

WSU Five-Year Program Review  
Self-Study

Cover Page

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

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A. Brief Introductory Statement

The Department of Health Promotion and Human Performance (HPHP) in the Jerry and Vickie Moyes College of Education (MCOE) offers programs that promote lifelong wellness from a variety of disciplines. The teaching environment, supported by faculty with diverse expertise, creates quality-learning communities that offer to undergraduates exceptional educational experiences. The newly remodeled state-of-the-art facilities – including fully equipped human performance exercise biochemistry, nutrition and athletic training/physical therapy laboratories, a networked computer lab, swimming and hydrotherapy pool, and ample indoor and outdoor recreational, fitness, sport and activity

areas, and indoor climbing wall – provide an outstanding arena for student instruction. With a curriculum designed to develop professional knowledge and skills, graduates from the department are prepared to work in a variety of educational, health, and fitness settings. The Health Promotion major is a flexible and interdisciplinary program of studies dually housed within HPHP and the Health Administrative Services (HAS) program in the Dr. Ezekiel R. Dumke College of Health Professions.

## B. Mission Statement

A twofold mission exists for the Health Promotion programs at Weber State University (WSU). The first is to prepare students to become professional health educators who can serve in five settings of practice including schools, worksites (i.e., occupational health promotion), communities, with individuals (i.e., wellness coaching) and in the health care system. The second is to promote the health and prevent disease of the respective participants including students, staff, faculty, and members of the community. Professional preparation of health educators is interdisciplinary and concentrates primarily on nationally prescribed responsibilities and competencies developed by the National Commission for Health Education Credentialing, Inc. (i.e., those on which the Certified Health Education Specialist credential is based). Other professional organizations that provide guidance to professional preparation include the Association for Worksite Health Promotion, the American Public Health Association, the American College Health Association, the Society for Public Health Education, the American College of Sports Medicine, and the American Association of Health Education.

### Goals:

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

Education Goal #2: Provide a Social Science General Education (SSGE) course for the University

Service Goal #3: Provide students with meaningful and mutually beneficial engagements with community partners

## B. 1. Roles of the Health Promotion Program

Health Promotion academic courses at WSU include general education and service courses (stress management, human sexuality, adolescent health issues, etc.) and professional preparation courses (program planning, research methods, methods in health promotion, etc.) offered in both health promotion and health administrative services (HAS). The respective academic programs include bachelor's degrees in health promotion/HAS. Minor programs include a general health promotion minor, a school health education minor, a nutrition minor, and support of the Bachelor of Integrated Studies (BIS) program.

## B. 2. Fundamental Definitions of Health Promotion and Health Education

Health Promotion was defined by the Joint Committee on Health Education and Promotion Terminology as, “any planned combination of educational, political, environmental, regulatory, or organizational mechanisms that support actions and conditions of living conducive to the health of individuals, groups, and communities.” It involves the science and art of helping people change or maintain their lifestyle to move toward a state of optimal health. Optimal health includes not only absence or healthful management of disease but functioning in balance with the dimensions of the total person concept (social, mental, emotional, physical, and spiritual). Lifestyle change can be facilitated through a combination of efforts to enhance awareness, change behavior, and create environments that support good health practices. This implies that health promotion is multidimensional and comprehensive.

Health Education was defined by Green and Kreuter as, “any combination of learning experiences designed to facilitate voluntary adaptations of behavior conducive to health.” The Joint Committee on Health Education and Promotion Terminology defined Health Education as, “any combination of planned learning experiences based on sound theories that provide individuals, groups, and communities the opportunity to acquire information and the skills needed to make quality health decisions.”

## B. 3. Admission Standards

Students are admitted to the Health Promotion program if they are students of good standing at the university.

## B. 4. Student Profiles and Recruitment

A student and faculty statistical summary can be found in Appendix A. There are approximately 350 males (51%) and 341 females (49%) in HPHP. Student demographics are reflective of the surrounding community. The MCOE has had a recruiter for 5 years. Prior to the hiring of the College recruiter, the Department’s Advisement Coordinator made visits to regional two-year colleges for recruiting purposes. Current recruitment activities include fostering interest in concurrent courses; general education courses; the major’s fair; Education Emphasis Week; open houses in the C. William Stromberg Complex to display the Stress Relief Center, Weber Rocks climbing wall, and human performance lab; distributing flyers to prospective student athletes visiting the university; and a social media presence.

## B. 5. Enrollment Trends

Enrollment in courses exclusively for the Health Promotion (HP) major and minor remains about the same annually with some minor fluctuations. Institutional research cannot differentiate HP student credit hours because the courses are shared across the headings. Enrollment in HLTH SS1030 – Health Lifestyles (the program’s general education course) has increased as institutional enrollment has increased at WSU. HP averaged 93 student majors over the past five years while the number of HP graduates per year averaged 30 over

the past five years. An increase in HP majors has been documented over the past five years (see Appendix A). A continued rise in majors and minors is anticipated, with more and more students expressing an interest in obtaining an online bachelor's degree.

## C. Curriculum

### C. 1. Degrees Offered

- a. Health Promotion major and Health Administrative Services: Health Promotion emphasis
- b. Health Promotion minor (Community, School, Worksite, Clinical)
- c. Health Promotion Teaching minor
- d. Bachelor of Integrated Studies (BIS)

### C. 2. Curriculum Map for the Health Promotion Major

Required Prerequisite Courses (6-7 credit hours):

- HLTH SS1030 – Healthy Lifestyles (3)
- HLTHS LS1110 – Biomedical Core Lecture/Lab (4) or  
ZOO L LS1020 – Human Biology (3)

Required Courses (31 credit hours):

- HLTH 3000 – Foundations of Health Promotion (3)
- HAS 3000 – The Health Care System (3)
- HLTH/HAS 3150 – Community Health Agencies and Services (3)
- HAS DV3190 – Cultural Diversity in Patient Education (3) or  
HLTH DV3420 – Multicultural Health and Nutrition (3)
- HLTH 3200 – Methods of Health Education (3) or  
HAS 4410 – Clinical Instructional Design and Evaluation (3)
- HIM 3200 – Epidemiology & Biostatistics (3)
- HLTH 3230 – Health Communication (3)
- HLTH 4013 – Health Promotion Research and Assessment (3)
- HLTH 4150 – Needs Assessment and Planning Health Promotion Programs (4)
- HLTH 4860 – Field Experience (3)
- HLTH 4990 – Senior Seminar (1)

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

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

Elective Courses - Minimum of 15 credit hours:

- NUTR LS1020 – Foundations in Nutrition (3)
- HLTHS 1101 – Medical Terminology (2)
- HLTH 1110 – Stress Management (3)
- HLTH 1300 – First Aid: Responding to Emergencies (3)
- HLTHS 2230 – Introductory Pathophysiology (3)
- PEP 2300 – Health/Fitness Evaluation and Exercise Prescription
- NUTR 2320 – Food Values, Diet Design, and Health (3)
- HLTH 2300 – Emergency Response (3)
- GERT 3000 – Death and Dying (3)
- HLTH 3050 – School Health Programs (3)
- HAS 3240 – Human Resource Development in Health Care (3)
- HLTH 3320 – Health and Nutrition in the Older Adult (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)
- HAS 4400 – Legal and Ethical Aspects of Health Administration (3)
- HAS 4410 – Clinical Instructional Design and Evaluation (3)
- HAS 4420 – Clinical Instructional Skills (3)
- NUTR 4420 – Nutrition and Fitness (3)
- HLTH 4700 – Wellness Coaching (3)
- HLTH 4800 – Individual Projects (1-3)
- HLTH 4860 – Field Experience (3)
- HLTH 4920 – Workshops (1)

### C. 3. Online, Independent Study, Satellite Campuses (Davis & West)

The HP major has been offered on a worldwide basis since its inception in 1997. Many of the required, professional, and elective courses are offered online or through distance learning (i.e., self-paced, independent study).

### C. 3a. Online

HLTH SS1030 –	Healthy Lifestyles (3)
HLTH 1110 –	Stress Management (3)
HLTH 2700 –	Consumer Health (3)
HLTH 3400 –	Substance Abuse Prevention (3)
HLTH 3500 –	Human Sexuality (3)
HLTH 4013 –	Health Promotion Research and Assessment (3)
HLTH 4250 –	Contemporary Health Issues of Adolescents (2)
HLTH 4800 –	Individual Projects (1-3)
HLTH 4860 –	Field Experience (3)

### C. 3b. Independent Study

HLTH SS1030 –	Healthy Lifestyles (3)
HLTH 1110 –	Stress Management (3)
HLTH 2700 –	Consumer Health (3)
HLTH 3400 –	Substance Abuse Prevention (3)
HLTH 3500 –	Human Sexuality (3)
HLTH 4013 –	Health Promotion Research and Assessment (3)
HLTH 4150 –	Needs Assessment and Planning of Health Promotion Programming (4)
HLTH 4250 –	Contemporary Health Issues of Adolescents (2)
HLTH 4800 –	Individual Projects (1-3)
HLTH 4860 –	Field Experience (3)
HLTH 4990 –	Senior Seminar (1)

### C. 3c. Satellite Campuses (Davis & West)

HLTH SS1030 –	Healthy Lifestyles (3)
HLTH 1110 –	Stress Management (3)
HLTH 1300 –	First Aid: Responding to Emergencies (2)
HLTH 3400 –	Substance Abuse Prevention (3)
HLTH 3500 –	Human Sexuality (3)

*Additional details can be found in the online and distance learning catalog. Go to:*

<http://departments.weber.edu/ce/default.asp>

## C. 4. General Education Courses

As an interdisciplinary program of studies, the HP major incorporates numerous courses shared by the Human Performance Management program, support courses from other colleges (Arts and Humanities, Business and Economics, Health Professions, and Science), select courses for HP alone, and department general education courses. The following course is identified as our program general education course: HLTH SS1030 – Healthy Lifestyles (3 credits). This course is a general education elective.

#### C. 5. Course Rotation – Required and Professional Courses

With the support of four full-time faculty, adjunct faculty members, and faculty from HAS, required and professional courses are offered on a regular and routine basis. Also noted, as needed, are alternative ways of taking courses when not offered on campus.



C. 5a. Course Rotation for the Past Three Academic Years

ROTATION OF HEALTH PROMOTION COURSES - PAST THREE YEARS											
COURSE	NAME	CREDIT HOURS	2010-2011			2011-2012			2012-2013		
			SUMMER	FALL	SPRING	SUMMER	FALL	SPRING	SUMMER	FALL	SPRING
HLTH SS1030	Healthy Lifestyles	(3)	X/OL/DL	X/OL/DL	X/OL/DL	X/OL/DL	X/OL/DL	X/OL/DL	X/OL/DL	X/OL/DL	X/OL/DL
HLTH 2400	Mind/Body Wellness	(3)	X	X	X	X	X	X	X	X	X
HLTH 2700	Consumer Health	(3)	X	OL	OL	X	OL	OL	X	OL	OL
HLTH 3000	Foundations of Health Promotion	(3)	OL/DL	X/DL	X	OL/DL	X/DL	X	OL/DL	X/DL	X
HAS 3000	The Health Care System	(3)	OL	X/OL	X/OL	OL	X/OL	X/OL	OL	X/OL	X/OL
HAS 3020	Health Care Marketing	(3)	OL	X/OL	X/OL	OL	X/OL	X/OL	OL	X/OL	X/OL
HLTH 3100	Applications of Technology in Health Promotion	(3)			X			X			X
HLTH/HAS 3150	Community and Worksite Health Promotion Programs	(3)	OL/DL	X/DL	X/DL	OL/DL	X/DL	X/DL	OL/DL	X/DL	X/DL
HLTH 3160	Principles of Health Behavior	(3)		X			X			X	
HAS DV3190	Cultural Diversity in Patient Education	(3)	OL/DL	OL/DL	X/DL	OL/DL	OL/DL	X/DL	OL/DL	OL/DL	X/DL
HLTH 3200	Methods in Health Education	(3)	X	X	X	X	X	X	X	X	X
HIM 3200	Epidemiology and Biostatistics	(3)	OL	X/DL	X/DL	OL	X/DL	X/DL	OL	X/DL	X/DL
HAS 3230	Health Communication	(3)	OL/DL	X/OL/DL	X/DL	OL/DL	X/OL/DL	X/DL	OL/DL	X/OL/DL	X/DL
HAS 3260	Health Care Administration and Supervisory Theory	(3)	OL	OL/DL	X/DL	OL	OL/DL	X/DL	OL	OL/DL	X/DL
NUTR DV3420	Multicultural Health and Nutrition	(3)	X	X	X	X	X	X	X	X	X
HLTH 4013	Health Promotion Research and Assessment	(3)	OL/DL	X/DL	DL	OL/DL	X/OL/DL	DL	OL/DL	X/DL	DL
HLTH 4150	Needs Assessment and Planning Health Promotion Programs	(4)	DL	X	X	DL	X	X	DL	X	X
HAS 4320	Health Care Economics and Politics	(3)	DL	X/DL	OL/DL	DL	X/DL	OL/DL	DL	X/DL	OL/DL
HAS 4410	Clinical Instructional Design and Evaluation	(3)	DL	OL/DL	DL	DL	OL/DL	DL	DL	OL/DL	DL
HLTH 4860	Field Experience	(1-6)	X/DL	X/DL	X/DL	X/DL	X/DL	X/DL	X/DL	X/DL	X/DL
HLTH 4990	Senior Seminar	(1)	DL	X	X	DL	X	X	DL	X	X

**Key: Classroom (X), Independent Study/ Distance Learning (DL), Online (OL)**

C. 5b. Course Rotation for the Current Academic Year

COURSE LISTING	COURSE NAME	CREDIT HOURS	2013-2014		
			SUMMER	FALL	SPRING
HLTH SS1030	Healthy Lifestyles	(3)	X/OL/DL	X/OL/DL	X/OL/DL
HLTH 2400	Mind/Body Wellness	(3)	X	X	X
HLTH 2700	Consumer Health	(3)	OL	OL	X
HLTH 3000	Foundations of Health Promotion	(3)	OL	X/OL	X/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
HLTH/HAS 3150	Community and Worksite Health Promotion Programs	(3)			X/DL
HLTH 3160	Principles of Health Behavior	(3)	OL/DL	X	
HAS DV3190	Cultural Diversity in Patient Education	(3)	OL/DL	OL/DL	X/DL
HLTH 3200	Methods in Health Education	(3)	X	X	X
HIM 3200	Epidemiology and Biostatistics	(3)	OL/DL	X/DL	X/DL
HAS 3230	Health Communication	(3)	OL/DL	X/OL/DL	X/DL
HAS 3260	Health Care Administration and Supervisory Theory	(3)	OL	OL/DL	X/DL
NUTR DV3420	Multicultural Health and Nutrition	(3)	OL	X	X
HLTH 4013	Health Promotion Research and Assessment	(3)	OL	X/DL	OL
HLTH 4150	Needs Assessment and Planning Health Promotion Programs	(4)		X/DL	X
HAS 4320	Health Care Economics and Politics	(3)	DL	X/DL	OL
HAS 4410	Clinical Instructional Design and Evaluation	(3)	DL	OL/DL	DL
HLTH 4860	Field Experience	(1-6)	X/DL	X	X
HLTH 4990	Senior Seminar	(1)		X	X

**Key: Classroom (X), Independent Study/ Distance Learning (DL), Online (OL)**

C. 5c. Course Rotation for the Next Three Academic Years

ROTATION OF HEALTH PROMOTION COURSES - NEXT THREE YEARS											
COURSE	NAME	CREDIT HOURS	2014-2015			2015-2016			2016-2017		
			SUMMER	FALL	SPRING	SUMMER	FALL	SPRING	SUMMER	FALL	SPRING
HLTH SS1030	Healthy Lifestyles	(3)	X/OL/DL	X/OL/DL	X/OL/DL	X/OL/DL	X/OL/DL	X/OL/DL	X/OL/DL	X/OL/DL	X/OL/DL
HLTH 2400	Mind/Body Wellness	(3)	X	X	X	X	X	X	X	X	X
HLTH 2700	Consumer Health	(3)	X	OL	OL	X	OL	OL	X	OL	OL
HLTH 3000	Foundations of Health Promotion	(3)	OL/DL	X/DL	X	OL/DL	X/DL	X	OL/DL	X/DL	X
HAS 3000	The Health Care System	(3)	OL	X/OL	X/OL	OL	X/OL	X/OL	OL	X/OL	X/OL
HAS 3020	Health Care Marketing	(3)	OL	X/OL	X/OL	OL	X/OL	X/OL	OL	X/OL	X/OL
HLTH 3100	Applications of Technology in Health Promotion	(3)			X			X			X
HLTH/HAS 3150	Community and Worksite Health Promotion Programs	(3)	OL/DL	X/DL	X/DL	OL/DL	X/DL	X/DL	OL/DL	X/DL	X/DL
HLTH 3160	Principles of Health Behavior	(3)		X			X			X	
HAS DV3190	Cultural Diversity in Patient Education	(3)	OL/DL	OL/DL	X/DL	OL/DL	OL/DL	X/DL	OL/DL	OL/DL	X/DL
HLTH 3200	Methods in Health Education	(3)	X	X	X	X	X	X	X	X	X
HIM 3200	Epidemiology and Biostatistics	(3)	OL	X/DL	X/DL	OL	X/DL	X/DL	OL	X/DL	X/DL
HAS 3230	Health Communication	(3)	OL/DL	X/OL/DL	X/DL	OL/DL	X/OL/DL	X/DL	OL/DL	X/OL/DL	X/DL
HAS 3260	Health Care Administration and Supervisory Theory	(3)	OL	OL/DL	X/DL	OL	OL/DL	X/DL	OL	OL/DL	X/DL
NUTR DV3420	Multicultural Health and Nutrition	(3)	X	X	X	X	X	X	X	X	X
HLTH 4013	Health Promotion Research and Assessment	(3)	OL/DL	X/DL	DL	OL/DL	X/OL/DL	DL	OL/DL	X/DL	DL
HLTH 4150	Needs Assessment and Planning Health Promotion Programs	(4)	DL	X	X	DL	X	X	DL	X	X
HAS 4320	Health Care Economics and Politics	(3)	DL	X/DL	OL/DL	DL	X/DL	OL/DL	DL	X/DL	OL/DL
HAS 4410	Clinical Instructional Design and Evaluation	(3)	DL	OL/DL	DL	DL	OL/DL	DL	DL	OL/DL	DL
HLTH 4860	Field Experience	(1-6)	X/DL	X/DL	X/DL	X/DL	X/DL	X/DL	X/DL	X/DL	X/DL
HLTH 4990	Senior Seminar	(1)	DL	X	X	DL	X	X	DL	X	X

**Key: Classroom (X), Independent Study/ Distance Learning (DL), Online (OL)**

## C. 6. Certifications

### C. 6a. Certified Health Education Specialist (CHES)

This national certification is provided by the National Commission for Health Education Credentialing, Inc. (NCHEC). According to the Joint Committee on Health Education and Promotion Terminology (2011), a health education specialist is, “[a]n individual who has met, at a minimum, baccalaureate-level required health education academic preparation qualifications, who serves in a variety of settings, and is able to use appropriate educational strategies and methods to facilitate the development of policies, procedures, interventions, and systems conducive to the health of individuals, groups, and communities.”

According to NCHEC, the CHES exam, “is a competency-based tool used to measure possession, application, and interpretation of knowledge in the Seven Areas of Responsibility for Health Education Specialists.” The exam itself is paper and pencil and consists of 165 multiple-choice questions. Currently, there are approximately 120 testing sites registered. An individual is eligible to sit for the examination if s/he has: 1) a bachelors, masters, or doctoral degree from an accredited institution of higher education, and, 2) an official transcript (including course titles) that clearly shows a major in health education (e.g., Health Education, Community Health Education, Public Health Education, School Health Education, etc.), or, an official transcript that reflects at least 25 semester hours (or 37 quarter hours) of course work with specific preparation addressing the Seven Areas of Responsibilities.

The CHES exam is based on the Seven Areas of Responsibility and associated competencies:

#### 1. Area of Responsibility 1: Assess needs, assets, and capacity for health education

Competencies:

- Plan assessment process
- Access existing information and data related to health
- Collect quantitative and/or qualitative data related to health
- Examine relationships among behavioral, environmental, and genetic factors that enhance or compromise health
- Examine factors that influence the learning process
- Examine factors that enhance or compromise the process of health education
- Infer needs for health education based on assessment findings

## 2. Area of Responsibility 2: Plan health education

### Competencies:

- Involve priority populations and other stakeholders in the planning process
- Develop goals and objectives
- Select or design strategies and interventions
- Develop a scope and sequence for the delivery of health education
- Address factors that affect implementation

## 3. Area of Responsibility 3: Implement health education

### Competencies:

- Implement a plan of action
- Monitor implementation of health education
- Train individuals involved in implementation of health education

## 4. Area of Responsibility 4: Conduct evaluation and research related to health education

### Competencies:

- Develop evaluation/research plan
- Design instruments to collect evaluation and research data
- Collect and analyze evaluation/research data
- Interpret results of the evaluation/research
- Apply findings from evaluation/research

## 5. Area of Responsibility 5: Administer and manage health education

### Competencies:

- Manage fiscal resources
- Obtain acceptance and support for programs
- Demonstrate leadership
- Manage human resources
- Facilitate partnerships in support of health education

6. Area of Responsibility 6: Serve as a health education resource person

Competencies:

- Obtain and disseminate health-related information
- Provide training
- Serve as a health education consultant

7. Area of Responsibility 7: Communicate and advocate for health and health education

Competencies:

- Assess and prioritize health information and advocacy needs
- Identify and develop a variety of communication strategies, methods, and techniques
- Deliver messages using a variety of strategies, methods and techniques
- Engage in health education advocacy
- Influence policy to promote health
- Promote the health education profession

These responsibilities were identified in the 1985 document, *A Framework for the Development of Competency-Based Curricula for Entry-Level Health Educators*, which was a result of the Role Delineation Project (RDP). The RDP took place between 1978-1981, in which the role of the health education specialist was defined. The role of the health education specialist was re-verified through the Competencies Update Project in 2005.

CHES Exam Results for the Last Five Years:

NCHEC provides the HP program an annual report on students from WSU who have taken the CHES exam. The overall summary data is presented at the top of the next page. More specific data is available in the actual reports from NCHEC. These reports break down the average scores on each of the seven responsibilities.

<b><u>2009 CHES Examination Analysis</u></b>				
Source of Scores	Total Score (X)	Number Tested	Number Passed	Percent Passed
National Cohort	101.95	1565	1203	76.87%
WSU	109.91	11	11	100.00%
<b><u>2010 CHES Examination Analysis</u></b>				
Source of Scores	Total Score (X)	Number Tested	Number Passed	Percent Passed
National Cohort	101.25	1593	1176	73.82%
WSU	104.29	14	12	85.71%
<b><u>2011 CHES Examination Analysis</u></b>				
Source of Scores	Total Score (X)	Number Tested	Number Passed	Percent Passed
National Cohort	104.04	1827	1376	75.31%
WSU	106.38	21	18	85.71%
<b><u>2012 CHES Examination Analysis</u></b>				
Source of Scores	Total Score (X)	Number Tested	Number Passed	Percent Passed
National Cohort	101.84	2068	1475	71.32%
WSU	103.83	18	11	61.11%
<b><u>2013 CHES Examination Analysis*</u></b>				
Source of Scores	Total Score (X)	Number Tested	Number Passed	Percent Passed
National Cohort				
WSU				

\*2013 data will not be provided until February 2014.

#### C. 6b. Health Endorsement for Teacher Certification

Health minors, with proper course selection by advisement, can certify to teach Health Education in Utah's public schools. In Utah, a student can obtain certification by earning a baccalaureate degree; completing an approved program in teacher education, or, having a degree major in a subject taught in Utah schools; and passing the Praxis Series in their certification area.

#### C. 7. Unique Aspects of the Curriculum Not Adequately Described Elsewhere

The HP major, as described in previous program reviews, was created and has evolved to blend various disciplines' expertise to prepare undergraduate students to serve in a variety of settings promoting health and wellness. Notable strengths within this program of study are 1) its utilization of existing courses and instruction within and outside the department to efficiently and effectively manage resources, 2) its flexibility to address the national health crisis through health, wellness, fitness, nutrition, and 3) students can work on mentored research projects under the guidance of a faculty member, providing a means to synthesize

information from methodology and course content. The curriculum is augmented by 180 hours of field experience and one required course (HLTH 4150 – Needs Assessment and Planning Health Promotion Programs) with a Community-Engaged Learning (CEL) designation, which requires students to engage in a minimum of 15 hours of community-based service learning.

#### C. 8. Evaluation of Curriculum and Processes to Modify and Update

Departmental curriculum changes are the result of continual feedback and evaluation from faculty, student course evaluations, and periodic discussions with potential employers. The curriculum is consistent with the departmental mission statement. A significant effort is extended to keep the upper division courses (used primarily by majors) current so graduates will be competitive in the employment market. Each semester, HLTH 4990 Senior Seminar is offered to graduating seniors and all graduating majors are encouraged to offer feedback through exit interviews and surveys. This level of review results in a curriculum that is balanced, comprehensive diverse, and relevant. The existing data, assessment, and surveys indicate students are acquiring the fundamental skills necessary.

As the program continues to progress through the assessment process further revisions will no doubt be made; however, the curriculum presently in place is the strongest it has ever been and students have every opportunity to assist program leadership in implementing it successfully. Courses are offered often enough to permit students to meet the requirements in a timely manner. If students enter the program as freshmen and receive careful advising and mentoring, they can graduate in four years.

#### C. 9. Required Courses Competency Grid

This grid includes only the required courses for the Health Promotion major (see the course key below).

##### **Student Learning Outcome Rating Key:**

- 0 = not addressed
- 1 = minor emphasis (i.e., discussed in one class session)
- 2 = moderate emphasis (i.e., discussed in two to four class sessions)
- 3 = major emphasis (i.e., discussed in five or more class sessions)

##### **Course Key**

HLTH 3000 - Foundations of Health Promotion	HLTH 4990 – Senior Seminar
HLTH/HAS 3150 - Community Health Agencies and Services	HAS 3000 - Health Care System
HLTH 3200 - Methods in Health Education	HAS 3190 – Cultural Diversity in Patient Education
HLTH 3420 – Multicultural Health and Nutrition	HAS 3230 - Health Communication
HLTH 4013 - Health Promotion Research and Assessment	HAS 4410 – Clinical Instructional Design and Evaluation
HLTH 4150 - Planning and Evaluating Health Promotion Programs	HIM 3200 - Epidemiology and Biostatistics
HLTH 4860 - Field Experience	



	<b>HLTH 3000</b>	<b>HLTH/HAS 3150</b>	<b>HLTH 3200</b>	<b>HLTH 3420</b>	<b>HLTH 4013</b>	<b>HLTH 4150</b>	<b>HLTH 4860</b>	<b>HLTH 4990</b>	<b>HAS 3000</b>	<b>HAS 3190</b>	<b>HAS 3230</b>	<b>HAS 4410</b>	<b>HIM 3200</b>
<b>RESPONSIBILITY I: Assess needs, assets, and capacity for health education</b>													
Plan assessment process	2	1	0	1	3	3	3	1	1	2	2	2	0
Access existing information and data related to health	2	1	2	3	3	3	3	1	2	1	3	1	0
Collect quantitative and/or qualitative data related to health	1	2	0	0	3	3	3	1	1	1	1	2	3
Examine relationships among behavioral, environmental, and genetic factors that enhance or compromise health	3	2	3	3	2	3	3	1	1	2	1	1	3
Examine factors that influence the learning process	1	0	3	3	0	3	2	1	2	3	2	3	0
Examine factors that enhance or compromise the process of health education	1	0	3	3	0	3	3	1	2	3	2	3	0
Infer needs for health education based on assessment findings	1	2	1	1	2	3	3	1	2	3	1	2	0

	HLTH 3000	HLTH/HAS 3150	HLTH 3200	HLTH 3420	HLTH 4013	HLTH 4150	HLTH 4860	HLTH 4990	HAS 3000	HAS 3190	HAS 3230	HAS 4410	HIM 3200
<b>RESPONSIBILITY II: Plan health education</b>													
Involve priority populations and other stakeholders in the planning process	2	3	1	0	1	3	3	1	2	0	2	1	0
Develop goals and objectives	2	1	3	0	2	3	3	1	0	2	1	3	0
Select or design strategies and interventions	2	1	3	0	1	3	3	1	1	2	2	3	0
Develop a scope and sequence for the delivery of health education	2	1	3	0	1	3	3	1	1	1	2	3	0
Address factors that affect implementation	1	0	3	1	0	3	3	1	1	2	0	2	0
<b>RESPONSIBILITY III: Implement health education</b>													
Implement a plan of action	1	1	3	0	1	3	3	1	1	2	2	3	1
Monitor implementation of health education	1	1	3	0	1	3	3	1	1	2	2	3	1
Train individuals involved in implementation of health education	1	2	3	0	1	3	3	1	1	1	2	1	1

	HLTH 3000	HLTH/HAS 3150	HLTH 3200	HLTH 3420	HLTH 4013	HLTH 4150	HLTH 4860	HLTH 4990	HAS 3000	HAS 3190	HAS 3230	HAS 4410	HIM 3200
<b>RESPONSIBILITY IV: Conduct evaluation and research related to health education</b>													
Develop evaluation/ research plan	2	1	0	0	3	3	3	1	1	3	1	3	1
Design instruments to collect evaluation and research data	1	1	0	0	3	3	3	1	1	1	2	3	2
Collect and analyze evaluation/ research data	1	1	0	0	3	3	3	1	1	2	2	3	3
Interpret results of the evaluation/ research	1	1	0	3	3	3	3	1	1	2	2	3	3
Apply findings from evaluation/ research	1	2	0	3	3	3	2	1	2	2	1	3	2
<b>RESPONSIBILITY V: Administer and manage health education</b>													
Manage fiscal resources	1	1	0	0	0	3	3	1	3	0	2	0	0
Obtain acceptance and support for programs	1	1	1	0	0	3	3	1	3	0	3	2	1
Demonstrate leadership	1	1	3	0	1	3	3	1	3	0	3	1	1
Manage human resources	1	2	1	0	2	2	3	1	1	0	3	0	0
Facilitate partnerships in support of health education	1	3	3	0	0	3	3	1	2	2	0	1	0

	<b>HLTH 3000</b>	<b>HLTH/HAS 3150</b>	<b>HLTH 3200</b>	<b>HLTH 3420</b>	<b>HLTH 4013</b>	<b>HLTH 4150</b>	<b>HLTH 4860</b>	<b>HLTH 4990</b>	<b>HAS 3000</b>	<b>HAS 3190</b>	<b>HAS 3230</b>	<b>HAS 4410</b>	<b>HIM 3200</b>
<b>RESPONSIBILITY VI: Serve as a health education resource person</b>													
Obtain and disseminate health-related information	2	0	2	3	3	3	3	1	1	3	1	1	3
Provide training	1	2	1	0	1	3	3	1	2	2	3	1	1
Serve as a health education consultant	1	2	0	0	3	3	3	1	1	3	3	1	2
<b>RESPONSIBILITY VII: Communicate and advocate for health and health education</b>													
Assess and prioritize health information and advocacy needs	1	0	2	0	3	3	3	1	2	2	2	1	1
Identify and develop a variety of communication strategies, methods, and techniques	1	1	3	3	2	3	3	1	3	2	1	3	2
Deliver messages using a variety of strategies, methods and techniques	2	2	3	0	1	3	3	1	2	2	3	3	1
Engage in health education advocacy	1	3	3	0	0	3	3	1	3	1	3	1	1
Influence policy to promote health	1	0	0	0	0	3	1	1	0	0	0	1	0
Promote the health education profession	3	2	3	0	0	3	2	3	0	2	0	2	0

## D. Student Learning Outcomes and Assessment

(Evidence of Learning: Courses within the Major & General Education Courses are shown in the tables below)

Education Goal 1: Provide students with a foundation in all Seven Areas of Responsibility for Health Education Specialists				
OBJECTIVES		MEASURES	SPRING 2013 EVALUATION	ACTION PLAN
#1	At the time of graduation, at least 80% of students will have a fundamental awareness of Responsibility 1: Assess needs, assets, and capacity for health education.	1. HLTH 3000 - 80% of students will be able to identify correctly multiple means by which health or health status can be measured.	1. HLTH 3000 - 82% of students correctly answered the exam questions on health measurement.	1. HLTH 3000 - No curricular or pedagogical changes needed at this time.
		2. HAS 3150 - 100% of students will be able to use basic principles of epidemiology.	2. HAS 3150 - 100% of students participated in class activities practicing the use of epidemiological principles. 100% of students also completed a quiz that included epidemiological practices and about 80% did well on the quiz.	2. HAS 3150 - No curricular or pedagogical changes needed at this time.
		3. HAS 3230 - 100% of students will conduct a personal SWOT analysis, identifying their various strengths, weaknesses, opportunities and threats, with determined action items relating to those findings and reaching personal, academic and professional goals.	3. HAS 3230 - 100% of students completed the SWOT analysis and received both instructor and peer review feedback on items discovered on SWOT. Action items were discussed in three class sessions as well as in group meetings	3. HAS 3230 - No curricular or pedagogical changes needed at this time.
		4. HLTH 4013 - 90% of students will complete a survey designed to assess health needs.	4. HLTH 4013 - 96% of students completed a survey designed to assess health needs.	4. HLTH 4013 - No curricular or pedagogical changes needed at this time.
		5. HLTH 4150 - 100% of students (after having created a community partnership) will develop a survey and assess the needs of the community in which they plan to serve.	5. HLTH 4150 - 100% of students administered the survey they developed and analyzed the data to determine the needs of their community partner.	5. HLTH 4150 - No curricular or pedagogical changes needed at this time.
		6. CHES Proxy Test - 80% of students who take the CHES proxy test in HLTH 4990 will score at or above 70% for Area of Responsibility 1.	6. CHES Proxy Test - 57% of students scored at or above 70% for Area of Responsibility 1.	6. CHES Proxy Test - Assessment results (from objective-specific measures, the course competency grid, and CHES practice exams) will continue to be used to maintain and develop program curriculum. Based on current assessment results, the HP program is considering the development of a CHES preparation workshop for students, which could be offered to interested students on an annual basis.

OBJECTIVES		MEASURES	SPRING 2013 EVALUATION	ACTION PLAN
#2	At the time of graduation, at least 80% of students will have a fundamental awareness of Responsibility 2: Plan health education.	1. HLTH 3000 - 80% of students will be able to identify the differences between behavior-change, cognitive-based, and social-change philosophies and methods.	1. HLTH 3000 - 79% of students correctly-answered the exam questions on health philosophies.	1. HLTH 3000 - While the objective was not technically met in spring 2013, the 1% difference is not concerning at this time. No curricular or pedagogical changes at this time.
		2. 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.	2. HLTH 3000 - 87% of students applied correctly (80% or better assignment score) theoretical constructs to a hypothetical case study in health.	2. HLTH 3000 - No curricular or pedagogical changes needed at this time.
		3. HLTH 3200 - 100% of students will plan and implement 5 experiential methods of instruction.	3. HLTH 3200: 90% of students correctly applied and evaluated the effectiveness of 5 experiential methods of instruction.	3. HLTH 3200: No curricular or pedagogical changes needed at this time.
		4. HLTH 4150 - 100% of all students enrolled will develop a timeline, that is both specific and measurable, for implementation of a program plan.	4. HLTH 4150: 90% of all students were able to follow the original timeline that was both specific and measurable, for implementation of their specific program plan. The other 10% made necessary modifications to the original timeline to better fit the needs of their community partner.	4. HLTH 4150: No curricular or pedagogical changes needed at this time.
		5. HLTH 4150 - 100% of students will pair with other students to conduct a class presentation on a popular and proven health promotion planning model.	5. HLTH 4150: 100% of students after having chosen a team to work with chose a popular and proven health promotion planning model that would best fit the needs of their intended interventions.	5. HLTH 4150: No curricular or pedagogical changes needed at this time.
		6. CHES Proxy Test - 80% of students who take the CHES proxy test in HLTH 4990 will score at or above 70% for Area of Responsibility 2.	6. CHES Proxy Test - 48% of students scored at or above 70% for Area of Responsibility 2.	6. CHES Proxy Test - Assessment results (from objective-specific measures, the course competency grid, and CHES practice exams) will continue to be used to maintain and develop program curriculum. Based on current assessment results, the HP program is considering the development of a CHES preparation workshop for students, which could be offered to interested students on an annual basis.

OBJECTIVES		MEASURES	SPRING 2013 EVALUATION	ACTION PLAN
#3	At the time of graduation, at least 80% of students will have a fundamental awareness of Responsibility 3: Implement health education.	1. HLTH 3000 - 80% of students will satisfactorily (80% or better assignment score) present both orally and visually information obtained from searching a health site on the internet.	1. HLTH 3000 - 92% of students satisfactorily (80% or better assignment score) presented information obtained from searching a health site on the internet.	1. HLTH 3000 - No curricular or pedagogical changes needed at this time.
		2. HAS 3150 - 100% of students will watch experts (local health educators and community health practitioners) in action.	2. HAS 3150 - 100% of students watched experts in action through observation and classroom activities.	2. HAS 3150 - No curricular or pedagogical changes needed at this time.
		3. HAS 3150 - 100% of students will practice health education in the classroom.	3. HAS 3150 - 100% of students practiced health education through classroom activities.	3. HAS 3150 - No curricular or pedagogical changes needed at this time.
		4. HLTH 3200 - 90% of students will teach 5 classes using experiential methods of instruction.	4. HLTH 3200: 90% of students successfully implemented 5 different experiential methods of instruction.	4. HLTH 3200: No curricular or pedagogical changes needed at this time.
		5. HAS 3230 - 100% of students will conduct a Leadership Self - Assessment to determine their abilities to lead, assess, implement and measure.	5. HAS 3230 - 100% of students completed this assignment and learned of their current skill sets and needed areas for improvement.	5. HAS 3230 - No curricular or pedagogical changes needed at this time.
		6. HLTH 4150 - 100% of all students enrolled will contact a non-profit organization of their choice and after doing a comprehensive needs assessment will plan and implement a community-based service-learning project.	6. HLTH 4150 - 100% of all students enrolled will successfully implement a community-engaged service-learning project with a non-profit organization of their choice.	6. HLTH 4150: No curricular or pedagogical changes needed at this time.
		7. CHES Proxy Test - 80% of students who take the CHES proxy test in HLTH 4990 will score at or above 70% for Area of Responsibility 3.	7. CHES Proxy Test - 25% of students scored above 70% for Area of Responsibility 3.	7. CHES Proxy Test - Assessment results (from objective-specific measures, the course competency grid, and CHES practice exams) will continue to be used to maintain and develop program curriculum. Based on current assessment results, the HP program is considering the development of a CHES preparation workshop for students, which could be offered to interested students on an annual basis.

OBJECTIVES		MEASURES	SPRING 2013 EVALUATION	ACTION PLAN
#4	At the time of graduation, at least 80% of students will have a fundamental awareness of Responsibility 4: Conduct evaluation and research related to health education.	1. HLTH 3000 - 100% of students will locate an article related to some aspect of health education using an online database.	1. HLTH 3000 - 100% of students satisfactorily (80% of better assignment score) located an article related to some aspect of health education using an online database.	1. HLTH 3000 - No curricular or pedagogical changes needed at this time.
		2. HIM 3200 - 90% of students will complete an epidemiology-related study.	2. HIM 3200 - 100% of students completed an epidemiology related research study	2. HIM 3200 - No curricular or pedagogical changes needed at this time.
		3. HLTH 4013 - 90% of students will complete a health-related study.	3. HLTH 4013 - 96% of students completed a health-related study.	3. HLTH 4013 - No curricular or pedagogical changes needed at this time.
		4. HLTH 4150 - 100% of students will do a comprehensive literature review on topics related to their community-engaged service-learning project.	4. HLTH 4150 - 100% of students will participate in the writing of the literature review (Chapter 2 of their final program plan) specific to the needs and interventions planned for their community-engaged service-learning project.	4. HLTH 4150: No curricular or pedagogical changes needed at this time.
		5. CHES Proxy Test - 80% of students who take the CHES proxy test in HLTH 4990 will score at or above 70% for Area of Responsibility 4.	5. CHES Proxy Test - 8% of students scored above 70% for Area of Responsibility 4.	5. CHES Proxy Test - Assessment results (from objective-specific measures, the course competency grid, and CHES practice exams) will continue to be used to maintain and develop program curriculum. Based on current assessment results, the HP program is considering the development of a CHES preparation workshop for students, which could be offered to interested students on an annual basis.



OBJECTIVES		MEASURES	SPRING 2013 EVALUATION	ACTION PLAN
#5	At the time of graduation, at least 80% of students will have a fundamental awareness of Responsibility 5: Administer and manage health education.	1. HLTH 3000 - 80% of students will satisfactorily (80% or better assignment score) outline a guide for making ethical decisions.	1. HLTH 3000 - 87% of students satisfactorily (80% or better score) outlined a guide for making ethical decisions specific to a health dilemma.	1. HLTH 3000 - No curricular or pedagogical changes needed at this time.
		2. CHES Proxy Test - 80% of students who take the CHES proxy test in HLTH 4990 will score at or above 70% for Area of Responsibility 5.	2. CHES Proxy Test: 25% of students scored above 70% for Area of Responsibility 5.	2. CHES Proxy Test - Assessment results (from objective-specific measures, the course competency grid, and CHES practice exams) will continue to be used to maintain and develop program curriculum. Based on current assessment results, the HP program is considering the development of a CHES preparation workshop for students, which could be offered to interested students on an annual basis.
#6	At the time of graduation, at least 80% of students will have a fundamental awareness of Responsibility 6: Serve as a health education resource person.	1. HLTH 3000 - 80% of students will satisfactorily (80% or better assignment score) present both orally and visually information obtained from searching a health site on the internet.	1. HLTH 3000 - 92% of students satisfactorily (80% or better assignment score) presented information obtained from searching a health site on the internet.	1. HLTH 3000 - No curricular or pedagogical changes needed at this time.
		2. HAS 3000 - At least 90% of students will be able to explain a current major issue in the U. S. healthcare system through scholarly research.	2. HAS 3000 - 90% of students presented a research paper that adequately explained and documented a current major issue in the U. S. healthcare system.	2. HAS 3000 - No curricular or pedagogical changes needed at this time.
		3. HAS 3150 - 100% of students will be able to identify and explain at least 15 community resources related to population health.	3. HAS 3150 - 100% of students were able to identify and explain at least 15 community resources related to population health through classroom activities and assignments.	3. HAS 3150 - No curricular or pedagogical changes needed at this time.
		4. CHES Proxy Test - 80% of students who take the CHES proxy test in HLTH 4990 will score at or above 70% for Area of Responsibility 6.	4. CHES Proxy Test - 14% of students scored above 70% for Area of Responsibility 6.	4. CHES Proxy Test - Assessment results (from objective-specific measures, the course competency grid, and CHES practice exams) will continue to be used to maintain and develop program curriculum. Based on current assessment results, the HP program is considering the development of a CHES preparation workshop for students, which could be offered to interested students on an annual basis.

OBJECTIVES		MEASURES	SPRING 2013 EVALUATION	ACTION PLAN
#7	At the time of graduation, at least 80% of students will have a fundamental awareness of Responsibility 7: Communicate and advocate for health and health education.	1. HTLH 3000 - 80% of students will satisfactorily (80% or better assignment score) identify the purpose and types of voluntary health agencies and professional health organizations.	1. HLTH 3000 - 84% of students satisfactorily (80% or better assignment score) identified the purpose and types of voluntary health agencies and professional health organizations.	1. HLTH 3000 - No curricular or pedagogical changes needed at this time.
		2. HAS 3230 - 100% of students will take an exam on concepts of Emotional Intelligence and proper industry procedures and standards in communicating in health delivery.	2. HAS 3230 - 100% completed the exam, and 85% performed well on the exam.	2. HAS 3230 - No curricular or pedagogical changes needed at this time.
		3. HAS 3230 - 100% of students will complete two separate assignments requiring interviews and contact with current industry personnel through Q & A interviews and mock job interviews.	3. HAS 3230 - 100% of students completed two separate assignments requiring interviews and contact with current industry personnel through Q & A interviews and mock job interviews.	3. HAS 3230 - No curricular or pedagogical changes needed at this time.
		4. HLTH 4150 - 100% of students will do a team presentation on the importance of advocating for health and health education.	4. HLTH 4150 - At the completion of their community-engaged service learning project 100% of students did a team presentation for their community partner, other students, and invited faculty on how the community partner can continue to advocate for health and health education programs.	4. HLTH 4150: No curricular or pedagogical changes needed at this time.
		5. CHES Proxy Test - 80% of students who take the CHES proxy test in HLTH 4990 will score at or above 70% for Area of Responsibility 7.	5. CHES Proxy Test - 25% of students scored above 70% for Area of Responsibility 7.	5. CHES Proxy Test - Assessment results (from objective-specific measures, the course competency grid, and CHES practice exams) will continue to be used to maintain and develop program curriculum. Based on current assessment results, the HP program is considering the development of a CHES preparation workshop for students, which could be offered to interested students on an annual basis.

OBJECTIVES		MEASURES	SPRING 2013 EVALUATION	ACTION PLAN
#8	By the time of graduation, at least 80% of students will have demonstrated an understanding of what it means to be a professional Health Education Specialist.	1. HLTH 3000 - 80% of students will be able to list and describe the Seven Areas of Responsibility for Health Education Specialists.	1. HLTH 3000 - 90% of students satisfactorily (80% or better assignment score) described the Seven Areas of Responsibility for Health Education Specialists.	1. HLTH 3000 - No curricular or pedagogical changes needed at this time.
#9	By the time of graduation, at least 90% of students will complete an internship that addresses at least three of the Seven Areas of Responsibility.	1. HLTH 4860 - 90% of students will complete an internship that addresses at least three of the Seven Areas of Responsibility.	1. HLTH 4860 - This is a new objective; data collection began in fall 2013.	1. HLTH 4860 - In order to measure this objective, all students registering for HLTH 4860 credit in fall 2013 were required to identify at least three of the Seven Areas of Responsibility that their internship addressed.

**Education Goal #2: Provide a Social Science General Education (SSGE) course for the University**

OBJECTIVES		MEASURES	SPRING 2013 EVALUATION	ACTION PLAN
#1	By the completion of the SSGE, students will demonstrate adequate proficiency related to Skill 4: Use of library or other research sources.	1. HLTH 1030 - By the completion of the course, at least 70% of students will score 70% or above on exam items related to Skill 4: Use of library or other research sources.	1. HLTH 1030 - 65% of students scored 70% or above on exam items related to Skill 4: Use of library or other research sources.	1. HLTH 1030 - While the objective was not technically met in spring 2013, the 5% difference is not concerning at this time. No curricular or pedagogical changes at this time.
		2. HLTH 1030 - 70% of the exam items related to Skill 4: Use of library or other research sources will be answered correctly.	2. HLTH 1030 - 80.7% of the exam items related to Skill 4: Use of library or other research sources were answered correctly.	2. HLTH 1030 - No curricular or pedagogical changes needed at this time.
#2	By the completion of the SSGE, students will demonstrate adequate proficiency related to Skill 5: Critical thinking, cognitive learning, and individual or group problem solving.	1. HLTH 1030 - By the completion of the course, at least 70% of students will score 70% or above on exam items related to Skill 5: Critical thinking, cognitive learning, and individual or group problem solving.	1. HLTH 1030 - 94% of students scored 70% or above on exam items related to Skill 5: Critical thinking, cognitive learning, and individual or group problem solving.	1. HLTH 1030 - No curricular or pedagogical changes needed at this time.
		2. HLTH 1030 - 70% of the exam items related to Skill 5: Critical thinking, cognitive learning, and individual or group problem solving will be answered correctly.	2. HLTH 1030 - 88.7% of the exam items related to Skill 5: Critical thinking, cognitive learning, and individual or group problem solving were answered correctly.	2. HLTH 1030 - No curricular or pedagogical changes needed at this time.

OBJECTIVES		MEASURES	SPRING 2013 EVALUATION	ACTION PLAN
#3	By the completion of the SSGE, students will demonstrate adequate proficiency related to Outcome 1: Describe a social science approach to studying and understanding human behavior.	1. 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: Describe a social science approach to studying and understanding human behavior.	1. HLTH 1030 - 87% of students scored 70% or above on exam items related to Outcome 1: Describe a social science approach to studying and understanding human behavior.	1. HLTH 1030 - No curricular or pedagogical changes needed at this time.
		2. HLTH 1030 - 70% of the exam items related to Outcome 1: Describe a social science approach to studying and understanding human behavior will be answered correctly.	2. HLTH 1030 - 83.9% of the exam items related to Outcome 1: Describe a social science approach to studying and understanding human behavior were answered correctly.	2. HLTH 1030 - No curricular or pedagogical changes needed at this time.
#4	By the completion of the SSGE, students will demonstrate adequate proficiency related to Outcome 2: Describe basic assumptions about humans and their behaviors from a social science perspective.	1. 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: Describe basic assumptions about humans and their behaviors from a social science perspective.	1. HLTH 1030 - 96% of students scored 70% or above on exam items related to Outcome 2: Describe basic assumptions about humans and their behaviors from a social science perspective.	1. HLTH 1030 - No curricular or pedagogical changes needed at this time.
		2. HLTH 1030 - 70% of the exam items related to Outcome 2: Describe basic assumptions about humans and their behaviors from a social science perspective will be answered correctly.	2. HLTH 1030 - 91.5% of the exam items related to Outcome 2: Describe basic assumptions about humans and their behaviors from a social science perspective were answered correctly.	2. HLTH 1030 - No curricular or pedagogical changes needed at this time.
#5	By the completion of the SSGE, students will demonstrate adequate proficiency related to Outcome 4: Explain the interactions between individuals and their sociocultural and/or natural environments.	1. HLTH 1030 - By the completion of the course, at least 70% of students will score 70% or above on exam items related to Outcome 4: Explain the interactions between individuals and their sociocultural and/or natural environments.	1. HLTH 1030 - 92% of students scored 70% or above on exam items related to Outcome 4: Explain the interactions between individuals and their sociocultural and/or natural environments.	1. HLTH 1030 - No curricular or pedagogical changes needed at this time.
		2. HLTH 1030 - 70% of the exam items related to Outcome 4: Explain the interactions between individuals and their sociocultural and/or natural environments will be answered correctly.	2. HLTH 1030 - 87.1% of the exam items related to Outcome 4: Explain the interactions between individuals and their sociocultural and/or natural environments were answered correctly.	2. HLTH 1030 - No curricular or pedagogical changes needed at this time.

OBJECTIVES		MEASURES	SPRING 2013 EVALUATION	ACTION PLAN
#6	By the completion of the SSGE, students will demonstrate adequate proficiency related to Outcome 5: Apply a social science perspective to a particular issue and identify factors impacting change (past or present).	1. HLTH 1030 - By the completion of the course, at least 70% of students will score 70% or above on exam items related to Outcome 5: Apply a social science perspective to a particular issue and identify factors impacting change (past or present).	1. HLTH 1030 - 93% of students scored 70% or above on exam items related to Outcome 5: Apply a social science perspective to a particular issue and identify factors impacting change (past or present).	1. HLTH 1030 - No curricular or pedagogical changes needed at this time.
		2. HLTH 1030 - 70% of the exam items related to Outcome 5: Apply a social science perspective to a particular issue and identify factors impacting change (past or present) will be answered correctly.	2. HLTH 1030 - 86.3% of the exam items related to Outcome 5: Apply a social science perspective to a particular issue and identify factors impacting change (past or present) were answered correctly.	2. HLTH 1030 - No curricular or pedagogical changes needed at this time.
Service Goal 1: Provide students with meaningful and mutually beneficial engagements with community partners				
OBJECTIVES		MEASURES	SPRING 2013 EVALUATION	ACTION PLAN
#1	By the time of graduation, 90% of students will complete a mutually beneficial internship with a community partner.	1. HLTH 4860 - 90% of students will earn an 80% or higher on their final grade for the internship.	1. HLTH 4860 - 100% of students earned an 80% or higher on their final grade for the internship.	1. HLTH 4860 - No curricular or pedagogical changes needed at this time.
		2. HLTH 4860 - 90% of students will complete a minimum of 180 internship hours.	2. HLTH 4860 - 95% of students completed a minimum of 180 internship hours.	2. HLTH 4860 - As of fall 2013, a penalty has been added to the HLTH 4860 course grade for students who do not complete the contracted number of hours within the specified semester. No other curricular or pedagogical changes needed at this time
		3. HLTH 4860 - 100% of students will be evaluated satisfactorily (80% or higher) by their internship site supervisor.	3. HLTH 4860 - 100% of students were evaluated satisfactorily (80% or higher) by their internship site supervisor.	3. HLTH 4860 - No curricular or pedagogical changes needed at this time.
#2	By the completion of HLTH 4150, 80% of students will articulate how social behavioral theories and methodologies were used in the design, implementation, and evaluation of a community-engaged service learning project.	1. HLTH 4150 - 80% of students will articulate, through an oral presentation, how social behavioral theories and methodologies were used in the design, implementation, and evaluation of a community-engaged service learning project.	1. HLTH 4150: 100% of students were evaluated satisfactorily (80% or higher) by their instructor and on-site community partner on the planning, implementation, evaluation, and effectiveness of their community-engaged service learning program plan.	1. HLTH 4150: No curricular or pedagogical changes needed at this time.

## E. Academic Advising

In HPHP, students can expect a friendly educational environment with student leadership involvement and a student-oriented advising program. The HP faculty, the HPHP Advisement Coordinator (Sherrie Jensen), and the HAS Faculty Advisor (Ken Johnson) are strongly committed to assisting each student in a planned advisement program that is most effective. Student satisfaction is a goal and students are counseled that the responsibility of successful completion of their programs lies in their hands. Students are advised of program admission requirements,

general education for courses in the department that satisfied general education requirements, and transfer articulation.

#### E. 1. Advising Strategy and Process

The HPHP department has a highly qualified and experienced Advisement Coordinator. Each individual HP faculty member also participates in advisement after students have an initial meeting with the Advisement Coordinator. The current advisement process (effective Fall 2013) is: new students attend a group advisement session, students schedule individual advisement sessions with the advisement coordinator, then student may meet with a faculty advisor or program director. The advisement coordinator seeks to maintain academic program requirements, follow degree maps, attend training and conferences related to advisement and WSU as well as for the specific program, and attend department and program meetings. The academic advisor has specific responsibilities as does the student.

##### Advisor Responsibilities:

- 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 skills in assuming responsibility for their educational plans and achievements.
- Promote and encourage students to develop productive working relationships with their professors.

Advisee Responsibilities: Advisees have clear responsibilities in order for the advising partnership to be successful. Among those responsibilities are the following:

- 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 needed.
- Keep a personal record of graduation progress and goals. Organize official documents (academic records, communications from professors or the advisement coordinator—including emails, letters, and/or phone calls).
- Clarify personal values and goals and provide the advisor with this information
- Become knowledgeable about University programs, policies and procedures.
- Accept responsibility for decisions made.

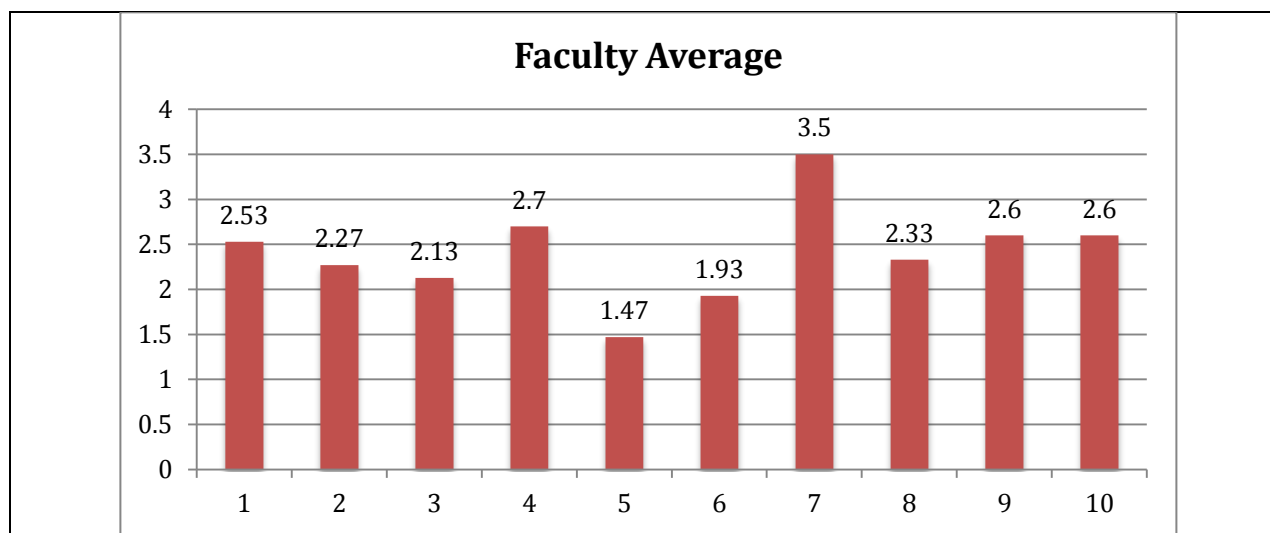
- Respond to official notification from the advisement coordinator (letters, emails, phone contacts, etc.) in a timely manner.
- Maintain effective working relationships with advisors, faculty and administrators.

## E. 2. Effectiveness of Advising

An advisement survey for department faculty evaluation of advisement and program students' evaluation of advisement was created and implemented during Spring 2013. The results were overall positive with some areas identified for improvement (survey questions and summary of data is found on the following pages). The main area for improvement was greater availability to the advisement coordinator. Beginning Fall 2013 group advisement for each program was implemented as a requirement for individual advisement (as discussed previously). Further, the process involved in meeting scheduling between students and the advisement coordinator needed improvement. A system is in place now to schedule meetings with the department secretary using Google calendar.

### Faculty Advisement Coordinator April 2013 Survey (15 of 18 faculty responded)

<b>Questions</b>
<ol style="list-style-type: none"> <li>1. The HPHP advisement coordinator is sufficiently available to assist students.</li> <li>2. The HPHP advisement coordinator responds quickly to student needs.</li> <li>3. The HPHP advisement coordinator provides accurate information to students.</li> <li>4. The HPHP advisement coordinator provides accurate information to faculty.</li> <li>5. The HPHP advisement coordinator handles academic petitions (waivers, substitutions, exceptions, experiential credit, etc.) appropriately.</li> <li>6. The HPHP advisement coordinator always follows department chair, program director, and/or faculty academic mandates.</li> <li>7. The HPHP advisement coordinator is knowledgeable about departmental programs and general education requirements.</li> <li>8. The HPHP advisement coordinator adequately documents advisement sessions through the online university advisement system.</li> <li>9. The advisement coordinator is in her office during peak advisement need times.</li> <li>10. I am satisfied with the HPHP advisement coordinator employee work ethic and quality.</li> </ol>
<b>Rating Scale</b>
<b>Questions 1-10</b>
<ol style="list-style-type: none"> <li>0. Strongly Disagree</li> <li>1. Sometimes Disagree</li> <li>2. Neither Agree nor Disagree</li> <li>3. Sometimes Agree</li> <li>4. Strongly Agree</li> </ol>
<b>Results</b>



**Student Advisement Coordinator April 2013 Survey (94 students responded)**

**Questions**

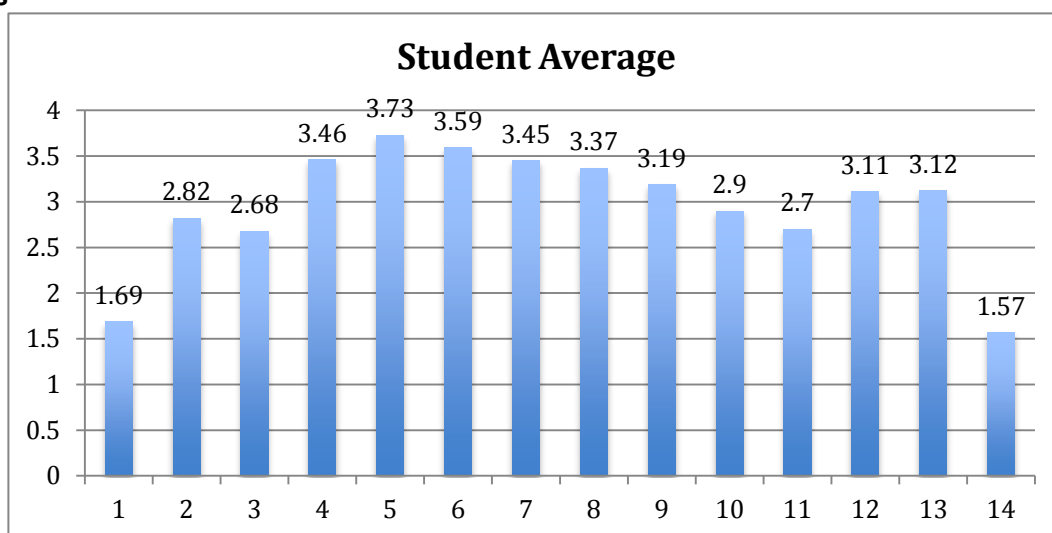
1. I am typically able to schedule a meeting with the HPHP advisement coordinator within:
2. The HPHP advisement coordinator is readily available to me throughout the semester when I need assistance.
3. The HPHP advisement coordinator responds quickly (such as within 24-48 hours Monday through Friday) to my email and voicemail.
4. The HPHP advisement coordinator's responses adequately address my questions and meet my needs.
5. The HPHP advisement coordinator is courteous and professional.
6. Meetings with the HPHP advisement coordinator are helpful and productive.
7. The HPHP advisement coordinator provides me with accurate advisement information.
8. The HPHP advisement coordinator helps me select courses that match my interests and graduation requirements.
9. The HPHP advisement coordinator is helpful in discussing my career plans and goals.
10. I feel confident that the HPHP advisement coordinator will follow up on any unresolved issues.
11. The HPHP advisement coordinator clearly communicates what is my responsibility and what she can do for me.
12. The HPHP advisement coordinator refers me to program faculty members for program-specific course questions.
13. The HPHP advisement coordinator tells me where to go on campus for additional resources when needed.
14. Information provided by the HPHP advisement coordinator is contradictory to information provided by my program faculty.

**Rating Scale**

<b>Question 1</b>	<b>Questions 2-7</b>	<b>Questions 8-14</b>
0. Over two weeks	0. Never	0. Strongly Disagree
1. One to two weeks	1. Rarely	1. Sometimes Disagree
2. About one week	2. Occasionally	2. Neither Agree nor Disagree
3. A few days	3. Most of the time	3. Sometimes Agree
4. Minutes to hours	4. Always	4. Strongly Agree



## Results



**Interpretation:** Students were generally satisfied with advisement but noted some areas needing improvement. The program faculty were generally unsatisfied with several facets related to advisement. Faculty were the most satisfied with the advisement coordinators knowledge about department programs and general education requirements and the least satisfied with the advisement coordinators handling of petitions (waivers, substitutions, exceptions, experiential credit). Faculty members also reported dissatisfaction with the advisement coordinator not following department chair, program director, and/or faculty mandates regarding advisement. Students were overall satisfied with the advisement coordinator being professional and courteous and meetings being helpful and productive. Students reported having difficulty scheduling a meeting with the advisement coordinator. Contradictory information between the program faculty and advisement coordinator appears to be a concern by some students.

**Actions taken:** Group advisement sessions have been implemented. Advisement scheduling has been taken over by a department secretary. The advisement coordinator is not permitted to processes petitions without approval in writing. Program faculty rather than the advisement coordinator handle difficult advising cases.

### E. 3. Past Changes and Future Recommendations

The department continually updates curriculum and advisement tools to assist students in successful completion of degree requirements. When program changes are made accommodations are in place so students can complete their program based on their catalog year. Advisement will continue to be progressive, include technology updates as a means to facilitate advisement and communication with students, and adapt to meet student and faculty needs based on survey results conducted minimally every three to five years.

## F. Faculty

### F. 1. Faculty Demographic Information

The program has one full-time tenured professor and three full-time tenure track assistant professors. Each holds a doctorate degree in in Health Education, Public Health, or Health Education and Promotion, with specific specialty training in areas specific to courses taught.

### F. 2. Programmatic/Departmental Teaching Standards

The program faculty members are held to the MCOE teaching standards and policies and procedures for tenure and promotion (per the tenure document and PPM 8-11). The department chair reviews faculty in their second year. Peer review committees review faculty teaching according to policy in their second and fifth year. Department and College ranking tenure and evaluation committees review faculty in their third and six years, also according to policy.

Faculty teaching schedules are determined by the department chair, in consultation with the program director and faculty member. They are established based on the strengths of the faculty member, needs of the program, and performance factors. 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 this program 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. The student evaluation instrument has been consistently used for over ten years and is currently being reevaluated by a department student survey committee.

### F. 3. Faculty Qualifications

Each faculty member is highly qualified to teach in this program. A summary of the current faculty is shown in the table below. Adjunct faculty must meet the department minimum qualifications to teach in the department and program. This includes holding a masters degree in a health-related field.

### F. 4. Faculty (*AY 2013-2014*)

	Tenure	Adjunct
<b>Number of faculty with Doctoral degrees</b>	4	1
<b>Number of faculty with Master's degrees</b>	0	4
<b>Number of faculty with Bachelor's degrees</b>	0	0
<b>Other Faculty</b>	0	0
<b>Total</b>	4	5

## F. 5. Evidence of Effective Instruction

### F. 5a. Regular Faculty

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 GOOD, therefore all tenured faculty have demonstrated quality teaching, and tenure-track faculty are striving for this standard. Tenured faculty must also go under post-tenure review, which ensures continued teaching quality.

### F. 5b. Adjunct Faculty

Adjunct instructors are used on a semester-by-semester as needed basis and offered semester teaching contracts (see Appendix F). When adjunct faculty members are used to teach a course, they use a department-approved course syllabus (see Appendix G), 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 or through WSU secure department cloud 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.

### F. 5c. Mentoring Activities

Faculty members within the program are mentored by the department chair, program directors, and other faculty within the diverse HPHP department. Adjunct instructors are mentored by a faculty member most familiar with the course taught by the adjunct.

### F. 5d. Diversity of Faculty

The faculty includes two males and two females, all Caucasian. 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, ethnicity, age, etc.

### F. 5e. Ongoing Review and Professional Development

Department faculty members are reviewed according to WSU PPM schedules. Adjunct faculty are evaluated annually via peer review and review of end of course evaluations. The typical schedule after hire as a tenure track assistant professor is:

- 2<sup>nd</sup> year: peer review of teaching by committee and Department Chair review
- 3<sup>rd</sup> Year: formal tenure rank and evaluation committee review

- 5<sup>th</sup> year: peer review of teaching by committee
- 6<sup>th</sup> Year: formal tenure rank and evaluation committee review

If tenure and rank advancement was granted:

- 11<sup>th</sup> year: eligible for full-professor promotion or post-tenure review
- Every five years: post-tenure review

All full-time HP faculty attend professional conferences each year. These conferences vary based on the faculty member's expertise, but are within the discipline of Health Promotion. Funding for these conferences comes from several sources: the WSU Research, Scholarship, and Professional Growth Committee grants (RSPG), WSU College of Education Endowment grants, and WSU Dept. of Health Promotion and Human Performance travel funds. The faculty also regularly attend teaching workshops on campus provided by the Teaching and Learning Forum. As needed, the faculty also attend trainings offered through WSU Training Tracker.

## G. Support Staff, Administration, Facilities, Equipment, and Library

### G. 1. Adequacy of Staff

The department currently has two non-exempt staff secretaries (Danielle Orozco and Jackelyn Luther) along with three exempt staff personnel including one advisor (Sherrie Jensen), one human performance lab coordinator (Tim Ruden) and one internship coordinator (Heather Hunter). The college also employs a recruiter who assists with recruitment for the HPHP department programs.

#### G. 1a. Ongoing Staff Development

Department staff members are extended opportunities for WSU development including travel to appropriate professional conference, WSU specific trainings through training tracker, and enrollment in WSU courses. Each staff member regularly attends such trainings and takes advantage of development opportunities.

### G. 2. Adequacy of Administrative Support

Prior to this academic year (2013-2014) the department was understaffed and needed additional secretarial assistance and internship coordinator assistance. The second department secretary was hired April 1, 2013 and the internship coordinator was hired August 12, 2013. The department and program has benefitted from improved support from the Dean and Provost.

### G. 3. Adequacy of Facilities and Equipment

The department is housed in the Swenson Building within the Stromberg Complex. The facility provides adequate classrooms, laboratories, and equipment to support the program. Faculty members along with some staff members and at times in collaboration with campus recreation

write research grants for equipment needed for teaching and research. Funds are usually secured for these excellent proposals.

#### G. 4. Adequacy of Library Resources

The Stewart Library provides information resources and services on multiple WSU campuses. Print, electronic including databases, and audio-visual materials are provided in adequate titles. Hours of operation are extensive and met student and faculty needs. The library website (<http://library.weber.edu>) assists with meeting 24/7 needs. The library assigns a librarian to each college. The librarian has an annual budget to provide current resources for the program. Additionally, the librarian meets faculty classes when invited in scheduled teaching rooms within the library and provides electronic resources for specific classes taught when requested. The resources adequately met the program, faculty, and student needs. When a resource is not in the library, the interlibrary loan process enables access to most materials.

#### H. 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). See Appendix E for a full list of community partners. Faculty maintain contact with former graduates of the program informally. Numerous former students initiate contact with faculty when requesting updated letters of recommendation or permission to contact when changing jobs. Each faculty has placement information about former students, which helps project health promotion employment opportunities for current students.

##### H. 1. Community Partnerships for Field Experiences

Numerous community health agencies partner with the Health Promotion program providing internships for students. These relationships extend well beyond Weber County, although the majority of students do serve 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.

##### H. 2. Benefits of Community Partnerships

Community associations have resulted in placement of student interns and employment of graduates. Local and regional companies now send recruiters to the WSU Job Fair and job openings to department faculty and the Advisement Coordinator. Often these recruiters are WSU graduates who have encouraged their company to recruit at WSU. Many HP graduates are hired by companies where previous graduates have worked. Student internships with local and state agencies have resulted in employment for the students upon graduation. Community contacts have also resulted in the establishment of scholarships for HP students. These donations have

provided opportunities for faculty and students to work on timely projects with potentially significant outcomes.

## I & J. Results of Previous Program Reviews & Action Plan for Ongoing Assessment Based on Current Self Study Findings

Problem Identified	Action Taken During Past 5 Years	Action Plan
A major challenge, stated in the 2003 report, is the need for at least one additional full-time faculty member. Considering the number of credit hours generated, supporting general education, having highly successful major and minor programs, plus providing significant courses for teacher education, an additional faculty member is not difficult to justify.	An additional full-time faculty member was hired with a start date of July 1, 2013.	While the addition of a fourth full-time faculty member on July 1, 2013, has increased program resources, the HP program will begin discussion during the 2013-2014 academic year about seeking approval for the addition of a fifth faculty member.
Without an additional faculty member, the reliance on adjunct faculty will continue. Although the efforts to ensure quality appointments and quality teachings are of primary concern, additional effort may be needed regarding orientations, mentorship programs, evaluation, which mirrors tenure track faculty. The reliance on student evaluations (subject to respect bias) is usually linear without corroboration. There may be a need for more standardization and accountability. The ratio of adjuncts to regular faculty may adversely affect accreditation.	An additional full-time faculty member was hired with a start date of July 1, 2013.	While the addition of a fourth full-time faculty member on July 1, 2013, has increased program resources, the HP program will begin discussion during the 2013-2014 academic year about seeking approval for the addition of a fifth faculty member.
	A template for the standardization of HLTH 1030 - Healthy Lifestyles, the course that the majority of adjunct instructors teach, was developed in spring 2013. HLTH 1030 instructors met at the beginning of fall 2013 to discuss this template. This self-study contains the HP program's first review of the data after this standardization (from its pilot implementation in spring 2013).	Each fall, the HP program will review assessment data for HLTH 1030 for the prior academic year. This data will be used to make changes to the course and its standardization, if needed.
The respective faculties of the Health Promotion program and Department of Health Administrative Services need to reestablish a high level of communication and collaboration.	Frequent (biweekly) informal meetings occur between directors of the HP and HAS programs. At least one formal meeting occurs on an annual basis with a variety of representatives from each program.	No action required.
In general the Health Education Program has done a superb job in meeting the reference standards of Weber State University, with one exception. They have used C.H.E.S. passing rates of students, but have not measured established objectives.	The HP program has established 9 specific objectives regarding the Seven Areas of Responsibility for Health Education Specialists (CHES competencies) and continues to assess those objectives, on an annual basis, through a variety of measures.	No action required.
As noted in the self-study the area of assessing "student learning outcomes" the faculty has set four major goals, which address this critical standard.	The HP program has an established set of goals and objectives, which are assessed on an annual basis through a variety of measures.	No action required.
As stipulated in the self-study a major challenge is to develop and implement an assessment plan regarding student-learning outcomes inclusive of the collection and analysis of data. The faculty has enumerated this already and is taking action.	The HP program has an established set of goals and objectives, which are assessed on an annual basis through a variety of measures.	No action required.

Problem Identified	Action Taken During Past 5 Years	Action Plan
<p>It may be helpful for the program to develop and maintain a depository of assessment data to be retained as an archive. This would prevent past faculty from taking these vital records with them, centralize the data, and make it assessable for longitudinal evaluations. In addition, program faculty could initiate better relations with the health education industry and its own alumni, surveying them on how well the Health Education program prepares its students.</p>	<p>Assessment data moved to electronic copy only (Chi Tester and Canvas) in spring 2013. All remaining hard copies of assessment data have been entered into an electronic database. A Box folder was created to store all program assessment documents associated with annual reports and self-studies.</p>	<p>The HP program will continue to collect and store all assessment data and documents electronically in one central location.</p>
<p>Based upon the excellent structure and success of the program it may be time to set a strategic goal of seeking national accreditation of the Health Promotion Major. The program accreditation effort is a national endeavor sponsored by several national professional organizations, including the Society for Public Health Education and the American Association for Health Education, in concert with the National Commission for Health Education Credentialing.</p>	<p>At present, the standard credential for undergraduate professional programs in health education is the designation awarded by the Joint Committee of the Society for Public Health Education (SOPHE) and the American Association for Health Education (AAHE)--SOPHE/AAHE Baccalaureate Program Approval (SABPAC). The National Implementation Task Force for Accreditation in Health Education (sponsored by SOPHE and AAHE), however, has recommended a new system be adopted for accreditation. Specifically, the task force recommendation is: (a) to phase out the current SABPAC approval process for undergraduate health education programs; and, alternatively, (b) to utilize the Council on Education for Public Health (CEPH) as the preferred accrediting entity to provide a single coordinated accreditation mechanism for health education and public health programs at both the undergraduate and graduate levels. Given the changing accreditation landscape, and the complexity of negotiating agreements with accrediting agencies (SABPAC, CEPH) and the National Commission for Health Education Credentialing, the faculty of the WSU Health Promotion Program believe it is advantageous to wait until the new system begins before seeking accreditation.</p>	<p>The HP program will continue to monitor the changing accreditation climate and will discuss on an annual basis the possibility of seeking accreditation.</p>



Problem Identified	Action Taken During Past 5 Years	Action Plan
<p>Based on student interviews regarding taking the C.H.E. S. exam, the team suggests providing more extensive opportunities for preparation. This could be in the form of better integration into courses, conducting study groups, having workshops, inviting guest speakers who have taken the exam, etc.</p>	<p>The HP program has established 9 specific objectives regarding the Seven Areas of Responsibility for Health Education Specialists (CHES competencies) and continues to assess those objectives, on an annual basis, through a variety of measures. In addition, the program updates a course competency grid (based on the Seven Areas of Responsibility) on an annual basis to evaluate how each course contributes to preparation for the CHES exam. This grid is used to assess and make decisions about curriculum. HP students have also begun (for the past three semesters) taking practice CHES exams in HLTH 4990 - Senior Seminar, during their final year of study.</p>	<p>Assessment results (from objective-specific measures, the course competency grid, and CHES practice exams) will continue to be used to maintain and develop program curriculum. Based on current assessment results, the HP program is considering the development of a CHES preparation workshop for students, which could be offered to interested students on an annual basis or incorporated into the existing senior seminar. The program is considering also mandating the inclusion of CHES competencies on all required-course syllabi.</p>
<p>Development of an option for occupational health promotion seems a viable goal. This option did exist in the Lifestyle Management Major of the 1990's. Although the BIS may provide one alternative, the Human Performance Major (which replaced Lifestyle Management) has all of content courses needed for such a major or emphasis. The team encourages the faculty to explore such an option using the Human Performance Major rather than creating duplication with new programs. The most expedient approach may be to encourage Human Performance Majors to voluntarily select the Health Promotion Minor to meet eligibility for taking the C.H.E.S. exam. The Academic Advisor has done this over the last few years for selected students, but such an approach has not been marketed by faculty advisors or in course content. In respect to the varied but highly related majors faculty should revisit professional preparation standards from professional organizations. For example, new approaches to wellness often have new nomenclature such as "Lifestyle Coaching".</p>	<p>Until July 1, 2013, when a new full-time faculty member was hired, the HP program was considered "under-staffed," with a reliance on adjunct faculty and full-time faculty members teaching overload to ensure that all courses were taught regularly. With the addition of a new faculty member, new discussion around creating "areas of emphasis" within the HP program has begun.</p>	<p>The HP program will meet with the HAS program in spring 2014 to discuss potential curricular changes (which may include the development of multiple "areas of emphasis" with the HP program).</p> <p>While the addition of a fourth full-time faculty member on July 1, 2013, has increased program resources, the HP program will begin discussion during the 2013-2014 academic year about seeking approval for the addition of a fifth faculty member. An additional faculty member may make the creation of "areas of emphasis" more feasible for the program.</p>

<b>Problem Identified</b>	<b>Action Taken During Past 5 Years</b>	<b>Action Plan</b>
<p>The School Health Minor should stand by itself, as denoted in the 2003 response to the site team visit. In addition, the Health 4150 course should not be included in the minor because it is not required by the Utah State Board of Education (those standards are included in the 2003 response).</p>	<p>As it stands, the HP program has no dedicated faculty in the area of school health. Without this expertise, the program has been hesitant to expand efforts related to a School Health minor or major.</p>	<p>The HP program will continue to monitor demand for increased efforts in the area of School Health on an annual basis.</p> <p>While the addition of a fourth full-time faculty member on July 1, 2013, has increased program resources, the HP program will begin discussion during the 2013-2014 academic year about seeking approval for the addition of a fifth faculty member. An additional faculty member may make an emphasis on School Health more feasible for the program.</p>
	<p>School Health minor students are advised to not take HLTH 4150, unless faculty advisors see significant benefit for the student in doing so.</p>	<p>No action required.</p>
<p>Based on the possible need for more school health educators, and the regression of these programs at the University of Utah and Utah State University, the time may be right to develop a School Health Major. Such an effort should be preceded by a needs assessment. This would not require any new courses.</p>	<p>As it stands, the HP program has no dedicated faculty in the area of school health. Without this expertise, the program has been hesitant to expand efforts related to a School Health minor or major.</p>	<p>The HP program will continue to monitor demand for increased efforts in the area of School Health on an annual basis.</p> <p>While the addition of a fourth full-time faculty member on July 1, 2013, has increased program resources, the HP program will begin discussion during the 2013-2014 academic year about seeking approval for the addition of a fifth faculty member. An additional faculty member may make an emphasis on School Health more feasible for the program.</p>
<p>Based on anecdotal evidence from students, greater emphasis needs to be put upon the CHES exam in all professional preparation courses.</p>	<p>The HP program has established 9 specific objectives regarding the Seven Areas of Responsibility for Health Education Specialists (CHES competencies) and continues to assess those objectives, on an annual basis, through a variety of measures. In addition, the program updates a course competency grid (based on the Seven Areas of Responsibility) on an annual basis to evaluate how each course contributes to preparation for the CHES exam. This grid is used to assess and make decisions about curriculum. HP students have also begun (for the past three semesters) taking practice CHES exams in HLTH 4990 - Senior Seminar, during their final year of study.</p>	<p>Assessment results (from objective-specific measures, the course competency grid, and CHES practice exams) will continue to be used to maintain and develop program curriculum. Based on current assessment results, the HP program is considering the development of a CHES preparation workshop for students, which could be offered to interested students on an annual basis or incorporated into the existing senior seminar. The program is considering also mandating the inclusion of CHES competencies on all required-course syllabi.</p>
<p>As part of community linkages, the Health Promotion Program needs to integrate more input from significant members. Developing and maintaining an active advisory committee could accomplish this.</p>	<p>The HP program piloted a luncheon with community partners to obtain feedback on the program and community partner needs.</p>	<p>The HP program is considering the implementation of an annual luncheon with community partners for the purposes of obtaining feedback.</p>

Problem Identified	Action Taken During Past 5 Years	Action Plan
The program needs to initiate regular meetings with the faculty of the HAS department, ensuring the seamless coordination of the two groups in offering the degree.	Frequent (biweekly) informal meetings occur between directors of the HP and HAS programs. At least one formal meeting occurs on an annual basis with a variety of representatives from each program.	No action required.

## K. Summary of Artifact Collection Procedure

Artifact	Goal/Objective Measured	When/How Collected?	Where Stored?
Exam, assignment, and final grades for relevant courses	Education Goal 1: Objective 1, Measures 1-5 Objective 2, Measures 1-5 Objective 3, Measures 1-6 Objective 4, Measures 1-4 Objective 5, Measure 1 Objective 6, Measures 1-3 Objective 7, Measures 1-4 Objective 8, Measure 1 Education Goal 2: Objective 1, Measures 1-2 Objective 2, Measures 1-2 Objective 3, Measures 1-2 Objective 4, Measures 1-2 Objective 5, Measures 1-2 Objective 6, Measures 1-2 Service Goal 1: Objective 1, Measures 1-3 Objective 2, Measure 1	End of each semester/ Each instructor submits documentation to Program Director	Electronic copies stored on HP Program Assessment Box folder; Artifacts also are archived using the Canvas Learning Management System
CHES Proxy Test Scores	Education Goal 1: Objective 1, Measure 6 Objective 2, Measure 6 Objective 3, Measure 7 Objective 5, Measure 2 Objective 6, Measure 4 Objective 7, Measure 5	End of each semester/ Collected in HLTH 4990 – Senior Seminar and submitted to Program Director	Electronic copies stored on HP Program Assessment Box folder; Artifacts also are archived using the Canvas Learning Management System
Internship Contract Paperwork	Education Goal 1: Objective 9, Measure 1	Beginning of each semester/ Collected by faculty supervisor for HLTH 4860 – Field Experience	Electronic copies stored on HP Program Assessment Box folder; Artifacts also are archived using the Canvas Learning Management System

Summary Information (as needed): N/A

## APPENDICES

### Appendix A: Student and Faculty Statistical Summary

<b>HPHP ALL</b>	2008-09	2009-10	2010-11	2011-12	2012-13
<b>Student Credit Hours Total <sup>1</sup></b>					
Athletic Training	<b>2,252</b>	<b>2,946</b>	<b>3,638</b>	<b>3,710</b>	4541
Health	<b>7,572</b>	<b>8,368</b>	<b>9,623</b>	<b>10,242</b>	<b>9,253</b>
Nutrition	<b>8,228</b>	<b>9,220</b>	<b>9,885</b>	<b>9,744</b>	<b>9,915</b>
Recreation	<b>271</b>	<b>323</b>	<b>327</b>	<b>330</b>	<b>267</b>
Physical Education	<b>5,416</b>	<b>5,560</b>	<b>5,833</b>	<b>5,833</b>	<b>5,898</b>
SCH Total	23,739	26,417	29,306	29,859	29,874
<b>Student FTE Total <sup>2</sup></b>	<b>791.30</b>	<b>880.57</b>	<b>976.87</b>	<b>995.30</b>	<b>995.80</b>
<b>Student Majors <sup>3</sup></b>	<b>438</b>	<b>497</b>	<b>571</b>	<b>676</b>	<b>691</b>
Athletic Training	191	217	252	154	157
Athletic Therapy	0	0	0	170	160
Health Promotion - 5013	60	77	88	109	131
Health Perf Mgmt - 5011, 5021, 5022	121	129	143	150	160
Physical Education	66	75	88	93	83
<b>Program Graduates <sup>4</sup></b>					
Athletic Training - 5020, 5026, 5027	<b>22</b>	<b>13</b>	<b>11</b>	<b>16</b>	11
Athletic Therapy - 5037	<b>8</b>	<b>13</b>	<b>11</b>	<b>15</b>	21
Health Promotion - 5013	<b>22</b>	<b>24</b>	<b>25</b>	<b>36</b>	43
Health Performance Mgmt - 5011, 5021, 5022	<b>21</b>	<b>29</b>	<b>17</b>	<b>25</b>	23
Physical Education - 5012, 5017	<b>18</b>	<b>10</b>	<b>13</b>	<b>17</b>	16
Bachelor Degree	(88) 91	(51) 89	(85) 77	(118) 109	(112) 114
Female	239	260	297	307	341
Male	222	238	291	366	350
<b>Faculty FTE Total <sup>6</sup></b>	40.68	39.28	40.18	42.29	NA
Adjunct FTE	25.07	23.06	25.09	26.12	NA
Contract FTE	15.61	16.22	15.09	16.17	NA
<b>Student/Faculty Ratio <sup>7</sup></b>	<b>19.45</b>	<b>22.42</b>	<b>24.31</b>	<b>23.54</b>	NA

*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 athletic therapy 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: Contract/Adjunct Faculty Profile

### Full-Time Faculty

Name	Gender	Ethnicity	Rank	Tenure Status	Highest Degree	Years of Teaching	Areas of Expertise
Michael Olpin	Male	Caucasian	Professor	Tenured	PhD	13 (WSU) 22 (total)	Healthy Lifestyles; Stress Management; Mind/Body Wellness; Wellness Coaching
Patricia Cost	Female	Caucasian	Assistant Professor	Tenure-Track	PhD	9 (WSU) 16 (total)	Healthy Lifestyles; Health Education Methods; Substance Abuse Prevention; Human Sexuality
Christopher Eisenbarth	Male	Caucasian	Assistant Professor	Tenure-Track	PhD	6 (WSU) 15 (total)	Healthy Lifestyles; Stress Management; Foundations and Theory of Health Promotion;
Laura Santurri	Female	Caucasian	Assistant Professor	Tenure-Track	PhD	<1 (WSU) 7 (total)	Research Methods; Needs Assessment & Developing, Implementing, and Evaluating Health Promotion Programs; Health Advocacy

### Adjunct Faculty

Name	Gender	Ethnicity	Rank	Tenure Status	Highest Degree	Years of Teaching	Areas of Expertise
James Bemel	Male	Caucasian	Adjunct	Non Tenure Track	PhD	6 (WSU & total)	Healthy Lifestyles
Sheri Bingham	Female	Caucasian	Adjunct	Non Tenure Track	M.Ed.	8 (WSU & total)	Healthy Lifestyles; School Health
Susan Hadley	Female	Caucasian	Adjunct	Non Tenure Track	M.Ed.	7 (WSU & total)	Stress Management
Heather Hunter	Female	Caucasian	Adjunct	Non Tenure Track	MS	11 (WSU) 12 (total)	Healthy Lifestyles; School Health

Shanyn Olpin	Female	Caucasian	Adjunct	Non Tenure Track	MS	13 (WSU)	Healthy Lifestyles; Adolescent Health; Consumer Health
						15 (total)	
Gayle Speechly	Female	Caucasian	Adjunct	Non Tenure Track	MS	5 (WSU & total)	Healthy Lifestyles; School Health; Adolescent Health; Stress Management
Jennifer Walker	Female	Caucasian	Adjunct	Non Tenure Track	MS	3 (WSU & total)	School Health

Summary Information (as needed): N/A



## Appendix C: Staff Profile

Name	Gender	Ethnicity	Job Title	Years of Employment	Area of Expertise
Heather Hunter	F	Caucasian	Internship Coordinator	<1	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.
Sherrie Jensen	F	Caucasian	Advisement Coordinator	9 in current position, 15 years at WSU	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.
Jackelyn Luther	F	Caucasian	Secretary/ Administrative Assistant	<1 year	Budget, purchasing, general office management, document preparation, WSU systems, customer service, scheduling, tracking and managing data etc.
Danielle Orozco	F	Caucasian	Secretary/ Administrative Assistant	2 years	Class schedules, document preparation, purchasing, general office management, WSU systems, customer service, scheduling, tracking and managing data etc.
Lisa Pedersen	F	Caucasian	Building Coordinator	2 years in current position, 10 years at WSU	Event coordination, scheduling, student employee supervision, purchasing, general office management, WSU systems, customer service, and other.
Timothy Ruden	M	Caucasian	Human Performance Lab Coordinator	17 years	Human performance lab functioning, research, technology, purchasing, customer services, and other.

Summary Information (as needed): N/A

## Appendix D: Financial Analysis Summary

<b>Health Promotion &amp; Human Performance Undergraduate Programs</b>					
<b>Cost</b>	<b>08-09</b>	<b>09-10</b>	<b>10-11</b>	<b>11-12</b>	<b>12-13</b>
Direct Instructional Expenditure	1,954,610	1,903,412	1,902,098	1,946,393	1,956,346
Cost Per Student FTE	2,470	2,162	1,947	1,956	1,965
<b>Funding</b>	<b>08-09</b>	<b>09-10</b>	<b>10-11</b>	<b>11-12</b>	<b>12-13</b>
Appropriated Fund	1,829,724	1,805,730	1,750,716	1,857,721	1,857,071
Other:					
Special Legislative Appropriation					
Grants of Contracts					
Special Fees/Differential Tuition	124,886	97,682	151,383	88,672	99,275
<b>Total</b>	<b>1,954,610</b>	<b>1,903,412</b>	<b>1,902,098</b>	<b>1,946,393</b>	<b>1,956,346</b>

Summary Information (as needed): HPHP houses many academic programs. HP 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 2008-2013. There was a decline from 2009 to 2011 and then an increase in 2012-2013. The cost per student FTE has declined from \$2,450 in 2008-2009 to \$1,965 in 2012-2013. This is likely due to the increase in class sizes for many academic programs in HPHP, although the class sizes for HP courses have not increased. The HPHP department has a number of course fees, and the addition of the Masters of Science in Athletic Training program in 2007 presented a tuition differential within the department (undergraduate versus graduate); these may be potential explanations for the rise and fall of specific fees.

## Appendix E: External Community Involvement Names and Organizations

Alpine Spine Sports & Rehab	Brandt Workman
Americorps	Jackie Lumpkin
Arthritis Foundation	Emily Hoffmann
Avalon Care Center	Amanda Koch
Bear River Health Department	Olivia Stello
Beneficial International	Linda Nelson
Blonde Runner Health LLC	Lora Erickson
Brightwork Cottage Senior Day Care Center	Jennifer Julian
Club Heights Elementary School	Kami Winger
Crystal Gateway Sport & Health(Alexandria, VA)	Peg Michael
Davis County Health Department	Ivy Melton-Sales
Deseret Mutual Benefit Administration	Wayne Ackerman
F.J. Management, Employee Wellness Program	Priscilla Angulo
Fish Mem. Hospital Cardiac Rehab(Orange City, FL)	Laura Anne Roemmelt
Gardner Dental	Rodney Gardner
The Gym Co.	Tammy McKean
Happy Chemo	Ginger Johnson
Healthy Innovations	Maria Richards
Hill AFB, Warrior Fitness	Josie Hepworth
Huntsman Cancer Institute	Lovi Maness
Intermountain Healthcare, Alta View Ortho	Laurie Pack
Kenco Wellness Program(Chattanooga, TN)	Karen Lawrence
Legacy House of Ogden	Richard Monk
Malmstrom AFB, Health & Wellness Center(MT)	Kirk Clark
March of Dimes	J. Bird
McKay-Dee Hospital Cardiac Rehab	Julie Brandt
McKay-Dee Hospital CHIC Center	Elon Jensen
McKay-Dee Hospital Public Relations	Kristy Jones
Midtown Clinic	Lisa Nichols
Mountain Region Hospice & Homecare	Katherine Morrison
Mountain View Medical Weight Loss Center	Donna Evans
North Park Elementary	Marsha Stanford
Ogden Veterans Home	P. Woodbury
Ogden-Weber Comm Action Partnership, Head Start	Lisa Konicek
Petersen, Inc.	Kim Stahl
Planned Parenthood Assoc of Utah	Annabel Sheinberg
Primary Children's Medical Center	Jamie Wanken

Ragnar Relay Series	Julia Bullard & Kent
Redwood Recreation Center	C. Barenbrugge
Rise, Inc.	Laura Reid
Salt Lake Community College Wellness Center	Tatiana Burton
Salt Lake Valley Health Department	T. Babeler
Select Health	Angela Bishop-Harmon
Sidney Regional Medical Center(Sidney, NE)	Evie Ranslem-Parsons
Sundance Physical Therapy	Amy Hawkins
Tanner Clinic	Valerie Swartz
Therapeutix Massage Center	K. Salerno
Timeless Medical Spa & Weight Loss Clinic	Debbie Williams
Transportation Clearinghouse, Inc.	Marisa Beasley
United Way of Northern Utah	Mitch McBride
United Way of Utah County	Sepheue Andrew
United Whole Health	Jenn Van Gorp
University Hospital	Elizabeth Smith
University of Utah Health Care, Cardiology	Hailey Nielson
University Pediatric Clinic	Terri Lotz
Utah AIDS Foundation	Tyler Fisher
Utah Air National Guard, 151 MDG Public Health	Merlin Tomshack
Utah Breastfeeding Coalition	K. Hardman
Utah Department of Health, Asthma Program	Rebecca Jorgenson
Utah Department of Health, Pregnancy Risk Line	Alfred Romeo
UT State Office of Ed, Child Nutrition Programs	Kalleen Russell
VA Medical Center Physical Therapy/Wellness	Curtis Ivins
Verizon Wireless, Employee Health Program	Amy Jessop
Vitality Wins	Maria Richards
Volunteers of America, Cntr for Women & Children	N. Crofts
Wasatch Care Center	Toby Culley
Weber High School	Jamie Stireman
Weber-Morgan Children's Justice Center	Rod Layton
Weber-Morgan Health Department	Nickee Palacios
Weight Watchers International	Kristin Holt
The Wellness Connection, Employee Health	Becky Smith
White Mountain Psychological Service(Pinetop, AZ)	Cynthia Carnett
YMCA (Alexandria, VA)	Soraja Lofstrom

## **Appendix F:** External Community Involvement Financial Contributions

There are no financial contributions from external community involvement to report

## Appendix G: MCOE Adjunct Semester Contract

November 21, 2012

Name  
Address  
City, UT, Zip

Dear XXXX,

I am pleased to offer you an appointment as Adjunct Instructor in the Department of Health Promotion and Human Performance (HPHP) for the Spring 2013 semester. This appointment is effective from January 7 to April 25, 2013, inclusive. You will be paid a total of \$XXXX dollars contingent upon sufficient class enrollments at the end of the third week of class [or if your online course has an enrollment greater than 25, you will be paid at the rate of \$105 per student (for a 3 credit hour class) enrolled at the end of the third week of class, or you will be paid at the rate of \$35 per credit hour per student enrolled at the end of the third week of class]. Following receipt of this signed agreement, you will be paid in equal installments in accordance with the University's payment schedule (a copy of which may be obtained from the payroll office). All payments are made using direct deposit; so be sure you have an up-to-date direct authorization form on file or make other arrangements with the payroll office.

1. Your acceptance of this appointment signifies your readiness to:
  - A. Teach the following course(s) at the times notes: Course Abbreviation, Course #, CRN: (XXX Campus, room #), Days of the week, time
  - B. Submit your class syllabus to the department secretary at least 2 weeks prior to the first day of class or within seven days from the execution of this agreement. The HPHP required syllabus is available online at: [www.weber.edu/HPHP/AdjunctFacultyResources.html](http://www.weber.edu/HPHP/AdjunctFacultyResources.html). Syllabus guidelines including required and suggested content is available online at: [www.weber.edu/tlf/Syllabus.html](http://www.weber.edu/tlf/Syllabus.html)
  - C. Maintain 2 office hours per week
  - D. Submit final grades by the deadline established by the Registrar for each term
  - E. Regularly check your official WSU email, your departmental mailbox, and if applicable your Canvas class correspondence
  - F. Advise the Department Chair at the earliest possibility if you are unable to teach a class
  - G. Attend meetings as requested by the Department Chair
  - H. Comply with all of the University's policies and procedures (available online at [weber.edu/ppm](http://weber.edu/ppm))
  - I. Have students complete end of course evaluations in every class you teach
  - J. Achieve the academic goals and objectives of your assigned course(s)
2. This contract shall not be legally binding until it has been approved by the Dean of the College.
3. Employment is subject to the contractual policies of the University as they may be amended from time to time, including those contained in the Weber State University Policy and Procedures Manual.
4. This is a non tenure-track appointment. Appointee has no entitlement to employment by the University except as expressly provided in this contract. Additional Adjunct

Instructor information is available online at: [www.weber.edu/adjunctfaculty/](http://www.weber.edu/adjunctfaculty/). A Moyes College of Education adjunct handbook is available as a resource to you online at:

[www.weber.edu/wsuiimages/COE/deans\\_office/Moyes COE Adjunct Handbook.pdf](http://www.weber.edu/wsuiimages/COE/deans_office/Moyes_COE_Adjunct_Handbook.pdf)

5. This contract is nonrenewable and shall terminate without further notice at the end of the term of employment set forth above.
6. This contract constitutes the entire understanding between the parties with respect to Appointee's employment at the University and supersedes any and all prior understandings or agreements, oral or written, relating hereto.
7. This contract may be modified or amended only upon mutual written agreement between the Department Chair and the Appointee and approval by the Dean of the College.
8. This contract shall be governed in all respects by the laws of the State of Utah.

If this contract is acceptable to you, please sign, date, and return it (in person, email, US mail, or campus mail) to the department secretary by December 7, 2012. I look forward to working with you in this capacity and appreciate the valuable contributions that you make to the academic programs within the department.

Sincerely,

\_\_\_\_\_  
Jennifer M. Turley, *Chair*  
*Department of Health Promotion & Human Performance*

Accepted signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(type in adjunct instructors name)

\_\_\_\_\_  
Jack Rasmussen, *Dean*  
*Jerry and Vickie Moyes College of Education*

## Appendix H: HPHP Syllabus Template

**WEBER STATE UNIVERSITY**  
*Moyes College of Education*  
Department of Health Promotion and Human Performance

**COURSE:** Prefix, #, type (lecture, lab, activity, community based learning, etc.),

semester, year, CRN, semester block  
Course name

**CREDIT HOURS:** 3

**CLASS SCHEDULE:** Days and times and/or Hybrid/Online at <http://canvas.weber.edu>

**PROFESSOR/**

**INSTRUCTOR:**

Name, credentials

Title

Email address

Telephone number with area code

Office location (building and room #)

*Office Hours: list at least 5 hours varying AM & PM and days of the week and include by appointment. Adjunct instructors hold 2 office hours/week.*

**COURSE DESCRIPTION:** Same as from the catalog (see online at <http://catalog.weber.edu/>)

**PREREQUISITES:**

**REQUIRED TEXTBOOK (OR REFERENCE COURSE MATERIALS):** Include the author, title, publisher, year, and ISBN.

**OPTIONAL TEXTBOOK (OR REFERENCE COURSE MATERIALS):** Include the author, title, publisher, year, and ISBN.

**COURSE DIRECTION:** Briefly describe the purpose the course serves and how it will benefit the academic/professional development or meet program standards/outcomes so students understand the purposefulness of the course.

**COURSE OBJECTIVES/LEARNING OUTCOMES:** These should be written in such a way as to be measurable and tied to the course requirements and the program's curriculum learning outcomes assessment grid when applicable.

**REQUIREMENTS:**

- **Quizzes:** Number of quizzes, relation to course materials, number of questions per quiz, points per quiz and/or question, delivery mode (in class, on chitester, on canvas, scheduled, pop, open/closed book, etc).
- **Exams:** Number of assignments, relation to course materials, study tips and reviews, points per exam, delivery/submission mode (in class, on chitester in testing centers or with approved proctors for out-of-area students or at home, timed or not timed, other testing rules and permitted testing tools if any, on canvas, scheduled, pop, open/closed book, etc).



- **Assignments/Projects/Papers/Presentations:** Number of assignments, relation to course materials, points per assignment, delivery/submission mode (format, required tools for success, in class, on chitester, on canvas, etc), paper and presentation format, time/page length, literature review and reference citation expectations, etc.
- **Labs:** Application of learning content using \_\_\_\_ skills, assessment, equipment, group work, independent work, data collection and analysis, etc.
- **Other:**

Course Work	Description	Due Date	Points
Quiz 1	...		10
Quiz 2	...		10
Quiz 3	...		10
Quiz 4	...		10
Quiz 5	...		10
Assignment 1	...		50
Assignment 2	...		50
Assignment 3	...		50
Assignment 4	...		50
Assignment 5	...		50
Exam 1	Over content from lecture ..., chapter ..., quiz or assignment ...		100
Exam 2	Over content from lecture ..., chapter ..., quiz or assignment ...		100
500 total points			
Extra Credit	...		10

***Note to faculty:** Keep in mind that for every 1 credit hour academic class there is 1 in class contact hour (~50 minutes). For every 1 credit hour lab or activity class there are ~2 hours of in class contact time. Further, for every 1 credit hour academic class students may spend up to 2 hours outside class related to class work (Studying, working on assignments, etc.).*

**EVALUATION:** Grades are based on a percentage of the total possible points earned in the class using the grade scale below.

A	A-	B+	B	B-	C+	C	C-	D+	D	D-	E
≥93%	90%	87%	83%	80%	77%	73%	70%	67%	63%	60%	<60%

*If canvas is used then inform students that grades can be accessed in the WSU Online canvas class under "Grades".*

#### **POLICIES:**

- **Attendance:** Is there an attendance policy or a policy related to coming to class on time and prepared to participate and not leaving early?
- **Graded Work:** How is required work graded? When rubric are used provide information on where they can be found (such as see the canvas assignment rubric). Is sample work available for students (and used with permission by prior students)? When can students expect their submitted work to be graded for quizzes, exams, assignments/projects, labs, etc.? How can students review their results and for how long. When is unclaimed work discarded?

- **Late Work:** What is the consequence of late work? Is it accepted for a period of time and docked late submission? Is late work not accepted without prior arrangements? Is there a make-up exam period for missed exams with a grade deduction?
- **Extra Credit:** Is extra credit available or not. If so to what extent (should not inflate grades and should be tied to the course learning outcomes) and are there predetermined extra credit opportunities, if so list them here.
- **Students with Disabilities:** "Any student requiring accommodations or services due to a disability must contact Services for Students with Disabilities (SSD) in room 181 of the Student Services Center. SSD can also arrange to provide course materials (including the syllabus) in alternative formats if necessary." For more information contact SSD at 801-626-6413, [ssd@weber.edu](mailto:ssd@weber.edu), or <http://departments.weber.edu/ssd/>.
- **Student Conduct:** Students enrolled in this class will adhere to the Department of Health Promotion and Human Performance (HPHP) "Student Conduct Policy" available online at <http://www.weber.edu/wsuiimages/HPHP/StudentCode/HPHPStudentCode.pdf>.
- **Academic Dishonesty:** Any individual caught cheating on any class work or plagiarizing will receive an automatic "E" for their final grade. Furthermore, a letter will go into the student's file describing the situation.
- **Turn-it-in (if applicable):** Inform students that Turn-it-in is used for papers and encourage students to use turn-it-in on their papers prior to submission to detect plagiarism.
- **Campus Closure:** In the event that the WSU campus is closed for face to face classes, the class will continue to meet at WSU Online <http://canvas.weber.edu>
- **Other:** Are there policies related to turning cell phones off, not eating food, etc. during class?

## TENTATIVE CLASS SCHEDULE

A daily schedule is preferred, a weekly schedule would minimally be required

Tentative implies there may be slight but not significant variation from this schedule

Week	Dates	Topic
1		Include things like lecture, lab, textbook chapter and pages, course material, assignment, quiz, and exams dates, etc. information here by date and/or week Include holiday's, dates the class may meet in other locations such as the library, last day to withdrawal, last day of classes, last day of finals, etc.
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		

<b>13</b>		
<b>14</b>		

**Note to faculty:** Give careful thought to your syllabus as this is a course contract that should not be changed after it is delivered to the class unless the change is favorable to the students and the students approve of/are OK with the change. Further, this syllabus document becomes part of your tenure and rank evaluation and is considered in your teaching rating by your peers. Per the College of Education tenure document faculty members must minimally be rated as good in teaching to be successful.