The community health graduate program assessment plan is a strategic plan designed to assist community health program faculty to measure both student and overall program effectiveness. The key assessment that follows attempts to provide evidence to inform community health faculty with regard to a) student progress and b) a reflective assessment for the continuation of the development and enhancement of the community health graduate program.

Submitted by: Dawn S. Tarabochia, PhD

Montana State University
Department of Health & Human Development
Community Health Graduate Program

The graduate program in Community Health Education is concerned with improving health and well-being for all through the promotion of healthful lifestyles, healthy family functioning, community actions for health, and conditions that make it possible to live healthful lives. The program draws on public health, health education, psychology, sociology, family science, and other social and behavioral sciences. This program is focused on community involvement because community health emphasizes an interactive process in which target populations are active participants in their health, rather than passive recipients. The Community Health graduate program offers a skills-based graduate degree that integrates theory and critical thinking to assess and act on the needs of individuals, families, and communities. Students learn to plan, implement, and evaluate programming designed to promote health, human development, and well-being with families and communities.

Community Health Graduate Program

Learning Outcomes

Graduate Program Learning Outcomes

The community health education program established the following program learning outcomes. These learning outcomes were created in alignment with standards from the National Commission for Health Education Credentialing, Inc., specifically the Health Education Specialist Practice Analysis (HESPA) Area of Responsibilities and Competencies (NCEC, 2015).

In addition to the seven areas of responsibility, specific advanced level sub-competencies for each of the seven areas of responsibilities have been selected. Graduate students in the community health program will show competency in each of the seven areas of responsibility as well as the selected advanced sub-competencies. Modification of current course content is underway to comply with the new competencies and sub-competencies outline in the HESPA 2015 document. The seven areas of responsibility and selected sub-competencies to be included into the graduate program curriculum are listed below:

1. Have the knowledge and skills to assess needs, resources, and capacity for health education. Specifically,
   a. Apply theories and/or models to the assessment process
   b. Build student ability to synthesis assessment findings
2. Have the knowledge and skills to plan health programs. Specifically,
   a. Learn how to select appropriate planning models for community health/health education
   b. Assess the efficacy of various strategies to ensure consistent program goals and objectives.
   c. Apply principles of evidence-based practice in selecting and/or designing strategies/interventions.
d. Develop a process for integrating health education into other programs as applicable.

3. Have the knowledge associated with health program implementation. Specifically,
   a. Understand the necessity of training individuals involved in the implementation process.
   b. Learn and utilize training best practices
   c. Know how to apply the theories and/or models of implementation

4. Develop an evaluation plan for health education programs. Specifically,
   a. Develop goals and objectives for the evaluation of a community health/health education program.
   b. Understand and the implement a specific logic model to guide the evaluation process.
   c. Determine the types of data needed to effectively evaluation a community health/health education program.

5. Develop a research plan for community health/health education. Specifically,
   a. Create a statement of purpose for the research
   b. Construct a research plan and assess the feasibility of the research plan
   c. Develop research questions and identify the types of data needed and assess the merits and limitations of the data.
   d. Develop a sampling plan and data collection method plan.
   e. Know and practice ethical principles of the research process.

6. Have the knowledge and skills to administer and manage health programs. Specifically,
   a. Obtain knowledge about financial plans, budgeting, and internal/external funding sources.
   b. Demonstrate the ability to prepare a budget request and develop a budget
   c. Identify differing leadership styles
   d. Explain how to manage human resources for community health/health education programs.

7. Have the knowledge and skills to act as health resource person. Specifically,
   a. Develop a training plan to train others to use health education skills.
   b. Explain the concept of consultation as it relates to community health/health education.

8. Develop the knowledge to communicate, promote, and advocate for health and health education.

9. To develop cultural awareness and sensitivity

10. To develop and apply communication and professional skills.
Alignment of Program Learning Outcomes by Community Health Course

Table 1 shows the alignment of community health required graduate courses to the program learning outcomes designed by standards outlined in the HESPA 2015 Competencies and Sub-Competencies document.

Table 1. Graduate Course Alignment to Community Health Graduate Program Learning Outcomes

<table>
<thead>
<tr>
<th>Community Health Graduate Courses</th>
<th>CHTH 443</th>
<th>CHTH 445</th>
<th>CHTH 501</th>
<th>CHTH 502</th>
<th>CHTH 503</th>
<th>HHD 512</th>
<th>HHD 515</th>
<th>HHD 5XX</th>
<th>CHTH 575</th>
<th>CHTH 590</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have the knowledge and skills to apply theories and/or models to the assessment process</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Have the knowledge and skills to plan health programs.</td>
<td>X</td>
<td>X</td>
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</tr>
<tr>
<td>Have the knowledge associated with health program implementation.</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td></td>
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</tr>
<tr>
<td>Develop an evaluation plan for health education programs.</td>
<td>X</td>
<td></td>
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<tr>
<td>Develop a research plan for community health/health education.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Have the knowledge and skills to administer and manage health programs.</td>
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<td>X</td>
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</tr>
<tr>
<td>Develop the knowledge to communicate, promote, and advocate for health and health education.</td>
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<td>X</td>
</tr>
</tbody>
</table>

Community Health Graduate Program Assessment Overview

Formative and summative evaluation of the graduate Community Health Education program is an iterative process that relies on consistent input from faculty, students, and community health professionals.
Data points in the community health education program assessment plan include:

- Alignment of program learning outcomes as established by the HESPA (2015) areas of responsibilities and competencies by courses required in the community health education program.
- Development of benchmarks to evaluate student knowledge and skill level associated with program learning outcomes at the appropriate skill levels.
- Benchmark data collected throughout the student's academic program in community health education to assess student knowledge and skills as aligned with the program learning outcomes set forth by the HESPA areas of responsibilities and competencies.

The assessment plan for Montana State University-Bozeman Graduate Community Health Education program proceeds through a series of benchmarks, which are assessed through test scores, designated assignments, and final grades designed to meet specific program learning outcomes as defined by the HESPA Areas of Responsibilities and Competencies. The final overall assessment of student learning culminates with the final benchmark-completion of a graduate level paper/project or thesis.

The assessment process comprehensively addresses both knowledge and skill outcomes. The following benchmarks have been identified as most important to the assessment of the community health graduate program as a means to evaluate the attainment of knowledge and skills associated with the program learning outcomes. Key assignments were identified for the evaluation of student knowledge and skill attainment and are used as benchmarks to assist faculty in identifying whether graduate students in the program are meeting/exceeding program learning expectations.

**Benchmarks for the Community Health Graduate Program Assessment**

Benchmarks for the assessment of the community health education program and student knowledge and skill acquisition were developed. These benchmarks are listed below.

- **Benchmark 1- Have the knowledge and skills to apply theories and/or models to the assessment process.**

Benchmark one is evaluated through the assessment of two different courses, CHTH 502 and CHTH 503. The focus in each course is the application of health theories. The CHTH 502 course provides information about commonly used health theories and models. The focus of the course is student ability to assess, teach and apply specific theories and models associated with the community health profession. The CHTH 503 course has a similar focus; however, is specific to a research method known as Community Based Participatory Research (CBPR). Theories associated with the CBPR practice are taught and students are required to assess, teach, and apply specific CBPR theories. The final grades from both courses will be used to assess student competency. The following scale will be used to report benchmark data: A/A-=1, B+/B-= 2, C+/C-= 3, C- =4, and D+ or lower = 5; Students pass Benchmark 1 with a score of 1 or 2.
Benchmark 2- Have the knowledge and skills to plan health programs.

Benchmark two is currently being assessed by student performance in the CHTH 445 Program Planning course. This course uses an instructional manual from the Cecil C. Sheps Center for Health Services Research for outlining the program planning process. Students work in groups and partner with a community mentor to develop a community health program. The final product of this course includes final report and a presentation to the community mentor. Graduate community health students must pass this class with a minimum of a C grade (74%) or higher. The development of a 500 level program planning and program implementation course is currently being completed to fulfill new sub-competencies for program planning as outlined in the HESPA 2015 document. The following scale will be used to report benchmark data: A/A−=1, B+/B− = 2, C+/C= 3, C− =4, and D+ or lower = 5; Students pass Benchmark 2 with a score of 1 or 2. Anything lower and the student must retake the course.

Benchmark 3- Have the knowledge associated with health program implementation.

Currently, the implementation of community health programs is not addressed in the graduate community health program. The sub-competencies for program implementation were developed in 2015 in the HESPA competencies and sub-competencies document. Upon release of this document curriculum changes were put into place to address the new sub-competencies. Thus, the development of a 500 level program planning and program implementation course is currently being developed to fulfill new sub-competencies for program implementation as outlined in the HESPA 2015 document. The following scale will be used to report benchmark data: A/A−=1, B+/B− = 2, C+/C= 3, C− =4, and D+ or lower = 5; Students pass Benchmark 2 with a score of 1 or 2. Anything lower and the student must retake the course.

Benchmark 4- Develop an evaluation plan for health education programs.

Benchmark four will be assessed in the CHTH 443 Program Evaluation course. Students will learn how to plan and conduct evaluation research and understand and utilize logic models to aid in evaluative process. Assessment will use final grades to as the assessment measure. The following scale will be used to report benchmark data: A/A−=1, B+/B− = 2, C+/C= 3, C− =4, and D+ or lower = 5; Students pass Benchmark 4 with a score of 1 or 2. Anything lower and the student must retake the course.

Benchmark 5- Develop a research plan for community health/health education.

Benchmark 5 will be evaluated through the assessment of final grades in the HHD 512 Research Methods course. This course prepares students to plan a research project specific to the student’s area of interest. This includes developing a purpose of research, writing research questions, creating sampling and data collection plans and the assessment of appropriate methods for data analysis. The instructor for this course will be responsible for assessing student skill development and remediation of skills throughout the course. This skill assessment will cumulate in the student’s final grade. The following scale will be used to report benchmark data: A/A−=1, B+/B− = 2, C+/C= 3, C− =4, and D+ or lower = 5; Students pass Benchmark 5 with a score of 1 or 2.
Benchmark 6- Have the knowledge and skills to administer and manage health programs.

Benchmark 6 will be assessed by final grades earned in the HHD 5XX Program Administration course, which is slated for development in 2017 and to be taught fall 2018. This course is an addition to the graduate curriculum to specifically address the additional sub-competencies outlined in the HESPA 2015 report. The following scale will be used to report benchmark data: A/A-=1, B+/B-= 2, C+/C= 3, C-=4, and D+ or lower = 5. Students pass Benchmark 6 with a score of 1 or 2. Anything lower and the student must retake the course.

Benchmark 7- Have the knowledge and skills to administer and manage health programs.

Grades earned in the HHD 501 Professional Communication Skills in HHD course will determine benchmark 7. This course focuses on the development of professional writing skills, how to find and cite peer-reviewed research, and how to format a paper using APA formatting. Final grades from this course will be used to determine student competency. The following scale will be used to report benchmark data: A/A-=1, B+/B-= 2, C+/C= 3, C-=4, and D+ or lower = 5; students pass Benchmark 6 with a score of 1 or 2. Anything lower and the student must retake the course.

Benchmark 8- Completion of a graduate level paper/project or thesis.

Students receiving a passing grade upon the completion of a graduate level paper, project or thesis will achieve benchmark 8. The following scale will be used to report benchmark data: A/A-=1, B+/B-= 2, C+/C= 3, C-=4, and D+ or lower = 5; students pass Benchmark 8 with a score of 1 or 2. Anything lower and the student will not graduate from the program until satisfactory completion of the paper is achieved.
The following data was collected as per the community health graduate assessment plan for AY 2016-2017. The data includes: the total number of community health graduate students who graduated, alignment of program learning outcomes by course, and benchmark data selected by community health education faculty to assess student knowledge and skill attainment at various levels throughout the student's academic program.

Overview of Community Health Graduates

In the 2016-2017 Academic Year, the community health graduate program graduated 6 graduate students, 1 in fall 2016 and 5 in spring 2017. The majority of these students completed professional papers in partial fulfillment for the requirements of graduation.

Benchmark Data for AY 2016-2017

Benchmark 1 - Have the knowledge and skills to apply theories and/or models to the assessment process.

Benchmark one is evaluated through the assessment of two different courses, CHTH 502 and CHTH 503. Student averaged grades will be converted into the scale listed below and reported as an overall average. Data for AY 2016-2017 was:

- Overall average CHTH 502: 1.00
- Overall average CHTH 503: 1.00

A/A-=1, B+/B-= 2, C+/C= 3, C- =4, and D+ or lower = 5; Students pass Benchmark 1 with a score of 1 or 2. Anything lower and the student must retake the course.

Benchmark 2 - Have the knowledge and skills to plan health programs.

Benchmark two is currently being assessed by student performance in the CHTH 445 Program Planning course. Student grades will be converted into the scale listed below and reported as an overall average. Data for AY 2015-2016 was:

- Overall Average: 1.00

A=1, A-/B+ = 2, B= 3, B- =4, and C+ or lower = 5; Students pass Benchmark 2 with a score of 1 or 2. Anything lower and the student must retake the course.
Benchmark 3- Have the knowledge associated with health program implementation.

Currently, the implementation of community health programs is not addressed in the graduate community health program. The sub-competencies for program implementation were developed in 2015 in the HESPA competencies and sub-competencies document. Upon release of this document curriculum changes were put into place to address the new sub-competencies. Thus, the development of a 500 level program planning and program implementation course is currently being developed to fulfill new sub-competencies for program implementation. Student grades will be converted into the scale listed below and reported as an overall average.

- **Overall Average: To be reported in AY 2017-2018**

  A=1, A-/B+ = 2, B= 3, B- =4, and C+ or lower = 5; Students pass Benchmark 3 with a score of 1 or 2. Anything lower and the student must retake the course.

Benchmark 4 - Develop an evaluation plan for health education programs.

Benchmark four will be assessed in the CTHH 443 Program Evaluation course and assessed by the final grade earned. Student grades will be converted into the scale listed below and reported as an overall average. Data for AY 2016-2017 was:

- **Overall Average: 1.00**

  A=1, A-/B+ = 2, B= 3, B- =4, and C+ or lower = 5; Students pass Benchmark 4 with a score of 1 or 2. Anything lower and the student must retake the course.

  ➢ **Benchmark 5- Develop a research plan for community health/health education.**

  Benchmark 5 will be evaluated through the assessment of final grades in the HHD 512 Research Methods course. Student grades will be converted into the scale listed below and reported as an overall average. Data for AY 2016-2017 was:

  - **Overall Average: 1.00**

    A=1, A-/B+ = 2, B= 3, B- =4, and C+ or lower = 5; Students pass Benchmark 5 with a score of 1 or 2. Anything lower and the student must retake the course.

  ➢ **Benchmark 6- Have the knowledge and skills to administer and manage health programs.**

  Benchmark 6 will be assessed by final grades earned in the HHD 5XX Program Administration course, which is slated for development in 2017 and to be taught fall 2018. This course is an addition to the graduate curriculum to specifically address the additional sub-competencies outlined in the HESPA 2015 report. Student grades will be converted into the scale listed below and reported as an overall average.
- **Overall Average: To be reported in AY 2017-2018**

A=1, A-/B+ = 2, B= 3, B- =4, and C+ or lower = 5; Students pass Benchmark 6 with a score of 1 or 2. Anything lower and the student must retake the course.

**Benchmark 7 - Have the knowledge and skills to administer and manage health programs.**

Grades earned in the HHD 501 Professional Communication Skills in HHD course will determine benchmark 7. Student grades will be converted into the scale listed below and reported as an overall average. Data for AY 2016-2017 was:

- **Overall Average: 1.00**

A=1, A-/B+ = 2, B= 3, B- =4, and C+ or lower = 5; Students pass Benchmark 7 with a score of 1, 2 or 3 from the community preceptor and a score of 1 from the community health preceptor. Anything lower and the student must retake the course.

**Benchmark 8 - Completion of a graduate level paper/project or thesis.**

The successful completion and student comprehensive exams and a graduate level paper, project or thesis will determine benchmark 8. Students must pass the comprehensive exam prior to completion of the final paper, project or thesis. Student grades from CHTH 575 professional paper or project or CHTH 590 Thesis will be converted into the scale listed below and reported as an overall average. Data for AY 2016-2017 was:

- **Overall Average: 1.00**

A=1, A-/B+ = 2, B= 3, B- =4, and C+ or lower = 5; Students pass Benchmark 8 with a score of 1, 2 or 3 from the community preceptor and a score of 1 from the community health preceptor. Anything lower and the student must retake the course.

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**Vital Statistics for AY 2016-2017**

During AY 2016-2017, the community health education program graduated 6 graduate students. Student GPA ranged from 3.75-4.00. Currently the program is unable to reliability to track student’s professional career attainment. However, the program has made attempts to track students.
What Was Learned from the AY 2016-2017 Assessment

The completion of this assessment identified significant changes to the curriculum through the addition of new course and the refinement of existing courses. These changes are necessary to ensure that graduate students in the community health graduate program receive the appropriate information and skill development to meet the professional practices and competencies outlined by the National Commission for Health Education Credentialing, Inc.

Program Responses Made from Data Collected for the AY 2016-2017 Assessment

Based on the information collected from this assessment several responses were initiated. The first was to adjust the timeline for the development of two required courses for the community health graduate program, Program Planning and Implementation and Program Assessment. Based on the new sub-competencies outlined in the HESPA 2015 Competencies and Sub-Competencies document, these courses are vital to the training of master level professions in the field of community health and health education. Second, a review of curriculum for established graduate course and how they align with new sub-competencies will take place during AY 2017-2018 to ensure that these new sub-competencies are being covered in the corresponding community health courses. Lastly, the graduate program will determine avenues for connecting graduate students to community professionals to further professional development and leadership skills for our students.
References