

MPH Program Learning Outcomes Report Summary 2019

The following table summarizes the assessment of Program Learning Outcomes (PLOs) for MPH program for assessment cycle 2018-19. This process is conducted regularly as part of the annual learning results assessments, which measure two or three PLOs for each program each year. This summary report is to be submitted to the EEC upon its completion.

Program	Master of Public Health (MPH)
Assessment Period	Summer 2019 to Spring 2020
Program Learning Outcomes	PLO 1: Demonstrate the ability to integrate biblical concepts and principles within the public health industry and society.
(PLOs)	PLO 2: Demonstrate effective oral and written communication skills
Closing the loop (from the last time these same PLOs were assessed)	N/A
Standards of Success	PLO 1: Artifact Proficiency Standard: To have met two out of the three categories. Aggregate Achievement Standard: to have a benchmark of 80 percent PLO 2: Artifact Proficiency Standard: To have met two out of the three categories. Aggregate Achievement Standard: to have a benchmark of
Evidence	PLO 1: MPH 560 - Week 7 Foundations of Public Health Policy - Part 3 Sample Size: 23 artifacts PLO 2: MPH 580 - Week 8 - Media Campaign and Public Health Messaging Sample Size: 15 artifacts
Assessment Tool	PLO 1: Direct-assessment rubric for evaluating artifact; inter-rater reliability exercise conducted.
	PLO 2: Direct-assessment rubric for evaluating artifact; inter-rater reliability exercise conducted.



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Assessors	Dr. Damien Byas
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	Dr. Robert Carter III (Tie-breaker)
Results	PLO 1:
Nesults	23 artifacts
	23 pass / 0 fail = 100% pass rate, PLO was met.
	PLO 2:
	15 artifacts
	13 pass / 2 fail = 87% pass rate, PLO was met.
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Discussion of	PLO 1:
Results	 According to the results measured against the performance levels
	of an 80% minimum pass rate for this criterion, the evidence
	demonstrates that PLO1 for MPH560 was exceeded. The MPH
	PLO regarding demonstrate the ability to integrate biblical
	concepts and principles within the public health industry and
	society met the 80% minimum passing rate.
	Out of the 23 Artifacts randomly assigned, 23 passed (for a 100%)
	pass rate). The two primary raters agreed on all 23 of the items,
	and a tie break was not used for any of the items.
	and a tie break was not used for any or the items.
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	PLO 2:
	 According to the results measured against the performance levels
	of an 80% minimum pass rate for this criterion, the evidence
	demonstrates that the PLO #2 for MPH 580 was met. The MPH
	PLO regardingDemonstrate effective oral and [written]
	communication skills in the field of public health met the 80%
	minimum passing rate.
	 Out of the 15 Artifacts randomly assigned, 13 passed and 2 failed
	(for a 87% pass rate). The two primary rates agreed on 11 of the
	items, and a tie break was used for 4 of the items.
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Proposed	PLO 1:
Changes	The results indicated that the MPH 560 artifact demonstrated
	learner proficiency for biblical integration. However, PLO1,
	(Demonstrate the Ability to Integrate Biblical Concepts and
	Principles within the Public Health Industry and Society) could still
	be improved regarding how students were able to integrate
	biblical concepts and principles. For example, some students
	referenced personal or moral obligations without actually
	referencing the biblical principles or concepts specifically.
	While the personal experiences were nested in moral obligations
	or Christian worldview, some reports demonstrated weaknesses
	in this criterion. Additionally, some papers showed weaknesses
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	in delivering the material in a clear and concise manner.



Rationale for Proposed Changes	PLO 2: The results indicated that the MPH 580 artifact demonstrated proficiency on the media campaign and public health messaging final assignment. However, the assessment team identified that the students may not have full knowledge of health and medical concepts. Additionally, the assignment instructions could be revised to ensure students explain important points and consider the visually impaired by providing font sizes large enough to meet APA style standards. This recommendation reflects good practices for health literacy. Finally, the team identified a discrepancy in the artifacts received and could not fully assess the oral communication aspects of the PLO 2. Specifically, the team only received the written text and did not receive the oral presentation recording (i.e., voice thread). PLO 1: No major proposed changes at this time. However, the MPH team should consider reviewing the final assignment to ensure that students understand the biblical concept integration is required. PLO 2: No major proposed changes at this time. However, the MPH team should consider reviewing the final assignment to ensure students understand the importance of creativity, organization, and consideration of all literacy levels and visually impaired populations. Also ensure the assessment
Financial Resources Required	PLO 1: Increasing sample sizes or testing additional artifacts will require additional funds for interrater reliability training and artifact assessment as determined by the Assistant Dean, Educational Effectiveness Committee, and Academic Dean when the next cycle of assessment for this PLO is determined. PLO 2: Increasing sample sizes or testing additional artifacts will require additional funds for inter-rater reliability training and artifact assessment as determined by the Assistant Dean, Educational Effectiveness Committee, and the Academic Dean when the next cycle of assessment for this PLO is determined.
Annual Learning Report recommended for approval	Approved by the Educational Effectiveness Committee on February 12, 2020.



Follow Up (Closing the Loop)	N/A This is the first time the MPH program has been assessed, no closing of the loop is possible from previous years.
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