups influence and are influenced by social contexts, institutions, physical environments and/or global process.
- 2. Application of concepts, theories, and methods:** Students will apply basic social science concepts, theories, and/or methods to a particular issue and identify factors that influence change.
- 3. Diverse perspectives:** Students will identify an argument about a social phenomenon and understand alternative explanations.

HPP Goal 3: Provide students with meaningful and mutually-beneficial engagements with community partners.

The third goal for HPP is to provide students with supervised internship experiences that benefit both the student, in terms of professional growth and work experience, and the organization in regard to student assistance with key tasks and services. A minimum of 180 hours of supervised internship experience is required for all HPP majors. To support this goal, HPP has a dedicated internship coordinator (a) to assist students to locate and secure internship opportunities, (b) to supervise students during field experiences, and (c) to evaluate the quality of internship sites, supervisors, and student experiences.

HPP Enrollment

The various roles and goals of HPP result in approximately 463 students currently enrolled and declared with either a major (n ≅ 345), minor (n ≅ 66), or BIS emphasis (n ≅ 52) in Health Promotion. Consequently, student enrollments in HPP result in numerous degrees awarded each year for the major (n ≅ 52), minor (n ≅ 19), and BIS emphasis (n ≅ 13) in Health Promotion. *(The aforementioned data were compiled using both ARGOS and the WSU Program Review Dashboard.)*³

³ Data compiled using the WSU Tableau Dashboards available at <https://portalapps.weber.edu/tableaudashboards/>

HPP produces more than 20 percent of the graduates from the College of Education (COE) each year. HPP produces, on average, more than 8000 school credit hours (SCHs) annually—approximately 56% of the SCHs for the Department of Health Promotion and Human Performance (HPPH), and 20% of the SCHs generated through the College of Education (COE). Of the SCHs generated by HPP, approximately one-third of these are the result of a general education offering, HLTH 1030 (Healthy Lifestyles).⁴ Appendix A identifies the SCHs, declared majors, and graduates for HPP for each of the last five years. Given the popularity of the HLTH 1030 course, it is offered both online and face-to-face across multiple WSU campuses (e.g., Ogden, Davis, Morgan, Roy).

Support for Other Programs

In addition to declared majors and minors, HPP coursework is utilized by 14 other WSU programs, most notably Public Health, Public Relations, Nutrition Education, and Social Work. In particular, seven HPP courses are cross referenced with the Health Administrative Services (HAS) program to support students in this academic unit to gain necessary knowledge and skills for multiple HAS degrees and emphases.

Demand Trends

The number of HPP majors has increased from 61 in 2009 to 182 in 2018—a nearly 300% increase in students, and the greatest average annual growth in the Department of Health Promotion and Human Performance (HPPH).⁴ The SCHs generated through HPP have remained steady over the last seven years—between 8293 and 10,185 annually—and growth is only limited by instructional capacity (i.e., number of HPP faculty). The “student pipeline” clearly indicates that the number of incoming students exceeds that of outgoing students and has resulted in steady growth for HPP.

⁴ Data compiled using the WSU Tableau Dashboards available at <https://portalapps.weber.edu/tableaudashboards/>

National Trends

The employment opportunities in health education/promotion are expected to increase over the next several years and, consequently, student demand for HPP courses will increase. In particular, according to the United States Department of Labor, Bureau of Labor Statistics,⁵ the employment of health educators and community health workers is expected to increase 21 percent from 2012 until 2022. This projected growth is faster than the average for all occupations and suggests the WSU HPP will remain a strong and sought-after program for years to come.

Increased Instructional Capacity

The primary challenge of HPP is the high student demand for HPP courses, relative to the number of HPP faculty. The average student-to-teacher ratio for HPP courses is 30:1. Relative to other programs on campus, and across the state, HPP could use additional faculty to assist in maintaining a high-quality curriculum and not overburden HPP faculty with teaching responsibilities (e.g., grading) disproportionate to other WSU faculty (e.g., the average student-to-teacher ratio for the Department of HPHP is 18:1, and the ratio for the University is 22:1).⁶

Conclusions

Overall HPP is a robust program serving thousands of students each academic year and assisting in degree achievement for multiple programs. HPP is currently the largest contributor of SCHs in the Department of HPHP and the enrollment trends, based on data for the last several years and market demand for health promotion students (e.g., BLS statistics), are expected to continue to increase for the foreseeable future.

⁵ Labor statistics retrieved from <http://www.bls.gov/ooh/community-and-social-service/health-educators.htm>

⁶ Data compiled using the WSU Tableau Dashboards available at <https://portalapps.weber.edu/tableaudashboards/>

Standard B: Curriculum

Course Offerings and Degrees

To pursue the program mission and goals (see Standard A), the Health Promotion Program (HPP) offers numerous courses and degrees. In particular, completion of prescribed HPP courses can lead to attainment of a major (BS, Health Promotion), minor (Health Promotion--Community, School, Worksite, Clinical), or Bachelor of Integrated Studies (BIS) emphasis area in Health Promotion. The required courses for the Health Promotion major are outlined in Table 1. The minor and BIS emphasis require the same set of courses (i.e., HLTH 1030, HLTH 3000, HLTH 4013, and HLTH 4150), and then allow students to select electives from a list of approved courses (e.g., HLTH 3400, HLTH 3500, HLTH 4250, etc.).

National Standards

The required courses and curriculum for the aforementioned major, minor, and emphasis area are aligned to national standards (e.g., endorsed by the National Commission for Health Education Credentialing/NCHEC) for the field of health education/promotion (see Standard A),⁷ and course assessments based on these standards are infused into every required course in HPP. This allows students to perform relevant skills throughout their program of study, and also allows instructors to evaluate students on readiness for employment as entry-level health education/promotion specialists on multiple occasions. Table 2 contains the curriculum grid used by HPP to document where key professional responsibilities are introduced, emphasized and assessed comprehensively.

⁷ A review of the scientifically-validated responsibilities and competencies needed to practice health education can be found at <https://www.nche.org/responsibilities-and-competencies>.

Table 1

Curriculum Map for the Health Promotion Major

Prerequisite Courses - Required (6-7 credit hours)

- HLTH 1030 SS Healthy Lifestyles (3)
- HTHS 1110 LS Integrated Human Anatomy and Physiology I (4) or ZOOL 1020 LS Human Biology (3)

Core Courses - Required (32 credit hours)

- HLTH 3000 Foundations of Health Promotion (3)
- HLTH 3200* Methods in Health Education (3)
- HLTH 4013 Health Promotion Research & Assessment (3)
- HLTH 4150 Needs Assessment & Planning Health Promotion Programs (4)
- HLTH 4860 Field Experience (2-6) (3 credit hours required)
- HLTH 4990 Senior Seminar (1)
- HAS 3000 The Health Care System (3)
- HAS 3150 Community Health Agencies & Services (3)
- HAS 3190 DV Cultural Diversity in Patient Education (3) or NUTR 3420 DV Multicultural Health & Nutrition (3)
- HAS 3230 Health Communication (3)
- HIM 3200** Epidemiology & Biostatistics (3)

**HAS 4410 or 4420 may be substituted for HLTH 3200.*

***GERT 3600 may be substituted for HIM 3200.*

Professional Block

Minimum of 9 credit hours must be approved by advisor. These courses may also be used as program electives if not used for the professional block.

- HLTH 2400 Mind/Body Wellness (3)
- HLTH 2700 Consumer Health (3)
- HLTH 3100 Applications of Technology in Health Promotion (3)
- HLTH 3160 Principles of Health Behavior (3)
- HAS 3020 Health Care Marketing (3)
- HAS 3260 Health Care Administration & Supervisory Theory (3)
- HAS 4320 Health Care Economics & Politics (3)

Table Continued on Next Page...

Table 1 Continued

Curriculum Map for the Health Promotion Major

Program Elective Courses (select any 15 credit hours from the following list)

- AT 3600 Ergonomics for Health & Safety (2)
 - HLTH 1110 Stress Management (3)
 - HLTH 1300 First Aid: Responding to Emergencies (2)
 - HLTH 2300 Emergency Response (3)
 - HLTH 3050 School Health Program (3)
 - HLTH 3400 Substance Abuse Prevention (3)
 - HLTH 3500 Human Sexuality (3)
 - HLTH 4220 Women's Health Issues (3)
 - HLTH 4250 Contemporary Health Issues of Adolescents (2)
 - HLTH 4700 Wellness Coaching (3)
 - NUTR 3320 Health/Nutrition in the Older Adult (3)
 - HLTH 4700 Wellness Coaching (3)
 - HLTH 4800 Individual Projects (1-3)
 - HLTH 4860 Field Experience (1-6) (3 credit hours required)
 - HLTH 4920 Short Courses, Workshops, Institutes & Special Programs (1-4)
 - NUTR 1020 LS Science & Application of Human Nutrition (3)
 - HAS 3240 Human Resource Development in Health Care (3)
 - HAS 4400 Legal & Ethical Aspects of Health Administration (3)
 - HAS 4410* Clinical Instructional Design & Evaluation (3)
 - HAS 4420* Clinical Instructional Skills (3)
 - HTHS 1101 Medical Terminology (2)
 - HTHS 2230 Introductory Pathophysiology (3)
 - GERT 3000 Death & Dying (3)
 - NUTR 2320 Food Values, Diet Design & Health (3)
 - NUTR 4420 Nutrition & Fitness (3)
 - PEP 2300 Health/Fitness Evaluation and Exercise Prescription (3)
-

Note. Graduates of the program are eligible to sit for the Certified Health Education Specialist (CHES) exam as long as they have completed courses in all Seven Areas of Responsibility. (Go to NCHEC.org for more information).

Table 2*Competency Grid for the Health Promotion Major*

| Required Courses | | NCHEC Area of Responsibility* | | | | | | |
|------------------|-----------------------------------|-------------------------------|---|---|---|---|---|---|
| Prefix | Title | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| HLTH 3000 | Foundations of Health Promotion | 2 | 1 | 1 | 1 | 1 | 1 | 2 |
| HLTH 3200 | Methods of Health Education | 2 | 1 | 3 | 1 | 1 | 1 | 2 |
| HLTH 4013 | Health Promotion Research | 2 | 1 | 1 | 3 | 1 | 2 | 1 |
| HLTH 4150 | Needs Assessment and Planning | 3 | 3 | 2 | 2 | 2 | 2 | 2 |
| HLTH 4990 | Senior Seminar | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| HAS 3000 | Health Care System | 1 | 1 | 1 | 1 | 1 | 2 | 1 |
| HAS 3150 | Community Health Agencies | 2 | 2 | 1 | 1 | 1 | 2 | 1 |
| HAS 3190 | Cultural Diversity in Patient Ed. | 2 | 1 | 1 | 1 | 1 | 2 | 2 |
| HAS 3230 | Health Communication | 2 | 1 | 1 | 1 | 3 | 1 | 2 |
| HAS 4410 | Clinical Instructional Design | 1 | 3 | 2 | 1 | 1 | 1 | 2 |
| HIM 3200 | Epidemiology and Biostatistics | 1 | 0 | 0 | 3 | 1 | 1 | 1 |
| NUTR 3420 | Multicultural Health & Nutrition | 2 | 1 | 1 | 1 | 0 | 1 | 1 |

***Student Learning Outcome Rating Key:** 0 = not addressed; 1 = introduced, minor emphasis; 2 = emphasized, moderate importance; 3 = assessed comprehensively, major emphasis

***Outcomes Key:** Responsibility 1: Assess needs, resources, and capacity for health education/promotion; Responsibility 2: Plan health education/promotion; Responsibility 3: Implement health education/promotion; Responsibility 4: Conduct evaluation and research related to health education/promotion; Responsibility 5: Administer and manage health education/promotion; Responsibility 6: Serve as a health education/promotion resource person; Responsibility 7: Communicate, promote, and advocate for health, health education/promotion, and the profession.

Notes. HLTH 4860 (Field Experience) is not on the curriculum map, as the experience (and the competencies covered within it) varies significantly from student to student. There are specific objectives and measures associated with HLTH 4860 represented in the assessment plan (under HPP Goal 3).

Curriculum Assessment and Refinement

To ensure that the current curriculum results in appropriate student learning outcomes, assessment data is gathered every semester and evaluated annually. The collection of assessment data is discussed in detail in the subsequent section of this document (For a review, see Standard C, Appendices G-H). In general, the HPP annual assessment data is used to inform curriculum changes, and refine instructional strategies used by HPP faculty. In particular, HPP program faculty continue to examine individual courses and the entire curriculum to ensure that student learning outcomes focus on national standards (i.e., responsibilities and competencies verified by the National Commission for Health Education Credentialing/NCHEC). The curriculum map and assessment grid are reviewed annually to determine the degree to which each course within the curriculum is addressing NCHEC standards. This information is used to validate curricular strengths and identify potential ways in which the curriculum may be further enhanced so that students are equipped with needed professional competencies.

Course Rotation and Scheduling

To permit students to meet the requirements for the various HPP degrees (e.g., BS, minor, BIS emphasis), every required course is offered multiple times each academic year. Elective courses also are offered multiple times each year to allow students to progress toward their degrees in a timely manner. To accommodate students further, HPP courses are offered in multiple formats (e.g., online, face-to-face, independent study/self-paced) and on several campuses (e.g., WSU Main, WSU Davis, WSU West).⁸ The annual schedule for course offerings is outlined in Table 3.

⁸ Additional information and details regarding online offerings and satellite campuses can be found online at <http://departments.weber.edu/ec/default.asp>.

Table 3*Course Offerings by Academic Term and Format*

| Course Prefix | Course Name | Credits | Terms Offered | | |
|---------------|---|---------|---------------|------|----------|
| | | | Summer | Fall | Spring |
| HLTH SS1030 | Healthy Lifestyles | 3 | X/OL | X/OL | X/OL/IND |
| HLTH 2400 | Mind/Body Wellness | 3 | X | X | X |
| HLTH 2700 | Consumer Health | 3 | OL | OL | OL |
| HLTH 3000 | Foundations of Health Promotion | 3 | OL | OL | OL |
| HAS 3000 | The Health Care System | 3 | OL | X/OL | X/OL |
| HAS 3020 | Health Care Marketing | 3 | OL | X/OL | X/OL |
| HLTH 3100 | Applications of Technology in Health Promotion | 3 | | | X |
| HAS 3150 | Community and Worksite Health Promotion Programs | 3 | OL | X/OL | X/OL |
| HLTH 3160 | Principles of Health Behavior | 3 | OL | X | |
| HAS DV3190 | Cultural Diversity in Patient Education | 3 | OL | OL | X/IND |
| HLTH 3200 | Methods in Health Education | 3 | OL | X | X |
| HIM 3200 | Epidemiology and Biostatistics | 3 | OL | X/OL | X/OL |
| HAS 3230 | Health Communication | 3 | OL | X/OL | X/OL |
| HAS 3260 | Health Care Administration and Supervisory Theory | 3 | OL | OL | X/IND |
| NUTR DV3420 | Multicultural Health and Nutrition | 3 | OL | X | X/OL |
| HLTH 4013 | Health Promotion Research and Assessment | 3 | OL | OL | OL |
| HLTH 4150 | Needs Assessment and Planning Health Promotion Programs | 4 | OL | OL | OL |
| HAS 4320 | Health Care Economics and Politics | 3 | OL | X/OL | OL |
| HAS 4410 | Clinical Instructional Design and Evaluation | 3 | IND | OL | IND |
| HLTH 4860 | Field Experience | 1-6 | X/DL | X/DL | X/DL |
| HLTH 4990 | Senior Seminar | 1 | OL | X | X |

Notes. X, Face-to-face offering; OL, Online offering; IND, Independent study; DL, Distance learning.

Initiatives

To support student demand for HPP courses, the program has implemented four main initiatives: (a) the provision of both online and face-to-face courses; (b) increased course enrollments for elective courses; (c) offering multiple course sections each semester for several popular health courses (e.g., HLTH 1030, Healthy Lifestyles; HLTH 1110, Stress Management; HLTH 3000, Foundations of Health Promotion; HLTH 3400, Substance Abuse Prevention; HLTH 3500, Human Sexuality); and (d) the hiring of three new faculty members. The aforementioned initiatives have helped to satisfy student interest in HPP courses but enrollments for popular courses still routinely exceed 30 students per section each semester. The new faculty members have enhanced instructional capacity in needed areas (e.g., program planning, substance abuse) but the student-to-faculty ratio in HPP courses (~30:1) still exceeds the averages for the Department of HPHP (18:1) and University (22:1).⁹

Efficiency

Despite high course enrollments, and added instructional burden placed on HPP faculty, the program has been very efficient and productive in multiple areas. For example, the overall median time for students to complete their HPP degrees is 4.95 years—this is better than the averages for both the College of Education (5.30) and University (5.99). Similarly, the median overall hours needed to receive a degree for HPP students is 125—again, better than the times to completion reported by the College of Education (135) and across the University (140). In terms of cost per SCH, HPP also is very efficient with costs on average at \$114.8 (range: \$101–\$126), considerably less (~\$40) than the University average. Moreover, less than 10% of HPP students “stop out” or “switch” degrees, and adequate course completion data indicate 91% of students are, at least, receiving passing grades.⁹

⁹ Data compiled using the WSU Tableau Dashboards available at <https://portalapps.weber.edu/tableaudashboards/>

Conclusions

HPP faculty base instruction on national standards and students are assessed on relevant skills throughout their program of study. HPP has implemented multiple strategies (e.g., increased course enrollments, hiring new faculty, etc.) to satisfy student interests in HPP course work. Multiple indicators (e.g., time needed for degree completion, “stop out” rates, etc.) suggest HPP is highly efficient in program delivery, and that HPP students successfully complete their degrees in suitable amounts of time. Assessment data, discussed next (see Standard C), also indicate that HPP is promoting student success, and is effective in advancing its program goals.

Standard C: Student Learning Outcomes and Assessment

The purpose and aims of HPP highlighted in the program mission and goals (see Standard A), are reflected and evaluated by attainment of the designed learning outcomes for the program. The specific objectives and desired outcomes for each program goal are highlighted in Tables 4-6. As noted earlier (see Standard B), the desired learning outcomes for goal 1 are based on the seven areas of responsibility promoted by NCHEC and deemed the essential elements for professional preparation (i.e., academic curriculum), credentialing (i.e., to become a Certified Health Education Specialist; CHES), and professional development of all health education specialists regardless of employment setting (e.g., health care, school, worksite, community health, etc.).¹⁰ For goal 2, the outcomes are based on the social science standards forwarded by the WSU General Education and Improvement Committee and approved by the WSU Faculty Senate and Utah Board of Regents.¹¹ The outcomes for goal 3 are based on direct measures developed by HPP faculty, and the internship coordinator, to evaluate students on professional competencies, similar to goal 1, aligned with NCHEC standards.

¹⁰ A review of the scientifically-validated responsibilities and competencies needed to practice health education can be found at <https://www.nchec.org/responsibilities-and-competencies>.

¹¹ The standards for general education courses in the social science breadth can be found at <https://www.weber.edu/GenEd/default.html>

Table 4*Learning Objectives for HPP Goal 1*

| No. | Objective |
|-----|--|
| 1 | At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 1: Assess needs, resources, and capacity for health education/promotion. |
| 2 | At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 2: Plan health education/promotion. |
| 3 | At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 3: Implement health education/promotion. |
| 4 | At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 4: Conduct evaluation and research related to health education/promotion. |
| 5 | At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 5: Administer and manage health education/promotion. |
| 6 | At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 6: Serve as a health education/promotion resource person. |
| 7 | At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 7: Communicate, promote, and advocate for health, health education/promotion, and the profession. |

Table 5*Learning Objectives for HPP Goal 2*

| No. | Objective |
|-----|---|
| 1 | By the completion of the SSGE course, students will achieve 70% competency on identified measures related to SSGE Outcome 1: Interactions between individuals and groups. In particular, students will be able to describe how individuals and groups influence and are influenced by social contexts, institutions, physical environments and/or global process. |
| 2 | By the completion of the SSGE course, students will achieve 70% competency on identified measures related to SSGE Outcome 2: Application of concepts, theories, and methods. Specifically, students will apply basic social science concepts, theories, and/or methods to a particular issue and identify factors that influence change. |
| 3 | By the completion of the SSGE course, students will achieve 70% competency on identified measures related to SSGE Outcome 3: Diversity. For instance, students will identify an argument about a social phenomenon and understand alternative explanations. |

Table 6

Learning Objectives for HPP Goal 3

| No. | Objective |
|-----|---|
| 1 | By the time of graduation, 90% of students will complete a mutually-beneficial internship with a community partner. |

HPP Assessment Plan

Assessment data to measure student learning relevant to the program goals (see Standard A) is collected every semester. A variety of direct measures are used to track student learning but, in general, performance-based assignments and competency-based exam questions are the preferred methods used by course instructors. In particular, the standards tool in Chi Tester, and the outcomes tool in Canvas, are used by several instructors to track student learning across semesters and through the health curriculum. Instructors for multiple courses align exam and assignment questions to specific learning objectives using Chi-Tester and/or Canvas to track student performance on selected outcomes both within a single semester and across semesters for multiple course sections. This aggregate data is then used to identify trends and examine program outcomes. The assessment plan and student learning outcomes for the three program goals is contained in Appendix G. The most recent assessment results for HPP can be found in Appendix H, and analysis of findings for the last five years is provided below.¹²

Five-Year Assessment Overview

The assessment data gathered over the last five years indicate that HPP has been very successful in meeting established benchmarks for student learning relevant to the specified program goals. Overall, the expected thresholds or desired benchmarks established by HPP faculty for the three program goals were met for 317 out of 350 measures (i.e., 91%). For the HPP goal to

¹² Annual reports and evidence of learning tables for HPP can be found at https://www.weber.edu/portfolio/hphp_healthpromotion.html

train students in the seven core areas of health education/promotion, 258 out of 288 benchmarks were met (90%). For goal 2, the provision of a general education course in the social sciences, 43 out of 44 benchmarks were met (98%). For goal 3, the provision of meaningful service opportunities for students, all 16 benchmarks were met during the last five years (100%). A summary of the percentage of benchmarks met by program goals is illustrated in Table 7. A more thorough analysis of student learning for each of the program goals is discussed next. Again, assessment data for the most current year is contained in Appendix H, whereas assessment results for the last five years can be retrieved online.¹³

Table 7

Percentage of Student Learning Outcomes Met for HPP Program Goals, 2013-2018.

| Academic Year | Goal 1 | Goal 2 | Goal 3 | Total by Year |
|----------------------|----------------------|--------------------|---------------------|----------------------|
| 2013-2014 | 80% (28/35) | 100% (12/12) | 100% (4/4) | 86% (44/51) |
| 2014-2015 | 86% (69/80) | 92% (11/12) | 100% (3/3) | 87% (83/95) |
| 2015-2016 | 93% (51/55) | 100% (7/7) | 100% (3/3) | 94% (61/65) |
| 2016-2017 | 92% (54/59) | 100% (7/7) | 100% (3/3) | 93% (64/69) |
| 2017-2017 | 93% (56/59) | 100% (6/6) | 100% (3/3) | 96% (65/68) |
| Total by Goal | 90% (258/288) | 98% (43/44) | 100% (16/16) | 91% (317/348) |

Notes. *Goal 1, Provide students with a foundation in all seven areas of responsibility for health education specialist; Goal 2, Provide a social science general education course for WSU; Goal 3, Provide students with meaningful and mutually-beneficial engagements with community partners.*

HPP Goal 1: Provide Students with a Foundation in all Seven Areas of Responsibility

The curriculum for the Health Promotion Program (HPP) is aligned to national standards (e.g., endorsed by the National Commission for Health Education Credentialing/NCHEC) for the

¹³ Annual reports and evidence of learning tables for HPP can be found at https://www.weber.edu/portfolio/hphp_healthpromotion.html

field of health education/promotion,¹⁴ and course assessments based on these standards are infused into every required course in HPP. This allows students to perform relevant skills throughout their program of study, and also allows instructors to evaluate students on readiness for employment as entry-level health education/promotion specialists on multiple occasions.

As illustrated in Table 7, over the last five years 90% of the benchmarks were met for the goal to train students in the seven areas of responsibility necessary to practice health education/promotion. In a few instances, benchmarks were not met because the established thresholds for a particular outcome were highly aspirational (e.g., 90% of students will score 70% or higher on a selected performance-based assignment). In these instances, the desired thresholds were lowered to a more realistic standard (e.g., 80% of students will score 70% or higher on the performance-based assignment). In a few other instances, benchmarks were not technically met but the percentages of students satisfying the established thresholds were still very close to the desired marks. In these instances, minor course modifications were made (e.g., added resources were provided to students, assignment instructions enhanced, study guides improved, etc.) to assist a greater number of students to be successful on the selected learning outcome.

CHES Practice/Proxy Tests. The majority of measures for goal 1 that HPP students did not meet benchmarks for over the last five years (23/30) related to practice tests completed in HLTH 4990 (Senior Seminar) by students to prepare for the Certified Health Education Specialists Exam (CHES). These practice tests are designed to replicate the actual CHES exam and measure possession, application, and interpretation of knowledge by students in the seven areas of responsibility for health education specialists. Given that the practice tests are used to gauge students' current level of preparedness for the CHES exam, students do not study or engage in actual preparation prior to taking the practice tests. Consequently, most students score below 70%

¹⁴ A review of the scientifically-validated responsibilities and competencies needed to practice health education can be found at <https://www.nchec.org/responsibilities-and-competencies>.

on the practice tests and the assessment benchmarks used by HPP, based on national averages for the actual CHES exam, have proved to be unrealistic. (Prior to taking the actual CHES exam, most students will engage in more than 30 hours of in-depth study to prepare for the national exam.) Moreover, the HPP faculty surmised that the low test scores on the practices tests were more the result of students not yet completing their academic course of study, rather than students not possessing appropriate knowledge and skills. Most HPP students completed the practices tests while they were still taking several required HPP courses designed to teach professional skills and competencies (e.g., HLTH 4013, HLTH 4150).

Curriculum Revisions. The less than desired scores by students on the CHES Practice Test suggested that students could benefit from additional training in CHES competencies (notably, evaluation, measurement, administration and management). Consequently, the HPP faculty revised select courses (e.g., HLTH 3000, HLTH 3200) to provide more CHES-related information earlier in the curriculum. These changes appear to have worked since the students' scores on the CHES proxy (or practice) test have steadily increased over the last five years (see Table 8), and demonstrate ongoing improvements in student readiness to complete the actual CHES exam.

National Certification. Each year many HPP graduates do take the actual CHES exam and seek voluntary professional certification through the National Commission for Health Education Credentialing (NCHEC). Eligibility for the NCHEC credential (i.e., Certified Health Education Specialists/CHES) is based on academic qualifications and successful completion of a competency-based exam. CHES-exam results for WSU students reveal scores similar to the averages seen across the United States. For example, as seen in Table 9, over the last five years the average percent score for WSU students taking the CHES exam is identical to the average score for the national cohort (i.e., 63%).

Table 8*HPP Students' Percent Scores for CHES* Practice Tests by Area of Responsibility** and Academic Year*

| Area* | 2013-2014 | 2014-2015 | 2015-2016 | 2016-2017 | 2017-2018 | Average |
|----------------|------------|------------|------------|------------|------------|------------|
| 1 | 72% | 75% | 73% | 74% | 79% | 75% |
| 2 | 66% | 68% | 73% | 69% | 69% | 69% |
| 3 | 68% | 68% | 71% | 71% | 75% | 71% |
| 4 | 57% | 59% | 63% | 54% | 66% | 60% |
| 5 | 64% | 69% | 72% | 70% | 70% | 69% |
| 6 | 52% | 51% | 60% | 58% | 61% | 56% |
| 7 | 63% | 66% | 69% | 67% | 67% | 68% |
| Average | 63% | 65% | 69% | 66% | 71% | 67% |

Notes.*CHES, Certified Health Education Specialists; **Area 1, Assess needs, resources, and capacity for health education/promotion; Area 2, Plan health education/promotion; Area 3, Implement health education/promotion; Area 4, Conduct evaluation and research related to health education/promotion; Area 5, Administer and manage health education/promotion; Area 6, Serve as a health education/promotion resource person; Area 7, Communicate, promote, and advocate for health, health education/promotion, and the profession.

Table 9*Comparison of Performance on CHES Exam between WSU Students and National Cohort*

| Year | National Cohort | | WSU HPP Students | |
|----------------|-----------------|----------------|------------------|----------------|
| | Average Score | Percent Passed | Average Score | Percent Passed |
| 2013 | 62% | 72% | 63% | 68% |
| 2014 | 62% | 69% | 65% | 71% |
| 2015 | 64% | 67% | 62% | 52% |
| 2016 | 62% | 66% | 58% | 56% |
| 2017 | 63% | 66% | 63% | 67% |
| Average | 63% | 66% | 63% | 63% |

Note. National averages and WSU Scores provided by NCHEC, <https://www.nchec.org>

The percentage of WSU students that pass the CHES exam (i.e., 63%) is slightly lower than the average for the national cohort (i.e., 66%). Consequently, to assist students to prepare for the CHES exam, and increase the percentage of students that pass the exam after their first attempt, HPP developed and implemented an online Canvas course that contains review materials and recorded study sessions that cover the key areas of responsibility. This canvas site is available to any student requesting support/assistance with studying for the CHES examination. With the addition of three new HPP faculty in 2017, face-to-face study sessions will again be offered beginning in the 2018-2019 academic year.

Curriculum Refinement. HPP program faculty continue to examine individual courses and the entire curriculum to ensure that student learning outcomes focus on national standards (i.e., responsibilities and competencies verified by the National Commission for Health Education Credentialing/NCHEC). An updated curriculum map was completed in 2018 to determine the degree to which each course within the curriculum is addressing NCHEC standards (see Standard C). This information was used to validate curricular strengths and identify potential ways in which the curriculum may be further enhanced so that students are equipped with needed professional competencies.

HPP Goal 2: Provide a Social Science General Education Course for WSU

The HLTH 1030 course (i.e., Healthy Lifestyles) is offered by WSU as a general education elective for the social science breadth area. To qualify for inclusion as a general education course, HLTH 1030 has been required to demonstrate that students score 70% or higher on direct measures related to three social science outcomes (i.e., 1, Interactions between individuals and society; 2, Application of concepts, theories, and methods; 3, Diverse Perspectives) noted previously (see Table 5).¹⁵ The standards tool in Chi Tester, and the outcomes tool in Canvas, are

¹⁵ The standards for general education courses in the social science breadth can be found at <https://www.weber.edu/GenEd/default.html>

used by HLTH 1030 instructors to track student learning across multiple sections and semesters of the course.

Over the last five years, 43 out of 44 benchmarks were met for HPP goal 2 (see Table 7). The single instance when the desired threshold wasn't met was due to student performance on an assignment to utilize online resources to investigate a health issue. Further instructions and examples were provided for students, and the benchmark was met in subsequent semesters. Given that the expected levels of achievement were met for the other student learning outcomes, no specific curricular or pedagogical changes were needed. The HLTH 1030 course recently was evaluated by the University Curriculum Committee and WSU Faculty Senate, and received unanimous approval for renewal as a general education course.

HPP Goal 3: Provide Students with Service Learning Opportunities

A minimum of 180 hours of supervised internship experience is required for all HPP majors, and the goal is to provide students with meaningful service opportunities with community partners. (If desired, students have the option to complete an additional 180 hours of internship with approved community partners.) The program has a dedicated internship coordinator (a) to assist students to locate and secure internship opportunities, (b) to supervise students during field experiences, and (c) to evaluate the quality of internship sites, supervisors, and student experiences.

Over the last five years, nearly 300 HPP students have completed internship with various community partners, and 100 percent of these students have received satisfactory reviews from their internship-site supervisors. Given that 100% of the student learning outcomes have been met for this goal, no pedagogical or curricular changes were deemed necessary. Nonetheless, HPP will continue to expand its list of potential internship sites, and add appropriate community partners to provide students with additional opportunities to engage in supervised community service (for a review of current community partners, see Appendix E).

Additional Indirect Measures of Student Learning

To validate further the activities of HPP, in addition to the direct measures previously noted in this report, the program also conducts a Senior Exit Survey, Alumni Survey, and Stakeholder Survey. Key findings from these measures are summarized below.

Senior Exit Survey. The Senior Exit Survey is administered each year to graduating students with a major in Health Promotion. Students are asked, for example, to report the extent to which they agree they have made progress toward reaching their professional goals, and their level of satisfaction with the academic program (e.g., curriculum, faculty) and support services (e.g., academic advising). Based on data collected over the past five years, a strong majority of HPP students, 88 percent, believed that the required coursework in HPP provided them with adequate-to-advanced knowledge, skills, and ability to practice health education/promotion in professional settings. A strong majority of students either agreed or strongly agreed that the health promotion major provided the following: (a) skills needed to be successful in their chosen career (Item 22, 98%), and (b) multiple opportunities to apply skills (e.g., internships, projects, assignments, presentations, etc.) during their academic program of study (Item 29, 97%). Related to HPP goal 1, the 2017-2018 Senior Exit Survey (Items 11-17) indicated that greater than 80 percent of students believed that the required coursework in the major provided them with adequate-to-advanced knowledge, skills, and ability in the seven core areas of responsibility (e.g., Area 1, 86%; Area 2, 90%; Area 3, 94%; Area 4, 90%; Area 5, 88%; Area 6, 90%; Area 7, 88%). Related to goal 2, 98 percent of students either agreed or strongly agreed that the required courses in their program (including HLTH 1030, Healthy Lifestyles) were relevant and useful to their professional preparation. A final finding of note, related to HPP goal 3, 88 percent of students either agreed or strongly agreed that their internship was a valuable educational experience related to their major.

Alumni Survey. To monitor students after graduation, HPP implemented an Alumni Survey in 2018. This survey is designed to ascertain graduates' current employment, perceived

competence in key job skills, continued engagement and support with HPP, and overall satisfaction with the HPP program. The initial results obtained from 90 HPP graduates indicate that 65% of HPP alumni are employed full time, with another 20% employed part time, in a health-related field. Nearly 60% of respondents indicated that their current job responsibilities were strongly related to the academic training received through HPP. Over seventy percent of survey participants indicated that HPP contributed to their knowledge, skills, and professional development, and that they had developed a strong professional connection with one or more HPP faculty. Overall, 86 percent of the HPP alumni indicated that they were either satisfied or very satisfied with their educational experiences with HPP.

Stakeholder Analysis. In 2018, HPP also initiated a stakeholder analysis to survey local and state health departments, non-profit community agencies, hospitals and other clinical settings, and private business who have supervised the work of HPP students and/or graduates. The aim of the survey was to ascertain key stakeholders' satisfaction with the work performance, professional skills and competence of HPP students and graduates. To date, HPP has received 30 completed surveys from select stakeholders. Related to HPP goal 1, greater than 80 percent of the stakeholders surveyed believed HPP students/graduates had adequate-to-advanced knowledge, skills, and ability in the seven core areas of responsibility (e.g., Area 1, 87%; Area 2, 83%; Area 3, 90%; Area 4, 73%; Area 5, 77%; Area 6, 88%; Area 7, 80%). Similar findings were found for other professional dispositions and skills, with stakeholders noting that HPP students/graduates were either "good" or "excellent" in regard to such things as dependability, reliability, and punctuality (93%), ability to work both independently (83%) or with a team of professionals (93%), and professional writing (77%) and technology skills (90%). HPP will continue to administer and monitor data trends from the Stakeholder Analysis and use the findings to inform desired and necessary changes to the HPP curriculum.

Conclusions

Multiple indicators—including both direct (e.g., competency-based exams, performance-based assignments scored with rubrics, pass rates for CHES exam, etc.) and indirect measures (e.g., student exit surveys, alumni surveys, stakeholder surveys, pass rates for CHES exam, etc.)—are being used by HPP to assess student learning and satisfaction among key program stakeholders (e.g., students, internship site supervisors, alumni, employers, etc.). The data indicate that HPP is successful in achieving its designated objectives (see Standard C) and goals (see Standard B), and realizing its identified mission (see Standard A). These findings, in addition to other items noted previously in this report (e.g., student completion rates and time needed to earn degrees) indicate that HPP is highly vested and successful in promoting student achievement.

Standard D: Academic Advising

The Department of Health Promotion and Human Performance (HPPH) employs a full-time academic advisor. The aim of this position is to foster a supportive and enriching advisement process that helps students to remain informed of academic requirements, courses, program and department policies, course articulation agreements, and other pertinent items such as available student services. HPPH is excited to have a new academic advisor, hired in July of 2018, who is focused on balancing students' needs and goals with faculty, program, and Department expectations and standards. The advising process, and responsibilities for the advisor and student, are outlined below.

Advising Strategy and Process

The current advisement process is as follows: (a) new students attend new student orientation; (b) students schedule individual advisement sessions with the academic advisor; and (c) students then may meet with faculty or the program director depending on their individual needs and goals. In general, the academic advisor guides students through academic program requirements, their degree maps, and assists in developing their semester schedule of courses. Ultimately it is up to each student to be aware of their progress towards graduation and to register and complete the necessary courses to achieve their desired degree. When students meet with the academic advisor, together, they review their progress and the next steps needed to maintain this progress. The academic advisor also will follow up with students for encouragement and progress "check-ins" to assist those students who may need additional support. The academic advisor also consults with program faculty and the Department Chair, as necessary, to ensure open communication and unanimous agreement for special student circumstances requiring course overrides and exceptions while maintaining program and Department policies, standards, and expectations.

As part of the advising process, HPHP has identified key advisor responsibilities. These tasks include the following:

- Understand and effectively communicate the curriculum, graduation requirements and University policies and procedures.
- Assist students in understanding the purposes and goals of higher education and its effects on their lives and personal goals.
- Encourage and guide students as they define realistic academic goals.
- Support students as they acquire the skills to develop clear and attainable educational plans.
- Provide students with information about, and strategies for utilizing, the available resources and services on campus.
- Monitor and accurately document discussions regarding the student's progress toward meeting their goals.
- Maintain the level of confidentiality provided by the Buckley Amendment (FERPA).
- Assist students in gaining decision-making skills, and assuming responsibility for their educational plans and achievements.
- Promote and encourage students to develop productive working relationships with program faculty.
- Attend training and conferences related to advisement and WSU, and attend department and program meetings.

Successful advising also necessitates that students be active and engaged in the advising process. As such, HPHP has identified the following students' responsibilities as necessary for the advising partnership to be successful:

- Schedule regular advisement appointments each semester.

- Come prepared to each appointment with questions or materials for discussion; be an active learner by participating fully in the advising experience.
- Ask questions when necessary.
- Keep a personal record of graduation progress and goals including organizing official documents (academic records, communications from professors or the academic advisor—including emails, letters, and/or phone calls).
- Communicate academic goals.
- Become knowledgeable about University programs, policies and procedures.
- Be responsible for their decisions.
- Respond to official notification from the academic advisor (letters, emails, phone contacts, etc.) in a timely manner.
- Maintain effective working relationships with advisors, faculty and administrators.

Effectiveness of Advising

Given that the current HPHP academic advisor has been employed at WSU for less than a year, no formal evaluations of the effectiveness of advising processes have been conducted by the Department. In the Fall of 2019, however, after the current advisor's first full year of employment, a survey will be created by the Department Chair and distributed to faculty and students to evaluate the advisor's performance, and identify strengths and potential areas of improvement. The results of the survey will be shared with the advisor and form the basis for any corrective measures deemed necessary to improve the advising process.

Past Changes and Future Recommendations

Although no formal evaluation of the advising process has been conducted for the newly-hired academic advisor, a few noteworthy changes in advising policy and procedures have already been implemented. For example, a change in the process for students to request course overrides

and exceptions for program requirements was developed and implemented in the fall semester. Previously, many program exceptions and course overrides were made for students by the former academic advisor without approval from program directors or the Department Chair. A formal petition process, requiring signatures from program directors and the Department Chair was implemented shortly after the hire of the new academic advisor. In addition, frequent and regular meetings among the academic advisor and program faculty have occurred to strengthen communication and develop a shared set of expectations and ethical standards. Technology updates to facilitate advisement and communication with students (e.g., use of the StarFish platform) also are underway and will further improve the effectiveness of advising. Continued support of the academic advisor will be a priority for HPHP as the importance of this position to assist with student success cannot be overstated.

Standard E: Faculty

Faculty Demographic Information

At present, the Health Promotion Program (HPP) has five full-time faculty to meet instructional demands. Three of these faculty are tenure-track (1 professor, 1 associate professor, 1 assistant professor), and the other two faculty are salaried instructors. The tenure-track faculty all hold doctoral degrees, whereas the instructors have masters degrees, in Health Education, Public Health, or Health Education and Promotion, with specific specialty training in areas specific to courses taught. A majority of HPP faculty (60%) also are currently certified as health education specialists (CHES/MCHES). When necessary, HPP also utilizes adjunct faculty to teach select courses on a semester-by-semester basis. Teaching assignments are determined by the HPP Department Chair, in consultation with the HPP program director, and are based on the educational backgrounds and select areas of expertise among program faculty, the needs of the program, and previous performance of the faculty members.

Diversity of Faculty

The current faculty includes two males, three females, and, in regard to racial/ethnic diversity, is 80 percent White (20 percent Asian). The department and program aspire to have diversity within the faculty but always hire the most qualified applicant in faculty searches regardless of factors such as gender, race/ethnicity, age, etc. Appendix B contains a profile of HPP faculty, including names, gender, background, rank, degrees, etc.

Programmatic/Departmental Teaching Standards

The program faculty members are held to the teaching standards and policies and procedures for tenure and promotion outlined by the WSU and the Moyes College of Education.¹⁶ For example, the department chair reviews faculty performance in their second year. Peer review

¹⁶ For a review of tenure and promotion policies for the College of Education, see https://apps.weber.edu/wsuiimages/COE/deans_office/MCOE%20Tenure%20and%20Promotion.pdf

committees also review tenure-track faculty teaching, according to policy, in their second and fifth years of employment. Moreover, Department and College ranking tenure and evaluation committees review faculty in their third and six years, also according to policy.

Evidence of Effective Instruction

In addition to the administrative and peer review of teaching, student evaluations of teaching are collected for every HPP faculty member, every semester. For example, all courses taught by non-tenured faculty members and adjunct faculty are evaluated by students on Chi Tester and compared to program and department standards and averages. Tenured faculty in HPP also abide by the same guidelines as non-tenured faculty. Chi Tester results include student commendations and recommendations. Numerical data based on a scale of one to five is interpreted and tracked by semester and over time. Results of end-of-course/instructor evaluations conducted on Chi Tester are included in each faculty member's professional file housed in the College Dean's office. Support files are housed in the faculty member's office in the Swenson Building, and end-of-course evaluation results are housed on Chi Tester and electronically by the Department. The minimum standard for tenure in the College of Education is a rating of "GOOD", therefore all tenured faculty have demonstrated quality teaching, and tenure-track faculty are striving for this standard. Tenured faculty also participate in post-tenure reviews (every five years) to ensure continued teaching quality.

When adjunct faculty members are used to teach a course, they use a department-approved course syllabus, follow the guidelines outlined in their semester teaching contract, have access to a college adjunct faculty handbook (available online and referenced in the teaching contract), and undergo student and, at times, peer evaluation. The results of evaluations are housed in the department chair's office and through secure, cloud-based document storage. Program directors are given access to adjunct faculty student course evaluations. These course evaluations are reviewed and issues are addressed with the adjunct faculty member as needed.

Mentoring Activities

Faculty members within HPP are mentored by the department chair, program directors, and other faculty within the diverse HPP department. For the last academic year, to assist with faculty mentoring and development of new faculty, HPP faculty meet monthly to discuss teaching assignments, issues, concerns, and resources (e.g., training opportunities) related to teaching.

Adjunct instructors are mentored by a faculty member most familiar with the course taught by the adjunct and, as needed, trainings are provided to update adjuncts on program standards and expectations.

Professional Development

All faculty in the Department (including adjuncts) can participate in the numerous trainings and workshops offered every year through WSU entities such as WSU Online, the Teaching and Learning Forum, and the Center for Community Engaged Learning. Moreover, funding is available through the Department, College of Education, and University (e.g., Research, Scholarship, and Professional Growth/RSPG Committee) to support professional-development opportunities for all faculty. For example, money to travel to conferences, pay conference registration fees, and retain professional memberships is available for interested faculty. Consequently, the full-time HPP faculty participate in multiple training opportunities annually, and attend professional conferences each year as well.

Standard F: Program Support

Adequacy of Staff

The Department of Health Promotion and Human Performance (HPHP) employees multiple staff (both exempt and non-exempt) to support the various academic programs (i.e., Outdoor Recreation, Physical Education, Exercise and Sport Science, Health Promotion). Specifically, HPHP employees a full-time Academic Advisor (Brittini Strickland), Administrative Specialist II (Marcia Kawa), Internship Coordinator (Barbara Dirks), Human Performance Lab Coordinator (Tim Ruden), and Recreation Manager (Derek DeBruin). These staff members are integral and vital members of HPHP and essential to the success of the various HPHP programs.

In addition to the personnel employed specifically through HPHP, the Department also receives staff support from other areas, notably the Moyes College of Education (COE). For example, the Stromberg Complex Manager (Matt Barker), employed by COE, ensures that classrooms, athletic fields and courts, and the pool/natatorium are appropriately scheduled and maintained for academic, scholarly, and community-based experiences. COE also employs a full-time college recruiter (a new recruiter is in the process of being hired) to assist the various academic programs in the college, to recruit new students. Finally, COE also has a full-time academic advisor (Natalie Struhs) who assists all COE programs with student retention by coordinating such efforts as the Starfish notification system.

Given the aforementioned staff support, the needs of the HPHP Department, and respective HPHP programs (including Health Promotion), are being met. Performance evaluations conducted by the HPHP Department Chair have found that all of the staff members noted above are performing at “above average-to-excellent” levels. Although the recently-hired staff members (e.g., Academic Advisor, and Administrative Specialist II) are still in the process of completing University orientation and on-the-job training, both are performing in an exemplary manner for the short time that they have been in these critical positions. All told, HPHP has many dedicated and passionate

staff that assist multiple programs, both inside and outside of the HPHP Department, to ensure high-quality learning experiences, job opportunities, and quality of work and support are provided for students, staff, and faculty in HPHP and COE.

Ongoing Staff Development

Similar to faculty members, Department staff members have ongoing opportunities for professional development. For example, staff are encouraged to participate in the many and varied trainings available through the WSU Training Tracker system, and can enroll in WSU academic courses at no cost. Specific funds within HPHP and COE are earmarked for staff development and can be applied toward travel for professional training, conference registration fees, professional certification, and continuing-education credits. Staff members participate in trainings and other professional-development practices dependent on their job duties, interests, and opportunities to enhance HPHP programs.

Adequacy of Administrative Support

Since the last HPP self-study and review (2013), the Department has added one additional staff member—the HPHP Recreation Manager. This position oversees the climbing wall (e.g., maintenance, care, budget, staff, etc.), the REC-based courses, and supports the Outdoor and Community Recreation Education (OCRE) program (e.g. professional support during OCRE-based trips; program policy and procedure development and review) and Department in various ways (e.g. departmental committees). This position was made available by assistance from the Dean and COE. As needed, the Department also receives supplemental support from the Dean and the Provost to cover the costs of additional courses/overloads (semester dependent).

Adequacy of Facilities and Equipment

The HPHP Department is housed in the Swenson Building within the Stromberg Complex. The facility provides adequate classrooms, laboratories, and equipment to support multiple HPHP academic programs. A recently completed (August 2018) building project has created an additional

classroom (SW 405), student lounge, storage areas for outdoor-recreation equipment, and four new faculty offices. Another newly-completed project (October 2018) renovated the entire natatorium and locker room areas. In addition, since the last HPP review, four pickleball courts have been installed for use by multiple sections of pickleball classes, other academic programs, service projects (e.g., the CAPES! Program), and community members. Finally, the Stress Relief Center has relocated (from SW 225 to SW 124) to a larger, and more centrally located, space to improve functionality and use of this important campus resource.

Adequacy of Library Resources

The Stewart Library provides information resources (e.g., databases, journals, audio-visual materials) and services (e.g., classes, project support) for multiple WSU campuses. The hours of operation are extensive and met student and faculty needs.¹⁷ In particular, the library assigns a librarian to each college to provide assistance and support (e.g., funds to purchase texts and journals; classes to instruct students on performing literature searches, etc.). As such, the library resources adequately met the program, faculty, and student needs of HPP, HPHP, and COE.

¹⁷ For a review of library services and resources, see <http://library.weber.edu>

Standard G: Relationships with External Communities

Liaisons with the community rely primarily on relationships cultivated between individual faculty members and local businesses, hospitals, schools, regional companies, and government facilities (e.g., county health departments and Hill Air Force Base). Faculty maintain contact with former graduates of the program informally, through social media such as Linked-in and Facebook, and by means of the Alumni Survey administered annually (see Standard C). Numerous former students initiate contact with faculty to request letters of recommendation or a reference for new jobs. Each faculty also has job placement information regarding former students to assist HPP to project employment opportunities for current students.

Community Partnerships for Field Experiences

Numerous community health agencies partner with HPP to provide internships for students (for a list of current community partners, see Appendix E). These relationships extend well beyond Weber County, but the majority of students do complete internships in the local area. These agencies include Weber-Morgan Health Department, Hill Air Force Base, the local unit of the American Cancer Society, McKay-Dee Hospital (Intermountain Health Care), St. Anne's Homeless Shelter, the Bonneville Unit of the American Red Cross, WSU Student Health Service Drug Prevention and Health Education Program, the Utah State Health Department, and others.

Benefits of Community Partnerships

Community associations have resulted in placement of student interns and employment of graduates. Local and regional companies routinely send job recruiters to the WSU Job Fair and position announcements to department faculty and the HPP Advisement Coordinator. Often these recruiters are WSU graduates who have encouraged their company to recruit at WSU. Many HPP graduates are hired by companies where previous graduates have worked. Student internships with local and state agencies have resulted in employment for many students upon graduation (e.g., Weber-Morgan Health Department). Community contacts have also resulted in the establishment

of scholarships for HPHP students (e.g., Carol S. Westmoreland Scholarship). These donations have provided opportunities for faculty and students to work on timely projects with potentially significant outcomes.

Alumni Survey

To monitor students after graduation, HPP implemented an Alumni Survey in 2018. This survey is designed to ascertain graduates' current employment, perceived competence in key job skills, alumni engagement and support, and overall satisfaction with the HPP program. The initial results obtained from 90 HPP graduates indicate that 65% of HPP alumni are employed full time, with another 20% employed part time, in a health-related field. Nearly 60% of respondents indicated that their current job responsibilities were strongly related to the academic training received through HPP. Over seventy percent of survey participants indicated that HPP contributed to their knowledge, skills, and professional development, and that they had developed a strong professional connection with one or more HPP faculty. Overall, 86 percent of the HPP alumni indicated that they were either satisfied or very satisfied with their educational experiences with HPP.

Stakeholder Analysis

In 2018, HPP also initiated a stakeholder analysis to survey local and state health departments, non-profit community agencies, hospitals and other clinical settings, and private business who supervised the work of HPP students and/or graduates. The aim of the survey was to ascertain key stakeholders' satisfaction with the work performance, professional skills and competence of HPP students and graduates. To date, HPP has received 30 completed surveys from select stakeholders. More than 80 percent of the stakeholders surveyed believed HPP students/graduates had adequate-to-advanced knowledge, skills, and ability in the seven core areas of responsibility (e.g., Area 1, 87%; Area 2, 83%; Area 3, 90%; Area 4, 73%; Area 5, 77%; Area 6, 88%; Area 7, 80%). Similar findings were found for other professional dispositions and skills, with

stakeholders noting that HPP students/graduates were either “good” or “excellent” in regard to such things as dependability, reliability, and punctuality (93%), ability to work both independently (83%) or with a team of professionals (93%), and professional writing (77%) and technology skills (90%). HPP will continue to administer and monitor data trends from the Stakeholder Analysis and use the findings to inform desired and necessary changes to the HPP curriculum.

Standard H: Program Summary

The self-study and Health Promotion Program (HPP) review conducted in 2013 resulted in the identification of a number of program strengths and challenges, as well as few areas of concern. Table 10 outlines the commendations and recommendations provided by the HPP review team. This section summarizes these areas, and examines the action plans developed and implemented by HPP to capitalize on existing strengths, and to address program challenges and weaknesses.

Table 10

HPP Strengths, Challenges, Weaknesses, and Recommendations Noted by the 2013 HPP Review Team

| Category | Comments |
|------------------------|--|
| Strengths | <ol style="list-style-type: none"> 1. Program has a thoroughly articulated mission. 2. A full-time academic advisor is employed to assist students with program policies and requirements. 3. The faculty, staff, and administration are highly knowledgeable. |
| Challenges | <ol style="list-style-type: none"> 1. Other Utah institutions have a greater number of faculty to serve similar amounts of students. 2. Some students in program are interested in seeking the CHES credential, whereas others students find credentialing less important. |
| Weaknesses | <ol style="list-style-type: none"> 1. Students in program believe they need more information and preparation in order to sit for the CHES exam. 2. Students commented that courses in the program were “low stress” compared to other courses on campus. |
| Recommendations | <ol style="list-style-type: none"> 1. Continued emphasis on the internship component of the program. 2. Increased faculty promotion of student memberships in professional organizations at the national and state levels. 3. Continued collaboration and service involvement across the campus community (e.g., Student Wellness, Counseling/Psychological Services). 4. Periodic assessment of the prospective need for additional full-time faculty to meet the growing number of majors in program. 5. Continued efforts to base the program curriculum and student learning objectives on national standards. 6. Continued support to assist students to prepare for the CHES exam. |

Program Strengths

The program review team noted a number of HPP strengths at the conclusion of the site-team visit in 2013. In particular, the review team stated that HPP had a thoroughly-articulated mission, and that course activities helped students to develop professional skills linked to national standards. The review team also noted that staff and faculty were program strengths: for example, that a full-time academic adviser was used by HPP to assist with informing students of program requirements and policies, and that HPP faculty were knowledgeable and passionate about the material they teach.

The aforementioned commendations by the review team in 2013 remain current strengths of HPP. The program mission continues to focus on the professional-development of students, and the accompanying HPP goals and objectives are strategically-aligned with this mission (see Standard A). Moreover, based on the HPP strategic plan, the program curriculum is aligned to national standards (i.e., those endorsed by the National Commission for Health Education Credentialing/NCHEC) for the field of health education/promotion, and course assessment based on these standards are infused in required course in HPP (see Standards B and C). In regard to staff and faculty, the department continues to have a full-time faculty advisor to assist students to navigate their programs of study, and in addition to retaining the core-tenured faculty from 2013, HPP hired three new faculty in 2017 to increase instructional capacity.

Program Challenges

In 2013, the program review team noted two key challenges for HPP. Specifically, (a) that other Utah institutions have greater number of faculty members to serve similar amounts of students; and (b) that for some HPP students the CHES certification is important, but less so for other students. Each of these challenges is discussed in detail next.

Faculty Capacity. Since the last program review, HPP has hired three new faculty members. These new faculty members have enhanced the instructional capacity in needed areas (e.g.,

program planning, substance abuse), and assisted with various service roles within the program (e.g., BIS committees, provision of study sessions for CHES exam, etc.). HPP also continues to maintain a strong pool of qualified adjunct faculty to meet instructional responsibilities. As such, the instructional needs and demands of HPP students are being met.

Nonetheless, the high student demand for HPP courses does result in increased instructional burden for HPP faculty. The average student-to-teacher ratio for HPP courses is 30:1. Relative to other programs on campus, and across the state, HPP could use additional faculty to assist in maintaining a high-quality curriculum and not overburden faculty with teaching responsibilities (e.g., grading) disproportionate to other WSU faculty (e.g., the average student-to-teacher ratio for the Department of HPHH is 18:1, and the ratio for the University is 22:1).¹⁸

Without added faculty, HPP will continue to consider and utilize enrollment-management strategies (e.g., increased use of pre-requisites, cohort codes for courses, limiting the number of students admitted to the major, etc.) to address the high student demand for HPP courses. Decreased course enrollments, in particular, will help to maintain high academic standards and allow HPP faculty to continue to use high-impact teaching and learning strategies (e.g., service-learning, supervised field experiences, etc.).

Given the high student demand for HPP courses, and limited instructional capacity, the program also will continue to examine alternative methods for program delivery. In particular, HPP will continue to utilize courses from other academic programs (e.g., HIM, HAS, NUTR, etc.) for use in the HPP curriculum. The use of coursework from multiple disciplines will help with instructional capacity, while also affording students diverse learning experiences from related academic units (e.g., public health, exercise science, recreation, etc.).

Student Interest in Professional Preparation. During the last HPP self study and review, both the site team and HPP faculty noted that for some students the CHES certification was very

¹⁸ Data compiled using the WSU Tableau Dashboards available at <https://portalapps.weber.edu/tableaudashboards/>

important for their professional careers, while for others, CHES certification was less important. This was deemed a “dilemma” by the review team because the HPP mission is clearly articulated to meet national standards needed for certification (i.e., CHES).

Despite some students not being interested in seeking certification as a Certified Health Education Specialists (CHES), the majority of HPP students are familiar with, and interested in obtaining, the CHES credential. Based on the 2017-2018 Senior Exit Survey (Item 9), for example, 63% of students anticipated taking the national examination for certification as a health education specialist. Although this percentage is slightly lower than previous years (e.g., 66% in 2016), the survey results suggest that the majority of students in HPP are both knowledgeable of, and inclined toward, national certification. To monitor students’ interest in national certification, HPP will continue to administer the Senior Exit Survey to graduating students.

Program Weaknesses

Related to the aforementioned program “Challenges” the 2013 HPP self study and site visit identified, the program review team also noted two HPP “Weaknesses”. Namely, (a) that some HPP students felt they were not entirely prepared to “sit” for the CHES exam, and (b) that some courses in HPP were “low stress” (e.g., not challenging), compared to other courses across campus like anatomy, physiology, and microbiology. The program response and action plans to these noted weaknesses are provided below.

Preparation for the CHES Exam. As demonstrated in Standards A, B, and C of this document, the curriculum for HPP is based on national standards forwarded by NCHEC as necessary for professional preparation to serve as a health education specialist. A curriculum grid is used to identify and evaluate the extent that required HPP courses address the prescribed national standards (i.e., the Seven Areas of Responsibility, see Standard A). Moreover, since the last program review in 2013, HPP mandated that all faculty teaching required HPP courses identify on their course syllabi the NCHEC competencies covered in their respective courses. Similarly, to further

address this weakness, HPP required HPP faculty teaching “core courses” to track student performance on national standards by aligning course assignments to specific professional competencies identified by NCHEC. These competencies are tracked using the “Outcomes” tool in Canvas, the WSU learning management system, and scoring rubrics are used to evaluate students on the selected measures. The increased emphasis by HPP to identify national standards on course syllabi and assignments has made students much more aware that knowledge and skills necessary to pass the CHES exam are covered in the required HPP courses.

In addition to the broad program changes noted above, HPP continues to employ other program activities to improve students’ readiness to sit for the national CHES exam. For example, students in HLTH 3000 and HLTH 4990 complete practice tests to assist with preparation for the national CHES exam. These tests serve as important indicators of students’ developing knowledge and skills in health education/promotion, and indicate their readiness to sit for the actual CHES exam. As alluded to in Standard C of this document, average student performance on the CHES practice tests continue to increase annually and demonstrate ongoing improvement in this area.

Another program innovation to help students prepare for the CHES exam included the development of a Canvas course designed specifically to review the Seven Areas of Responsibility covered by the CHES exam. This Canvas course was created in response to the 2013 HPP Review Team recommendations, and includes student-developed study materials and recorded study sessions that cover each NCHEC Area of Responsibility. The Canvas site is available to any student requesting support/assistance with studying for the CHES examination.

Admittedly, efforts to assist students to prepare for the CHES exam (e.g., study sessions, CHES-preparation workshops) have been hindered by a lack of faculty over the last five years. For three out of the last five years, HPP operated with only two full-time faculty and this prohibited the provision of study sessions and workshop to prepare for the CHES exam because faculty were overburdened with existing teaching and service assignments. With the addition of three new

faculty in 2017, however, HPP again has the faculty resources to offer workshops and study sessions to help students prepare for the CHES exam.

“Low Stress” Courses. The second program “weakness” identified by the 2013 HPP Review Team was the perception by students that select courses in HPP were “low stress” and not as academically challenging compared to other courses offered across campus (e.g., anatomy, physiology, microbiology). The HPP faculty acknowledge that some introductory or elective courses in the program may be considered “low stress” (e.g., HLTH 1110, Stress Management). Lower-division, content/topic courses in HPP, however, are not designed to provide students with professional training but, rather, are offered to allow students to explore select health issues and topics of interest to them. Professional-preparation courses offered by HPP, on the other hand, are based on national standards (see Standards A, B, and C), and deemed by HPP faculty and students to be academically challenging. To support this supposition that the required courses in HPP are rigorous and substantive, data from the 2017-2018 Senior Exit Survey (Item 36) indicate that 86 percent of HPP students either agreed or strongly agreed that courses in the major were academically challenging. Similarly, the exit survey indicated that a strong majority of students either agreed or strongly agreed that the health promotion major provided the following: (a) skills needed to be successful in their chosen career (Item 22, 92%), and (b) multiple opportunities to apply skills (e.g., internships, projects, assignments, presentations, etc.) during their academic program of study (Item 29, 98%).

Review Team Recommendations and HPP Actions

Based on the strengths, challenges, and weaknesses noted in Standard H of this document, the 2013 Program Review Team forwarded six recommendations to maintain or improve the functioning of HPP. These recommendations are highlighted next along with the response and action plans implemented by HPP.

Continued Emphasis on the HPP Internship. The 2013 HPP review team recommended that there be a continued emphasis on the internship component of HPP, and that this is necessary to allow HPP graduates to remain competitive for employment opportunities in Utah and the surrounding region. HPP does consider the internship component of the curriculum to be the culminating experience for HPP students, and the use of a full-time internship coordinator to help students identify, initiate, and complete supervised field studies is evidence of this commitment. Since the last program review, HPP has instituted additional requirements for student field experiences, including more frequent evaluations of students by site supervisors, the provision to allow supervisor evaluations to count partially toward students' internship grades, and the use of required presentations by students (e.g., oral, poster, videos) to document more fully their internship activities and accomplishments.

Over the last five years, nearly 300 HPP students have completed internship with various community partners, and 100 percent of these students have received satisfactory reviews from their internship-site supervisors. Furthermore, 100% of the student learning outcomes established for the internship have been met, and this attests to the efficacy of the pedagogical and curricular changes made in this area. Based on data from the 2017-2018 Senior Exit Survey (Item 25), 88 percent of students either agreed or strongly agreed that their internship was a valuable educational experience related to their major. To enhance internship experiences for future students, HPP will continue to expand its list of potential internship sites, and add appropriate community partners to provide students with additional opportunities to engage in supervised community service.

Increased Promotion of Student Memberships in Professional Organizations. The second recommendation made by the 2013 HPP Review Team was to promote further to students the importance of membership and participation in professional organizations. The HPP faculty sees significant value in student membership in, and involvement with, both national (e.g., Society

for Public Health Education/SOPHE) and state health organizations (Utah SOPHE). In both foundation and upper-division courses, HPP students are formally and informally encouraged by faculty to learn more about (and consider becoming members in) the various national and state health education/promotion organizations.

With the addition of three new faculty in 2017, and a concomitant increase in service capacity for HPP, the program implemented two program innovations that will increase student involvement in professional membership. First, a Health Promotion Club was created for students in the spring of 2018. In general, the aim of this club is to help students find support in achieving personal, academic, and professional success. In particular, a key activity of the club is to encourage members to seek out professional development opportunities including attending professional conferences. The second key innovation implemented by HPP, was the provision of academic credit (i.e., HLTH 4920) to allow students to attend and participate in state or national conferences. The addition of the Health Promotion Club, and the HLTH 4920 course offering, are intended to increase student involvement in professional organizations.

Continued Service Collaboration. The third recommendation for HPP made by the site-visit team in 2013 was to continue the extensive collaboration and service involvement between HPP with campus and community partners. HPP does have several strong campus (e.g., Student Wellness, Employee Wellness) and community partners (e.g., McKay-Dee Hospital, Weber-Morgan Health Department) that afford HPP students with relevant, hands-on, service-oriented internship experiences. Consequently, HPP will continue to nurture these existing relationships to ensure that the placement of student interns at the various sites is beneficial for all involved. To assist with this, HPP has a full-time internship coordinator to network with HPP partners, and to evaluate the value of student placements from both the perspective of the student and the hosting agency.

In 2018, HPP also initiated a stakeholder analysis to survey key campus and community partners (e.g., local and state health departments, non-profit community agencies, hospitals and

other clinical settings, and private business) who supervise the work of HPP students and/or graduates. The aim of the survey was to ascertain key stakeholders' satisfaction with the work performance, professional skills and competence of HPP students and graduates. To date, HPP has received 30 completed surveys from select stakeholders. Related to HPP goal 1, greater than 80 percent of the stakeholders surveyed believed HPP students/graduates had adequate-to-advanced knowledge, skills, and ability in the seven core areas of responsibility (e.g., Area 1, 87%; Area 2, 83%; Area 3, 90%; Area 4, 73%; Area 5, 77%; Area 6, 88%; Area 7, 80%). Similar findings were found for other professional dispositions and skills, with stakeholders noting that HPP students/graduates were either "good" or "excellent" in regard to such things as dependability, reliability, and punctuality (93%), ability to work both independently (83%) or with a team of professionals (93%), and professional writing (77%) and technology skills (90%). HPP will continue to administer and monitor data trends from the Stakeholder Analysis and use the findings to inform desired and necessary changes in the relationships among HPP with campus and community partners.

Investigate Need for Additional Full-Time Faculty. The fourth recommendation by the 2013 Program Review Team was to investigate the prospective need for additional full-time faculty to meet the growing number of HPP student majors and minors at WSU. Since the last program review, HPP has hired three new faculty members. These new faculty members have enhanced the instructional capacity of HPP in needed areas (e.g., program planning, substance abuse) and assisted with various service roles within the program (e.g., BIS committees, CHES preparation, Health Promotion Club). Nonetheless, the student-to-faculty ratios for HPP faculty are higher than many other programs across campus. For example, the average student-to-teacher ratio for the Department of HPHP is 18:1, the ratio for the University is 22:1, and the ratio for HPP is 30:1.¹⁹ Consequently, added faculty for HPP would help to decrease the current instructional burdens

¹⁹ Data compiled using the WSU Tableau Dashboards available at <https://portalapps.weber.edu/tableaudashboards/>

experienced by existing HPP faculty (e.g., large class sizes, added grading, etc.) that are somewhat disproportionate to other programs and faculty. Without added faculty, HPP will need to consider enrollment-management strategies (e.g., increased use of pre-requisites, cohort codes for courses, limiting the number of students admitted to the major, etc.) to address the high student demand for HPP courses. Decreased enrollments will help to maintain high academic standards and allow HPP faculty to continue to use high-impact teaching and learning strategies (e.g., service-learning, supervised field experiences, etc.).

Base HPP Curriculum on National Standards. The fifth recommendation forwarded by the 2013 HPP Review Team was to continue to base the HPP curriculum and related student learning objectives on national standards. The curriculum for the Health Promotion Program (HPP) is aligned to national standards (e.g., endorsed by the National Commission for Health Education Credentialing/NCHEC)²⁰ for the field of health education/promotion, and course assessments based on these standards are infused into the required courses in HPP (see Standards B and C). This allows students to perform relevant skills throughout their program of study, and also allows instructors to evaluate students on readiness for employment as entry-level health education/promotion specialists on multiple occasions. The HPP annual assessment data will continue to be used to validate curricular strengths and identify potential ways in which the curriculum may be further enhanced so that students are equipped with needed professional competencies (see Appendices H and I).

Continued Support to Assist Students in Preparation for the CHES Exam. The sixth recommendation provided by the 2013 HPP Review Team was to continue to support students in preparing for the CHES exam. The HPP curriculum standards are based on the framework set forth by the National Commission for Health Education Credentialing (NCHEC), and designed to prepare students to sit for the CHES exam. HPP uses a curriculum grid to identify necessary training in

²⁰ A review of the scientifically-validated responsibilities and competencies needed to practice health education can be found at <https://www.nchec.org/responsibilities-and-competencies>.

CHES-related competencies for specific courses, and relevant skills training is provided throughout the required curriculum. Moreover, online study tools are available for interested students planning to take the CHES exam and, with the addition of new faculty, HPP plans to offer face-to-face workshops and study sessions as well. The use of practice tests in HLTH 3000 and HLTH 4990 allow students to gauge their current level of readiness to take the actual CHES exam. HPP students average scores on the CHES exam over the last five years are identical to national averages (see Standard C in this document) but current and additional (e.g., face-to-face study sessions) efforts in this area should result in an increased number of HPP students receiving the CHES credential.

Conclusion

Overall, the 2013 HPP self-study and review resulted in the identification of a number of program strengths (e.g., program mission, knowledgeable faculty), challenges (e.g., number of faculty, students not interested in professional credentials), and weaknesses (e.g., CHES preparation, low-stress courses). The site team also provided HPP with a number of recommendations to improve HPP (e.g., continued focus on internships, collaboration with community partners, etc.). The HPP faculty believes the strengths and challenges identified by the review team have been addressed, for example, by continuing to focus the program on national standards (i.e., NCHEC criteria), and the hiring of three new faculty to increase the instructional capacity of the program. Corrective actions also were taken to address the identified weaknesses, for instance, by mandating all HPP faculty teaching required courses to include CHES-related learning objectives on course syllabi, and document student learning related to these objectives with scoring rubrics based on program standards. A summary of the initial responses and subsequent action plans to the challenges, weaknesses, and recommendations identified by the 2013 program review team are outlined further in Appendix I.

Appendix A

Student and Faculty Statistical Summary

| Health Promotion | 2013-14 | 2014-15 | 2015-16 | 2016-17 | 2017-18 |
|---------------------------------------|---------|---------|---------|---------|---------|
| SCH AND FTE | | | | | |
| ESS | 0 | 0 | 0 | 1,326 | 1,452 |
| Hlth Promo | 8,429 | 8,901 | 8,543 | 8,293 | 8,266 |
| PE | 2,454 | 2,773 | 2,764 | 2,564 | 2,551 |
| PEP | 2,861 | 2,788 | 2,744 | 1,982 | 2,345 |
| REC | 338 | 365 | 269 | 248 | 0 |
| OCRE | 0 | 0 | 0 | 260 | 997 |
| AT | 5,714 | 6,078 | 308 | n/a | n/a |
| ATHL | 352 | 383 | 0 | n/a | n/a |
| NUTR | 8,653 | 8,874 | 1,004 | n/a | n/a |
| | | | | | |
| Dept SCH Totals | 28,801 | 30,162 | 15,632 | 14,673 | 15,611 |
| Dept FTE Totals | 960.03 | 1005.40 | 521.07 | 489.10 | 520.37 |
| Program SCH Total ¹ | n/a | n/a | n/a | 8,293 | 8,266 |
| Program FTE Total ² | n/a | n/a | n/a | 276.43 | 275.53 |

HPHP prior to July 1, 2015
 Transition year, 7/1/15 to
 7/1/16
 New HPHP, 7/1/16 forward



| | | | | | |
|---|--------|---------|--------|-------|-----|
| Faculty FTE Total ⁶ | 44.86 | 46.78 | 42.68 | 24.69 | n/a |
| Dept FTE (student) | 960.03 | 1005.40 | 977.07 | 489.1 | n/a |
| Student/Faculty Ratio ⁷ | 21.40 | 21.49 | 22.89 | 19.81 | n/a |

| Health Promotion | 2013-14 | 2014-15 | 2015-16 | 2016-17 | 2017-18 |
|--|------------|------------|------------|------------|------------|
| MAJORS | | | | | |
| ESS | 146 | 154 | 161 | 167 | 203 |
| Hlth Promo | 144 | 179 | 182 | 184 | 193 |
| PE | | | | | |
| PEP | 72 | 57 | 51 | 62 | 68 |
| REC | | | | | |
| OCRE | n/a | n/a | n/a | 0 | 17 |
| AT | 326 | 365 | 384 | n/a | n/a |
| ATHL | | | | | |
| NUTR | n/a | n/a | n/a | n/a | n/a |
| | | | | | |
| Dept Major Totals | 688 | 755 | 778 | 413 | 481 |
| Program Major Totals ¹ | 144 | 179 | 182 | 184 | 193 |

| Health Promotion | 2013-14 | 2014-15 | 2015-16 | 2016-17 | 2017-18 |
|---|-----------|-----------|-----------|-----------|-----------|
| GRADS | | | | | |
| ESS | 39 | 25 | 28 | 31 | 37 |
| Hlth Promo | 41 | 58 | 53 | 48 | 52 |
| PE | | | | | |
| PEP | 9 | 14 | 13 | 8 | 10 |
| REC | | | | | |
| OCRE | n/a | n/a | n/a | 0 | 0 |
| AT | 42 | 49 | 41 | n/a | n/a |
| ATHL | | | | | |
| NUTR | n/a | n/a | n/a | n/a | n/a |
| | | | | | |
| Dept Grad Totals | 131 | 146 | 135 | 87 | 99 |
| Program Grad Totals ¹ | 41 | 58 | 53 | 48 | 52 |

Note: Data provided by Institutional Research

1. **Student Credit Hours Total** represents the total department-related credit hours for all students per academic year. Includes only students reported in Banner system as registered for credit at the time of data downloads.
2. **Student FTE Total** is the Student Credit Hours Total divided by 30.
3. **Student Majors** is a snapshot taken from self-report data by students in their Banner profile as of the third week of the Fall term for the academic year.
4. **Program Graduates** includes only those students who completed all graduation requirements by end of Spring semester for the academic year of interest. Students who do not meet this

requirement are included in the academic year in which all requirements are met. Summer is the first term in each academic year.

5. **Student Demographic Profile** is data retrieved from the Banner system.
6. **Faculty FTE** is the aggregate of contract and adjunct instructors during the fiscal year. **Contract FTE** includes instructional-related services done by "salaried" employees as part of their contractual commitments. **Adjunct FTE** includes instructional-related wages that are considered temporary or part-time basis. Adjunct wages include services provided at the Davis campus, along with on-line and Continuing Education courses.
7. **Student/Faculty Ratio** is the Student FTE Total divided by the Faculty FTE Total.

Summary Information (as needed): As shown in the table, the Health Promotion and Human Performance department houses many academic programs. Overall, the number of student majors and program graduates has increased with the most growth observed in exercise science and health promotion. Gender equity in students in the department programs is evident. The student/faculty ratio data indicates an increase in the number of students taking courses in the department and a higher student-to-faculty ratio over time. This data is in line with the increasing SCH data.

Appendix B

Current Faculty Profiles

| | |
|---|----------|
| Faculty – Health Promotion Program | |
| Headcount | 9 |
| With Doctoral Degrees (Including MFA and other terminal degrees, as specified by the institution) | 4 |
| Full-time Tenured | 2 |
| Full-time Non-Tenured (includes tenure-track) | 1 |
| Part-time | 1 |
| | |
| With Master’s Degrees | 5 |
| Full-time Tenured | 0 |
| Full-time Non-Tenured | 2 |
| Part-time | 3 |
| | |
| With Bachelor’s Degrees | 0 |
| Full-time Tenured | 0 |
| Full-time Non-tenured | 0 |
| Part-time | 0 |
| | |
| Other | 0 |
| Full-time Tenured | 0 |
| Full-time Non-tenured | 0 |
| Part-time | 0 |
| | |
| Total Headcount Faculty | 9 |
| Full-time Tenured | 2 |
| Full-time Non-tenured | 4 |
| Part-time | 3 |

Contract/Adjunct Faculty Profile

| Name | Gender | Rank | Tenure Status | Highest Degree | Years of Teaching | Areas of Expertise |
|---------------------------|--------|---------------------|------------------|----------------|------------------------|--|
| Michael Olpin | Male | Professor | Tenured | PhD | 18 (WSU) 27 (total) | Stress Management; Mind/Body Wellness; Applications of Technology; Wellness Coaching |
| Christopher Eisenbarth | Male | Associate Professor | Tenured | PhD | 11 (WSU) 20 (total) | Healthy Lifestyles; Stress Management; Foundations and Theory of Health Promotion; Research Methods |
| Yan Huang | Female | Assistant Professor | Tenure-Track | PhD | 2 (WSU) 6 (total) | Needs Assessment & Developing, Implementing, and Evaluating Health Promotion Programs; Substance Abuse Prevention; Adolescent Health |
| Heather Hunter | Female | Instructor | Non-tenure track | MS | 16 (WSU) 17 (total) | Methods of Health Education; Healthy Lifestyles; Human Sexuality |
| Christina Aguilar-Alvarez | Female | Instructor | Non-tenure track | MS | 3 (WSU) 5 (total) | Healthy Lifestyles; Human Nutrition; Women's Health; Senior Seminar |
| James Bemel | Male | Adjunct | Non Tenure Track | PhD | 11 (WSU & total) | Healthy Lifestyles, Human Sexuality |
| Sheri Bingham | Female | Adjunct | Non Tenure Track | M.Ed. | 13 (WSU & total) | Healthy Lifestyles |
| Shanyn Olpin | Female | Adjunct | Non Tenure Track | MS | 18 (WSU) | Healthy Lifestyles; Adolescent Health; Consumer Health |
| Susan Hadley | Female | Adjunct | Non Tenure Track | M.Ed. | 12 (WSU & total) | Human Sexuality; Stress Management |

Appendix C

Staff Profiles

| Name | Gender | Job Title | Years of Employment | Area of Expertise |
|---------------------|--------|--|---------------------|--|
| Barbara Dirks | Female | Internship Coordinator | 2 | Coordinate, implement, organize, and balance daily operations and office functions of the departmental related to internships, cooperative work experiences, and clinical sites. Team player with department faculty, students, student workers, and exempt and non-exempt staff co-workers. |
| Brittini Strickland | Female | Advisement Coordinator | 1 | Student advisement, knowledge of department and program careers and degree requirements, referral to faculty and campus entities, use WSU systems such as CAT tracks and canvas. Tracking and managing data. |
| Marcia Kawa | Female | Secretary/ Administrative Assistant | 1 | Class schedules, document preparation, purchasing, general office management, WSU systems, customer service, scheduling, tracking and managing data etc. |
| Derek DeBruin | Male | Recreation Manager | 4 | Coordinates and manages the climbing rock wall, supervises REC-prefixed course offerings, and teaches various REC courses. |
| Timothy Ruden | Male | Human Performance Lab Coordinator | 22 | Human performance lab functioning, research, technology, purchasing, customer services, and other. |

Appendix D

Financial Analysis Summary

| HPHP - Health Promotion, Human Performance, Nutrition, PE, PEP, Athl Trn | | | | | |
|---|------------------|------------------|--------------|--------------|--------------|
| Funding | 13-14 | 14-15 | 15-16 | 16-17 | 17-18 |
| Appropriated Fund | 2,037,518 | 2,216,706 | | | |
| CE - IW Wage | 415,695 | 475,967 | | | |
| Other: | | | | | |
| Special Legislative Appropriation | | | | | |
| Grants or Contracts | | | | | |
| Special Fees/Differential Tuition | 94,650 | 117,595 | | | |
| Total | 2,547,863 | 2,810,268 | | | |

| HPHP - Exercise Science, Health Promotion, Phys Ed, PEP, Recreation | | | | | |
|--|--------------|--------------|------------------|------------------|------------------|
| Funding | 13-14 | 14-15 | 15-16 | 16-17 | 17-18 |
| Appropriated Fund | | | 1,307,207 | 1,417,809 | 1,579,698 |
| CE - IW Wage | | | 254,870 | 204,897 | 220,608 |
| Other: | | | | | |
| Special Legislative Appropriation | | | | | |
| Grants or Contracts | | | | | |
| Special Fees/Differential Tuition | | | 76,122 | 189,192 | 18,084 |
| Total | | | 1,638,199 | 1,811,898 | 1,818,390 |

| | | | | | |
|--------------|---------|---------|---------|---------|---------|
| FTE | 960.0 | 1005.4 | 521.1 | 489.1 | 520.4 |
| Cost per FTE | \$2,654 | \$2,795 | \$3,144 | \$3,705 | \$3,494 |

| Program Name | | | | | |
|-----------------------------------|----------|----------|----------|----------|----------|
| Funding | 10-12 | 12-13 | 13-14 | 14-15 | 15-16 |
| Appropriated Fund | \$\$\$ | \$\$\$ | \$\$\$ | \$\$\$ | \$\$\$ |
| Other: | 00000.00 | 00000.00 | 00000.00 | 00000.00 | 00000.00 |
| Special Legislative Appropriation | | | | | |
| Grants or Contracts | | | | | |
| Special Fees/Differential Tuition | | | | | |
| Total | | | | | |

Financial Analysis Summary: Summary Information (as needed): HPHP houses many academic programs. Health Promotion is one of five majors. The data shown in the table above reflects the costs and funding for the department as a whole, a portion of which is representative of the HP program. The HPHP department instructional expenditures have remained relatively consistent from 2013-2018.

Appendix E

External Community Involvement Names & Organizations

| Organization | Contact |
|---|----------------------|
| Bear River Health Department | Allena Pierce |
| Boys & Girls Club | Kate Bideaux |
| Box Elder County Employee Wellness | Jenica Stander |
| Davis County Health Department | Ivy Melton-Sales |
| Davis Hospital, Diabetes Program | Cindy Johnston |
| Davis Moves, Davis School District | Kim Johnson |
| Friends for Sight | Kate Edwards |
| GBS Benefits Employee Wellness | Dianne Fullerton |
| GOAL Foundation | Clarisse Milijour |
| Head Start Davis County | Mark Dewsnup |
| Huntsman Cancer Institute | Garrett Harding |
| McKay-Dee Hospital CHIC Center | Elon Jensen |
| Mayo Clinic | Kaisa Weineke |
| Mountain Star Medical Hospital | Kylie Cottle |
| Ogden Clinic | Valerie Kirejewski |
| Orriant Employee Wellness | Kaile Calder |
| Pregnancy Care Center | Gwen Johnston |
| Ragnar Relay | Sheylane Barrett |
| Roy High School | Theresa Maas |
| Salt Lake Community College Wellness Center | Tatiana Burton |
| Salt Lake County Health Department | Tiffany Brinton |
| Select Health | Angela Bishop-Harmon |
| Tri-County Health Department | Jake Isaacson |
| Utah County Health Department | Stephanie Jones |
| Utah AIDS Foundation | Blake Johnson |
| Utah Department of Health | Rebecca Ward |
| Utah Department of Health, Birth Defects | Julie Southwick |
| Wasatch County Health Department | Jonelle Fitzgerald |
| Weber-Morgan Health Department | Jesse Bush |
| Women in Motion | Rachel Smith |
| Youth Impact | Pete Hall |
| YMCA of No. Utah | Jill Wood |

Appendix F

Site Visit Team (Intern & External Members)

| Name | Position | Contact |
|----------------------------------|---|--|
| Diana Abel, Internal Reviewer | Executive Director of Counseling, Health, and Wellness | Weber State University, Student Services Center, Suite 280 3885 West Campus Dr DEPT 1114 Ogden, UT 84408-1114 diannaabel@weber.edu 801-626-6406 |
| Julie Gast, External Reviewer | Professor of Health Education and Promotion, Department of Health, Physical Education, and Recreation | Utah State University 7000 Old Main Hill Logan, UT 87322-7000 juliegast@usu.edu 435-797-1490 |

Appendix G

2017-2018 Assessment Plan

| Goal 1: Provide students with a foundation in all Seven Areas of Responsibility for Health Education Specialists | | | |
|--|---|---|--|
| Objectives | Measures | Assessment Strategy | Schedule |
| Objective 1: At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 1: Assess needs, resources, and capacity for health education/ promotion. | HLTH 3000: 80% of students will score at or above 70% on exam questions related to Responsibility 1. | Chi-tester online assessment tool with items aligned to program standards: 123 questions. | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4990: 60% of students who take the CHES proxy test will score at or above 70% for Responsibility 1. | Chi-tester online assessment tool with items aligned to program standards: 15 questions. | During the fall semester, for all sections in the prior academic year. |
| | HLTH 3000: 80% of students will analyze relationships among behavioral and environmental factors that influence health at a satisfactory level (i.e., assignment scores $\geq 70\%$). | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 3200: 80% of students will demonstrate at a satisfactory level (assignment scores $\geq 70\%$) the factors that facilitate learning through the development of a lesson plan. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4013: 80% of students will demonstrate at a satisfactory level (assignment scores $\geq 70\%$) the skill to access and review scholarly literature related to health. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4150: 80% of students will develop at a satisfactory level (assignment scores $\geq 70\%$) an assessment plan for health | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |

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| | education/promotion. | | |
| | HLTH 4150: 80% of students will demonstrate at a satisfactory level (assignment scores $\geq 70\%$) the skill to access existing information and data related to health. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4150: 80% of students will complete at a satisfactory level (assignment scores $\geq 70\%$) a community assessment to examine the relationships among behavioral, environmental, and other factors that influence health. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4150: 80% of students will participate at satisfactory level (assignment scores $\geq 70\%$) in an online discussion to examine factors that enhance or impede the process of health education/promotion. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | NUTR 3420: 80% of students will complete the Information Literacy Quiz at a satisfactory level (i.e., score $> \text{ or } = 70\%$). | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HAS 3190: 70% of students will research and report at a satisfactory level ($\geq 70\%$ assignment scores) the health traditions of individuals from cultures different than their own. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HIM 3200: 90% of students will be able to demonstrate basic principles of epidemiology at a satisfactory level (assignment and exam scores $\geq 70\%$). | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HAS 3230: 90% of students will conduct at a satisfactory level (assignment scores $\geq 70\%$) a | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |

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| | personal SWOT analysis identifying their various strengths, weakness, with action items relating to those findings. | | year. |
| | HAS 3150: 90% of students will complete an assignment at a satisfactory level (assignment score > or = 70%) to assess population health needs of their local community and associated interventions. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HAS 3150: 90% of students will complete an assignment locating mortality rates in Weber County at a satisfactory level (assignment score > or = 70%). | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| Objective 2: At the time of graduation, at least 80% of students achieve 70% competency on identified measures of Responsibility 2: Plan health education/promotion. | HLTH 3000: 80% of students will score 70% or above on exam questions related to Responsibility 2. | Chi-tester online assessment tool with items aligned to program standards: 88 questions. | During the fall semester, for all sections in the prior academic year. |
| | HLTH 3000: 80% of students will be able to identify and apply correctly (80% or better assignment score) theoretical constructs to a hypothetical case study in health. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4990: 50% of students who take the CHES proxy test will score at or above 70% for Responsibility 2. | Chi-tester online assessment tool with items aligned to program standards: 23 questions. | During the fall semester, for all sections in the prior academic year. |
| | HLTH 3200: 80% of students will develop a health education lesson plan at a satisfactory level (assignment score \geq 70%) to address a target population, setting, and topic. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4150: 80% of students will | Student data recorded using the | During the fall semester, for all |

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| | construct at a satisfactory level (assignment score $\geq 70\%$) goals and objectives to plan a health program. | WSU learning management system (Canvas). | sections in the prior academic year. |
| | HLTH 4150: 80% of students will develop at a satisfactory level (assignment score $\geq 70\%$) the design and strategy for a health intervention. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4150: 80% of students will develop at a satisfactory level (assignment score $> \text{ or } = 70\%$) a plan for the delivery of a health intervention. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| Objective 3: At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 3: Implement health education. | HLTH 3000: 80% of students will score at or above 70% on exam questions related to Area of Responsibility 3. | Chi-tester online assessment tool with items aligned to program standards: 54 questions. | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4990: 50% of students who take the CHES proxy test will score at or above 70% for Responsibility 3. | Chi-tester online assessment tool with items aligned to program standards: 37 questions. | During the fall semester, for all sections in the prior academic year. |
| | HLTH 3200: 80% of students will demonstrate at a satisfactory level (assignment scores $\geq 70\%$) the practical application of health education theories to educate a target audience. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 3000: 80% of students will demonstrate at a satisfactory level (assignment score $\geq 70\%$) the practical application of ethical principles in health promotion. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HAS 3150: 90% of students will observe and report at a satisfactory level (assignment score $> \text{ or } = 70\%$) program implementation by local | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |

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| | health educators and practitioners. | | |
| Objective 4: At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 4: Conduct evaluation and research related to health education/promotion. | HLTH 3000: 80% of students will score at or above 70% on exam questions related to Responsibility 4. | Chi-tester online assessment tool with items aligned to program standards: 37 questions. | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4990: 50% of students who take the CHES proxy test will score at or above 70% for Area of Responsibility 4. | Chi-tester online assessment tool with items aligned to program standards: 26 questions. | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4013: 80% of students will conduct at a satisfactory level (assignment scores \geq 70%) searches of electronic databases to locate peer-reviewed literature for specific health topics. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4013: 80% of students will interpret and critique at satisfactory levels (assignment scores \geq 70%) research material obtained from scholarly sources. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4013: 80% of students will synthesize and draw conclusions at a satisfactory level (assignment scores \geq 70%) research findings obtained from scholarly sources. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4013: 80% of students will communicate at a satisfactory level (assignment scores \geq 70%) recommendations from research findings for a selected priority population. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | NUTR 3420: 80% of students will complete the Major Project (Written) at a satisfactory level (i.e., score $>$ or $=$ 70%). | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HIM 3200: 90% of students will | Student data recorded using the | During the fall semester, for all |

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| | complete at a satisfactory level (assignment score > or = 70%) a paper that analyzes and interprets epidemiological data. | WSU learning management system (Canvas). | sections in the prior academic year. |
| | HIM 3200: 80% of students will earn a score of 70% or higher in all course examinations and quizzes. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| Objective 5: At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 5: Administer and manage health education/promotion. | HLTH 3000: 80% of students will score at or above 70% on exam questions related to Responsibility 5. | Chi-tester online assessment tool with items aligned to program standards: 19 questions. | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4990: 50% of students who take the CHES proxy test will score at or above 70% for Area of Responsibility 5. | Chi-tester online assessment tool with items aligned to program standards: 16 questions. | During the fall semester, for all sections in the prior academic year. |
| | HAS 3230: 90% of students will conduct at a satisfactory level (assignment scores ≥ 70%) a personal leadership analysis to identify and expand their strengths and weakness to manage and administer health programs. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HAS 3230: 90% of students will complete at a satisfactory level (assignment score of 70% or higher) a group project to demonstrate adaptable and innovative leadership styles. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HAS 3230: 80% of students will complete peer exercises at a satisfactory level (assignment score > or = 73%). | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HAS 3000: 80% of students will complete collaborative exercises with peers (research & plan a presentation) exercises at a | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |

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| | satisfactory level (assignment score > or = 73%). | | |
| Objective 6: At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 6: Serve as a health education resource person. | HLTH 3000: 80% of students will score at or above 70% on exam questions related to Responsibility 6. | Chi-tester online assessment tool with items aligned to program standards: 118 questions. | During the fall semester, for all sections in the prior academic year. |
| | HLTH 3000: 80% of students will be able to critique online resources for accuracy, relevance, and timeliness ($\geq 70\%$ assignment score). | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4990: 50% of students who take the CHES proxy test will score at or above 70% for Area of Responsibility 6. | Chi-tester online assessment tool with items aligned to program standards: 23 questions. | During the fall semester, for all sections in the prior academic year. |
| | HLTH 3200: 80% of students will evaluate resource materials for accuracy, relevance, and timeliness for intended audiences at satisfactory levels (assignment scores $\geq 70\%$). | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4013: 80% of students will identify at a satisfactory level (assignment scores $\geq 70\%$) valid information resources for targeted populations. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HAS 3000: 90% of students will be able to present and document at a satisfactory level (assignment scores $\geq 70\%$) a scholarly research that examines a current major issue in the U.S. health care system. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| Objective 7: At the time of graduation, at least 80% of students will achieve 70% competency on identified measures | HLTH 3000: 80% of students will score at or above 70% on exam questions related to Responsibility 7. | Chi-tester online assessment tool with items aligned to program standards: 145 questions. | During the fall semester, for all sections in the prior academic year. |

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| of Responsibility 7: Communicate, promote, and advocate for health, health education, and the profession. | HLTH 3000: 80% of students will be able to describe at a satisfactory level (assignment score > or = 70%) the seven major responsibilities for the health education specialists. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 3000: 80% of students will be able to describe at a satisfactory level (assignment score > or = 70%) the benefits of participating in professional organizations. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4990: 50% of students who take the CHES proxy test in HLTH 4990 will score at or above 70% for Area of Responsibility 7. | Chi-tester online assessment tool with items aligned to program standards: 14 questions. | During the fall semester, for all sections in the prior academic year. |
| | HLTH 3200: 80% of students will analyze a successful social marketing campaign for a targeted audience at a satisfactory level (assignment scores ≥ 70%). | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 3200: 80% of students will deliver at a satisfactory level (assignment scores ≥ 70%) a health education presentation using a variety of communication methods and strategies. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4013: 80% of students will access resources at satisfactory level (assignment scores ≥ 70%) related to identified advocacy needs. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4013: 80% of students will explain at satisfactory level (assignment scores ≥ 70%) the major responsibilities of the health education specialists. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 3000: 80% of students will be able to describe at a satisfactory | Student data recorded using the WSU learning management system | During the fall semester, for all sections in the prior academic |

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| | level (assignment score > or = 70%) current and emerging issues in health promotion that require advocacy. | (Canvas). | year. |
| | NUTR 3420: 80% of students will complete a final presentation on a culturally-relevant issue related to diet and health at a satisfactory level (i.e., presentation score > or = 70%). | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HAS 3000: 90% of students will develop an oral presentation on complementary and alternative strategies at a satisfactory level (assignment score > or = 70%). | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HAS 3230: 90% of students will complete a presentation to demonstrate basic models of communication with a grade of 70% or better | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| Education Goal #2: Provide a Social Science General Education (SSGE) course for the University | | | |
| Objectives | Measures | Assessment Strategy | Schedule |
| Objective 1: By the completion of the social science general education course (SSGE), students will achieve 70% competency on identified measures related to SSGE Outcome 1: Interactions between individuals and society. | HLTH 1030: By the completion of the course, at least 70% of students will score 70% or above on exam items related to Outcome 1: Interactions between individuals and society. | Chi-tester online assessment tool with items aligned to SSGE Outcome 1: 58 questions. | During the fall semester, for all sections in the prior academic year. |
| | HLTH 1030: By the completion of the course, at least 70% of students will complete at a satisfactory level ($\geq 70\%$ assignment score) a socio-cultural analysis of a health issue in the U.S. using the ecological model. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| Objective 2: By the completion of the social science general education course (SSGE), students | HLTH 1030: By the completion of the course, at least 70% of students will score 70% or above on exam | Chi-tester online assessment tool with items aligned to SSGE Outcome 1: 50 questions. | During the fall semester, for all sections in the prior academic year. |

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| will achieve 70% competency on identified measures related to SSGE Outcome 2: Application of concepts, theories, and methods. | items related to Outcome 2: Applications of concepts, theories, and methods. | | |
| | HLTH 1030: By the completion of the course, at least 70% of students will identify at satisfactory levels ($\geq 70\%$ assignment score) evidence-based strategies and theories to employ for behavior change. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| Objective 3: By the completion of the social science general education course (SSGE), students will achieve 70% competency on identified measures related to SSGE Outcome 3: Diverse perspectives. | HLTH 1030: By the completion of the course, at least 70% of students will score 70% or above on exam items related to Outcome 3: Diverse perspectives. | Chi-tester online assessment tool with items aligned to SSGE Outcome 3: 23 questions. | During the fall semester, for all sections in the prior academic year. |
| | HLTH 1030: By the completion of the course, at least 70% of students will complete at satisfactory levels (assignment scores 70% or above) discussion boards to examine the challenges of ethnicity, race, religion, gender, and sexual orientation to the health care system. | Chi-tester online assessment tool with items aligned to program standards: 5 questions. | During the fall semester, for all sections in the prior academic year. |

| Goal 3: Provide students with meaningful and mutually beneficial engagements with community partners | | | |
|---|---|--|--|
| Objectives | Measures | Assessment Strategy | Schedule |
| Objective 1: By the time of graduation, 90% of students will complete a mutually beneficial internship with a community partner. | HLTH 4860: 90% of students will earn an 80% or higher on their final grade for the internship. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4860: 90% of students will complete a minimum of 60 internship hours per credit of HLTH 4860. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |
| | HLTH 4860: 90% of students will be evaluated satisfactorily (80% or higher) by their internship site supervisor. | Student data recorded using the WSU learning management system (Canvas). | During the fall semester, for all sections in the prior academic year. |

Appendix H

2017-2018 Evidence of Learning Table/Assessment Results for Previous Academic Year

| Goal 1: Provide students with a foundation in all Seven Areas of Responsibility for Health Education Specialists | | | |
|---|--|--|---|
| Objectives | Measures | 2017-2018 Results | Action Plan |
| Objective 1: At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 1: Assess needs, resources, and capacity for health education. | HLTH 3000: 80% of students will score at or above 70% on exam questions related to Responsibility 1. | 97% of students achieved at least 70% competency on exam questions related to Responsibility 1. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4990: 60% of students who take the CHES proxy test will score at or above 70% for Responsibility 1. | 80% of students scored at or above 70% for Area of Responsibility 1. | No curricular or pedagogical changes needed at this time. |
| | HLTH 3000: 80% of students will analyze relationships among behavioral and environmental factors that influence health at a satisfactory level (i.e., assignment scores \geq 70%). | 98% of students demonstrated at a satisfactory level (assignments scores \geq 70%) skills to analyze relationships among behavioral and environmental factors that influence health. | No curricular or pedagogical changes needed at this time. |
| | HLTH 3200: 80% of students will develop a lesson plan at a satisfactory level (assignment scores \geq 70%) to demonstrate the factors that influence the process by which people learn. | 98% of students demonstrated at a satisfactory level (assignments scores \geq 70%) necessary skills to develop a lesson plan to influence the process by which people learn. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4013: 80% of students will demonstrate at a satisfactory level (assignment scores \geq 70%) the skill to access and review scholarly literature related to health. | 100% of students demonstrated at a satisfactory level (assignment scores \geq 70%) the skill to access existing information and data related to health. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4150: 80% of students will develop at a satisfactory level (assignment scores \geq 70%) an assessment plan for health education/promotion. | 98% developed at a satisfactory level (assignment scores \geq 70%) an assessment plan for health education/promotion. | No curricular or pedagogical changes needed at this time. |

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| | HLTH 4150: 80% of students will demonstrate at a satisfactory level (assignment scores $\geq 70\%$) the skill to access existing information and data related to health. | 87% of students will demonstrated at a satisfactory level (assignment scores $\geq 70\%$) the skill to access existing information and data related to health. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4150: 80% of students will complete at a satisfactory level (assignment scores $\geq 70\%$) a community assessment to examine the relationships among behavioral, environmental, and other factors that influence health. | 92% of students completed at a satisfactory level (assignment scores $\geq 70\%$) a community assessment to examine the relationships among behavioral, environmental, and other factors that influence health. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4150: 80% of students will participate at satisfactory level (assignment scores $\geq 70\%$) in an online discussion to examine factors that enhance or impede the process of health education/promotion. | 93% of students participated at a satisfactory level (assignment scores $\geq 70\%$) in an online discussion to examine factors that enhance or impede the process of health education/promotion. | No curricular or pedagogical changes needed at this time. |
| | NUTR 3420: 80% of students will complete the Information Literacy Quiz at a satisfactory level (i.e., score $\geq 70\%$). | 85% of students completed the Information Literacy Quiz at a satisfactory level (i.e., score $>$ or $= 70\%$). | No curricular or pedagogical changes needed at this time. |
| | HAS 3190: 70% of students will research and report at a satisfactory level (assignment scores $\geq 70\%$) the health traditions of individuals coming from cultures different than their own.* | 92% of students scored 70% or higher. | No curricular or pedagogical changes needed at this time. |
| | HIM 3200: 90% of students will be able to demonstrate basic principles of epidemiology at a satisfactory level (assignment and exam scores $\geq 70\%$). | 100% of students scored 70% or better on the epidemiology assignments and exams. | No curricular or pedagogical changes needed at this time. |

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| | HAS 3230: 90% of students will conduct at a satisfactory level (assignment scores $\geq 70\%$) a personal SWOT analysis identifying their various strengths, weakness, with determined action items relating to those findings. | 97% of students scored 70% or better on the SWOT analysis identifying their various strengths, weakness, with determined action items relating to those findings. | No additional action is required at this time. |
| | HAS 3150: 80% of students will complete an assignment at a satisfactory level (assignment $\geq 70\%$) to assess population health needs of their local community and associated interventions.* | 89% of students completed the assignment with a grade of 70% or better. | No additional action is required at this time. |
| | HAS 3150: 80% of students will complete an assignment locating mortality rates in Weber County at a satisfactory level (assignment score $\geq 70\%$). | 81% of students completed the assignment with a grade of 70% or better. | No additional action is required at this time. |
| Goal 1: Provide students with a foundation in all Seven Areas of Responsibility for Health Education Specialists | | | |
| Objectives | Measures | 2017-2018 Results | Action Plan |
| Objective 2: At the time of graduation, at least 80% of students achieve 70% competency on identified measures of Responsibility 2: Plan health education/promotion. | HLTH 3000: 80% of students will score 70% or above on exam questions related to Responsibility 2. | 92% of students scored at or above 70% for Area of Responsibility 2. | No curricular or pedagogical changes needed at this time. |
| | HLTH 3000: 80% of students will be able to identify and apply correctly (80% or better assignment score) theoretical constructs to a hypothetical case study in health. | 94% of students completed the assignment with a grade of 70% or better. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4990: 50% of students who take the CHES proxy test will score at or above 70% for Area of Responsibility 2. | 50% of students scored at or above 70% for Area of Responsibility 2. | No curricular or pedagogical changes needed at this time. |
| | HLTH 3200: 80% of students will | 98% of students developed a health | No curricular or pedagogical |

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| | develop a health education lesson plan at a satisfactory level (assignment score $\geq 70\%$) to address a target population, setting, and topic. | education lesson plan at a satisfactory level (assignment score $\geq 70\%$) to address a target population, setting, and topic. | changes needed at this time. |
| | HLTH 4150: 80% of students will construct at a satisfactory level (assignment score $\geq 70\%$) goals and objectives to plan a health program. | 95% of students constructed at a satisfactory level (assignment score $\geq 70\%$) goals and objectives to plan a health program. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4150: 80% of students will develop at a satisfactory level (assignment score $\geq 70\%$) the design and strategy for a health intervention. | 100% of students developed at a satisfactory level (assignment score $\geq 70\%$) the design and strategy for a health intervention. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4150: 80% of students will develop at a satisfactory level (assignment score $\geq 70\%$) a plan for the delivery of a health intervention. | 100% of students developed at a satisfactory level (assignment score $\geq 70\%$) a plan for the delivery of a health intervention. | No curricular or pedagogical changes needed at this time. |
| Objective 3: At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 3: Implement health education. | HLTH 3000: 80% of students will score at or above 70% on exam questions related to Responsibility 3. | 96% of students scored at or above 70% for Area of Responsibility 3. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4990: 50% of students who take the CHES proxy test will score at or above 70% for Responsibility 3. | 66% of students scored above 70% for Area of Responsibility 3. | No curricular or pedagogical changes needed at this time. Threshold will be raised to 55% for next academic year. |
| | HLTH 3200: 80% of students will demonstrate at a satisfactory level (assignment scores $\geq 70\%$) the practical application of health education theories to educate a target audience. | 100% of students demonstrated at a satisfactory level (assignment scores $\geq 70\%$) the practical application of health education theories to educate a target audience. | No curricular or pedagogical changes needed at this time. |
| | HLTH 3000: 80% of students will demonstrate at a satisfactory level (assignment scores $\geq 70\%$) the | 87% of students demonstrated at a satisfactory level (assignment scores $\geq 70\%$) the practical | |

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| | practical application of ethical principles in health education. | application of ethical principles in health education. | |
| | HAS 3150: 80% of students will observe and report at a satisfactory level (assignment score > or = 70%) program implementation by local health educators and community health practitioners | 81% of students scored at or above 70% for Area of Responsibility 3 | No curricular or pedagogical changes needed at this time. |
| Objective 4: At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 4: Conduct evaluation and research related to health education/promotion. | HLTH 3000: 80% of students will score at or above 70% on exam questions related to Responsibility 4. | 88% of students scored at or above 70% for Area of Responsibility 4. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4990: 50% of students who take the CHES proxy test will score at or above 70% for Area of Responsibility 4. | 52% of students scored above 70% for Area of Responsibility 4. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4013: 80% of students will conduct at a satisfactory level (assignment scores ≥ 70%) searches of electronic databases to locate peer-reviewed literature for specific health topics. | 92% of students conducted at a satisfactory level (assignment scores ≥ 70%) searches of electronic databases to locate peer-reviewed literature for specific health topics. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4013: 80% of students will interpret and critique at satisfactory levels (assignment scores ≥ 70%) research material obtained from scholarly sources. | 96% of students interpreted and critiqued at satisfactory levels (assignment scores ≥ 70%) research material obtained from scholarly sources. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4013: 80% of students will synthesize and draw conclusions at a satisfactory level (assignment scores ≥ 70%) research findings obtained from scholarly sources. | 98% of students synthesized and formed conclusions at a satisfactory level (assignment scores ≥ 70%) the research findings obtained from scholarly sources. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4013: 80% of students will communicate at a satisfactory level (assignment scores ≥ 70%) recommendations from research | 96% of students will communicated at a satisfactory level (assignment scores ≥ 70%) recommendations from research | No curricular or pedagogical changes needed at this time. |

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| | findings for a selected priority population. | findings for a selected priority population. | |
| | NUTR 3420: 80% of students will complete the Major Project (Written) at a satisfactory level (i.e., score > or = 70%). | 90% of students completed the assignment with a grade of 70% or better. | No curricular or pedagogical changes needed at this time. |
| | HIM 3200: 90% of students will complete at a satisfactory level (assignment score > or = 70%) a paper that analyzes and interprets epidemiological data.* | 100% of students completed the assignment with a grade of 70% or better. | No curricular or pedagogical changes needed at this time. |
| | HIM 3200: 80% of students will earn a score of 70% or higher in all course examinations and quizzes. | 84% of students completed the assignment with a grade of 70% or better. | No curricular or pedagogical changes needed at this time. |
| Objective 5: At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 5: Administer and manage health education/promotion. | HLTH 3000: 80% of students will score at or above 70% on exam questions related to Responsibility 5. | 99% of students scored at or above 70% for Area of Responsibility 5. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4990: 50% of students who take the CHES proxy test will score at or above 70% for Area of Responsibility 5. | 55% of students scored above 70% for Area of Responsibility 5. | No curricular or pedagogical changes needed at this time. |
| | HAS 3230: 90% of students will conduct at a satisfactory level (assignment scores \geq 70%) a personal leadership analysis to identify and expand their strengths and weakness to manage and administer health programs. | 97% of students completed the assignment with a grade of 70% or better. | No curricular or pedagogical changes needed at this time. |
| | HAS 3230: 90% of students will complete at a satisfactory level (assignment score of 70% or higher) a group project to demonstrate adaptable and innovative leadership styles. | 100% of students completed the project with a grade of 70% or better. | No curricular or pedagogical changes needed at this time. |
| | HAS 3230: 80% of students will | 97% of students completed the | No curricular or pedagogical |

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| | complete peer exercises at a satisfactory level (assignment score > or = 73%).* | exercises with a grade of 70% or better. | changes needed at this time. |
| | HAS 3000: 80% of students will complete collaborative exercises with peers (research & plan a presentation) exercises at a satisfactory level (assignment score > or = 73%).* | 95% of students completed the assignment with a grade of 70% or better. | No curricular or pedagogical changes needed at this time. |
| Objective 6: At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 6: Serve as a health education resource person. | HLTH 3000: 80% of students will score at or above 70% on exam questions related to Responsibility 6. | 86% of students scored at or above 70% for Area of Responsibility 6. | No curricular or pedagogical changes needed at this time. |
| | HLTH 3000: 80% of students will be able to critique online resources for accuracy, relevance, and timeliness ($\geq 70\%$ assignment score). | 91% of students completed the assignment with a grade of 70% or better. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4990: 50% of students who take the CHES proxy test will score at or above 70% for Area of Responsibility 6. | 36% of students scored above 70% for Area of Responsibility 6. | The HP program will continue to offer a CHES Exam preparation workshop for interested students. Current curriculum also will be evaluated to identify courses to infuse further with content and skills related to Area of Responsibility 6. |
| | HLTH 3200: 80% of students will evaluate resource materials for accuracy, relevance, and timeliness for intended audiences at satisfactory levels (assignment scores $\geq 70\%$). | 100% of evaluated resource materials for accuracy, relevance, and timeliness for intended audiences at satisfactory levels (assignment scores $\geq 70\%$). | No curricular or pedagogical changes needed at this time. |
| | HLTH 4013: 80% of students will identify at a satisfactory level (assignment scores $\geq 70\%$) valid information resources for targeted | 89% of students will identified at a satisfactory levels (assignment scores $\geq 70\%$) valid information resources for targeted populations. | No curricular or pedagogical changes needed at this time. |

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| | populations. | | |
| | HAS 3000: 90% of students will be able to present and document at a satisfactory level (assignment scores \geq 70%) a scholarly research that examines a current major issue in the U.S. health care system. | 95% of students completed the assignment with a grade of 70% or better. | No curricular or pedagogical changes needed at this time. |
| Objective 7: At the time of graduation, at least 80% of students will achieve 70% competency on identified measures of Responsibility 7: Communicate, promote, and advocate for health, health education, and the profession. | HLTH 3000: 80% of students will score at or above 70% on exam questions related to Responsibility 7. | 95% of students scored at or above 70% for Area of Responsibility 6. | No curricular or pedagogical changes needed at this time. |
| | HLTH 3000: 80% of students will be able to describe at a satisfactory level (assignment score \geq 70%) the seven major responsibilities for the health education specialists. | 89% of students completed the assignment with a grade of 70% or better. | No curricular or pedagogical changes needed at this time. |
| | HLTH 3000: 80% of students will be able to describe at a satisfactory level (assignment score $>$ or $=$ 70%) the benefits of participating in professional organizations. | 88% of students completed the assignment with a grade of 70% or better. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4990: 50% of students who take the CHES proxy test in HLTH 4990 will score at or above 70% for Area of Responsibility 7. | 72% of students scored above 70% for Area of Responsibility 7. | No curricular or pedagogical changes needed at this time. |
| | HLTH 3200: 80% of students will analyze a successful social marketing campaign for a targeted audience at a satisfactory level (assignment scores \geq 70%). | 100% of analyzed a successful social marketing campaign for a targeted audience at a satisfactory level (assignment scores \geq 70%). | No curricular or pedagogical changes needed at this time. |
| | HLTH 3200: 80% of students will deliver at a satisfactory level (assignment scores \geq 70%) a health education presentation using a variety of communication methods and strategies. | 99% of students will deliver at a satisfactory level (assignment scores \geq 70%) a health education presentation using a variety of communication methods and strategies. | No curricular or pedagogical changes needed at this time. |

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| | HLTH 4013: 80% of students will access resources at satisfactory level (assignment scores \geq 70%) related to identified advocacy needs. | 89% of students accessed resources at satisfactory level (assignment scores \geq 70%) related to identified advocacy needs. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4013: 80% of students will explain at satisfactory level (assignment scores \geq 70%) the major responsibilities of the health education specialists. | 96% of students will explain at satisfactory level (assignment scores \geq 70%) the major responsibilities of the health education specialists. | No curricular or pedagogical changes needed at this time. |
| | HLTH 3000: 80% of students will be able to describe at a satisfactory level (assignment score $>$ or $=$ 70%) current and emerging issues in health promotion that require advocacy. | 89% of students described at a satisfactory level (assignment score $>$ or $=$ 70%) current and emerging issues in health promotion that require advocacy. | No curricular or pedagogical changes needed at this time. |
| | HAS 3000: 90% of students will develop an oral presentation on complementary and alternative strategies at a satisfactory level (assignment score $>$ or $=$ 70%). | 95% of students completed the presentation with a grade of 70% or better. | No curricular or pedagogical changes needed at this time. |
| | HAS 3230: 90% of students will complete a presentation to demonstrate basic models of communication with a grade of 70% or better | 90% of students completed the presentation with a grade of 70% or better. | No curricular or pedagogical changes needed at this time. |
| Goal #2: Provide a Social Science General Education (SSGE) course for the University | | | |
| Objectives | Measures | 2017-2018 Results | Action Plan |
| Objective 1: By the completion of the social science general education course (SSGE), students will achieve 70% competency on identified measures related to SSGE Outcome 1: Interactions between individuals and society. | HLTH 1030: By the completion of the course, at least 70% of students will score 70% or above on exam items related to Outcome 1: Interactions between individuals and society.* | 79% of students scored 70% or higher on exam items related to Outcome 1. | No curricular or pedagogical changes needed at this time |
| | HLTH 1030: By the completion of the course, at least 70% of students | 90% of students completed the assignment with a grade of 70% or | No curricular or pedagogical changes needed at this time |

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| | will complete at a satisfactory level (assignment score 70% or above) a sociocultural analysis of a health issue in the U.S. using the ecological model.* | better. | |
| Objective 2: By the completion of the social science general education course (SSGE), students will achieve 70% competency on identified measures related to SSGE Outcome 2: Application of concepts, theories, and methods. | HLTH 1030: By the completion of the course, at least 70% of students will score 70% or above on exam items related to Outcome 2: Applications of concepts, theories, and methods. | 90% of students scored 70% or higher on exam items related to Outcome 2. | No curricular or pedagogical changes needed at this time |
| | HLTH 1030: By the completion of the course, at least 70% of students will complete at satisfactory levels (assignment scores 70% or above) evidence-based strategies to employ for behavior change. | 92% of students completed the assignment with a grade of 70% or better. | No curricular or pedagogical changes needed at this time |
| Objective 3: By the completion of the social science general education course (SSGE), students will achieve 70% competency on identified measures related to SSGE Outcome 3: Diverse perspectives. | HLTH 1030: By the completion of the course, at least 70% of students will score 70% or above on exam items related to Outcome 3: Diverse perspectives.* | 79% of students scored 70% or higher on exam items related to Outcome 3. | No curricular or pedagogical changes needed at this time |
| | HLTH 1030: By the completion of the course, at least 70% of students will complete at satisfactory levels (assignment scores 70% or above) discussion boards to examine the challenges of ethnicity, race, religion, gender, and sexual orientation to the health care system.* | 89% of students completed the assignment with a grade of 70% or better. | No curricular or pedagogical changes needed at this time |

| Goal #3: Provide students with meaningful and mutually beneficial engagements with community partners | | | |
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| Objectives | Measures | 2017-2018 Results | Action Plan |
| Objective 1: By the time of graduation, 90% of students will complete a mutually beneficial internship with a community partner. | HLTH 4860: 90% of students will earn an 80% or higher on their final grade for the internship.* | 95% of students earned an 80% or higher on their final grade for the internship. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4860: 90% of students will complete a minimum of 60 internship hours per credit of HLTH 4860.* | 97% of students completed a minimum of 60 internship hours per credit of HLTH 4860. | No curricular or pedagogical changes needed at this time. |
| | HLTH 4860: 90% of students will be evaluated satisfactorily (80% or higher) by their internship site supervisor.* | 97% of students earned satisfactory ratings (80% or higher) by their internship supervisor. | No curricular or pedagogical changes needed at this time. |

Note. *Denotes high-impact educational practice (e.g., collaborative assignments, undergraduate research, diversity/worldviews, community-based learning, and/or internships).

Summary of Artifact Collection Procedure

| Artifact | Goal/Objective Measured | When/How Collected? | Where Stored? |
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| Exam, assignment, and final grades for relevant courses | Goal 1: Objective 1, Measures 1-13 Objective 2, Measures 1-8 Objective 3, Measures 1-8 Objective 4, Measures 1-7 Objective 5, Measure 1-6 Objective 6, Measures 1-5 Objective 7, Measures 1-10 Goal 2: Objective 1, Measures 1-2 Objective 2, Measures 1-3 Objective 3, Measures 1-2 Goal 3: Objective 1, Measures 1-3 | Assessment data are compiled during the fall semester of each academic year. Instructors for individual courses submit documentation to the Program Director. | Electronic copies are stored on HP Program Assessment Box folder; Artifacts also are archived using the Canvas Learning Management System, and the Chi Tester System. |

Appendix I

Summary of Recent Actions Based on Previous Program Review

| Challenge Identified | Initial Response & Action Plan | Progress & Current Action Plan |
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| <p>The site review team noted that other Utah institutions have greater number of faculty members to serve similar amounts of HP students. However, all four of Weber’s faculty members were tenure-track professors holding terminal degrees in their fields.</p> | <p>At present, the program is at instructional capacity, and periodically, an insufficient number of faculty exist to provide specific content courses (e.g., HLTH 4220, Women’s Health Issues) and to teach select professional courses within the School Health Minor (e.g., HLTH 3050, School Health Program). The HP Program will investigate in Fall 2014 the feasibility of hiring an additional tenure-track faculty member to teach courses for the health teaching minor. In the meantime, the HP Program will maintain a strong pool of qualified adjunct faculty to meet instructional responsibilities.</p> | <p>The Health Promotion (HP) Program hired three new faculty members for the 2017-2018 academic year. These new faculty members have enhanced the instructional capacity in needed areas (e.g., program planning, substance abuse) and assisted with various service roles within the program (e.g., BIS committees). The HP program also continues to maintain a strong pool of qualified adjunct faculty to meet instructional responsibilities.</p> |
| <p>Both the site visit team and the HP faculty noted that for some students the CHES certification was very important for their professional careers, while for others, less important. This presents a dilemma: the HP Program has carefully articulated its program to meet CHES competencies; however, some students may not be aware of the significance of the importance of CHES for their future employment.</p> | <p>Based on formal exit surveys and informal discussions with students, the HP Program faculty have ascertained that not all students majoring in health promotion are interested in seeking national certification as health education specialists. For example, some students are more interested in content-related courses (e.g., Mind-Body Wellness), rather than process-oriented courses (e.g., Health Promotion Research and Assessment) geared toward national certification. To monitor students’ interest in national certification and preferences for specific content- and process-oriented courses, the HP Program administers a biannual senior exit survey to graduating students. For the 2013-2014 academic year, results of the Senior Exit Survey revealed that 83% of students anticipated taking the national examination for certification as a health education specialist given by the National Commission for Health Education Credentialing (NCHEC). In terms of</p> | <p>Instructors of core-required courses continue to identify on course syllabi the NCHEC competencies covered in the courses.</p> <p>Based on the 2017-2018 Senior Exit Survey (Item 9), 63% of students anticipate taking the national examination for certification as a health education specialist. Although this percentage is slightly lower than previous years (e.g., 63% in 2017), the survey results suggest that the majority of students in the HP Program are both knowledgeable of, and inclined toward, national certification.</p> |

students' preferred areas of coursework, the exit survey notes a strong interest among students in a Mind-Body Wellness track (42% of respondents), followed by areas of concentration in community/public health (25% of respondents).

| Weakness Identified | Initial Response & Action Plan | Progress & Current Action Plan |
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| <p>HP Students knew about CHES and that it was emphasized in the program's classes, but they felt like they need more information and preparation in order to "sit" for the national exam.</p> <p>HP Students commented that the courses in the program were "low stress" courses. They compared them to other courses on campus like anatomy, physiology, and microbiology and stated that it was a relief to be able to balance those courses with the HP program courses. This may lead to the perception that HP coursework is not challenging compared</p> | <p>The curricular standards used in the HP Program are based on a framework set forth by the National Commission for Health Education Credentialing (NCHEC). Students graduating with a major in Health Promotion should feel confident and prepared to "sit" for the national certification exam offered by NCHEC. To assist students to recognize the major areas of responsibility and specific competencies forwarded by NCHEC, instructors in all "Courses Required" for the HP Major will include in their course syllabi at least 3 course objectives specific to NCHEC competencies (e.g., NCHEC 7.2: Identify and develop a variety of communication strategies, methods, and techniques). Course syllabi are the basic planning tools and roadmaps to success for both students and faculty: by incorporating specific NCHEC competencies into course syllabi, students will subsequently engage in competency-based application activities aligned with NCHEC standards, and faculty will provide ongoing documentation of student performance based on NCHEC standards. By September 2014, 80% of the instructors of "Courses Required" for the Health Promotion Major will have syllabi that specifically detail at least 3 course objectives aligned to NCHEC competencies (e.g., NCHEC 7.2: Identify and develop a variety of communication strategies, methods, and techniques).</p> <p>Although some introductory or elective courses in the program may be considered "low stress" (e.g., with the intent being to attract and recruit students to other courses in the program), the "Courses Required" for the Health Promotion Major are based on national standards (NCHEC) deemed to be academically challenging. To monitor students'</p> | <p>Students in HLTH 3000 and HLTH 4990 complete practice tests to assist with preparation for the national CHES exam. In addition, a Canvas course exists to support students studying for the CHES examination. Included in this course are student-developed study materials and recorded study sessions that cover each NCHEC Area of Responsibility and associated competencies. The Canvas site is available to any student requesting support/assistance with studying for the CHES examination.</p> <p>The 2017-2018 Senior Exit Survey (Items 11-17), evaluated students perceived competence in the seven core areas of responsibility necessary for national certification as a health education specialist. A strong majority of students, greater than 80 percent, believed that the required coursework in the major provided them with adequate-to-advanced knowledge, skills, and ability in the seven core areas of responsibility (e.g., Area 1, 86%; Area 2, 90%; Area 3, 94%; Area 4, 90%; Area 5, 88%; Area 6, 90%; Area 7, 88%).</p> <p>Based on data from the 2017-2018 Senior Exit Survey (Item 36), 86 percent of students either agreed or strongly agreed that courses in the major were academically challenging. Similarly, the exit survey indicated that a strong majority of students either agreed or strongly agreed that the health promotion major provided the following: (a) skills</p> |

with other health science departments.

beliefs regarding the rigor, difficulty, and academic challenge of courses within the Health Promotion Major, the HPP will administer a biannual senior exit survey to graduating students. The contents of this survey may vary from year to year, but in 2013, questions were added to evaluate among graduates whether “classes in my major were academically challenging” and if “the health promotion program required me to evaluate and solve complex problems.” For the 2013-2014 academic year, results of the Senior Exit Survey revealed that a strong majority of students believed that classes within the Health Promotion Major were academically challenging: “Overall the classes in my major were academically challenging” (50% somewhat agree; 33% strong agree). Similarly, 75 percent of students for this academic year believed “The health promotion program required me to evaluate and solve complex problems” (25% somewhat agree; 50% strong agree).

needed to be successful in their chosen career (Item 22, 92%), and (b) multiple opportunities to apply skills (e.g., internships, projects, assignments, presentations, etc.) during their academic program of study (Item 29, 98%).

| Recommendations for Improvement | Initial Response & Action Plan | Progress & Current Action Plan |
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| <p>We recommend that there be continued emphasis on the primacy of the internship component of the HP program and on its related growth given the competitive nature of the employment market for HP graduates in Utah. There is an increased marketability likely afforded by varied field practicum experiences [STANDARD G - RELATIONSHIPS WITH EXTERNAL COMMUNITIES]</p> | <p>The HP Program considers the internship component of the curriculum to be the culminating experience for HP students. This experience is meant to provide the student with the opportunity to apply skills learned in the classroom in a way that is mutually beneficial for the student and the community/campus partner. To ensure high standards associated with internship credit, the HP Program will add additional structure to the experience. In addition to a newly instituted final presentation requirement, in which HP students must formally present their accomplishments over the course of their internship experience, the HP Program will also provide the site supervisors with the opportunity to contribute to the student's HLTH 4860 grade. In prior semesters, students received full credit for the simple completion of the mid-term and final site supervisor evaluations. In future semesters, site supervisors will be provided the opportunity to give a mid-term and final grade, which will contribute (in part) to the student's overall HLTH 4860 grade. By April 21, 2014, all students enrolled in HLTH 4860 will be required to formally present their internship experience in a structured format (i.e., oral, poster, or video presentation). This new requirement will be carried forward in all subsequent semesters. By May 5, 2014 (the beginning of the summer 2014 semester), the opportunity for site supervisors to directly contribute to student grades through the mid-semester and final site supervisor evaluations will be incorporated into the syllabus and Canvas site for HLTH 4860 in the summer semester. This new requirement will be carried forward in all subsequent semesters.</p> | <p>A minimum of 180 hours of supervised internship experience is required for all HP students. If desired, students also have the option to complete an additional 180 internship hours with approved community partners.</p> <p>The HP Program has continued to expand its list of potential internship sites, adding opportunities with the OUTreach Resource Center, the CAPES! program at WSU, the Huntsman Cancer Institute, and the WSU Women's Center, among others.</p> <p>Based on data from the 2017-2018 Senior Exit Survey (Item 25), 88 percent of students either agreed or strongly agreed that their internship was a valuable educational experience related to their major.</p> |

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| <p>We recommend increased faculty promotion of student memberships in HP-related national and state organizations (e.g., Health Education Assoc. of Utah—HEAU) as an additional means of fostering students' professional development [STANDARD G - RELATIONSHIPS WITH EXTERNAL COMMUNITIES]</p> | <p>The HP Program faculty see significant value in student membership in, and involvement with, both national and state health promotion organizations. In both foundational and upper-division courses, HP students are both formally and informally encouraged by faculty to learn more about (and consider membership in) the various national and state health promotion organizations. The HP Program will explore adding a course fee on to the senior seminar class to pay for the student's annual membership in the Health Education Association of Utah (HEAU) or students will be encouraged to start their own HP club and raise funds for membership dues; an HP faculty member will serve as their advisor. In addition, two mechanisms exist (HLTH 2920 and HLTH 4920) in which students could potentially receive credit for attendance and presenting at state conferences. However, until additional faculty positions in the HP program, it will not be feasible to offer these classes.</p> | <p>With the addition of new faculty in 2017, the HP Program has scheduled a course (i.e., HLTH 4920 courses) to allow students to obtain academic credit to attend professional conferences held within Utah (e.g., Utah Society of Public Health Education).</p> |
| <p>We commend existing and encourage continued HP collaboration and service involvements across the campus community (e.g., collaborations with the Counseling & Psychological Services Center, Student Wellness Program, Integrated Studies Program), as such involvements are viewed as valued partnerships within the University community [STANDARD G - RELATIONSHIPS WITH EXTERNAL COMMUNITIES]</p> | <p>The HP Program has many strong community and campus partners that provide relevant, hands-on, service-oriented internship experiences for HP students. The HP faculty will continue to nurture existing relationships with on-campus partners to ensure that the placement of student interns at their sites is beneficial for all involved. During each academic semester, HP faculty, with the support of the HPHP internship coordinator, will obtain feedback from each on-campus internship site supervisor about both the needs of that site, and, the quality of the current student interns.</p> | <p>The HP Program has a dedicated internship coordinator who supervises students engaged in their internship experience, as well as develops new, and maintains existing, internship sites. Feedback from and about internship sites is communicated on a regular basis to the HP Program Director. The HP Program has continued to expand its list of potential internship sites, adding opportunities with the OUTreach Resource Center, the CAPES! program at WSU, the Huntsman Cancer Institute, and the WSU Women's Center, among others.</p> |
| <p>We recommend periodic assessment of the prospective need for additional full-time faculty to meet the growing segment of HP student majors at WSU, with continued attention and commitment to</p> | <p>At present, the program is at instructional capacity, and periodically, an insufficient number of faculty exist to provide specific content courses (e.g., HLTH 4220, Women's Health Issues) and to teach select</p> | <p>The Health Promotion (HP) Program hired three new faculty members for the 2017-2018 academic year. These new faculty members have enhanced the instructional capacity in needed areas (e.g.,</p> |

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| <p>matching the various elements of diversity represented within both the student population and surrounding communities [STANDARD E – FACULTY]</p> | <p>professional courses within the School Health Minor (e.g., HLTH 3050, School Health Program). The HP Program will investigate in Fall 2014 the feasibility of hiring an additional tenure-track faculty member to teach courses for the health teaching minor. In the meantime, the HP Program will maintain a strong pool of qualified adjunct faculty to meet instructional responsibilities.</p> | <p>program planning, substance abuse) and assisted with various service roles within the program (e.g., BIS committees).</p> |
| <p>We recommend continued efforts to base HP’s academic curriculum and related student learning objectives on national standards (benchmarks) within the area of health promotion, adapting to the changing landscape within the profession as needed per faculty’s exhibited commitment to linking student learning with professional practice [STANDARD B – CURRICULUM / STANDARD C - STUDENT LEARNING OUTCOMES AND ASSESSMENT].</p> | <p>The curricular standards used in the HP Program are based on a framework set forth by the National Commission for Health Education Credentialing (NCHEC). Students graduating with a major in Health Promotion should feel confident and prepared to “sit” for the national certification exam offered by NCHEC. To assist students to recognize the major areas of responsibility and specific competencies forwarded by NCHEC, instructors in all “Courses Required” for the HP Major will include in their course syllabi at least 3 course objectives specific to NCHEC competencies (e.g., NCHEC 7.2: Identify and develop a variety of communication strategies, methods, and techniques). Course syllabi are the basic planning tools and roadmaps to success for both students and faculty: by incorporating specific NCHEC competencies into course syllabi, students will subsequently engage in competency-based application activities aligned with NCHEC standards, and faculty will provide ongoing documentation of student performance based on NCHEC standards.</p> | <p>The 2017-2018 assessment results for the HP program revealed that 65 out of 68 instructional benchmarks were met (i.e., 93%). The findings are similar to previous academic years (e.g., 2016-2017 assessment results) and suggest that the HP program continues to provide students with high-quality academic experiences in multiple areas: (a) for declared HPP majors and minors preparing to work in health education/promotion settings (i.e., HP goal 1); for students seeking to satisfy general education requirements in the social sciences (i.e., HP goal 2); and engaged-learning opportunities (i.e., service learning internships) for upper-division HPP students (i.e., HP goal 3).</p> |
| <p>We recommend continued support (e.g., allocation of time and necessary resources) for assisting students in preparation for the CHES (Certified Health Educator Specialist) examination to increase the percentage of students who pass the CHES examination both at and beyond the 70% cutoff</p> | <p>The curricular standards used in the HP Program are based on a framework set forth by the National Commission for Health Education Credentialing (NCHEC). Given that approximately 70 percent of individuals who qualify and sit for the Certified Health Education Specialist (CHES) examination</p> | <p>Students in HLTH 3000 and HLTH 4990 complete practice tests to assist with preparation for the national CHES exam. In addition, a Canvas course exists to support students studying for the CHES examination. Included in this course are student-developed study materials and recorded study</p> |

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| <p>score [STANDARD C - STUDENT LEARNING OUTCOMES AND ASSESSMENT]</p> | <p>receive certification, a similar success rate should be seen among WSU students who take the exam. To increase the percentage of WSU students who pass the CHES exam, the HPP will pursue the following objectives:</p> <ul style="list-style-type: none"> i. By September 2014, 80% of the instructors of “Courses Required” for the Health Promotion Major will have syllabi that specifically detail at least 3 course objectives aligned to NCHEC competencies (e.g., NCHEC 7.2: Identify and develop a variety of communication strategies, methods, and techniques); ii. By March 2015, program faculty will investigate the interest and utility of formal study groups (facilitated through the HLTH 4990 course, Senior Seminar) for students interested in taking the CHES exam; iii. By December 2015, HPP faculty will use results from the Senior Exit Survey (e.g., percentage of students who anticipate taking the national examination for certification as a health education specialist given by the NCHEC) to determine whether the format and content of HLTH 4990 (Senior Seminar) will be changed to allow a greater focus on CHES preparation. (At present, only two weeks in HLTH 4990 are devoted toward CHES preparation and, possibly, an increase in course credit from 1-credit hours to 2-credit hours may be necessary to prepare students to sit for the CHES exam.) | <p>sessions that cover each NCHEC Area of Responsibility and associated competencies. The Canvas site is available to any student requesting support/assistance with studying for the CHES examination.</p> <p>The 2017-2018 Senior Exit Survey (Items 11-17), evaluated students perceived competence in the seven core areas of responsibility necessary for national certification as a health education specialist. A strong majority of students, greater than 80 percent, believed that the required coursework in the major provided them with adequate-to-advanced knowledge, skills, and ability in the seven core areas of responsibility (e.g., Area 1, 86%; Area 2, 90%; Area 3, 94%; Area 4, 90%; Area 5, 88%; Area 6, 90%; Area 7, 88%).</p> |
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