

## MPH Program Learning Outcomes Report Summary 2020

The following table summarizes the assessment of Program Learning Outcomes (PLOs) for MPH program for assessment cycle 2019-20. 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.

<b>Program</b>	Master of Public Health (MPH)
<b>Assessment Period</b>	SU I 2019 to SP II 2020
<b>Program Learning Outcomes (PLOs)</b>	<p>PLO 3: Evaluate key personal and organizational ethics affecting public health activities</p> <p>PLO 4: Utilize information technology in strategic analysis and data interpretation</p>
<b>Closing the loop (from the last time these same PLOs were assessed)</b>	N/A First time PLOs 3 and 4 were assessed
<b>Standards of Success</b>	<p>PLO 3: Artifact Proficiency Standard: To have met two out of the three categories. Aggregate Achievement Standard: to have a benchmark of 80 percent</p> <p>PLO 4: Artifact Proficiency Standard: To have met two out of the three categories. Aggregate Achievement Standard: to have a benchmark of 80 percent.</p>
<b>Evidence</b>	<p>PLO 3: MPH 630 - Public Health Program Evaluation Plan - Part 4 - Final Report Sample Size: 17 artifacts</p> <p>PLO 4: MPH 540 - Evidence-based Recommendations - Part 3 - Advocacy of a Recommendation Sample Size: 15 artifacts</p>



<p><b>Assessment Tool</b></p>	<p>PLO 3: Direct-assessment rubric for evaluating artifact; inter-rater reliability exercise conducted.</p> <p>PLO 4: Direct-assessment rubric for evaluating artifact; inter-rater reliability exercise conducted.</p>
<p><b>Assessors</b></p>	<p>Dr. Damien Byas Dr. Lois Chipman-Sullivan Dr. Robert Carter III (Tie-breaker)</p>
<p><b>Results</b></p>	<p>PLO 3: 17 artifacts 16 pass / 1 fail = 94% pass rate, PLO was met.</p> <p>PLO 4: 15 artifacts 13 pass / 2 fail = 87% pass rate, PLO was met.</p>
<p><b>Discussion of Results</b></p>	<p>PLO 3: According to the results measured against the performance levels of an 80% minimum pass rate for this criterion, the evidence demonstrates that PLO3 for MPH 630 was exceeded. The MPH PLO demonstrated the ability to integrate ethical principles and reasoning within the public health industry and society met the 80% minimum passing rate.</p> <p>Out of the 17Artifacts randomly assigned, 16 passed (for a 94% pass rate). The two primary raters agreed on all 17 of the items.</p> <p>PLO 4: According to the results measured against the performance levels of an 80% minimum pass rate for this criterion, the evidence demonstrates that the PLO #4 for MPH 540 was met. The MPH PLO regarding effective statistical analysis and data interpretation in the field of public health met the 80% minimum passing rate.</p> <p>Out of the 15 Artifacts randomly assigned, 13 passed and 2 failed (for a 87% pass rate). The two primary rates agreed on 14 of the items, and a tie break was used for 1 of the items.</p>
<p><b>Proposed Changes</b></p>	<p>PLO 3: The results indicated that the MPH 630 artifact demonstrated learner proficiency for ethical reasoning.</p> <p>However, PLO 3 could be improved upon on how students were able to better integrate ethical reasoning principles.</p>



	<p>For example, some students referenced personal or moral obligations without actually referencing the ethical reasoning from a Christian worldview</p> <p>The focus of the PLO are ethical principles related to ethical reasoning are rules or standards for right conduct or practice, especially the standards of a profession.</p> <p>Assessment rubric language will be clarified to reflect that focus.</p> <p>PLO 4: The results indicated that the MPH 540 artifact demonstrated proficiency on the statistical analysis and data interpretation in the advocacy final assignment. However, the assessment team identified that the students may not have full knowledge of data interpretation and transition into public health recommendations and advocacy.</p> <p>All three members of the committee discussed the evidence of this weakness in statistical interpretation and transition into public health messaging and advocacy.</p> <p>The next step would be to revise the PLO to be more reflective of data analysis and interpretation.</p> <p>Suggested PLO revision: “Critically evaluate interventions and outcomes based on data analysis and interpretation common to public health practice.”</p> <p>Along with a revision of the PLO, the assignment instructions would be revised to specifically address the importance of statistical analysis and interpretation for success, and to ensure that students understand the importance of creativity, organization, and consideration of all literacy levels and visually impaired populations.</p>
<b>Rationale for Proposed Changes</b>	<p>PLO 3: Assessment rubric language will be clarified to reflect the focus of ethical principles as they are related to the standards of the public health profession</p> <p>PLO 4: Create better alignment between the program goals, PLO, and assignment instructions and requirements</p>



<p><b>Financial Resources Required</b></p>	<p>PLO 3: 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.</p> <p>PLO 4: We are planning to have MPH 540 revised to better align with the new proposed PLO.</p> <p>We will also need to plan to have this on the allotted budget for the revision process for 2021-2022.</p>
<p><b>Annual Learning Report recommended for approval</b></p>	<p>Approved by the Educational Effectiveness Committee on September 9, 2020.</p>
<p><b>Follow Up (Closing the Loop)</b></p>	<p>Please note the following is not a result of the findings of the original 2019 report, but rather a conversation about the 2019 report in preparation of the 2020 report between Christine Oh, Robert Carter, and John Washatka:</p> <p>PLO 1 is to be revised to “Demonstrate the ability to integrate a Christian worldview within the public health industry and society” from “Demonstrate the ability to integrate biblical concepts and principles within the public health industry and society.”</p> <p>The rationale is to revise the language to be more consistent with a broader university use of “Christian Worldview.”</p> <p>Along with a revision of the PLO, the assignment instructions would be revised to specifically address the “integration of a Christian worldview” after the PLO has been revised.</p> <p>Biblical integration is defined as a Christian worldview shaping. The Christian worldview is best expressed in the biblical story of Creation, Fall, and Redemption. Taking these three events as the lenses through which to look at public health education, we see that faith and learning are bound together and that the Christian faith must govern the public health educational experience.</p> <p><a href="#">View of Training a Christian Public Health Workforce: A Qualitative Study of Christian Public Health Training Programs</a></p>