

Assurance of Student Learning 2020-2021	
CHHS	Public Health
Master of Public Health - 152	
Marilyn Gardner	

Use this page to list learning outcomes, measurements, and summarize results for your program. Detailed information must be completed in the subsequent pages.

Student Learning Outcome 1: Synthesize foundational MPH competencies

Instrument 1	Direct: Integrative learning experience (ILE)/capstone paper
Instrument 2	Direct: Evaluation Report (PH 591)
Instrument 3	Indirect: Student self-assessment of competency development (MPH Exit Survey)

Based on your results, circle or highlight whether the program met the goal Student Learning Outcome 1.	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Not Met
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Student Learning Outcome 2: Apply MPH competencies in collaboration with public health/related professionals.

Instrument 1	Direct: Summary Report: Applied practice experience projects
Instrument 2	Indirect: Self-report of service beyond curricular/program requirements (MPH Exit Survey)
Instrument 3	Indirect: Student reflection of applied practice experiences

Based on your results, circle or highlight whether the program met the goal Student Learning Outcome 2.	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Not Met
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Student Learning Outcome 3: Develop plan, program, or policy to address a public health problem.

Instrument 1	Direct: Program plan (PH 575)
Instrument 2	Direct: Program proposal (PH 578)
Instrument 3	Indirect: Student self-assessment of program preparation to design a population-based policy, program, project or intervention (MPH Exit Survey).

Based on your results, circle or highlight whether the program met the goal Student Learning Outcome 3.	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Not Met
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Program Summary (Briefly summarize the action and follow up items from your detailed responses on subsequent pages.)

Overall, each learning outcome is reasonably met by the measurement instruments en toto. While some of the individual measures did not meet thresholds – mainly those attributable to discrete assignments/products – we believe this is largely attributable to the extraordinary challenge faced by many of our students due to COVID-19. Many of our students work in public health/health-related settings, and were called upon to work extreme overload. Additionally, many juggled non-traditional instruction of their children and care-giving for infected family members. Several students lost family members. Several became infected. The MPH faculty worked compassionately with students, but could not

compromise on the rigor required of our accrediting body. Thus, we are not alarmed by the dip in some of the individual scores; indeed, we expected far worse under the circumstances.

That said, we are committed to the continuous improvement of the MPH program. AY 2021-22 will be a year of transition. Two new T/T professors will join the MPH faculty to replace the two current MPH faculty who left the program at the end of AY 20-21. Changes in accreditation criteria will require curricular and programmatic changes. As part of this transition, we will continue explore ways of strengthening our measures to ensure we are gathering meaningful data.

Student Learning Outcome 1

Student Learning Outcome	Synthesize foundational MPH competencies.		
Measurement Instrument 1	<u>ILE paper</u> : Students produce a professionally written paper that synthesizes MPH program competencies, and minimally includes a four parts: 1) thorough overview of the public health problem; 2) literature review, 3) critical analysis/results, and 4) public health recommendations. Rubric is attached.		
Criteria for Student Success	Students will earn a mean score of 2.0 or higher (of 3) on their ILE overall, and on each of the four parts mentioned above.		
Program Success Target for this Measurement	80% of students graduating in AY 19-20 will meet the criteria for student success.	Percent of Program Achieving Target	Overall: 85% Part 1: 77% Part 2: 85% Part 3: 62% Part 4: 62%
Methods	The census of MPH graduating in AY 20-21 was assessed (N=13). Two independent reviewers assessed each ILE, rating each part as high pass (3), pass (2), low pass (1), or did not pass (0). A mean score was computed by averaging the scores of the four parts. Each rater's scores (parts and overall) were averaged, creating a single score for each student. For ASL reporting, these mean scores were categorized by scores ≥ 2 and <2 .		
Measurement Instrument 2	<u>Evaluation Report</u> : PH 591 is an applied synthesis course taken close to graduation. Students prepare an evaluation report that synthesizes several program competencies. The report is the culmination of a semester-long case study. Instructions with scoring are attached.		
Criteria for Student Success	Students will earn an overall score of at least 80% on the evaluation report.		
Program Success Target for this Measurement	80% of students enrolled in PH 591 will meet the criteria for success.	Percent of Program Achieving Target	83.3%
Methods	The census of students enrolled in PH 591 during AY 19-20 were assessed (N=12). The PH 591 instructor scores each evaluation report based on the demonstrated proficiency in each of the area. The scores are summed, then transformed into a percentage. Collectively, the scores of students are categorized into scores $\geq 80\%$ and $<80\%$.		
Measurement Instrument 3	<u>MPH Exit Survey</u> : Graduating students are required to complete an exit survey, which is administered through Qualtrics. In one section, students self-assess competency development overall using a five-star system. This singular item is a global measure of student perceptions on how well the program, en toto, developed the required foundational and program competencies.		
Criteria for Student Success	Students rate competency development with 4 or more stars (out of five, with five being the highest).		
Program Success Target for this Measurement	80% of respondents will meet criteria for student success	Percent of Program Achieving Target	100% Mean = 4.53
Methods	Census of graduating students in AY 20-21 complete mandatory MPH exit survey through Qualtrics (N=13). System identifies who has completed the survey, but responses are not linked to the respondents. Results are analyzed descriptively (frequency, central tendency). Frequency data are recoded in and compared to target.		

Based on your results, highlight whether the program met the goal Student Learning Outcome 1.	<input checked="" type="checkbox"/> Met	<input type="checkbox"/> Not Met
Actions (Describe the decision-making process and actions for program improvement. The actions should include a timeline.)		
<p><u>These actions were identified during the 19-20 ASL:</u></p> <p>Develop ILE Guidebook with rubrics: During summer 2020, we beta tested new rubrics for assessing the ILE. Based on those findings, we created and launched an ILE Guidebook for students. The Guidebook provided explanations of each required sections, detailed instructions, and a copy of the rubrics being used.</p> <p><u>Although not a part of the follow-up for this SLO, we did the following:</u></p> <p>Discussed reinforcing concepts from low-scoring areas in courses to provide students with opportunities to build competence: Ongoing efforts include providing resources to students on various aspects of academic writing and identifying opportunities to apply/reinforce concepts in required core courses.</p> <p>Discussed SLO findings and measurement instruments: The newly hired and existing MPH faculty for the 2021-22 AY met in May 2021 to discuss changes to competencies by our accrediting agency and the classes in which these competencies would be met. Held ILE informational session in conjunction with student governance organization.</p>		
Follow-Up (Provide your timeline for follow-up. If follow-up has occurred, describe how the actions above have resulted in program improvement.)		
<p>Align/identify measurement instruments with revised competency assessments: At the end of fall semester 2021, MPH faculty will meet to discuss and identify course assessments and activities that align with and/or reinforce SLOs.</p> <p>Revise ILE Guidebook: In addition to making changes to align with revised accreditation requirements, the ILE Guidebook will be revised to incorporate feedback from students and faculty reviewers.</p> <p>Revise ILE assessment process: Presently, only the final draft of ILEs are rated, even though students submit drafts for comment. In fall 2021, we will begin providing formal feedback on the areas in which they are assessed. Specifically, we will modify draft reviews to include rubric ratings.</p> <p>Create ILE Assessment Guidebook for faculty reviewers.</p>		
Next Assessment Cycle Plan (Please describe your assessment plan timetable for this outcome)		
<p>MPH faculty will view and discuss these findings during MPH workday or curriculum meeting during the fall semester, and make decisions to replace, modify, or keep existing SLOs and measurement instruments.</p> <p>Most artifacts are collected annually. The MPH program coordinator leads this process, and collects data, as needed, from instructors of any courses sampled. Data are collected and collated during the summer and discussed prior to the beginning of the new academic year.</p>		

Student Learning Outcome 2

Student Learning Outcome	Apply MPH competencies in collaboration with public health/related professionals.		
Measurement Instrument 1	<u>Applied practice experience products.</u> Our accrediting agency requires each student to complete a minimum of two competency-based products in collaboration with a public health/related agency.		
Criteria for Student Success	Products created during applied practice experiences will demonstrate alignment with MPH competencies.		
Program Success Target for this Measurement	90% of graduates' products align with five or more competencies	Percent of Program Achieving Target	100%
Methods	Students' applied products are assessed vis a vis the competencies throughout their program. A summary data base is maintained and products are kept in individual files on the shared drive. Prior to each student's graduation, these documents/files are audited and assessed for compliance. Products include such deliverables as a lesson plan, data base, infographic, presentation, webpage, report, program proposal, social media plan, etc. N=13		
Measurement Instrument 2	<u>MPH Exit Survey: Service beyond curricular/program requirements.</u> Public health competencies are typically reinforced during community service activities; thus, this is an indirect, or proxy measure, for the learning objective. MPH students are encouraged to engage in service beyond curricular/program requirements.		
Criteria for Student Success	Students self-report that they engage in extra-curricular service activities related to public health during MPH program.		
Program Success Target for this Measurement	50% of graduates will meet criteria for success	Percent of Program Achieving Target	61.5%
Methods	Census of graduating students take mandatory MPH exit survey through Qualtrics. System identifies who has completed the survey, but responses are not linked to the respondents. Results are analyzed descriptively (frequency, central tendency) and compared to target. N=13		
Measurement Instrument 3	<u>Applied Practice Experience Reflections.</u> Students complete 100 hours of applied practice that involves substantial interaction with public health/related practitioners. These hours may be completed in a single experience, such as an internship, or in multiple experiences. To get credit, students must submit a summary report at the conclusion of each applied experience, in which students reflect on the experience and the competencies applied/developed.		
Criteria for Student Success	Students identify competencies applied during their applied practice experience hours in their reflections.		
Program Success Target for this Measurement	90% of graduates will meet the criteria for success.	Percent of Program Achieving Target	100%
Methods	Upon submission, the summary report is checked for completeness and alignment between activities and competencies. Once approved, the summary report is added to the student's file/portfolio and the hours are awarded. A running tally of hours is housed in the gradebook of the MPH Student organizational site on Blackboard. Prior to graduation, an audit is conducted on each graduate's file and the competencies met are abstracted. N = 13		
Based on your results, check whether the program met the goal Student Learning Outcome 2.			<input checked="" type="checkbox"/> Met <input type="checkbox"/> Not Met
Actions (Describe the decision-making process and actions planned for program improvement. The actions should include a timeline.)			

These actions were identified during the 19-20 ASL:

Assess student perceptions of guidebook and web-based submissions. Completed. We used this information to enact the following:

- **Revised data collection process:** After beta testing the online submission process for graduate applied practice experiences (GrAPEs) in spring 2020, we used feedback from users to further revise the forms and processes.
- **Revised GrAPE Guidebook:** In response to feedback and observations, we revised the GrAPE Guidebook to provide explicit step-by-step instructions.
- **Communicated Changes:** In response to students expressing doubts about the GrAPE requirements, we held “Spotlight” sessions with students to address questions and go over processes.

Foster culture of service: We had planned to have students use the MPH’s social media platforms to highlight their service activities. However, student feedback indicated many were either not active on social media or felt uncomfortable using social media for academic purposes. Thus, we pivoted in our approach and did the following:

- **GrAPE Orientation:** We observed that many students waited until their final semesters of study to fulfil the GrAPE requirement. To foster a culture of service throughout the program, the GrAPE coordinator met with each first-semester student to orient them to GrAPEs, identify areas of interest, etc.

Follow-Up (Provide your timeline for follow-up. If follow-up has occurred, describe how the actions above have resulted in program improvement.)

Improve quality of summary reports: Although not reflected in measurement 3 for this SLO, a review of the artifacts revealed inconsistencies in the quality of the summary reports. Thus, to ensure robust, quality summary reports, we plan to provide feedback on the reports to students, and, when warranted, require revisions.

Embed on-going applied practice projects into core courses. Although not reflected in measurement 1 for this SLO, a review of the artifacts revealed variability in the types of products being submitted. Coupled with student and preceptor feedback, we plan to embed at least two product-based applied practice experiences into our curriculum. This will ensure quality, competency-based products as well as allow students more flexibility in their individual GrAPEs; students will be able to use the GrAPE hour requirement to focus on projects within their public health-related interests without the restrictions of needing a product as well.

Continue to refine Grape Guidebook: After a year of using the GrAPE Guidebook, we have identified ways to make the Guidebook even more helpful to students. We will update and make available a new version of the GrAPE Guidebook with this new information by Fall 2021.

Continue to foster culture of service: We will explore creating an annual newsletter that highlights some of the service activities identified in the GrAPE summary report.

Next Assessment Cycle Plan (Please describe your assessment plan timetable for this outcome)

MPH faculty will view and discuss these findings during MPH workday or curriculum meeting during the fall semester, and make decisions to replace, modify, or keep existing SLOs and measurement instruments.

Most artifacts are collected annually. The MPH program coordinator leads this process, and collects data, as needed, from instructors of any courses sampled. Data are collected and collated during the summer and discussed prior to the beginning of the new academic year.

Student Learning Outcome 3			
Student Learning Outcome	Develop plan, program, or policy to address a public health problem.		
Measurement Instrument 1	<u>Program Proposal</u> : Based on an identified public health problem, PH 575 students develop a program proposal which includes program goals and objectives, budget, marketing, and sustainability.		
Criteria for Student Success	Students score 80% or higher on program proposal.		
Program Success Target for this Measurement	80%	Percent of Program Achieving Target	100%
Methods	Planning projects are graded by the course instructor. Individual grades are reported on a census of students completing PH 575 during academic year. Rubric attached. N=13		
Measurement Instrument 2	Health Disparities final paper: Students in PH 578 propose a theory-based plan to address a health disparity.		
Criteria for Student Success	Students score at least 80% on final paper.		
Program Success Target for this Measurement	80% of students will meet criterial for success	Percent of Program Achieving Target	72.7%
Methods	The final paper is graded by the course instructor. Individual grades are reported on a census of students completing PH 578 during academic year. N = 22		
Measurement Instrument 3	<u>MPH Exit Survey</u> : Assessment of competency 9. The MPH Exit Survey includes a section that assesses students' perception of how well the program developed each competency. Competency 9 is "Design a population-based policy, program, project or intervention."		
Criteria for Student Success	Students rate competency 9 as 4 or higher (of 5).		
Program Success Target for this Measurement	85% of graduates will meet criterial for success.	Percent of Program Achieving Target	100% Mean = 4.85
Methods	Census of graduating students take mandatory MPH exit survey through Qualtrics. System identifies who has completed the survey, but responses are not linked to the respondents. Results are analyzed descriptively (frequency, central tendency) and compared to target. N=13		
Based on your results, check whether the program met the goal Student Learning Outcome 3.			<input checked="" type="checkbox"/> Met <input type="checkbox"/> Not Met
Actions (Describe the decision-making process and actions for program improvement. The actions should include a timeline.)			
<u>These actions were identified during the 19-20 ASL:</u>			
Staff MPH core courses with MPH primary faculty. Completed. With the exception of PH 584, which does not align to any accreditation-required competencies, all MPH courses were staffed with MPH faculty, as per policy enacted as an action item in AY 18-19.			
Ensure MPH core courses offered through WKU On-Demand are consistent in content and assessments as semester-based courses. Not completed. Three on-demand core MPH courses were taught by the two faculty leaving the program. Thus, it was decided that the faculty taking			

over these core courses would create their content and assessments to be used for all formats in which core courses are taught (face-to-face, online, and on-demand).

Follow-Up (Provide your timeline for follow-up. If follow-up has occurred, describe how the actions above have resulted in program improvement.)

Ensure MPH core courses taught in multiple formats (f2f, online, on-demand) have consistent content and assessments. Although the fate of on-demand is currently unknown for our college, new T/T MPH faculty will create course content and assessments that are consistent for all formats.

Review assessments to ensure strong alignment with competencies and SLOs. At the end of AY 20-21, the incoming and returning MPH faculty had a workday to identify lead instructors for each core MPH course and to identify courses that will have aligned content and assessments with competencies.

Next Assessment Cycle Plan (Please describe your assessment plan timetable for this outcome)

MPH faculty will view and discuss these findings during MPH workday or curriculum meeting during the fall semester, and make decisions to replace, modify, or keep existing SLOs and measurement instruments.

Most artifacts are collected annually. The MPH program coordinator leads this process, and collects data, as needed, from instructors of any courses sampled. Data are collected and collated during the summer and discussed prior to the beginning of the new academic year.

PH 591
Evaluation Report

Before dedicating the resources to implement the program statewide, funders want to know if the pilot test was successful. You have been asked to prepare a comprehensive report and present your findings at a meeting with staff from both organizations.

Report

Please structure your report as such:

- Cover page
- Table of Contents
- List of Tables
- List of Figures
- Executive Summary: Even though this comes first, it is written last. It provides a brief BUT SPECIFIC AND MEANINGFUL overview of the evaluation, and then bullet points some of the salient findings. This is the ONLY place in your report where bullet points are acceptable.
- Introduction: Your report should begin by providing a succinct rationale for the program overall (think social and epi diagnosis from P-P). This is a mini-literature review about the underlying issue, and should be no more than two pages. Anyone who reads this should understand the need for the program.
- Description of Program: Begin this chapter by identifying the purpose of the program. The rest of this chapter should very clearly describe the program activities and why they were designed as such (think theory). Think critically about this. This section MUST include a visual logic model of the program. This section is what would be in the program theory or PRECEDE. Use subheadings, tables, and/or charts as needed to clarify or summarize.
- Evaluation: This chapter will begin with an overview of the purpose of the evaluation, the type and levels of evaluation conducted, sampling, and design. While you are writing for a lay audience, you still want to include appropriate terminology so that the funding agency will know that this is a sound evaluation. Be specific. Then, include the following sections:
 - Process Evaluation: Begin this section with an overview paragraph about the purpose of process evaluation. Then you will describe what was done and found. Report the facts, and refrain from interpreting, making recommendations, criticisms, etc. Use subheadings, tables, and/or charts as needed for clarity.
 - Impact Evaluation: Begin this section with an overview paragraph about the purpose of impact evaluation and then, in detail, how impact was measured. Include these subsections
 - Data Collection: This is related to how/when data were collected. Include response rates here.
 - Measures: Identify each of the measures. Describe the items within each measure, how they were measured, recoded, computed, etc.
- Results: You will have two primary sub-sections: Descriptive Results and Inferential Results. Your results section should report and describe the findings of your statistical analyses. It should NOT interpret or make judgments about them.
 - Descriptive Results: Create two tables and write narratives for each. The first table will be your descriptive results for demographic variables by group (intervention or control). The second table will include the data for the measures (and related items) by group. Please include the appropriate test statistics on tables and in text, etc., even though this is part of your descriptive

results. Think about WHY I am asking you to include these inferential data. HINT: This should look like a condensed and cleaned up version of your Homework 7.

- Inferential Results: At minimum, you should create one table looking at post-test data for all measures (and related items) and write a narrative about it. While I do not want you to formally state the hypotheses or decisions, you should think in those terms in this section. Make sure to include appropriate test-statistics, etc. in your narrative and on tables. If there are other analysis that you think are important, include them, making sure to explain the purpose, findings, etc.
- Conclusions: This is where you interpret your findings and make judgements about the program's effectiveness in terms of both process and impact. As part of the impact, think critically about your findings and whether they make sense relative to theory. If there are things that are not consistent, think about why.
 - Limitations: Include a section that talks about the limitations of the evaluation (think internal and external validity, etc.)
- Recommendations: Based on the findings, what do you recommend the stakeholders do? Be specific but do NOT suggest a specific activity. For example, you may recommend that activities to increase (insert theoretical construct) be designed or that a way of more accurately measuring (insert variable here) be created.
- References
- Appendices

General Instructions for Report

- The narrative portions of your report should be double-spaced; tables should be single spaced. Margins should be 1" all around.
- Use Calibri 12 point font.
- I prefer using [AMA style](#)¹ in-text citations for evaluation reports as it is a cleaner look than APA. You are welcome to use either for in-text citations and references.
- Your tables should be formatted as shown in the lectures.
- You are not allowed to use the words "should," "need," or "must" in the paper. I will deduct 5 points for each "should" or "must" in your paper. =) I also do not want to see "I/We think/feel/believe" statements anywhere in your report.
- Your report should use appropriate grammar and be free from spelling and punctuation errors. I always recommend having several sets of eyes proof-read your paper and to utilize the writing center if you're not a strong writer.
- Your report should be written with a lay audience in mind, but also include (where appropriate) necessary statistical information. **Do not include the word hypothesis(es) anywhere.**
- Do not use a running head; you do, however, need to use page numbers.
- Your visual depictions need to be labeled sequentially as figures (eg, Figure 1. Overview of....; Figure 2. Logic Model of....). The figure number, title, and page number are what you include in the list of figures. Similarly, the table number, title, and page number are what you include in the list of tables.
- If you use graphs for inferential data, make sure to include data tables in the appendix that support them. Do not put both tables and graphs in your narrative section.

Expectations

I expect thought. Deep, critical thought. While much of the report includes and builds on homework assignments, these have been components and not fully discussed in terms of rationale, etc. There are also

things that I allude to, rather than spelling out. That's because I want you to think instead of just following instructions.

Remember, you are evaluators.

Grading

Points	Section
5	Executive Summary
8	Intro
12	Description
20	Evaluation
20	Results
15	Conclusions
15	Recommendations
5	Format
100	Total

PH 578: Health Disparities

Guidelines for first paper:

To provide direction for the first paper, I need to provide a bit of information about the *final* paper.

The final paper for this course is intended to be, in essence, a program/policy proposal that is aimed at addressing a specific and defined health disparity. As part of that proposal, you will need to make a decision about which model(s) you aim to employ to address the health inequity. You will also need to provide a thorough and clear review of existing literature, employing a systems-thinking approach, that explains the various roots of the health disparity. The lit review should also provide evidence that the inequality can be adequately explained using the model(s) chosen. To be clear, when I say models, I am referring to the behavior/psycho-social/materialist/macro models we are exploring within this class. It is this part of the final paper that you will need to complete before April 4.

The paper (and subsequent presentation) is meant to serve as the foundation for your final paper. Within the first ('Midterm') paper, you will need to decide which model(s) – parts of the 'system' – best address the health disparity. This is to be done through a thorough exploration of the various system levels to determine, based on the evidence, which is the best angle to take in order to address the gap. The first paper should, ultimately, clearly convey the scope (aka models) through which you plan to address the inequality. It should be noted that it is perfectly acceptable to merge multiple models. That said, I would caution against blending more than two.

In the final paper/presentation, you will need to develop a program *based on* an identified theory. The theory that you choose will need to be in concert with your chosen perspective – you cannot argue that the disparity is a result of individual behaviors and then develop a program that focuses on community access. Because of this, the more models you incorporate into your explanation, the harder it will be to identify a theory that reflects that approach.

So there is no confusion, this is not a review of a particular health outcome. Rather, it is an assessment, considering multiple components of the 'system', of why one particular group experiences worse outcomes when compared to another group (or other *groups*) within our society. Furthermore, the purpose of the final paper is not to propose how we can eradicate the health outcome, but rather to propose a program aimed at eliminating/lessening the excessive burden of that one group.

The first paper should be no less than seven pages, double-spaced, 12-font Times New Roman, and standard margins. You need to provide some basic information about the health outcome – cause of the disease, relevant rates, etc. – that demonstrate that a health disparity exists, and provide an overview of reasons for the inequality as gleaned from the literature. Please do not ask how many sources you are required to have. My answer will *always* be along the lines of 'as many as you need to provide a complete, balanced, and clear narrative.' If you submit a paper that does not provide a thorough review of the literature, your grade for this paper will reflect that and I will let you know that this needs to be corrected for the final paper.

Content of the Final Project

The Final Project is a continuation and completion of the Midterm Paper. You are to build upon the evidence and rationale of the health disparity that was identified in the development of the Midterm Paper.

The final product should include the following:

- Completed and polished Literature review (Midterm Paper)
- An explicit statement and explanation of the model(s) selected (Behavioral/Cultural, PsychoSocial, etc.)
- The identification and explication of the theory chosen as the basis of the program/policy developed. What theory did you select, what does the theory argue, and how does it explain your chosen health disparity (this last bit should tie back to the literature review/background)?
- A clear communication of the program/policy proposed to address the health disparity. This includes an explanation of what the program/policy will do, and any potential limitations. Remember that the program/policy needs to be rooted in the identified theory.

The proposed policy/program is not necessarily intended to eliminate the health outcome being discussed, but rather to reduce the existing disparity.

The final submission should be in the range of 8-15 pages. There is no harm in exceeding fifteen pages. However, anything less than eight pages is likely to be an incomplete product (given everything that needs to be communicated). The citations and references should be consistent, and in an official format. I would recommend APA, but if your group decides to utilize another format, that's fine. Just be consistent, and check them before submitting your final product. Standard fonts and font size is expected.

PH 575 Grant Application Paper

Description of Assignment

You are going to develop a comprehensive grant application. There is no page requirement for the assignment.

The paper should include:

1. A selected health problem described in general terms, backed with data and possible economic costs to the community
2. A description of a target population that needs this intervention/program
3. Background information and a proposed theoretical basis to address the problem
4. A brief description and overview of your proposed EBI intervention for this population and problem along with any needed adaptations
5. Goals and objectives are included as well as appropriate corresponding activities
6. A logic model is developed
7. A budget of all needed and available resources are included
8. A task timeline is detailed in the assignment along with a description of personnel and their effort
9. An evaluation plan which includes the purpose, process and rationale for the plan as well as components of the plan and data collection instruments to be used
10. Conclusion that summarizes the main points of the proposal
11. A listing of references used to create the rationale (in APA format) and utilization of the chosen literature to inform your decisions throughout the proposal

CRITERIA For GRADING ASSIGNMENT

CONTENT CATEGORY	Excellent or Exemplary Work (4 points)	Proficient or Adequate Work (3 points)	Still Needs Work (1-2 points)
What is the health problem?	Demonstrates full knowledge (more than required) by: <ul style="list-style-type: none"> addressing chosen problem with examples, explanation and elaboration. providing essential information that is logically arranged and succinctly presented. 	<ul style="list-style-type: none"> Provides information about problem but fails to elaborate. Describes some of the essential information. Ideas are sometimes vague, unclear or not well documented. 	<ul style="list-style-type: none"> Knowledge is rudimentary or relies on frequent quotes rather than own words. Description contains extraneous or insufficient information. Not logically arranged or discussed.
What is the magnitude or importance of the problem?	Emphasizes importance of the problem with: <ul style="list-style-type: none"> a strong statement, statistic or relevant quotation. Situational analysis or epidemiologic assessment that includes 3 or more pieces of evidence (facts, statistics, examples, real life examples) to support the statement of importance. Source of evidence is recent and reliable. 	<ul style="list-style-type: none"> Importance of problem discussed but missing strong statement, relevant quote, or statistic Includes at least 2 pieces of evidence (facts, statistics, examples, etc) to support importance. Source of evidence somewhat dated. 	<ul style="list-style-type: none"> Importance of problem presented in description. Includes 1 or fewer pieces of evidence (facts, statistics, or examples) to support importance. Source of evidence is old or unreliable.
Who is most affected by the problem and what health behaviors put them at risk?	<ul style="list-style-type: none"> Identifies and describes population to be targeted (geographically, numbers, demographics etc.) Demonstrates understanding of people for whom the program is intended by discussing their unmet need, health status or health behavior. Uses 3 or more pieces of evidence from epidemiologic assessment (facts, statistics, examples) to support need in target population; Source is recent and reliable. Makes strong case for why problem is urgent and should be dealt with. 	<ul style="list-style-type: none"> Describes target population to some extent. Demonstrates some understanding of people for whom program is intended. Uses at least 2 pieces of epidemiologic evidence (facts, statistics, examples) to support need within the target population. Source is somewhat dated. Makes case for why the problem should be dealt with. 	<ul style="list-style-type: none"> Limited discussion and understanding of people for whom the program is intended. Does not discuss unmet need or health status. Uses 1 or fewer pieces of evidence to support the problem importance. Source is old or unreliable. Case for why the problem should be addressed is weak.
What has been or can be done about the problem? (Proposed program/ intervention)	Proposes a clear solution to the problem: <ul style="list-style-type: none"> Solution includes name and purpose of proposed health promotion program or intervention Provides a general overview of what the program may include. rationale for the program tries to align the potential value and benefit to the community 	<ul style="list-style-type: none"> Solution briefly describes a proposed health promotion program or intervention. Provides very basic overview of the program. Rationale not likely to align the potential value and benefit to the community. 	<ul style="list-style-type: none"> Solution is vague or unrealistic. Provides minimal overview of the program. Little or no attempt to make rationale for program/ intervention align with what is important to the community.
What are potential outcomes or benefits? What may hinder these results?	Demonstrates importance/need of the program by: <ul style="list-style-type: none"> Statements about potential outcomes of the program and why it will be beneficial. Using results of other studies or interventions to support the rationale. Discusses behavioral and environmental factors that might hinder successful results Closes paper with convincing language that there is no better time to solve the problem and why it is important. 	<ul style="list-style-type: none"> At least one statement indicates what can be gained from the program and why the program will be beneficial. Limited use of results from other studies to support the rationale. Minimal discussion of behavioral and environmental factors to be considered. Closes paper with mention that timing is right for the program but little other rationale. 	<ul style="list-style-type: none"> Includes brief statement to indicate what can be gained from the program or why the program will be successful. Little or no rationale provided No discussion of behavioral and environmental factors Closes paper without mention of the program's current usefulness.

CONTENT CATEGORY	Exemplary (4 points)	Proficient (3 points)	Developing (1-2 points)
Background and Theoretical Basis	<p>Demonstrates full knowledge (more than required) by:</p> <ul style="list-style-type: none"> describing chosen problem and factors (behavioral and environmental) associated with the problem defining and documenting a theoretical model or approach to address the problem and describing the selected factors/constructs that would need to be targeted in order to address the problem. summarizing strategies or interventions that have been used and discussed in the literature, in terms of evidence of success and theoretical basis (if any) elaborating on why the proposed program could be effective or beneficial 	<p>Demonstrates adequate knowledge by:</p> <ul style="list-style-type: none"> providing expected information about the program but fails to elaborate. Description of behavioral and environmental aspects of the problem missing one or the other Theoretical model or approach described in broad terms. Literature summary of other strategies or interventions is discussed with little detail or examples. Provides little or no discussion about why the proposed program would be effective. 	<ul style="list-style-type: none"> Demonstrated knowledge is rudimentary or relies on frequent quotes rather than own words. Selected program or intervention is minimally relevant to public health and the description contains extraneous information; is not logically arranged. Theoretical model is missing or poorly described.
Description of Program/Intervention and Evidence Base	<p>Demonstrates clarity when describing the program or intervention by:</p> <ul style="list-style-type: none"> discussing strategies upon which the program or intervention is based outlining the criteria or rationale used for selecting the particular program or strategy providing evidence of program's potential effectiveness Including 3 or more pieces of evidence (facts, statistics, or examples) to support the statement of evidence-based. Source of evidence is recent and reliable. 	<ul style="list-style-type: none"> Program or intervention is adequately described. Some description of rationale provided. Includes 2 pieces of evidence (facts, statistics, or examples) to show evidence based status. Source of evidence somewhat dated but reliable. 	<ul style="list-style-type: none"> Program or intervention is not adequately described. Little or no rationale provided as to why it is important or if it will work. Includes 1 or fewer pieces of evidence (facts, statistics, or examples) to support evidence based status. Source of evidence is old or unreliable.
Adaptation for Target Population or Community	<p>Demonstrates understanding of people for whom the program is intended by:</p> <ul style="list-style-type: none"> Identifying and describing the target population/ community. discussing their unmet or unique needs describing how the program will be adapted or modified to make it more culturally relevant and acceptable 	<ul style="list-style-type: none"> Describes target population to some extent. Demonstrates some understanding of people for whom the program is intended. Adequate discussion of adapting or modifying program for population. 	<ul style="list-style-type: none"> Describes population but limited understanding of people for whom the program is intended. Does not discuss unmet need or health status. Does not make a strong case for why the program should be adapted or does not provide a rationale or explanation for the adaptations that are described.
Goals, Objectives and Activities	<p>Demonstrates excellent groundwork for later evaluation planning by:</p> <ul style="list-style-type: none"> providing at least one well written goal that is global: includes all program components and provides direction providing at least 3 or more objectives that are hierarchical in nature (levels) and contain 4 elements to make them complete objectives 	<p>Demonstrates adequate groundwork for later evaluation planning because:</p> <ul style="list-style-type: none"> Goal is well written Provides at least 2 objectives that contain 4 required elements Some objectives not realistic or have unclear criterion Activities discussed to some extent 	<p>Insufficient groundwork for later evaluation planning</p> <ul style="list-style-type: none"> Goal is not well written Each objective does not contain 4 required elements Some objectives are irrelevant to what is described in program Activities not discussed

	<ul style="list-style-type: none"> • writing objectives that are reasonable time- wise, realistic, and have clearly set criterion. • describing activities that are planned for the program and how they relate to the objectives 		
Logic Model	<ul style="list-style-type: none"> • Creates a visual tool to demonstrate understanding of relationships of the planned program with intended results. • Logic model provides excellent detail to show logical relationships and a roadmap for the program. 	<ul style="list-style-type: none"> • Visual tool demonstrates understanding of relationships of the planned program • Provides some detail to show a roadmap for the program. 	<ul style="list-style-type: none"> • Visual tool is missing or demonstrates limited understanding of relationships of the planned program. • Insufficient detail to show how program will work or what it will accomplish.
Use of literature	<ul style="list-style-type: none"> • Includes a list of the references used in preparing the program plan. • Literature includes a balance of articles, books, government publications and other documents that explain the past and current knowledge about the topic. • Publications are no more than 5 to 7 years old. 	<ul style="list-style-type: none"> • Includes a list of the references used in preparing the program plan. • Literature includes articles and other documents but relies heavily on one modality that may or may not explain the past and current knowledge. • Some publications are more than 7 years old 	<ul style="list-style-type: none"> • Includes a list of the references • Literature is limited to non academic documents such as websites and government publications. • Most publications are more than 7 years old.

ILE Rubric

CONTENT REQUIREMENT	High Pass (3)	Pass (2)	Low Pass (1)	Does Not Pass (0)
<p>Clearly described public health issue: <i>Public health issue is clearly defined, sufficiently focused, and supported by current evidence.</i></p>	<p>Topic is clearly defined and focused. The importance of the topic is well articulated and supported by current data and other reputable sources.</p>	<p>Topic is sufficiently defined and focused. The importance of the topic is adequately articulated and supported by current data and reputable sources.</p>	<p>Topic is not well defined and/or focused. The importance of the topic is marginally supported by current data and/or other reputable sources.</p>	<p>Topic is poorly define and unfocused. Importance is insufficiently supported.</p>
<p>Literature Review: <i>Evidence is relevant, sources correctly cited, and synthesized to effectively provide insight into the question/issue</i></p>	<p>Evidence is relevant, timely, and clearly summarized with sources correctly cited. Vast majority of supporting evidence come primarily from peer-reviewed journals and other reputable professional sources.</p>	<p>Evidence is mostly relevant and timely, and sufficiently summarized. Most supporting evidence come from reputable sources.</p>	<p>Evidence is marginally relevant, timely, and/or summarized. An adequate amount of evidence come from reputable sources.</p>	<p>Evidence is not relevant, timely, and/or adequately summarized. An inadequate amount of evidence comes from reputable sources.</p>
<p>Critical Analysis: <i>Insightful discussion relative to content form and supporting evidence.</i></p>	<p>Discussion is thoughtful and insightful, and clearly informed by evidence.</p>	<p>Discussion is sufficient, but but somewhat lacking in thoughtfulness, insight, and understanding of evidence.</p>	<p>Discussion is marginally sufficient, but lacks depth of thoughtfulness, insight, and/or understanding of evidence.</p>	<p>Discussion is inadequate, and does not demonstrate insight or adequate understanding of evidence.</p>
<p>Discuss public health implications: <i>Implications of evidence, research, and/or findings are clearly identified and justified, and actions recommended are comprehensive, feasible, innovative, and ethical</i></p>	<p>Recommendations flow logically from evidence, are well-argued, and/or are comprehensive, feasible, innovative, and/or ethical</p>	<p>Recommendations somewhat flow logically from evidence and are justified though there are gaps, and/or recommendations are somewhat comprehensive, feasible, innovative, and/or ethical</p>	<p>Recommendations do not logically follow from evidence, are questionable and/or inappropriate, and/or not comprehensive, feasible, innovative, and/or ethical</p>	<p>Does not provide relevant recommendations.</p>

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