

# PROGRAM REVIEW

## Fairmont State Board of Governors

- Program with Special Accreditation  
 Program without Special Accreditation

Title of Degree Program Community Health Education

### INSTITUTIONAL RECOMMENDATION

The institution is obligated to recommend continuance or discontinuance of a program and to provide a brief rationale for its recommendation:

- 1) Continuation of the program at the current level of activity
- 2) Continuation of program with corrective action (for example, reducing the range of optional tracks or merging programs);
- 3) Identification of the program for further development (for example, providing additional institutional commitment);
- 4) Development of a cooperative program with another institution, or sharing courses, facilities, faculty, and the like;
- 5) Discontinuation of the Program

Rationale for Recommendation:

Improve Assessment Data

Signature of person preparing report:

*Chris Kast*

Digitally signed by Chris Kast  
Date: 2020.05.31 21:03:12 -04'00'

1/15/2021

Date

Signature of Dean

**Richard Harvey**

Digitally signed by Richard Harvey  
Date: 2020.05.31 20:35:53 -04'00'

Date

Signature of Provost and Vice President for Academic Affairs:

**Mirta M. Martin**

Digitally signed by Mirta M. Martin  
Date: 2020.06.08 11:51:29 -04'00'

Date

Signature of President:

*Billie Sparr*

Signature of Chair, Board of Governors:

Date

6/11/2020

Date

# Executive Summary for Program Review

**Name and degree level of program:** Community Health Education Undergraduate

## External reviewer

Jessica Wright, Director, WV Bureau of PH, Health Promotion & Chronic Disease Div.

Email: [Jessica.G.Wright@wv.gov](mailto:Jessica.G.Wright@wv.gov) Office: (304) 356-4193 Fax: (304) 558-1553

## Synopses of significant findings:

Overall, the external reviewer was pleased with the program and with the ability of program graduates to meet the health promotion needs of WV citizens. The reviewer also provided a letter summarizing her thoughts. The letter is provided in Appendix XI.

The Community Health Education Program and courses has served more than 5,000 students over the past five years, with 27 graduates.

## Plans for program improvement, including timeline. Identification of weaknesses or deficiencies from the previous review and the status of improvements implemented or accomplished

\*\*\*The 2016 Program Review was approved with NO deficiencies or recommendations for improvement. Improvements listed below are based on the expertise of program faculty.\*\*\*

The Community Health Education program has always worked on continuous improvement. Past examples include adding/revising courses, re-aligning learning outcomes, and adjusting pre-req expectations. The updates described below will further assist students in earning their degree in a timely fashion and preparing them for community-based health promotion careers, all while being fiscally responsible to the university and state.

The Area of Emphasis will be replaced with the requirement of a minor, double major, or an associate degree. These options allow more flexibility while ensuring students receive additional training tailored to their career plans. Allowing interchangeable courses and adjustments to pre-reqs will provide more flexibility for students and reduce the number of registration over-rides. Additional information about interchangeable courses and pre-reqs are available in the *Adequacy* section of this review.

During the Summer of 2019, Community Health moved to the Department of Behavioral Sciences. As part of this move, the following improvements are planned:

1. The Community Health courses will get a new prefix, CHEP, beginning Fall 2020.
2. Some Community Health courses will be electives for psychology and sociology majors, increasing the ability to double major or complete a minor in multiple fields.
3. Community Health courses will join other behavioral science courses as allowable electives for the Criminal Justice program. This will increase the visibility of the program's minor and will benefit criminal justice students because the skillsets learned will assist in prison-based health promotion, health promotion for first responders, etc.

Increasing visibility of Community Health will take place in a number of ways.

1. Aligning required courses with other university programs to encourage double majors.
2. 2-2 agreements with community colleges will encourage associate degree graduates who want to continue their education.
3. Longer-term options (dependent on adequate staffing of program faculty):
  - a. Potential online/evening/weekend sections for pre-req courses to increase exposure, access, and interest in the program.
  - b. Potential course offerings at the Charles Point campus to better accommodate students traveling from the southern reaches of the university catchment area.
  - c. Offering entry-level courses in local high schools that are also high-yield feeders.

### Five-year trend data on graduates and majors enrolled

Three (n=3) out of the 27 Community Health graduates completed the degree within four years and an additional ten (n=10) completed the degree within six years of enrolling as a first-time freshman.

Community Health majors frequently enter the program in their sophomore or junior year of college. Students entering the program already in their junior year of college face the biggest challenge of graduating “on time”. Whenever possible, faculty work with students to meet their original graduation date.

As with many Fairmont State students, students in this program are balancing full-time careers, raising families, caring for ill family members, and any number of other demands that take away from a 100% focus on college. All of these demands routinely cause students to delay their degree completion.

Additional data are available in the *Adequacy* section and Appendix I.

Community Health Education Graduates per Term	
Community Health Education	Graduates
Fall 2014	0
Spring 2015	2
Summer 2015	0
Fall 2015	1
Spring 2016	5
Summer 2016	0
Fall 2016	3
Spring 2017	5
Summer 2017	0
Fall 2017	2
Spring 2018	3
Summer 2018	0
Fall 2018	3
Spring 2019	3
<b>Total</b>	<b>27</b>
<b>Average per academic year</b>	<b>5.4</b>
<p><b>About this measure:</b> Number of students who graduate with a Community Health major per term. Students who graduate in a summer term are included in the graduation numbers for the following Fall and Spring terms. Note that this measure does not mean that the student began enrollment as a Community Health major, but only that the student graduated with a Community Health major. The average per term is calculated by summing the Summer, Fall, and Spring semesters and then dividing by 5.</p>	

### Summary of assessment model and how results are used for program improvement

Taskstream is used to track student learning outcomes and annual program assessment indices. No formal program review feedback has been posted in Taskstream by school-level or department-level leadership. A TaskStream program assessment team member stated,

“A well-articulated assessment plan makes a big difference for an external reviewer. I am not supposed to evaluate this program as a reviewer, but I was impressed by the thoroughness.”

Since 2013, the Community Health program has aligned all course and program outcomes with the Health Education Specialist Certification Areas of Responsibilities. Student outcomes are assessed for introductory, reinforcing, and mastery levels of achievement. Details about the Areas of Responsibilities and assessment are provided in Appendix VI.

Improvements based on assessment findings include:

- Adding courses targeting program funding and management and a capstone course to review key skills prior to students sitting for professional certification exams,
- Adjusting learner outcomes to new courses to ensure proper scaffolding of content
- Increasing the internship expectation from 40 hours to 120 hours to provide students adequate time to practice their new skillset in a supervised and supported environment.

**Data on student placement (for example, number of students employed in positions related to the field of study or pursuing advanced degrees)**

Program graduates are prepared to enter a number of careers and graduate degree programs. While most graduates immediately enter the workforce, some choose to also further their education. As of Summer 2019, two graduates have earned master’s degrees (one in education and one in public health), one is currently attending an expedited nursing program, and one is completing a master’s of public health degree.

Throughout the Community Health program, students learn about career options. Students learn that they are mastering a skillset that prepares them to work in many fields, including: social services, health education & promotion, insurance industry, non-profit organizations, hospitals, human resource/benefits offices, medical/dental offices, pharmaceutical companies, research, government agencies, etc.

During the 2019 Program Review survey, 19 graduates, 10 internship site supervisors, and 6 employers responded. Graduates were asked if they thought they were employed in a position that uses their degree (the higher the score the more related their perceived their job and degree). The mean score was 71.4, with 10 graduates reporting a score of 90 or higher.

Due to the high expectations of the program, graduates are securing careers in the field and impressing supervisors. Feedback from the survey respondents include:

- A program graduate stated, “There are many opportunities for graduates of the Community Health Education program. Although those exact words may not be used in a job posting, the concept of what a graduate can do lies in many different positions. The government and other entities are seeing results from education and prevention programs, therefore making job opportunities more attainable.”
- An employer stated, “[graduate’s name] is a great asset to our board of education and has made outstanding changes to our food service in the county!”
- An intern supervisor stated, “Our intern was probably the most well-rounded intern we have had that not only had subject knowledge, but also had the other skills we seek... Very impressed and would encourage the program to keep doing what they're doing.”

# PROGRAM REVIEW

<b>FAIRMONT STATE UNIVERSITY</b>	
Program:	
School:	
Date:	

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## **Program Catalog Description:**

### **2018-2019 version**

The School of Education, Health and Human Performance offers a Bachelor of Science in Community Health Education and also a minor for students interested in pursuing a career in this area.

### **2020-2021 version (awaiting approval by the curriculum committee):**

The Bachelor of Science degree in Community Health provides students with the knowledge and skills to work in community-based programs. The focus of the degree is to prepare health professionals who can assess needs, plan and implement programs, conduct research, communicate health information, and serve as a health resource person. Courses are designed with hands-on learning in mind. Students participate in projects where they are meeting a real community's health needs.

Program graduates work to promote positive health behaviors and prevent disease by collaborating with individuals and communities. Employment opportunities are available in non-profit, government, healthcare, and business sectors. Some graduates also earn certification through professional organizations, including the National Commission on Health Education Credentialing. A number of program graduates have earned this additional certification.

## VIABILITY (§ 4.1.3.1)

### Enrollments

#### Applicants, graduates

Community Health Education Enrollment 2014-2019	
Major Degree Program	Enrollment
Fall 2014	18
Spring 2015	21
Summer 2015	11
Fall 2015	33
Spring 2016	27
Summer 2016	14
Fall 2016	22
Spring 2017	21
Summer 2017	5
Fall 2017	15
Spring 2018	16
Summer 2018	5
Fall 2018	15
Spring 2019	13
Summer 2019	3
<b>Average Enrollment Per Term*</b>	<b>20</b>
<p><b>About this measure:</b> A student is considered enrolled in a major degree program if the student is registered at Fairmont State as an undergraduate student, enrolled in at least one credit-bearing course during a given term, and classified as majoring in Community Health Education. These numbers are not cohort-based, and merely reflect the number of major degree-seeking students enrolled per degree program per term.</p>	

Please note that during the Fall 2019 semester, three additional students have declared Community Health Education as their major, bringing the current total to 12 majors. Faculty are meeting with potential majors on a weekly basis as well as introducing the program to potential students during community events.

Community Health Education is not a program that students typically declare when first entering college. The 2019 Program Review Survey asked program graduates about the path they took to get to the Community Health program. Graduates described life/college experiences, including:

- Began taking Health Sciences classes. Switched over to Community Health when it became available. May 2015-was the 1st graduate of the Community Health program
- Advisor mentioned Community Health and I met with Dr. Sidwell and really enjoyed her

enthusiasm. Became interested and fell in love with the program.

- I started at Fairmont State as an undeclared student. I took Dr. Leary's Intro to Health class. I really enjoyed her and what she had to say about the program.
- I felt that the Community Health program was more of a path that I wanted after discovering it.
- After losing my mother to a rare neurological disease in 2007, I wanted to change careers and go into public health. In 2013, after my children were finished with high school, I decided to go back to school at Fairmont State and chose the Community Health program.
- I discovered my love for health and fitness so I decided to pursue that at Fairmont State University when I found the Community Health program.
- I wanted to have a health-focused career, but I did not want to become a nurse or work in administration. Once I read the description of the program, I knew that it was exactly what I wanted to do.

## Program courses

Overall Student Success: Community Health Education						
Term	As awarded	Bs Awarded	Cs Awarded	Ds Awarded	Fs Awarded	Number of Withdrawals
Fall 2014	207	125	77	30	34	25
Fall 2015	278	174	83	21	31	23
Fall 2016	272	128	78	32	42	24
Fall 2017	244	134	58	24	30	28
Fall 2018	358	138	55	18	40	30
Spring 2015	175	96	36	12	24	14
Spring 2016	223	111	54	17	18	18
Spring 2017	224	93	34	16	30	15
Spring 2018	238	78	43	12	17	7
Spring 2019	360	123	30	17	12	15
About this measure: This table provides the total number of grades awarded per grade for Fairmont State University students per term across all courses under the umbrella of the Community Health program. This measure includes all courses taught regardless of course type.						

Several courses in the Community Health program are also required for other degrees at Fairmont State, meet General Studies requirements, and/or can be taken by non-majors who have an interest in health promotion. Because these courses serve multiple purposes, the success rates for individual courses are not necessarily reflective of Community Health students. The mean GPA for Community Health graduates is approximately 3.2 (on a 4.0 scale).



## Service courses

Overall Student Success: Community Health Service Courses						
Term	As awarded	Bs Awarded	Cs Awarded	Ds Awarded	Fs Awarded	Number of Withdraws
Fall 2014	196	122	77	29	32	24
Fall 2015	241	162	79	18	30	21
Fall 2016	210	117	72	32	38	24
Fall 2017	217	125	57	22	29	27
Fall 2018	311	124	53	17	38	26
Spring 2015	154	87	31	9	21	13
Spring 2016	190	94	47	15	17	14
Spring 2017	178	71	29	14	24	14
Spring 2018	202	67	35	10	14	6
Spring 2019	324	116	29	16	11	14

About this measure: This table provides the total number of grades awarded per grade for Fairmont State University students per term across all service courses identified by the Community Health Education program. This measure includes all courses taught regardless of course type.

HLTA 1100 is not a required course in the Community Health program but is included in this report because it is frequently taught by program faculty. HLTA 1100, PHED 1100, HLTA 2203, and HLTA 3315 serve as General Studies courses for the larger university community. Other courses have no (or few) pre-reqs and are taken by students across campus.

### Courses required for the School Health degree

HLTA 1150  
 HLTA 2202  
 HLTA 2203  
 HLTA 2210  
 HLTA 3315  
 HLTA 3360

### Courses required for the Exercise Science degree

HLTA 1150  
 HLTA 3315 (no longer required)

### Health Communication concentration of the BA in Communication

HLTA 1150  
 HLTA 2202  
 HLTA 2203

### The following major courses are open to any Fairmont State student:

HLTA 1110 (no PR)  
 HLTA 1150 (no PR)  
 HLTA 2202 (no PR)  
 HLTA 2203 (no PR)  
 HLTA 4446 (course began Spring 2019; ENLG 1102 and MATH 1407, or higher)  
 HLTA 4410 (no PR)  
 HLTA 3315 (pre-req HLTA 1150, sophomore status)  
 PHED 1100 (no PR)

## External Education/Off Campus Courses

Student Course Enrollment by Course Location			
Term	Caperton	Fairmont	Online
Fall 2014		432	67
Fall 2015		510	100
Fall 2016	19	457	101
Fall 2017	10	392	116
Fall 2018		421	218
Spring 2015		282	77
Spring 2016		353	88
Spring 2017		334	79
Spring 2018		317	78
Spring 2019		328	231

**About this measure:** This table provides the number of students in a Community Health Education course relative to the type of course in which the student enrolled. In order to be included in this table, the student had to receive a final grade or withdraw from the course during the given term of enrollment.

HLTA 1150 is offered during the summer term but has experienced very low enrollment. It has continued to be offered because it is a gateway course for a number of degree programs on campus and allowed students entering a degree program later in their academic career a chance to “catch up”. This course also serves as a recruitment avenue for the degree programs.

The new facility at Charles Pointe may provide the opportunity to offer gateway courses off the main campus, making them attractive to students who live in the southern portion of the university’s catchment area.

### Cost/Student credit hour

The following is an estimate of program cost for the 18/19 academic year. This estimate attempts to combine labor and operating costs from all sources into a single number for easy comparison, but in some cases this is hampered by certain costs being charged to a higher organizational unit that contains the program such as a department or college.

Program Cost 18/19 = \$121,417.61

## **General Studies Requirements Met**

The following courses meet “Attribute 10: Health”:

HLTA 2203 Contemporary & Drug Behavior Issues

HLTA 3315 Healthy Sexuality

PHED 1100 Fitness & Wellness

(Course Outcomes and Assessment information available in Appendix IV and V)

## **Assessment Requirements**

Due to state and university budget cuts during the years that the Community Health program has been in existence, it has not been feasible to become accredited through the National Commission on Health Education Credentialing (NCHEC) or the Council on Education for Public Health. Program faculty strive to meet the expectations for accrediting bodies, especially NCHEC, in hopes that accreditation will be possible in the future.

While not accredited by NCHEC, program faculty designed the courses and assessment materials to meet the Areas of Responsibility used in the NCHEC accreditation process (Areas of Responsibility are explained in Appendix VI). Using TaskStream to establish and assess both program and course student learning outcomes has worked well. The information is being used effectively by the program faculty to track progress and revise the program to better serve the students and community. See attached program curriculum map, goals, and assessments in Appendix VII and VIII, and IX.

## **Adjunct use**

Over the past five years, two to three adjunct instructors teach program courses each semester. These individuals bring unique skills to the classroom through their full-time employment in the health promotion field. They are assigned courses that showcase their work experience. For example, the Epidemiology & Biostatistics course was taught by a state epidemiologist until his retirement in 2018. The Environmental Health course continues to be taught by an adjunct instructor with state-level expertise in environmental health issues. A new adjunct began Fall 2019. This individual has a master’s in public health, with an emphasis in epidemiology.

## **Graduation/Retention Rates**

Graduation rates remain high relative to overall major counts, which suggests the program is quite efficient. While the program’s model schedule includes major courses distributed across all four years, an accelerated schedule is usually required because students enter the program in their sophomore or junior years. The program faculty strive to meet the original graduation term whenever possible, but this can be difficult/impossible if students enter the program during their junior year. Adjustments to help students meet their original graduation date include accommodating students who must take two courses that meet at the same time and allowing students to take courses together when one of the courses would usually be a pre-requisite. (Such accommodations are dependent on the student’s prior academic performance.)

Regarding retention, multiple factors complicate easy interpretation of this metric. First, undeclared students who reach the 60-credit hour threshold are required to declare a major. Some declare Community Health as their major while having no intention to complete the program (or take any of the courses). When these students are identified, faculty advisors discuss more appropriate majors and encourage the students to consider the most appropriate degree program for their long-term career goals.

Second, outside forces, such as financial aid changes, influence whether/how quickly students complete their degree. In 2017, the federal financial aid requirements changed. This resulted in several Community Health students not receiving aid and subsequently dropped out of the university. Despite attempts to assist these students, they decided not to return.

Third, life events greatly influence how long it takes a student to complete their degree. Students are encouraged to meet with faculty and discuss any life events that impact their participation in class and/or completion of assignments/courses. Accommodations are made whenever possible. Examples experiences by students in the program include: unexpected deaths in the family, catastrophic illnesses, severe financial hardships, etc.

These and similar challenges are faced by students across campus. Part of what attracts students to Fairmont State is the support offered by faculty and staff. Students know the university cannot solve their problems but having the supportive networks helps retain many students and for those who have a break in attendance, they know the their support networks are here waiting when they can return.

## **Previous Program Review Results**

The 2016 review was approved with “continuation of the program at current level of activity”. No deficiencies were identified.

## **Other Relevant Information**

The following letters were originally written as part of Dr. Leary’s tenure application (Academic Year 2018-2019). They are included with this program review to demonstrate the commitment of the program faculty to the success of students, especially students seeking their academic home.

## Leary, Janie

---

**From:** Lavorata, Christina  
**Sent:** Wednesday, November 08, 2017 8:26 AM  
**To:** Crislip-Tacy, Carolyn; Leary, Janie  
**Subject:** Brice Johnson

Dear Carolyn and Janie,

I met with Brice on Tuesday to sign his credit load form. What a fine young man! He is mature and polite, and we had good conversation about how he has found himself at FSU and how he will manage the workload.

I wanted to pass along my admiration to both of you, as he credits you both with his finally found success and satisfaction.

*Chris*

Christina Lavorata, Ed.D.  
Provost and Vice-President, Academic Affairs  
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FSU Faculty Development Committee  
1201 Locust Avenue  
Fairmont, WV 26554

To Whom It May Concern:

I am a graduate of the Community Health Education program at Fairmont State University, where I had the opportunity to work under the direction of Dr. Janie Leary. Like many students pursuing a Bachelor's Degree, I was somewhat undecided about my future when I first started at Fairmont State. Janie was the first to let me know that I had been accepted to the Community Health Education program, and her support led me to pursue a Master's Degree in Epidemiology at West Virginia University's School of Public Health.

Dr. Leary was not only my advisor throughout my time at FSU; she became a mentor and was part of a wonderful support system through the successful times, and especially the stressful times that every student inevitably endures. After my time at FSU was over, Dr. Leary and I have kept in touch and she still gives me her honest opinion and advice when I ask for it. She truly takes time to consider each and every student as individuals, not just a face with a name.

I strongly recommend Dr. Janie Leary for tenure. She is always willing to unselfishly share her expertise with students. It is my belief that Janie will continue to be a valuable asset to the Community Health Education program, and an integral part of Fairmont State University.

Sincerely,



Elena Marie Wojcik, CHES  
WVU School of Public Health MPH Candidate  
(304) 282-1388  
elena.wojcik@hsc.wvu.edu



The following is evidence of The Community Health program's commitment to health promotion in the community.

## **FSU Students Implement Needs Assessment Project in Richwood**

**Monday, October 10, 2016**

Community Health Education students at Fairmont State University will spend the 2016-2017 academic year identifying health and safety needs in Richwood, W.Va., one of the communities affected by the historic flooding in June 2016.

"When we heard about the flooding in Nicholas County this summer, we felt strongly we wanted to do something to help," said Dr. Amy Sidwell, Assistant Professor of Health Education and Physical Education in the FSU School of Education, Health and Human Performance.

The project titled "A transdisciplinary approach to community needs assessment following a natural disaster" is a research-based project initiated by students to determine Richwood's ongoing recovery needs. Students are collecting data from a number of sources. They are analyzing government data, developing an electronic survey and completing interviews with residents and key stakeholders.

"For our future health educators, being able to assess needs and resources are critical skills. This project allows students the opportunity to work within the community to address real issues," said Dr. Janie Leary, Assistant Professor of Community Health Education.

Students are participating in service activities with Rebuild Richwood on Oct. 13, Dec. 1, and in April 2017. This fall, students will be involved in winterizing homes and collecting donations. In December, students will share the findings of their data collection at a community forum. In April, students will visit Richwood to help implement a health promotion program.

Students enrolled in the course include: Ahmed Alsheri, Brianna Blake, Sabrina Buhagiar, Chelsie Dunn, Spencer Flanagan, Madeline Hamilton, Gerlie Jenkins, Claire Shook, Candice Travis, Amber Trickett and Richwood native Tesla White.

"It's always very sad to hear of disasters such as this, but one never thinks that it will happen to them or to people they love and care about. This flood was very devastating to my hometown. But to see all of the support and love that was shown from people everywhere, it really restores your faith in humanity, White said.

(FALL 2019 PRESS RELEASE)



FAIRMONT STATE  
UNIVERSITY

NEWS

*For Immediate Release*

**Students to conduct Community Needs Assessment for the city of Clarksburg**

Fairmont State University's Community Health program faculty and students are conducting a community needs assessment for the City of Clarksburg. They will be collecting information from people who live, work, volunteer, or go to school in the City of Clarksburg.

The students participating are in two classes, the first works to conduct health and safety needs assessments for local communities, this year being Clarksburg. The second class then develops health promotional materials to address the health and safety issues identified through the assessment.

"This project takes students out of the classroom and into the communities where they will ultimately live and work," Dr. Janie Leary, associate professor for the Community Health program, said. "Students gain experience while providing services to the community."

Annette Wright, Clarksburg City Clerk, said the city will be able to gain insight from the assessment and utilize it to better help their citizens.

"We are excited that this needs assessment is taking place and we look forward to the results," she said.

Those who choose to participate in the survey will answer questions about topics such as harm reduction and need exchange programs, food insecurity, homelessness, family financial needs, and more. The survey can be found at <http://j.mp/2m643jq>.

The Bachelor of Science degree in Community Health provides students with the knowledge and skills to work in community-based programs. The focus of the degree is to prepare graduates to assess needs, plan and implement programs, conduct research, communicate health information, and serve as a resource person. Courses are designed with hands-on learning in mind.

"Students participate in projects where they are meeting a community's health needs. They are guided through the process of collecting needs assessment data, analyzing it, and identifying the important issues," Leary said. "Communities benefit because they learn more about what the community needs are without having to secure funds for the project."

Working with real communities as students provides them with a better skill set once they graduate, Leary said. Program graduates work to promote positive health behaviors and prevent disease by educating communities and individuals.

If there are any questions or someone would like a paper version of the survey, please contact Dr. Janie Leary at (304) 333-3630 or [jleary2@fairmontstate.edu](mailto:jleary2@fairmontstate.edu).

###



## ADEQUACY (§ 4.2.4.2)

### Current Program Requirements (Academic Year 2019-2020)

General Studies	48-49 hrs	1. - Critical Analysis	Any
		2. - Quantitative Literacy	MATH 1407 or higher
		3. - Written Communication	ENGL 1101
		4. - Teamwork	Any
		5. - Information Literacy	ENGL 1102
		6. - Technology Literacy	Any
		7. - Oral Communication	COMM 2200, 2201, or 2202
		8. – Citizenship	Any
		9. - Ethics	Any
		10. - Health and Well-being	PHED 1100
		11. - Interdisciplinary & Lifelong Learning	Any
		12. - Fine Arts	Any
		13. - Humanities	Any
		14. - Social Sciences	SOCY 1110 or PSYC 1101
		15. - Natural Sciences	Any
		16. - Cultural Awareness & Human Dignity	Any
Major	61 hrs	<p>HLTA 1110 Nutrition                      HLTA 1150 Introduction to Health Education                      HLTA 2202 Environmental Health                      HLTA 2203 Contemporary &amp; Drug Behavior Issues                      HLTA 2210 Disease Etiology                      HLTA 3315 Healthy Sexuality                      HLTA 3320 Behavior Change Theory                      HLTA 3330 Introduction to Epidemiology &amp; Biostatistics                      HLTA 3345 Community Needs Assessment                      HLTA 3350 Health Promotion &amp; Program Planning                      HLTA 3360 Communication Techniques for Health Promotion                      HLTA 3390 Certified Health Education Specialist (CHES) Preparation                      HLTA 4410 Seminar in Public Health Education                      HLTA . 4440 Health Research &amp; Measurement Design                      HLTA . 4445 Health Research Implementation                      HLTA . 4446 Funding &amp; Administration of Health Promotion Programs                      HLTA 4451 Field Practicum in Community Health                      HLTA . 4452 Field Practicum in Community Health Portfolio</p> <p>Students are required to complete an Area of Emphasis (described below) or earn a minor. Fall 2019, curriculum proposal is under consideration that would allow an associate degree to meet this requirement.</p> <p style="padding-left: 40px;">Areas of Emphasis- Complete one area:                      Nutrition (requires HLTA 1110 as PR)                      9 credit hours from any of the following:                      HLTA 1120, HLTA 1145, HLTA 1155, HLTA 2215, HLTA 2220, HLTA 2250                      Psychology (will require PSCY 1101 as PR)                      9 credit hours of Psychology courses at the 3000 and/or 4000 level</p>	

		<p>(PSYC/SOCY 2240-Behavioral Statistics may count for 3 of the 9 credits)</p> <p>Exercise Science (requires PHED 2211 as PR)</p> <p>PHED 3312 Physiology of Exercise</p> <p>PHED 3316 Fitness Assessment</p> <p>PHED 3317 Clinical Apps in Exercise Physiology</p> <p>Sociology (will require SOCY 1110 as PR)</p> <p>9 credit hours of Sociology courses at the 3000 and/or 4000 level</p> <p>(PSYC/SOCY 2240-Behavioral Statistics may count for 3 of the 9 credits)</p>
Electives	9+ hrs	
TOTAL	120 hrs	

Programs not meeting the above requirements must request a continuation of their exception with a justification below:

Students who take General Studies courses that count in multiple areas can complete the General Studies requirements in as few as 34 credit hours. This allows students to take additional courses to earn a minor or double major. Some of the General Studies courses can also meet the PSYC or SOCY requirements for the Area of Emphasis.

**Program Requirements that will begin Fall 2020 (please note that this table uses the updated prefix and course numbers. The full curriculum proposal is available upon request).**

General Studies	48-49 hrs	1. - Critical Analysis	Any
		2. - Quantitative Literacy	MATH 1407 or higher
		3. - Written Communication	ENGL 1101
		4. - Teamwork	Any
		5. - Information Literacy	ENGL 1102 or ENGL 1103
		6. - Technology Literacy	Any
		7. - Oral Communication	COMM 2200, 2201, or 2202
		8. – Citizenship	Any
		9. - Ethics	Any
		10. - Health and Well-being	PHED 1100
		11. - Interdisciplinary & Lifelong Learning	Any
		12. - Fine Arts	Any
		13. - Humanities	Any
		14. - Social Sciences	SOCY 1110 or PSYC 1101
		15. - Natural Sciences	Any
		16. - Cultural Awareness & Human Dignity	Any
Major	52-54 hrs	CHEP 1100 OR CHEP 1150 PHED 1100 NUTR 1110 CHEP 2202 OR HLTA 2202 CHEP 3000 or HCMG 2231 CHEP 3320 POLI/PSYC/SOCY 2240 OR BSBA 3310 OR MATH 1550 CHEP 3345 CHEP 3350 CHEP 3360 CHEP 4410 CHED 4440 OR PSYC 3305 OR SOCY 3360 OR 3370 CHED 4445 OR PSYC 3390 OR SOCY 4480 CHEP 4450 CHEP 4480 CHEP 4490  Students must complete courses on at least TWO of the topics below: Addiction: CHEP 2200 OR HLTA 2203 OR PSYC 3395 OR CRIM 3365 Sexuality & Relationships: CHEP 3315 OR HLTA 3315 OR SOCY ____ (number TBD) Health Promotion & Special Populations: CHEP 4000 or CHEP 4001 or PSYC 4491	
Electives	varies	Students are required to complete a minor, double major, or have an associate degree. Required elective hours is dependent on the route chosen by students	
TOTAL	120 hrs		

# Faculty Summary Data

## Full-time Program Faculty

- One faculty member resigned Spring/Summer 2019.
- One full-time tenured, associate-level faculty member
  - This faculty member has taught Community Health Program courses since Fall 2013. She also has experience teaching community-based, continuing education and graduate-level courses.
  - This faculty member has a doctoral degree and master's degree in Public Health, as well as an undergraduate degree in Social Work.
  - Highlighted certifications and trainings:
    - Certified Health Education Specialist
    - Independent Applying the QM Rubric (APPQMR)
    - Mental Health First Aid USA training
    - WV Ctr for Children's Justice: Trauma & Children Handle with Care Training
    - WV-DHHR: Bureau for Behavioral Health & Health Facilities: Becoming an Ally
    - Court Appointed Special Advocate (CASA) program
  - Since 2013, this faculty member has authored or co-authored seven peer-reviewed articles and participated in five conference presentations.
  - In 2017, this faculty member was a corecipient of the Foundation Fellows Award.
  - This faculty member has mentored students who have subsequently published or presented their undergraduate research at university- and state-level events.
  - This faculty member has been nominated for the following university awards:
    - 2019 William A. Boram Award for Teaching Excellence.
    - 2019 Faculty Recognition
    - 2016 Excellence in Academic Advising
  - Major courses taught by this faculty member (between Fall 2013 & 2019):

▪ HLTA 1100	▪ HLTA 3345	▪ HLTA 4445
▪ HLTA 1150	▪ HLTA 3350	▪ HLTA 4446
▪ HLTA 2210	▪ HLTA 3360	▪ HLTA 4451
▪ HLTA 3320	▪ HLTA 3390	▪ HLTA 4452
▪ HLTA 3330	▪ HLTA 4440	

## Adjunct Faculty

- One adjunct instructor retired Spring 2018
- One adjunct instructor was hired, beginning Fall 2019
  - She is a Community Health graduate who graduated with a master's degree in Public Health, Spring 2019
  - She works in infectious disease tracking/research
- One adjunct instructor has been teaching in the program since it began Fall 2013
  - He holds a master's degree in Community Health Education
  - He is an administrator at a county health department
- Courses currently taught by the adjunct instructors:
  - HLTA 2202
  - HLTA 4410
- Courses previously taught by adjunct instructors:
  - HLTA 3330, HLTA 4450 (precursor to 4451 and 4452)

## Accreditation/National Standards

The Community Health program is not accredited but aligns all course and program outcomes with the NCHEC: Health Education Specialist Certification Areas of Responsibilities. This alignment began Fall 2013 and continues to guide the program. The seven areas of responsibility include:

- Area I: Assess Needs, Resources and Capacity for Health Education/Promotion
- Area II: Plan Health Education/Promotion
- Area III: Implement Health Education/Promotion
- Area IV: Conduct Evaluation and Research Related to Health Education/Promotion
- Area V: Administer and Manage Health Education/Promotion
- Area VI: Serve as a Health Education/Promotion Resource Person
- Area VII: Communicate, Promote, and Advocate for Health, Health Education/Promotion, and the Profession

The Curriculum Map for the program is available in Appendix VI. Careful attention is given to ensure students demonstrate appropriate levels of mastery for all areas of responsibility. For example, assessing health needs in a community is a critical skill for graduates of the program. Students receive multiple opportunities to practice this skill by scaffolding the content throughout the program. Students begin basic assessment in the program's gateway courses. The sophomore and junior level courses allow students to further practice the skills. By the time students are taking senior level courses, they are expected to demonstrate mastery of the skills. Examples of assessments for each level include:

- HLTA 1150: Review data and identify areas for health promotion. (Introductory)
- HLTA 3345: Conduct a community-based needs assessment. (Reinforcing)
- HLTA 4446: Write a grant proposal addressing a community health need. (Mastery)

## **NECESSITY (§ 4.1.3.3)**

### Placement and success of graduates

#### **Placement**

A Program Review survey was conducted Summer 2019. Of the 27 graduates, 19 responded (70.4% response rate). Respondents represent graduates from the first graduating class (Spring 2015) through the most recent graduating class, Spring 2019.

Community Health graduates enter the workforce with a skillset that qualifies them for any number of careers. The variety of job titles provided by graduates completing the 2019 Program Review Survey underscores the robustness of the skills of the graduates:

- Youth Health Educator
- Partnerships for Success Coordinator
- Adult Intervention Specialist, Suicide Prevention focus
- Self- Employed
- Audit Senior Consultant
- Personnel Supervisor
- Sanitation
- Cardiac Surgery Patient Navigator
- Fitness and Wellness Coordinator
- Nicholas County Child Nutrition Director & Wellness Coordinator
- Registered Medical Assistant
- Personal Assistant
- Threat Intake Examiner
- Child Protective Services Worker
- Treatment Coordinator

Graduates were asked “Do you feel you are currently employed in a position that uses your undergraduate degree from Fairmont State?”, which had a response scale of 0-Not at all to 100-Definitely. The mean score was 71.4. Two graduates reported that they were not using their degree (score of 0). One was working in the banking industry- she has since moved into the insurance industry (after she had submitted her survey responses). The other is working part-time jobs while enrolled in an accelerated nursing degree program (accelerated nursing degree programs normally require that students to already possess a 4-year degree)- while her current job is not in a health field, she is plans to enter the field after completing her current degree program. Six graduates reported a score of 99 or 100, indicating that they are employed in a position using their degree. When asked to explain their answer, responses included the following:

- Below are just a few of the many skills I use daily in my job:
  1. understanding behavior change
  2. implementation of programming
  3. finding your target audience
  4. being able to conform a program or curriculum to meet the needs of an audience
  5. knowing what types of career paths are available in this field
  6. being able to create health promotion materials.
- There is a skill set from each and every class of the Community Health program that I use on a daily basis. I use theories and models to assess individual behaviors and community readiness, needs assessment skills, program planning and implementation skills, research skills-creating surveys, deploying surveys, analysis of data, and reporting-, health promotion,

cultural competency, stakeholder interview skills, dissemination of information, advocacy, and the knowledge from the Drugs and Behavior course that helps me understand illegal substances and the affects they have on individuals and society. I am positive that there are more skills that I use in my position, but they are now a way of life for me and I apply them as needed.

- Many but research design, cultural competency, and needs assessment are what helped me in this position.
- The Community Health program covered social issues and as a social worker, I learned how to better understand the needs of individuals as well as the many variables of the underlying causes that would result in the need for social work.
- I have gotten to teach other people about basic biostatistics that I learned at FSU, I've gotten to see real-life community/public health initiatives being put into action (my job is to get HCV+ individuals into treatment, which prevents the continued spread of HCV). I've gotten to write my own IRB at WVU for my own research, which I also did at FSU, with the help of Dr. Leary. Having done an IRB at FSU helped me to write (and understand) my own and the importance of them.
- Data collection and entry. Health literacy. Health education. Research methods.
- My entire job is need analysis, research, and program planning. These are essential tasks I could not have learned anywhere else but the Community Health program at Fairmont State.

Graduates were also asked, "How would you assess the future employment prospects of the Community Health Education program?", with 0 indicating no prospects and 100 indicating many prospects. The mean score was 83.4. Graduates went on to explain their answers:

- There are many opportunities for graduates of the Community Health Education program. Although those exact words may not be used in a job posting, the concept of what a Community Health graduate can do lies in many different positions. The government and other entities are seeing results from education and prevention programs, therefore making job opportunities more attainable.
- With more people looking for ways (other than medication) to be healthy there is more of a need for health education and promotion.
- The curriculum covered in the program addresses the current issues we have in the state. Issues that need to be addressed and alleviated. Students learn to research these issues and are familiar with tools to use to gather pertinent data that may help in improvements. Surely, positions that try to make communities better would be in abundance, especially in the state our communities are in now with the overwhelming substance abuse and poverty.
- I think it's a great field to get into it with a lot of great opportunities, however, I think where you live and how much you are looking to make really makes a difference.
- In Florida, there is a huge population for community health outreach. Bus stops- here they travel to bus stops and give vaccines and other care to those in need.
- Alone is DC there are a ton of community base organizations that are always looking to hire research specialist especially in the sexual health field.
- This nation is discovering how unhealthy it is. Health education is slowly becoming a priority which makes our degree essential.
- As I have learned not only in the Community Health program but also in graduate school, primary prevention is taking a larger role in our healthcare system. Health educators are especially needed to help residents and communities learn better, healthier ways of living.
- I think there are definitely more opportunities and there will continue to be more. Public and community health are growing as medical professionals are realizing that it is key to preventative medicine.
- I know our company is moving towards community health education with the establishment of our HealthHubs, centering in a lot of communities.

## Similar Programs in WV

Fairmont State's Community Health Education program (120 credit hours) began Fall 2013, replacing the old Health Science degree program. Community Health's coursework was designed to meet health education and health promotion needs of 21<sup>st</sup> Century communities. The program includes a 120-hour, community-based internship.

In 2015, WVU began offering an undergraduate degree in Public Health (120 credit hours).

West Virginia State University offers an undergraduate degree in Health Sciences with a community health emphasis (120 credit hours).

### Student Characteristics across programs

(HEPC Data Portal: <http://www.wvhepc.edu/resources/data-and-publication-center/>)

	Fairmont State	WVU	WV State
Degree Name	Community Health Education	Public Health, General	Health Sciences, Community Health emphasis
Undergraduate Enrollment	3,942	26,907	4,033
WV Residents	88.4%	48.0%	92.6%
Full-time	81.6%	88.6%	42.3%
Program enrollment estimates for 2018	15	11	26 (count includes all emphasis areas of the program)

The WVU program is guided by the Council on Education for Public Health Competencies. WVSU's and Fairmont State's programs are guided by the National Health Education Specialist Certification Areas of Responsibility. While graduates from all three programs may find themselves in similar careers, the US Bureau of Labor Statics predicts a 16% growth in the field through 2026, necessitating multiple programs to meet the expected growth in the field.

Fairmont State's program requires that students work within communities as part of their coursework. This provides real-world experience while also helping communities identify and meet health-related needs that may go unaddressed otherwise. Fairmont State's program also allows students to earn their degree while taking classes that are small and have extensive instructor-student interactions. Further, non-traditional students and students who are working benefit from the flexibility offered by the program and professors. This is something that has been appreciated by many program graduates. Below are Summer 2019 graduate survey responses to the question, "What do you consider the strengths of the Community Health program?":

- "Class sizes are smaller and offer more individual attention."
- "The bonding and community you receive from the instructors as well as the students."
- "Small classes, personal, dedicated instructors."
- "The program had/has great professors that truly care about their students."
- "Flexible schedules. Understand[ing] professors that want to see you do well."



## CONSISTENCY WITH MISSION (§ 4.1.3.4)

Fairmont State's mission includes a commitment to preparing global leaders and student success. The Community Health program strives to produce graduates who demonstrate a skillset beneficial in health promotion and skills that are transferrable to any field a graduate may decide to enter. Graduates are reaching communities across the state, nation, and globe. They are advancing through their organizations and completing graduate school.

All Community Health students must successfully complete a 120-hour internship. The Community Health course-based service projects and internship are consistent with the university's philosophy of giving back to the community.

A course-based service project example is the community-based needs assessment and program development conducted each year- cities that have benefited from this project include Fairmont, Richwood, and most recently, Clarksburg. Internships require that students assess the health-related needs of the organization and develop programs/materials to meet that need. Examples include representing the agency at meetings, designing training materials, leading health promotion courses, reviewing grant proposals, conducting evaluation, etc. Internship sites have included:

- Local health departments
- Non-profits and social service agencies
- Medical facilities
- Mental health facilities
- Extension services
- State agencies

During the Summer 2019 Program Review Survey, internship site supervisors and employers were asked about their perceptions of the program and the preparations of their interns/employees. Ten (n=10) internship site supervisors and six (n=6) employers responded to the survey questions. One internship supervisor responded but did not answer any questions- she stated that her notes on the interns were at her old place of employment (where the students interned) but that she would welcome more interns from the Community Health program at her new organization.

Both groups were asked, "If you had openings, how likely are you to hire a Community Health Education graduate in the future?". Answer options ranged from 0 to 100 with 100 being "very likely". The mean score was 82.6.

Both groups were provided a list of skills and attributes that are important in the work world. They were asked to indicate how strongly they agree that their intern(s)/employee(s) demonstrated those skills/attributes (answer options ranked from 1, strongly disagree to 5, strongly agree). The mean scores ranged from 4.53 to 5.0 on all skills/attributes, examples include:

- Oral/written communication
- Assessing needs in the community
- Leading programs in the community
- Problem solving and critical thinking skills
- Working knowledge of health topics
- Demonstrates sincere interest, respect, and compassion for others

Internship site supervisors were asked, "What did you most like (or dislike) about having a Community Health Education intern?" and responses included:

- She did great with planning the fair and worked very independently but kept me in the loop about activities and concerns. (this intern organized a health fair)
- She lives in the community so had a real grasp on the problems faced by our community.
- I enjoyed a fresh perspective and creative ideas for engaging youth in the community setting.
- This intern assisted with tasks that we needed help in completing. Having someone here with a community health background was very beneficial.
- Our intern, [student name] was so driven and knowledgeable. She took great initiative and developed ideas for an excellent resource guide for our clients and their caregivers. She asked questions to gain insight and then took that information and was very effective. She had excellent time management skills and I was always impressed with how she utilized the time she had and the output of work in the amount of time she was there.
- I like that those in the Community Health program come to us with a more well-rounded overall versed view of the health field and industry compared to exercise science interns we get that can sometimes tend to be more one track minded at times.

Internship site supervisors were also answered, "Please provide any comments or suggestions that would help us better prepare future Community Health Education graduates to meet the needs of your organization and community." With the following responses:

- I think the fair is growing and we are adding more community agencies each year! It's great!
- I believe continuing to educate and provide them with the experiences that you are currently providing them will give them the best opportunities and continue to make them successful for future careers. We chose to hire a Community Health graduate for a Fitness and Wellness Coordinator position and have been more than pleased with that decision. We have high hopes of being able to utilize the Community Health department to help place interns in future programming ideas in the upcoming year.
- I feel it is important that they know the community they are working in even if it means a couple of days of just exploring and talking with people in the community.
- Place more interns here at the WV Bureau of Public Health. We can also better plan for opportunities to present orally for audiences and develop products we need for pilot test, etc.
- Our intern was probably the most well-rounded intern we have had that not only had subject knowledge, but also had the other skills we seek without having to train beyond the basic program information. Very impressed and would encourage the program to keep doing what they're doing.

**PROGRAM REVIEW**

**Appendixes**

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## APPENDIX I: STUDENT ENROLLMENT

Community Health 4 Year Graduation Numbers		
Enrollment Parameter	Time period	Graduates
Student began in	Fall 2011	2*
Student graduated by	Spring 2015	
Student began in	Fall 2012	1*; 1
Student graduated by	Spring 2016	
Student began in	Fall 2013	2
Student graduated by	Spring 2017	
Student began in	Fall 2014	0
Student graduated by	Spring 2018	
Student began in	Fall 2015	0
Student graduated by	Spring 2019	

**About this measure:** Number of students who graduate with a Community Health major within four academic years of enrollment as a first-time freshman. Students who graduate in a summer term are included in the graduation numbers for the following Fall and Spring terms. Note that this measure does not mean that the student began enrollment as a Community Health major, but only that the student graduated with a Community Health major.

\*Health Science major; the Community Health major was not available until 2015.

Community Health 6-Year Graduation Numbers		
Enrollment Parameter	Time period	Graduates
Student began in	Fall 2009	5*
Student graduated by	Spring 2015	
Student began in	Fall 2010	3*; 1
Student graduated by	Spring 2016	
Student began in	Fall 2011	4*; 1
Student graduated by	Spring 2017	
Student began in	Fall 2012	2*; 4
Student graduated by	Spring 2018	
Student began in	Fall 2013	4
Student graduated by	Spring 2019	

**About this measure:** Number of students who graduate with a Community Health major within six academic years of enrollment as a first-time freshman. Students who graduate in a summer term are included in the graduation numbers for the following Fall and Spring terms. Note that this measure does not mean that the student began enrollment as a Community Health major, but only that the student graduated with a Community Health major.

\*Health Science major; the Community Health major was not available until 2015.

<b>Community Health Education Graduates per Term</b>	
<b>Community Health Education</b>	<b>Graduates</b>
Fall 2014	0
Spring 2015	2
Summer 2015	0
Fall 2015	1
Spring 2016	5
Summer 2016	0
Fall 2016	3
Spring 2017	5
Summer 2017	0
Fall 2017	2
Spring 2018	3
Summer 2018	0
Fall 2018	3
Spring 2019	3
<b>Total</b>	<b>27</b>
<b>Average per academic year</b>	<b>5.4</b>

About this measure: Number of students who graduate with a Community Health major per term. Students who graduate in a summer term are included in the graduation numbers for the following Fall and Spring terms. Note that this measure does not mean that the student began enrollment as a Community Health major, but only that the student graduated with a Community Health major. The average per term is calculated by summing the Summer, Fall, and Spring semesters and then dividing by 5.

<b>Community Health Education Enrollment 2014-2019</b>	
<b>Major Degree Program</b>	<b>Enrollment</b>
Fall 2014	18
Spring 2015	21
Summer 2015	11
Fall 2015	33
Spring 2016	27
Summer 2016	14
Fall 2016	22
Spring 2017	21
Summer 2017	5
Fall 2017	15
Spring 2018	16
Summer 2018	5
Fall 2018	15
Spring 2019	13
Summer 2019	3

**About this measure:** A student is considered enrolled in a major degree program if the student is registered at Fairmont State as an undergraduate student, enrolled in at least one credit-bearing course during a given term, and classified as majoring in Community Health Education. These numbers are not cohort-based, and merely reflect the number of major degree-seeking students enrolled per degree program per term.

## APPENDIX II: STUDENT SUCCESS RATE

Overall Student Success: Community Health Service Courses						
Term	As awarded	Bs Awarded	Cs Awarded	Ds Awarded	Fs Awarded	Number of Withdrawals
Fall 2014	196	122	77	29	32	24
Fall 2015	241	162	79	18	30	21
Fall 2016	210	117	72	32	38	24
Fall 2017	217	125	57	22	29	27
Fall 2018	311	124	53	17	38	26
Spring 2015	154	87	31	9	21	13
Spring 2016	190	94	47	15	17	14
Spring 2017	178	71	29	14	24	14
Spring 2018	202	67	35	10	14	6
Spring 2019	324	116	29	16	11	14

About this measure: This table provides the total number of grades awarded per grade for Fairmont State University students per term across all service courses identified by the Community Health Education program. This measure includes all courses taught regardless of course type.

Overall Student Success: Community Health Education						
Term	As awarded	Bs Awarded	Cs Awarded	Ds Awarded	Fs Awarded	Number of Withdrawals
Fall 2014	207	125	77	30	34	25
Fall 2015	278	174	83	21	31	23
Fall 2016	272	128	78	32	42	24
Fall 2017	244	134	58	24	30	28
Fall 2018	358	138	55	18	40	30
Spring 2015	175	96	36	12	24	14
Spring 2016	223	111	54	17	18	18
Spring 2017	224	93	34	16	30	15
Spring 2018	238	78	43	12	17	7
Spring 2019	360	123	30	17	12	15

About this measure: This table provides the total number of grades awarded per grade for Fairmont State University students per term across all courses under the umbrella of the Community Health program. This measure includes all courses taught regardless of course type.

## APPENDIX III: OFF CAMPUS COURSES

Student Course Enrollment by Course Location			
Term	Caperton	Fairmont	Online
Fall 2014		432	67
Fall 2015		510	100
Fall 2016	19	457	101
Fall 2017	10	392	116
Fall 2018		421	218
Spring 2015		282	77
Spring 2016		353	88
Spring 2017		334	79
Spring 2018		317	78
Spring 2019		328	231

**About this measure:** This table provides the number of students in a Community Health Education course relative to the type of course in which the student enrolled. In order to be included in this table, the student had to receive a final grade or withdraw from the course during the given term of enrollment.

## APPENDIX IV: COURSES OUTCOMES

### HLTA 1150

Course Outcome	Direct Assessment Measure	Satisfactory Performance Standards
Participate in Data Collection and Analysis	Data Analysis Project Direct - Student Artifact	70% of students will complete the Log Report & score 70% or higher
Investigate the job market for Health Education professionals Identify how and where trained health professionals could contribute.	Health Professional Interview Paper Direct - Student Artifact	70% of the students will score 75% or higher on the assignment
Demonstrate health-related content knowledge	Content Exam Direct - Exam	70% of students will earn a 70% or higher on the exam(s)
Investigate health topics and societal influences	Content Exam Direct - Exam	70% of students will earn a 70% or higher on the exam(s)

### HLTA 2202

Course Outcome	Direct Assessment Measure	Satisfactory Performance Standards
Demonstrate knowledge of environmental health and safety	Direct - Exam	70% of students will score 70% or better on Exam.
Describe the philosophy, organization, and function of federal, state, and/or local public health agencies	Direct – Student Artifact	70% of students will score 70% or better on the assignment.
Investigate an assigned environmental health risk.	Direct – Student Artifact	70% of students will score 70% or better on this assignment.

### HLTA 2203

Course Outcome	Direct Assessment Measure	Satisfactory Performance Standards
Demonstrate knowledge of drug abuse and addiction.	Midterm & Final Exam Direct - Exam	The class average on both exams (combined) will be at least 70%.
Evaluate and assess needs to determine priorities for drug prevention.	Needs Assessment Paper Direct-Student Artifact	Students' average scores will be 2.0-2.4.
Identify behaviors and skills regarding drug use that impact psychological health and well-being	Book Review Direct - Student Artifact	Average scores on all assignments will be 28/40 (70%).



**HLTA 2210**

Course Outcome	Direct Assessment Measure	Satisfactory Performance Standards
Describe disease etiology and prevention practices	Content Exams Direct - Exam	70% of students would average 70% or higher on the content exams.
Identify and analyze factors that influence health behaviors	Disease Risk Assessment Direct - Student Artifact	70% of students will score 70% or better
Engage in professional growth and leadership by reflecting on current research and professional practice regarding disease	Annotated Bibliography Direct - Student Artifact	70% of students will score a 70% or higher
Recall content knowledge in disease etiology	Direct - Exam	70% of students would average 70% or higher

**CHEP 3315 Healthy Sexuality**

Course Outcome	Direct Assessment Measure	Satisfactory Performance Standards
Demonstrate his/her knowledge on Human Sexuality content	Content Exams Direct - Exam	70% of students would average 70% or higher on the content exams.
Articulate opinions based on research and the body of literature in this discipline on a variety of sexually-based topics	Research Paper Direct - Student Artifact	70% of students will score 70% or better
Develop, implement, analyze, and report on health data	Sexuality Research Project Direct - Student Artifact	70% of students will score 70% or better

**HLTA 3320**

Course Outcome	Direct Assessment Measure	Satisfactory Performance Standards
Recognize the difference between explanatory and change theories	Content exam Direct - Exam	70% of students will score 70% or better
Apply foundational theories and models to develop assessment strategies	Personal Health Journal Direct - Student Artifact	70% of students will score 70% or better
Identify gaps in health data using theories and assessment models	Peer Health Assessment Indirect - Interview	70% of students will score 70% or better
Select a planning model for health education	Community Behavior Change Activity Direct - Portfolio	70% of students will score acceptable on NCHEC Competency 2.23
Design theory-based strategies and interventions to achieve stated objectives	Community Behavior Change Activity Direct - Portfolio	70% of students will score acceptable on NCHEC 2.3.2

**HLTA 3330**

Course Outcome	Direct Assessment Measure	Satisfactory Performance Standards
Recall basic principles of epidemiology and biostatistics	Baseline and Final Exam Direct - Exam	50% of students will improve their final exam score by 20 points over their baseline exam.
Recognize epidemiological and biostatistical methodologies	Investigating an outbreak Direct - Other	70% of students will participate in the activity
Create health measurement instruments	Data Collection Tool Direct - Student Artifact	80% of students will participate in this class activity
Investigate a population health surveillance program	Research Paper Direct - Student Artifact	70% of students will score an 70% or higher
Identify concepts related to research design	Research Assignment Designs Direct - Student Artifact	The class mean will be 70% or higher

**HLTA 3345**

Course Outcome	Direct Assessment Measure	Satisfactory Performance Standards
Recall fundamental concepts of needs and capacity assessment.	Exams Direct - Exam	70% of students will score 70% or better on the exams.
Collect primary data and utilize secondary data to assess a community's health needs and capacity.	Primary Collection Activity Indirect - Interview	70% of students will score 70% or better on the Primary Collection Activity.
	Secondary Data Collection Activity Direct - Student Artifact	70% of students will score 70% or better on the Secondary Data Collection Activity.
Employ assessment strategies when working with key stakeholders, individuals, or groups.	Interview Activity Indirect - Interview	70% of students will score 70% or better on the Interview Activity.
Prepare a report of needs and capacity assessment findings, taking into account the audience and health literacy of the readers.	Final Report Direct - Portfolio	75% of students will score in the Meets or Exceeds Expectations category for NCHEC Competency 4.4.
Interpret results of the findings in order to recommend how the findings would be applied in a community setting.		

**HLTA 3350**

Course Outcome	Direct Assessment Measure	Satisfactory Performance Standards
Be able to define health and health promotion	Content exam Direct - Exam	70% of students will score 70% or better on the content exam.
Describe the unique characteristics of each of the following contexts for health promotion efforts.	Essay Direct - Student Artifact	70% of students will score 70% or better on the essay.
Identify important social, organizational, and cultural health promotion considerations	Program Planning Activity Portfolio- Direct - Portfolio	The class' average score on the Context portion of the Portfolio will be 2.0-2.49 or better.
Plan a program in which logistical considerations, participants' responsibilities, and practitioners' roles are identified.	Program Planning Activity Portfolio- Logistics Direct - Portfolio	The class' average score on the Logistics portion of the Portfolio will be 2.0-2.49.

**HLTA 3360**

Course Outcome	Direct Assessment Measure	Satisfactory Performance Standards
Define the following: Health Communication, Multi-faceted approach, Multidisciplinary, and Audience-centered	Content Exams Direct - Exam	70% of students would average 70% or higher
Identify a behavior of interest to be targeted with a health communication technique.	Directed Response Activity Direct - Student Artifact	70% of students will score 70% or higher.
Apply a variety of health communication strategies	Messaging Activity Direct - Student Artifact	70% of students will score 70% or better
Advocate for a healthy behavior identified.	Presentation Direct - Other	70% of students will score 70% or better

**HLTA 3390**

Course Outcome	Direct Assessment Measure	Satisfactory Performance Standards
Apply the NCHEC Core Competencies to meet Community Health needs.	Pre-Post Exam Direct - Exam	The class will average a 25 point increase from the baseline to the final exam.
Apply Health Education Code of Ethics to Community Health Educ.	Ethics reflection Direct - Student Artifact	80% of students will earn an 80% or higher

**HLTA 4410**

Course Outcome	Direct Assessment Measure	Satisfactory Performance Standards
Identify current and emerging health issues and develop an advocacy plan for addressing a public health problem	Advocacy Plan Direct - Portfolio	The class average on the Advocacy Plan will be 70%.
Examine one existing & one proposed health policy & describe how the policies fit within a local, state, regional, territorial, federal, or world-wide public health system	Analysis Paper Direct - Student Artifact	The class average on the Analysis Paper will be 70%.
Create a presentation in which they explain the benefits of participating in professional organizations, advocate for the profession, and describe their own professional development plans toward becoming health educators.	Presentation Direct - Other	The class average will be 70% on the presentation.

**HLTA 4440**

Course Outcome	Direct Assessment Measure	Satisfactory Performance Standards
Demonstrate proficient knowledge of how the scientific method applies to the research.	Demonstrate proficient knowledge of how the scientific method applies to the research Direct - Student Artifact	70% of students will earn a 70 or higher on each assessment
Analyze various types of research Types of Research- Analyze various types of research	Analyze various types of research Direct - Exam	
Research Process and Problems- Demonstrate knowledge of how research problems and processes are performed	Demonstrate knowledge of how research problems & processes are performed Direct - Exam	
Demonstrate Completion of a Research Report - including an introduction, review of literature, and a methods section on a selected topic of interest in the field of community health.	Complete an introduction, review of literature and a methods section Direct - Student Artifact	

**HLTA 4445**

Course Outcome	Direct Assessment Measure	Satisfactory Performance Standards
Collect & analyze data- Students will show the ability to design and implement a data collection plan for their senior research project.	Data collection Direct - Student Artifact	70% of students will earn a 70% or higher
Interpret results of Sr. research projects and make appropriate discussion and conclusions of what results indicate.	Results report Direct - Student Artifact	70% of students will earn a 70% or higher
Perform appropriate statistical test(s)- Based on data collected & research design, perform, analyze, & interpret results of appropriate stats tests		70% of students will earn a 70% or higher

**HLTA 4446**

Course Outcome	Direct Assessment Measure	Satisfactory Performance Standards
Identify funding sources for health promotion programs.	Funding Opportunities Resource Guide Direct - Student Artifact	70% of students will earn a 70% or higher
Develop a proposal for a health promotion topic that is of interest to the student.	Project Proposal Direct - Student Artifact	70% of students will earn a 70% or higher
Students will demonstrate fiscal stewardship through a semester long project managing a fictitious health promotion program budget.	Budget Development Direct - Student Artifact	70% of students will earn a 70% or higher
	Budget Management Direct - Student Artifact	70% of students will earn a 70% or higher
Students will discuss personnel management in the context of health promotion programs.	Personnel Development & Management Direct - Student Artifact	70% of students will earn a 70% or higher

**HLTA 4451/4452**

Course Outcome	Direct Assessment Measure	Satisfactory Performance Standards
Students will work in a community agency assisting with health education/promotion activities.	Internship Forms Direct - Student Artifact	All student interns will submit required materials.
Students will develop resume, cover letter, health philosophy, and other materials necessary for professional advancement.	Professional Portfolio Direct - Portfolio	90% of students will complete the professional portfolio.
Students will interview individuals working in the health education/promotion field and reflect on how the information learned impacts their own career outlook.	Professional Interviews Direct - Student Artifact	80% of student interns will earn an 80% or higher.
Implement Health Education project (Implement a Plan of Action)-Students will identify and offer suggestions to address a community health concern important to the internship agency.	Implement Health Education Direct - Portfolio	90% of student interns will successfully identify and address the identified health concern.
Serve as a Health Education Resource Person-Students will act as a health education resource person for the internship agency.	Health Resource Direct - Portfolio	90% of student interns will successfully develop a resource to support the identified health concern

## **APPENDIX V: DEGREE REQUIREMENTS**

# COMMUNITY HEALTH EDUCATION PROGRAM

## OVERVIEW OF THE PROGRAM:

The Bachelor of Science degree in Community Health provides students with the knowledge and skills to work in community-based programs. The focus of the degree is to prepare graduates to assess needs, plan and implement programs, conduct research, communicate health information, and serve as a resource person. Courses are designed with hands-on learning in mind. Students will participate in projects where they are meeting a community's health needs. This degree program requires a minor OR an area of emphasis outside the major so students may focus on a specific area of interest, such as Exercise Science, Psychology, or Sociology.

Community Health Education is also offered as a 21-credit minor.

## EMPLOYMENT OPPORTUNITIES:

Program graduates work to promote positive health behaviors and prevent disease by educating communities and individuals. Employment opportunities are available in non-profit, government, healthcare, and business sectors. Some graduates also earn for the Certified Health Education Specialist credential from the National Commission on Health Education Credentialing. A number of program graduates have earned this additional certification.

## Job titles for Community Health graduates:

- Youth Health Educator
- Partnerships for Success Coordinator
- Adult Intervention Specialist, Suicide Prevention focus
- Threat Intake Examiner
- Cardiac Surgery Patient Navigator
- Fitness and Wellness Coordinator
- Child Nutrition Director & Wellness Coordinator
- Treatment Coordinator



**FAIRMONT STATE  
UNIVERSITY™**  
College of Liberal Arts



*What I like about Fairmont State University's Community Health program is:*

- *It prepares me to work where I live.*
- *I am ready to work as soon as I graduate.*
- *I can go into any community, assess the situation, and help the community address their situation.*

*- Bobbi Nicole Beam, class of 2019*

## CONTACT INFORMATION

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Email: [jleary2@fairmontstate.edu](mailto:jleary2@fairmontstate.edu)



## B.S. COMMUNITY HEALTH MODEL SCHEDULE

### FRESHMAN FIRST SEMESTER

G.S.1 CRITICAL ANALYSIS-SELECT ANY COURSE WITH THIS ATTRIBUTE.....	3
G.S.2 QUANTITATIVE LITERACY MATH 1407 OR HIGHER.....	3
G.S.3 WRITTEN COMMUNICATION-ENGL 1101.....	3
HLTA 1150 INTRODUCTION TO HEALTH EDUCATION.....	3
EMPHASIS AREA/MINOR COURSE.....	3
	15

### FRESHMAN SECOND SEMESTER

G.S.5 ENGL 1102.....	3
G.S.6 TECH. LITERACY-SELECT ANY COURSE WITHIN THIS ATTRIBUTE.....	3
G.S.14 SOCIAL SCIENCES -PSYC 1101 OR SOCY 1101 RECOMMENDED.....	3
HLTA 2210 DISEASE ETIOLOGY.....	3
HLTA 1110 NUTRITION.....	3
	15

### SOPHOMORE FIRST SEMESTER

G.S.7 ORAL COMMUNICATION-COMM 2200, 2201, or 2202.....	3
G.S.11 INTERDISCIPLINARY-SELECT ANY COURSE WITHIN THIS ATTRIBUTE.....	3
HLTA 2202 ENVIRONMENTAL HEALTH.....	3
HTLA 3320 BEHAVIOR CHANGE THEORY.....	3
HLTA 3345 COMMUNITY NEEDS ASSESSMENT.....	3
	15

### SOPHOMORE SECOND SEMESTER

G.S.4 TEAMWORK-SELECT ANY COURSE WITHIN THIS ATTRIBUTE.....	3
G.S.15 NATURAL SCIENCES-SELECT ANY COURSE WITHIN THIS ATTRIBUTE....	4-5
G.S.12 FINE ARTS-SELECT ANY COURSE WITHIN THIS ATTRIBUTE.....	3
HLTA 2203 CONTEMPORARY & DRUG BEHAVIOR.....	3
HLTA 3350 HEALTH PROMOTION & PROGRAM PLANNING.....	3
	16-17

### JUNIOR FIRST SEMESTER

G.S.9 ETHICS-SELECT ANY COURSE WITHIN THIS ATTRIBUTE.....	3
HLTA 3315 HEALTHY SEXUALITY.....	3
HLTA 3330 INTRO TO EPIDEMIOLOGY & BIOSTATISTICS.....	3
HLTA 4410 SEMINAR IN PUBLIC HEALTH.....	3
EMPHASIS AREA/MINOR COURSE.....	3
	15

### JUNIOR SECOND SEMESTER

G.S.10 PHED 1100 FITNESS & WELLNESS.....	2
G.S.8 CITIZENSHIP-SELECT ANY COURSE WITHIN THIS ATTRIBUTE.....	3
HTLA 3360 COMM. TECHNIQUES FOR HEALTH PROMOTION.....	2
HLTA 3390 CERTIFIED HEALTH ED. SPECIALIST PREP.....	2
EMPHASIS AREA/MINOR COURSE.....	6
	16

### SENIOR FIRST SEMESTER

G.S.13 HUMANITIES-SELECT ANY COURSE WITHIN THIS ATTRIBUTE.....	3
G.S.16 CULTURAL AWARE.-SELECT ANY COURSE WITHIN THIS ATTRIBUTE.....	3
HTLA 4440 HEALTH RESEARCH & MEASUREMENT.....	3
FREE ELECTIVES.....	6
	15

### SENIOR FIRST SEMESTER

HLTA 4445 RESEARCH IMPLEMENTATION.....	3
HLTA 4446 FUNDING & ADMIN. OF HEALTH PROGRAMS.....	3
HLTA 4451 FIELD PRACTICUM IN COMMUNITY.....	3
HLTA 4452 PORTFOLIO.....	1
FREE ELECTIVES.....	2
	12

Students must complete a Minor or an Area of Emphasis as part of the Community Health Education degree. Students choosing to complete a minor should review the undergraduate catalog and speak with an advisor to determine options for a minor. Students choosing to complete an Area of Emphasis must choose one of the areas listed below.

#### Areas of Emphasis

##### Psychology

PSCY 1101: Introduction to Psychology

9 credit hours of Psychology courses at the 3000 and/or 4000 level

PSYC/SOCY 2240 Behavioral Statistics may count for 3 of the 9 hours

##### Sociology

SOCY 1110: Introduction to Sociology

9 credit hours of Sociology courses at the 3000 and/or 4000 level

PSYC/SOCY 2240 Behavioral Statistics may count for 3 of the 9 hours

##### Exercise Science

PHED 2211: Anatomy & Physiology

PHED 3312: Physiology of Exercise

PHED 3316: Fitness Assessment & Exercise Physiology

PHED 3317: Clinical Applications for Exercise Physiology

##### Nutrition

HLTA 1110L Nutrition

9 credit hours of Nutrition courses from the list below:

HLTA 1120: Nutrition in Childhood & Adolescence

HLTA 1145: Sports Nutrition

HLTA 1155: Local Market Agriculture

HLTA 2215: Introduction to Foods

HLTA 2220: Diet Therapy

HLTA 2250: Applications in Community & Medical Nutrition

## MINOR COMMUNITY HEALTH EDUCATION

HLTA 1150 INTRODUCTION TO HEALTH EDUCATION.....	3
HTLA 2210 DISEASE ETIOLOGY.....	3
HLTA 3320 BEHAVIOR CHANGE THEORY.....	3
HLTA 3345 COMMUNITY NEEDS ASSESSMENT.....	3
HLTA 3350 HEALTH PROMOTION & PROGRAM PLANNING.....	3
HLTA 3330 INTRO TO EPIDEMIOLOGY & BIOSTATISTICS.....	3

One course from the list below:

HLTA 2202 ENVIRONMENTAL HEALTH.....	3
HTLA 2203 CONTEMPORARY & DRUG BEHAVIOR ISSUES.....	3
HLTA 3360 COMMUNICATION TECH. FOR HEALTH PROMOTION.....	2
HLTA 3315 HEALTHY SEXUALITY.....	3
HLTA 3390 CERTIFIED HEALTH ED. SPECIALIST PREP.....	2
HLTA 4446 FUNDING & ADMIN. OF HEALTH.....	3

20-21

Note: This model schedule is a suggested course sequence & is meant to be used as a guide. Students should check the Undergraduate Catalog for their entrance year into Fairmont State University (or any subsequent catalog) to learn more about the graduation requirements for their major.

## Compressed Community Health Education course schedule (using Academic Year 2019-2020 course rotation)

The published model schedule provides the ideal spacing of courses across all four years of a student's academic career. Since many students enter the Community Health program after a year or more of college, condensed schedules are often necessary if students are to graduate in a timely manner. Faculty do everything possible to accommodate the compressed scheduling, including working with students who need pre-req or time conflict overrides. These accommodations have always been based on the student's prior academic performance. Some students may have to complete general studies and/or emphasis area courses, but the compressed schedule allows students complete the major courses within two years. This compressed schedule will also benefit students who enter the program with an associate degree.

Fall Enrollment		Spring Enrollment	
<b>1<sup>ST</sup> TERM</b>	<b>12</b>	<b>1<sup>ST</sup> TERM</b>	<b>12</b>
HLTA 1110	3	HLTA 1110	3
HLTA 1150	3	HLTA 1150	3
HLTA 2210	3	HLTA 2210	3
HLTA 2203	3	HLTA 2203	3
<b>2<sup>ND</sup> TERM</b>	<b>10</b>	<b>2<sup>ND</sup> TERM</b>	<b>12</b>
HLTA 3360	2	HLTA 3345	3
HLTA 3315	3	HLTA 4440	3
PHED 1100	2	HLTA 3330	3
HLTA 2202	3	HLTA 3320	3
<b>3<sup>RD</sup> TERM</b>	<b>15</b>	<b>3<sup>RD</sup> TERM</b>	<b>16</b>
HLTA 3345	3	HLTA 3350	3
HLTA 4440	3	HLTA 4445	3
HLTA 3330	3	HLTA 3390	3
HLTA 3320	3	HLTA 4446	3
HLTA 4410	3	HLTA 3360	2
<b>4<sup>TH</sup> TERM</b>	<b>16</b>	<b>4<sup>TH</sup> TERM</b>	<b>15</b>
HLTA 3350	3	HLTA 3315	3
HLTA 4445	3	PHED 1100	2
HLTA 3390	3	HLTA 2202	3
HLTA 4446	3	HLTA 4410	3
HLTA 4451/4452	4	HLTA 4451/4452	4

# APPENDIX VI: PROGRAM OUTCOMES

## Community Health Education Curriculum Map

(Key for the map: I=Introductory, R=Reinforcing, & M=Mastery)

### National Commission for Health Education Credentialing

#### Areas of Responsibility (used for assessment purposes)

1. Assess needs, assets, & capacity for health educ.	Candidates & graduates will: Plan an Assessment Process, Access Existing Information & 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. Plan health education	Candidates & graduates will: Involve Priority Populations & Other Stakeholders in the Planning Process, Develop Goals & Objectives, Select or Design Strategies & Interventions, Develop a Scope & Sequence for the Delivery of Health Education, & Address Factors That Affect Implementation
3. Implement health educ.	Candidates & graduates will: Implement a Plan of Action, Monitor Implementation of Health Education, & Train Individuals Involved in Implementation of Health Education
4. Conduct evaluation & research related to health educ.	Candidates & graduates will: Develop Evaluation/Research Plan, Design Instruments to Collect Data, Collect & Analyze Evaluation/Research Data, Interpret Results of the Evaluation/ Research, & Apply Findings From Evaluation/Research
5. Administer & manage health programs	Candidates & graduates will demonstrate understanding of ways to obtain acceptance & support for programs, & facilitate partnerships in support of health education
6. Serve as a health resource person	Candidates & graduates will: Obtain & Disseminate Health-Related Information.
7. Communicate & advocate for health and health education	Candidates & graduates will: Assess & Prioritize Health Information & Advocacy Needs, Identify & Develop a Variety of Communication Strategies, Methods, & Techniques, Deliver Messages Using a Variety of Strategies, Methods & Techniques, Engage in Health Education Advocacy, Influence Policy to Promote Health, & Promote the Health Education Profession

## B.S. Community Health Education-Detailed Curriculum Map

Courses & Activities Mapped to Community Health Education Program Outcomes

National Commission for Health Education Credentialing Areas of Responsibilities

	Area One: Assess Needs, & Capacity for Health Educ.	Area Two: Plan Health Educ.	Area Three: Implement Health Educ.	Area Four: Conduct Evaluation & Research related to Health Educ.	Area Five: Administer & Manage Health Educ.	Area Six: Serve as a Health Education Resource Person	Area Seven: Communicate & Advocate for Health & Health Educ.
<b>Courses &amp; Learning Activities</b>							
HLTA 1150: Intro. to Health Education	I			I			
HLTA 2202: Environmental Health	I					I	
HLTA 2203: Contemporary Drug & Behavior Issues	I						
HLTA 2210: Disease Etiology	I				I		I
HLTA 3315: Healthy Sexuality						I	
HLTA 3320: Behavior Change Theory	R	I		I			
HLTA 3330: Intro. to Epidemiology & Biostats	R			R			
HLTA 3345: Community Needs Assessment	R			R			R
HLTA 3350: Health Promotion & Program Planning		R	I				
HLTA 3360: Commun. Techs. for Health Professionals							R
HLTA 3390: CHES Prep Course						R	
HLTA 4410: Seminar in Public Health	M					R	M
HLTA 4440: Health Research & Measurement Design				R			
HLTA 4445: Research Implementation				M			
HLTA 4446: Funding & Administration of Health Promotion	M	M	R		R	R	M
HLTA 4451-4452: Field Practicum in Community & Public Health			M		M		

## **APPENDIX VII: EXAMPLE PROGRAM ASSESSMENT**

[RRC 2019] Implementation  
**Data Collection**

**Finding per Measure**

**Community Health Education Program Goals**

B.S. Community Health Education Goals

**Outcome: Preparation as a Health Educator**

An exit survey is deployed prior to students' graduation from the Community Health Education Program to assess students' perceptions of the program's effectiveness preparing them in each of the seven Areas of Responsibility for Health Educators as outlined by the National Commission on Health Education Credentialing.

▼ **Measure:** Exit Survey

Method of Assessment:	An exit survey is developed and deployed prior to students' graduation from the Community Health Education Program.
Acceptable Target:	70% of respondents will report the Community Health Education Program was effective preparing them for employment or graduate school placement.
Ideal Target:	80% of respondents will report the Community Health Education Program was effective preparing them for employment or graduate school placement.
Method Frequency:	Yearly
Key/Responsible Personnel:	Dr. Janie Leary

**Findings for Exit Survey**

Summary of Findings:	4 out of 6 student interns completed the exit survey
Results :	Acceptable Target Achievement: Not Met; Ideal Target Achievement: Approaching
Recommendations:	Continue to stress to students the importance of the exit survey.
Reflections/Notes:	
Substantiating Evidence:	

### Outcome: Certified Health Education Specialist Credentialing

Students will take the Certified Health Education Specialist exam offered by the National Commission on Health Education Credentialing. Composite exam scores from Fairmont State University graduates will be reported for program planning and improvement purposes.

#### ▼ Measure: Certified Health Education Specialist Credentialing

Method of Assessment:	<p>Students will take the Certified Health Education Specialist exam offered by the National Commission on Health Education Credentialing. Composite exam scores from Fairmont State University graduates will be reported for program planning and improvement purposes.</p> <p>Unfortunately, NCHCEC does not publish a 'certain score' that exam takers must achieve. That is why this goal focuses on the number of students who take the exam. The statement below is from the NCHCEC exam handbook: "NCHCEC has used the Modified Angoff method and variations of this method to set the passing point for the CHES® examination.... The results are reviewed by NCHCEC and a final standard is set. This standard is upheld on every subsequent form of the CHES® examination using a statistical process called equating." <a href="https://www.speakcdn.com/assets/2251/final_ches_exam_oct_2019_handbook.pdf">https://www.speakcdn.com/assets/2251/final_ches_exam_oct_2019_handbook.pdf</a></p>
Acceptable Target:	The majority of Community Health Education seniors taking the CHES exam will pass.
Ideal Target:	All of the Community Health Education seniors taking the CHES exam will pass.
Method Frequency:	Yearly
Key/Responsible Personnel:	Dr. Amy Sidwell

#### Findings for Certified Health Education Specialist Credentialing

Summary of Findings:	One student took the CHES exam Fall 2018 and did not pass. This student passed the exam Spring 2019.
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Results :	One additional student took the exam Spring 2019 and did not pass. Acceptable Target Achievement: Not Met; Ideal Target Achievement: Approaching
Recommendations:	Continue to review the CHES reports to identify ways to help student better apply the skills they learn in the program. Continue to work with students to address test anxiety leading up to the exam date.
Reflections/Notes:	Fall 2018 was the first time the CHES exam was offered online (previously, it was only offered paper-and-pencil, two days a year). Feedback from students who took the computer-based exam will aid in better preparing future students on what to expect (and hopefully address some of the text anxiety).

**Community Health Education Program Outcomes**

B.S. Community Health Education  
National Commission for Health Education Credentialing Areas of Responsibilities, Competencies, and Sub-competencies for Health Education Specialists

**Outcome: 1. ASSESS NEEDS, ASSETS AND CAPACITY FOR HEALTH EDUCATION**

Candidates and graduates will: Plan an 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

▼ **Measure:** Community Needs Assessment: Content Knowledge Exams  
*Course level Direct - Exam*

Method of Assessment:	Candidates will take content knowledge exams on definition of needs assessment, capacity assessment, and sources of primary and secondary data.
Acceptable Target:	70% of students will score 70% or better on the content knowledge exams.
Ideal Target:	80% of students will score 70% or better on the content knowledge exams.
Method Frequency:	Yearly



Key/Responsible Personnel: Dr. Amy Sidwell

#### Findings for Community Needs Assessment: Content Knowledge Exams

Summary of Findings: 100% of students scored 80% or above on the exams

Results : Acceptable Target Achievement: Exceeded; Ideal Target Achievement: Exceeded

Recommendations: Continue reinforcing key points from the lectures through application tasks.

Reflections/Notes: Students performed well as a result of repeated exposure to key terms.

#### Substantiating Evidence:

[Final\\_Grades\\_Community\\_Needs\\_Assessment\\_Fall\\_2018.xlsx](#) (Excel Workbook (Open XML))

#### ▼ **Measure:** Community Needs Assessment: Final Report *Course level Direct - Portfolio*

Method of Assessment: Working within a community, students will collect data, report their findings, interpret the results, and make recommendations for implementing a potential solution to the health problem identified.

Acceptable Target: 70% of students will score 70% or better on Community Needs Assessment Final Report.

Ideal Target: 80% of students will score 70% or better on Community Needs Assessment Final Report.

Method Frequency: Yearly

Key/Responsible Personnel: Dr. Amy Sidwell

#### Findings for Community Needs Assessment: Final Report

Summary of Findings: 83% (5 out of 6 students) scored in the Meets or Exceed Expectations criteria for NCHEC Competency 4.4.  
50% (3 out of 6 students) scored in the Exceeds category for NCHEC Competency 4.4.


Results : Acceptable Target Achievement: Exceeded; Ideal Target Achievement: Exceeded

Recommendations: Continue allowing class time for discussions of findings.

Reflections/Notes: Students generally did well on this criteria. Consider going back and asking them whether their actual findings are similar or different than the inferences they made earlier in the semester to reinforce the notion that we should make statements based on the data and not assumptions.

Substantiating Evidence:

 Final\_Report\_Evaluation\_Results\_for\_TaskStream\_Fall\_2018.jpg (JPEG (Image))

 Final\_Report\_Needs\_Assessment\_NB\_Fall\_2018.docx (Word Document (Open XML))

▼ **Measure:** Disease Etiology: Content Exams  
*Course level Direct - Exam*

Method of Assessment: Students will demonstrate knowledge of disease etiology, prevention practices, factors that influence health behaviors, and factors that enhance or compromise health.

Acceptable Target: 70% of students will score 70% or better on each of the content exams.

Ideal Target: 80% of students will score 70% or better on each of the content exams.

Method Frequency: Yearly

Key/Responsible Personnel: Dr. Janie Leary

Findings for Disease Etiology: Content Exams

Summary of Findings: 39 students took midterm; mean average of 86.2%  
 34 out of 39 students earned a 70% or higher  
 30 out of 39 students earned an 80% or higher

Results : Acceptable Target Achievement: Exceeded; Ideal Target Achievement: Exceeded

Recommendations: Continue using the same measure.

Reflections/Notes: Students who are actively engaged in class continue to do well on the exam.

Substantiating Evidence:

[HLTA\\_2210\\_Assessment\\_18-19\\_midterm\\_%26\\_final\\_exam.pdf \(Adobe Acrobat Document\)](#)

[Sample student exam \(Adobe Acrobat Document\)](#)

▼ **Measure:** Disease Etiology: Disease Risk Assessment  
*Course level Direct - Student Artifact*

Method of Assessment: Candidates will create an instructional activity for a given community-based audience in which disease risk may be assessed.

Acceptable Target: 70% of students will score 70% or better on the Assessment assignment.

Ideal Target: 80% of students will score 70% or better on the Assessment assignment.

Method Frequency: Yearly

Key/Responsible Personnel: Dr. Janie Leary

**Findings for Disease Etiology: Disease Risk Assessment**

Summary of Findings: 36 out of 39 students completed the Risk Assessment paper  
31 out of 36 earned a 70% or higher  
22 out of 36 earned an 80% or higher

Results : Acceptable Target Achievement: Exceeded; Ideal Target Achievement: Exceeded

Recommendations: Minor edits to the Risk Assessment instructions will take place to better assist students with understanding assignment expectations

Reflections/Notes: A few students struggled with the content of their risk assessment- mainly not aligning their resources with their original intent. The main struggles observed consisted of technical issues (not following the instructions, using APA format, etc.)

### Substantiating Evidence:

Amber\_H.pdf (Adobe Acrobat Document)

HLTA\_2210\_Assessment\_18-19\_RiskAssess.pdf (Adobe Acrobat Document)

## Outcome: 2. PLAN HEALTH EDUCATION

Candidates and graduates will: 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

### ▼ **Measure:** Behavior Change Theory: Community Behavior Change Activity *Course level Direct - Student Artifact*


Method of Assessment:	Candidates will identify a population in which a health behavior change is indicated, write goals and objectives for changing the behavior, select an appropriate planning model, and design strategies and/or interventions to achieve the stated objectives.
Acceptable Target:	70% of students will score 70% or better on the Community Behavior Change activity.
Ideal Target:	80% of students will score 70% or better on the Community Behavior Change activity.
Method Frequency:	Yearly
Key/Responsible Personnel:	Dr. Amy Sidwell

### Findings for Behavior Change Theory: Community Behavior Change Activity

Summary of Findings:	100% of students scored 80% or higher on the Community Behavior Change Activity.
Results :	Acceptable Target Achievement: Exceeded; Ideal Target Achievement: Exceeded
Recommendations:	Continue introducing this during the first week of class so students know what they're working toward.

**Reflections/Notes:** Students did exceptionally well on the final assignment. Continue using the planning document where they brainstorm reasons the population engages in the activity, the best theory to address the problem, and the most appropriate planning model.

**Substantiating Evidence:**

 Community\_Behavior\_Change\_NBeam\_Fall\_2018 (1).docx (Word Document (Open XML))

 Final\_Grades\_Behavior\_Change\_Theory\_Fall\_2018.xlsx (Excel Workbook (Open XML))

▼ **Measure:** Health Promotion & Program Planning: Program Planning Activity  
*Course level Direct - Portfolio*

**Method of Assessment:** Candidates will identify a workplace, school, community, or hospital setting in which a program could be implemented. The social, organizational, and cultural considerations will be addressed. Logistics, participants' responsibilities, and practitioners' roles will be described.

**Acceptable Target:** 70% of students will score 70% or better on the Program Planning Activity.

**Ideal Target:** 80% of students will score 70% or better on the Program Planning Activity.

**Method Frequency:** Yearly

**Key/Responsible Personnel:** Dr. Amy Sidwell

**Findings for Health Promotion & Program Planning: Program Planning Activity**

**Summary of Findings:** The class average on Context was 2.33.

**Results :** Acceptable Target Achievement: Met; Ideal Target Achievement: Approaching

**Recommendations:** Spend more time relaying the importance of cultural considerations.

**Reflections/Notes:**

**Substantiating Evidence:**

Portfolio\_Context\_for\_Health\_Promotion\_SWest.docx (Word Document (Open XML))

Portfolio\_Scores\_2019.png (PNG (Image))

### Outcome: 3. IMPLEMENT HEALTH EDUCATION

Candidates and graduates will: Implement a Plan of Action, Monitor Implementation of Health Education, & Train Individuals Involved in Implementation of Health Education

▼ **Measure:** Field Practicum: Internship Evaluation Rubric\_Implementation  
*Course level Direct - Other*


Method of Assessment:	Candidates will implement a health education plan within a community health setting, and/or monitor its implementation, and/or train others to work within the scope of the project.
Acceptable Target:	70% of students will score 70% or better on the Implementation portion of the Internship Evaluation Rubric.
Ideal Target:	70% of students will score 70% or better on the Implementation portion of the Internship Evaluation Rubric.
Method Frequency:	Yearly
Key/Responsible Personnel:	Dr. Janie Leary

#### Findings for Field Practicum: Internship Evaluation Rubric\_Implementation

Summary of Findings:	One student earned 96% on this assignment The other student earned 50%-she did not submit the photographic evidence of her work but the due date.
Results :	Acceptable Target Achievement: Not Met; Ideal Target Achievement: Moving Away
Recommendations:	Remind interns to submit all parts of their assignments in the appropriate areas by the due date.
Reflections/Notes:	The student who earned 50% on this assignment completed the assignment successfully, she simply did not submit by the

assignment due date/time.

Substantiating Evidence:

 ches\_area\_3.docx (Word Document (Open XML))

**Outcome: 4. CONDUCT EVALUATION AND RESEARCH RELATED TO HEALTH EDUCATION**

Candidates and graduates will: Develop Evaluation/Research Plan, Design Instruments to Collect Data, Collect and Analyze Evaluation/Research Data, Interpret Results of the Evaluation/Research, & Apply Findings From Evaluation/Research

▼ **Measure:** Research Design Seminar: Research Project  
*Course level Direct - Student Artifact*

Method of Assessment:	Candidates will collect, analyze, and interpret data in order to apply findings from evaluation/research.
Acceptable Target:	70% of Community Health Education students will score 70% or better on the Research Project.
Ideal Target:	80% of Community Health Education students will score 70% or better on the Research Project.
Method Frequency:	Yearly
Key/Responsible Personnel:	Dr. Janie Leary

Findings for Research Design Seminar: Research Project

Summary of Findings:	All three students earned 90% or higher on the assignment
Results :	Acceptable Target Achievement: Exceeded; Ideal Target Achievement: Exceeded
Recommendations:	Continue using this assignment
Reflections/Notes:	
Substantiating Evidence:	

 Research\_Poster\_.ppt (Microsoft PowerPoint)

▼ **Measure:** Research Methodology: Research Plan  
*Course level Direct - Student Artifact*

Method of Assessment:	Candidates will develop an evaluation/research plan and design/select instruments to collect data.
Acceptable Target:	70% of students will score 70% or better on the Research Plan.
Ideal Target:	80% of students will score 70% or better on the Research Plan.
Method Frequency:	Yearly (upon implementation of the Community Health Education program)
Key/Responsible Personnel:	Dr. Janie Leary

Findings for Research Methodology: Research Plan

Summary of Findings:	All three students earned 80% or higher
Results :	Acceptable Target Achievement: Exceeded; Ideal Target Achievement: Exceeded
Recommendations:	This semester-long activity is a requirement for actual data collection. It will continue but will be adapted to meet recent changes in the IRB process/paperwork.
Reflections/Notes:	
Substantiating Evidence:	

 Institutional\_Review\_Board\_Human\_Subjects\_Application.doc (Microsoft Word)

**Outcome: 5. ADMINISTER AND MANAGE HEALTH EDUCATION**

Candidates and graduates will demonstrate understanding of ways to obtain acceptance and support for programs, &




facilitate partnerships in support of health education

▼ **Measure:** Field Practicum: Internship Evaluation Rubric\_Administration & Management  
*Course level Direct - Other*

Method of Assessment:	During the internship, candidates will demonstrate understanding of ways to obtain acceptance and support for programs, and facilitate partnerships in support of health education.
Acceptable Target:	70% of students will score 70% or better on the Administration & Management portion of the Internship Evaluation Rubric.
Ideal Target:	80% of students will score 70% or better on the Administration & Management portion of the Internship Evaluation Rubric.
Method Frequency:	Yearly
Key/Responsible Personnel:	Dr. Janie Leary

Findings for Field Practicum: Internship Evaluation Rubric\_Administration & Management

Summary of Findings:	Both students earned 100% for this assignment.
Results :	Acceptable Target Achievement: Exceeded; Ideal Target Achievement: Exceeded
Recommendations:	Beginning Fall 2019, this activity will be moved to HLTA 4446.
Reflections/Notes:	
Substantiating Evidence:	

 CHES\_Area\_V\_(internship).doc (Microsoft Word)

**Outcome: 6. SERVE AS A HEALTH EDUCATION RESOURCE PERSON**

Candidates and graduates will: Obtain and Disseminate Health-Related Information.


▼ **Measure:** Behavior Change Theory: Peer Health Assessment  
*Course level Direct - Student Artifact*

Method of Assessment:	Candidate will develop an assessment to be used with a peer to identify gaps in the peer's self-reported health status. The candidate will obtain and disseminate health-related information, and serve as a health education consultant.
Acceptable Target:	70% of the students will score 70% or better on the Peer Health Assessment.
Ideal Target:	80% of the students will score 70% or better on the Peer Health Assessment
Method Frequency:	Yearly
Key/Responsible Personnel:	Dr. Amy Sidwell

Findings for Behavior Change Theory: Peer Health Assessment

Summary of Findings:	100% of students scored 80% or better on the Peer Health Assessment.
Results :	Acceptable Target Achievement: Exceeded; Ideal Target Achievement: Exceeded
Recommendations:	Continue allowing the students to pick a person they know well who is willing to answer questions based on interpersonal theories.
Reflections/Notes:	Each student did a pilot test of their questions by asking a peer to review their questions for readability and relationships to the concepts in the chosen theory. This worked well.

Substantiating Evidence:

 Peer\_Health\_Assessment\_MA\_Fall\_2018.docx (Word Document (Open XML))

▼ **Measure:** Field Practicum: Internship Evaluation Rubric\_Serve as a Health Ed Resource Person  
*Course level Direct - Other*

Method of Assessment:	During the internship, candidates will: Obtain and Disseminate Health-Related Information, & Serve as a Health Education Consultant.
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Acceptable Target:	70% of students will score 70% or better on the Serve as a Health Ed Resource Person portion of the Internship Evaluation Rubric
Ideal Target:	80% of students will score 70% or better on the Serve as a Health Ed Resource Person portion Internship Evaluation Rubric.
Method Frequency:	Yearly
Key/Responsible Personnel:	Dr. Janie Leary

#### Findings for Field Practicum: Internship Evaluation Rubric\_Serve as a Health Ed Resource Person

Summary of Findings: Both students earned 100% on this assignment

Results : Acceptable Target Achievement: Exceeded; Ideal Target Achievement: Exceeded

Recommendations: Continue using the current assignment

Reflections/Notes:

Substantiating Evidence:

 CHES\_Area\_VI\_(internship).odt (File)

### Outcome: 7. COMMUNICATE AND ADVOCATE FOR HEALTH AND HEALTH EDUCATION

Candidates and graduates will: 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

#### ▼ **Measure:** Communication Techniques for Health Promotion: Messaging Activity *Course level Direct - Student Artifact*

Method of Assessment:	Using health behavior theories and models, candidates will create, pilot-test, and edit messages tailored to priority populations in a community setting.
Acceptable Target:	70% of students will score 70% or better on the Messaging Activity.

Ideal Target:	80% of students will score 70% or better on the Messaging Activity.
Method Frequency:	Yearly
Key/Responsible Personnel:	Dr. Janie Leary

#### Findings for Communication Techniques for Health Promotion: Messaging Activity

Summary of Findings:	All five students earned 80% or higher on the newsletter assignment. Three out of five students earned 70% or higher on the intercept interview assignment. These three students earned 90, 100, and 100 on the assignment.
Results :	Acceptable Target Achievement: Met; Ideal Target Achievement: Approaching
Recommendations:	Continue using both assignments
Reflections/Notes:	The students who earned low grades on the intercept interview assignment reported being confused (and not asking for help) or did not submit all sections of the assignment). Will work with future classes to make sure students understand all aspect of the assignment.

#### Substantiating Evidence:

[3360-interept\\_interview.pdf \(Adobe Acrobat Document\)](#)

[3360-newsletter1.pdf \(Adobe Acrobat Document\)](#)

#### ▼ **Measure:** Communication Techniques for Health Promotion:Directed Response Activity *Course level Direct - Student Artifact*

Method of Assessment:	Candidates will analyze and respond to factors that impact current and future needs in community health education.
Acceptable Target:	70% of students will score 70% or better on the Directed Response Activity.
Ideal Target:	80% of students will score 70% or better on the Directed Response Activity.

Method Frequency: Yearly  
Key/Responsible Personnel: Dr. Janie Leary

#### Findings for Communication Techniques for Health Promotion:Directed Response Activity


Summary of Findings: All students successfully completed this assignment. Students continue to report a new appreciation for the struggles of managing diabetes.

Results : Acceptable Target Achievement: Exceeded; Ideal Target Achievement: Exceeded

Recommendations: Continue to use this activity.

Reflections/Notes:

Substantiating Evidence:

 Low\_Literacy\_Assignment\_(communication).odt (File)

#### ▼ **Measure:** Public Health Seminar\_Advocacy Plan *Course level Direct - Student Artifact*

Method of Assessment: Students plan, implement, and evaluate an advocacy effort based on a salient health issue.

Acceptable Target: 70% of students will score 70% or better on the Advocacy Plan

Ideal Target: 80% of students will score 70% or better on the Advocacy Plan

Method Frequency: Yearly

Key/Responsible Personnel: Dr. Amy Sidwell

#### Findings for Public Health Seminar\_Advocacy Plan

Summary of Findings: 100% of students scored more than 80% on the Advocacy Plan.


Results : Acceptable Target Achievement: Exceeded; Ideal Target Achievement: Exceeded

Recommendations: Continue introducing this in the beginning of each semester and work on it each week.

Reflections/Notes:

Substantiating Evidence:

 Advocacy\_Paper\_NBeam.docx (Word Document (Open XML))

 Final\_Grades\_HLTA\_4410\_Public\_Health\_Seminar\_Fall\_2018 (1).xlsx (Excel Workbook (Open XML))

▼ **Measure:** Public Health Seminar-Advocate for the Health Education Profession Presentation  
*Course level Indirect - Other*


Method of Assessment:	Each student provides a presentation to his or her peers to explain the benefits of participating in professional organizations, advocates for the profession, and describes their professional development plans toward becoming a health educator.
Acceptable Target:	70% of students will score 70% or better on the presentation
Ideal Target:	80% of students will score 70% or better on the presentation
Method Frequency:	Yearly
Key/Responsible Personnel:	Dr. Amy Sidwell


Findings for Public Health Seminar-Advocate for the Health Education Profession Presentation

Summary of Findings:	100% of students scored 80% or better on the presentation.
Results :	Acceptable Target Achievement: Exceeded; Ideal Target Achievement: Exceeded
Recommendations:	Continue having students find professional health organizations on their own and applying what they learned to their own professional development.

Reflections/Notes:

Substantiating Evidence:

 Final\_Grades\_HLTA\_4410\_Public\_Health\_Seminar\_Fall\_2018 (1).xlsx (Excel Workbook (Open XML))

 Health\_Education\_Profession\_Presentation\_NB.pptx (PowerPoint Presentation (Open XML))

### Self Study Alternative Assessment

No text specified

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## **APPENDIX VIII: FULL-TIME FACULTY DATA**



## Janie M. Leary, PhD, MPH, BSW, CHES

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### Education

Year	School	Degree	Field
2011	West Virginia University	PhD	Public Health
2005	Armstrong Atlantic University	MPH	Public Health
1995	Georgia State University	BSW	Social Work

### Certifications & Trainings

2019	SAPST - Substance Abuse Prevention Skills Training
2019	WV Student Success Summit
2019	Quality Matters: Independent Applying the QM Rubric (APPQMR)
2018	WV Center for Children’s Justice: Trauma & Children Handle with Care Training
2018	WV-DHHR: Bureau for Behavioral Health & Health Facilities: Becoming an Ally
2015	Fostering Futures Training
2015	Mental Health First Aid USA training
2014-current	Certified Health Education Specialist
2013-2015	Certified Clinical Research Professional

### Full-time Professional Experience in West Virginia

2013-current	Associate Professor	Fairmont State University Community Health Education Program
		<ul style="list-style-type: none"> <li>• Earned tenure and promotion to the rank of Associate Professor Spring 2019</li> <li>• Developed the following courses: Disease Etiology, Communication for Health Professionals, Health Research &amp; Methodology, Health Research Implementation, Certified Health Education Specialist Preparation, and Funding &amp; Health Program Management.</li> <li>• Redesigned the following courses: Internship, Introduction to Health Education, and Personal Health</li> <li>• Mentor students through research and internship experiences.</li> <li>• Participate in campus community events</li> <li>• Serve on numerous committees, including: Institutional Review Board, Academics &amp; Credits, Grants Committee, Healthy Campus Initiative, various employee search committees.</li> </ul>
2011-2013	Research Manager	West Virginia University Research Corporation School of Medicine, Department of Pediatrics
		<ul style="list-style-type: none"> <li>• Prepare IRB-related material &amp; necessary updates for WVU &amp; collaborating universities</li> <li>• Manages and coordinates project activities between sites, PIs, funder, and others</li> <li>• Manages and coordinates the handling of laboratory samples</li> </ul>



## Professional Activities

### Courses taught on a regular basis

- HLTA 1100
- HLTA 1150
- HLTA 2210
- HLTA 3320
- HLTA 3330
- HLTA 3345
- HLTA 3350
- HLTA 3360
- HLTA 3390
- HLTA 4440
- HLTA 4445
- HLTA 4446
- HLTA 4451
- HLTA 4452

### Courses taught occasionally

- PHED 1100
- PHED 4400
- PHED 4410
- Independent research and extra internship courses for students seeking additional training in these areas.

### Special efforts related to courses

The following courses had to be developed from scratch during my time at Fairmont State:

- HLTA 2210
- HLTA 3330
- HLTA 3360
- HLTA 3390
- HLTA 4440
- HLTA 4445
- HLTA 4446
- HLTA 4451
- HLTA 4452

### Major course changes

- HLTA 1100
- HLTA 1150

### Advisement

- **2019-2020**
  - Thirteen (n=13) Community Health Education advisees, Fall 2019
- **2018-2019**
  - Seven (n=7) Community Health Education advisees, Fall 2018
  - Fifteen (n=15) Exercise Science advisees, Spring 2019
- **2017-2018**
  - Seven (n=7) Community Health Education advisees, Fall 2017
  - Seven (n=7) Community Health Education advisees, Spring 2018
- **2016-2017**
  - Ten (n=10) Community Health Education advisees, Fall 2016
  - Ten (n=10) Community Health Education advisees, Spring 2017
- **2015-2016**
  - Eleven (n=11) Community Health Education advisees, Fall 2015
  - Twelve (n=12) Community Health Education advisees Spring 2016
- **2014-2015**
  - Five (n=5) Community Health Education advisees, Fall 2014

- Six (n=6) Community Health Education advisees, Spring 2015
- **2013-2014**
  - (no advisees Fall 2013 due to it being my first semester)
  - Two (n=2) Community Health Education advisees, Spring 2014

### **Student Research**

#### **Mentoring Research Projects: 2018-2019**

HLTA 3345 class	City of Clarksburg Health & Safety Needs Assessment
Stephanie West	Perceptions about Healthcare Access in West Virginia
Candice Travis	Parent and school employee perceptions about Sexuality Education in WV Schools

#### **AY 2018-2019 (HLTA 4440 & HLTA 4445)**

Emily Fry	Perceptions on opioids, harm reduction, & treatment prog. in WV
Carolyn Furbee	Public perceptions of sexual assault on college campuses
Nicole Beam	Adult Perceptions on the Foster Care System in West Virginia

#### **AY 2017-2018 (HLTA 4440 & HLTA 4445)**

Abigail Fetty	Physical Activity Perceptions of College Students
Amber Trickett	College Students and their Nutrition
Bryce Johnson	Adult's (35-65) Perceptions on Suicide in the Mature Pop. (65+)
Candice Travis	What are Parent Perceptions on Sex Education?
Olivia Gross	Perspectives of Smoking & Health Risks in People over Age 40
Spencer Flanagan	Stress in College Students

#### **AY 2016-2017 (HLTA 4440 & HLTA 4445)**

Brianna Blake	Depression and Anxiety in College Students
Nicole Bland	How Does Serving as a Dementia Caregiver Affect Caregiver Health?
Madeline Hamilton	Congenital Heart Disease/Defects
Gerlie Jenkins	Post-Traumatic Stress Disorder (PTSD): Information for Family, Friends, & the General Public
Claire Shook	Geriatric Prescription Misuse and Abuse

#### **AY 2015-2016 (PHED 4400 & PHED 4410)**

Chelsie Dunn	Gluten-related Disorders
Christie Viltrakis	Sleep in College Students
James Keys	Does dependency effect addiction in college students?
Elena Wojcik	Factors Affecting HPV Vaccination Uptake Perceptions in Parents of Adolescents?
David Dryden	How is Nursing Stress/Burnout a Problem for Today's Nurses?
Shauntise Weeks	Why is the minority community largely affected by HIV/AIDS?
Saige Mongold	Prescription Drug Addiction among Teens and Young Adults:

### Current Research Projects

Leary, JM. & Travis, C. (currently collecting data) "Parent and school employee perceptions about Sexuality Education in WV Schools".

Students in HLTA 3345 conducting a Community Needs Assessment for City of Clarksburg, topics include:

- Family financial insecurity
- Physical activity behaviors
- Childhood obesity
- Food insecurity
- Healthcare access
- Needs of the homeless community
- Perceptions of the Needle Exchange Program
- Needs of the Disability community
- Mental health needs of children and families

### Publications

- Downs, JS, Ashcraft, AM, Murray, PJ, Berlan, ED, Bruine de Bruin, W, Eichner, J, Fischhoff, B, **Leary, JM**, McCall, RB, Miller, E, Salaway, J, Smith-Jones, J, & Sucato, GS. (2018). Video intervention to increase perceived self-efficacy for condom use in a randomized controlled trial of female adolescents. *Journal of pediatric and adolescent gynecology*. 31(3), 291-298, e2. Doi: <https://doi.org/10.1016/j.jpag.2017.10.008>
- Nolan JA, Lilly CL, **Leary JM**, Meeteer W, Campbell HD, Dino GA, & Cottrell L. (2016) Barriers to Parent Support for Physical Activity in Appalachia. *Journal of Physical Activity & Health*. 13(10):1042-1048. doi: 10.1123/jpah.2015-0474
- Moilanen, KL, **Leary, JM.**, Watson, S. M., & Ottley, J. (2015). Predicting age of sexual initiation: Family-level antecedents in three ethnic groups. *Journal of Early Adolescence*. 38(1), 28-49. doi: 10.1177/0272431615586462
- Lilly, CL, Bryant, LL, **Leary, JM**, Vu, MB, Hill-Briggs, F, Samuel-Hodge, CD (2014). Evaluation of the Effectiveness of a Problem-Solving Intervention Addressing Barriers to Cardiovascular Disease Prevention Behaviors in 3 Underserved Populations: Colorado, North Carolina, West Virginia, 2009. *Preventing Chronic Disease*, 11, E32. doi: 10.5888/pcd11.130249
- Leary, JM**, Ice, C, Dino, G, Loprinzi, P, Cottrell, L (2013) Parental influences on 7-9 year olds' physical activity: A Conceptual Model. *Preventive Medicine*, 56:5, 341-344. doi: 10.1016/j.ypmed.2013.02.005
- Leary, JM**, Ice, C, Neal, W, Cottrell, L. (2013) Parent and child weight status predict weight related behavior change. *Journal of Communication in Healthcare*. 6(2), 115-121. doi:10.1179/1753807612Y.0000000021
- Loprinzi, PD, Schary, D, Beets, MW, **Leary, JM**, & Cardinal, BJ (2013). Association between hypothesized parental influences and preschool children's physical activity behavior. *American Journal of Health Education*. 44:1. 9-18. doi:10.1080/19325037.2012.749685

- Ice, C, Elliott, E, Cottrell, L, **Leary, JM**, Neal,W. (2012). Parental perception of child's physical activity and cardiovascular health outcomes. *Journal of Science and Medicine in Sport*,15 (Suppl), 93. (published abstract)
- Murphy, E, Ice, C, McCartney, K, **Leary, JM**, & Cottrell, L. (2012). Is parent and child weight status associated with decision making regarding nutrition and physical activity opportunities? *Appetite*, 59(2), 563-569. doi: 10.1016/j.appet.2012.06.006
- Leary, JM**, Gaines, SK, Baldwin, D, Wold, JL, & Ice, C. (2012) A missing link: Determining population and sample sizes. *Commune Bonum*.2: 30-32.
- Leary, JM**, Ice, C, & Cottrell, L. (2012) Adaptation and cognitive testing of physical activity measures for use with young, elementary-aged children and their parents. *Quality of Life Research*. 21(10):1815-1828. doi: 10.1007/s11136-011-0095-1
- Watson, SM\* & **Leary, JM**. (2012) Perceptions of Parent-Teen Communication in Relation to Current Sexual Behavior and Pregnancy Prevention. *McNair Research Abstracts*. <http://mcnair.wvu.edu/research-abstracts>
- Leary, JM**, Adams, D, Gaines, SK, Wold, JL, & Mink, M. (2008) Measurement of activity preferences of preschoolers and caregivers. *Education & Health* 24(4): 67-68.
- Baldwin, D, Gaines, SK, Wold, JL, Williams, A, & **Leary, JM**. (2007) The Health of Female Child Care Providers: Implications for Quality of Care. *Journal of Community Health Nursing*. 24(1): 1-17.
- Wold, JL, Gaines, SK, & **Leary, JM**. (2006). Use of Public Health Nurse Competencies to Develop a Childcare Health Consultant Workforce. *Public Health Nursing*. 23(2): 139-145. doi: 10.1111/j.1525-1446.2006.230205.x
- Gaines, SK, Wold, JL, Spencer, L, and **Leary, JM**. (2005) Assessing the Need for Child Care health consultants. *Public Health Nursing*. *Public Health Nursing*. 22(1): 8-16. doi: 10.1111/j.0737- 1209.2005.22103.x
- Gaines, SK, Wold, JL, Bean, M, Brannon, G, and **Leary, JM**. (2004) Partnership to Build Sustainable Public Health Nurse Child Care Health Support. *Family and Community Health*. 27(4): 346-354.
- Gaines, SK & **Leary JM**. (2004) Public Health Emergency Preparedness in the Setting of Child Care. *Family and Community Health*. 27 (3): 263-268.

### Presentations

- Alsup, J, **Leary, JM**, & Ryan, M. (2015) Cardiovascular Fitness. Instructor Exchange - Future of Health and Sports Conference. Fairmont State University. October 14 & 15, 2015.
- Leary, JM** (2015). Health Promotion: Nutrition and Physical Activity presentations for the WV National Guard's community outreach: Get Fit Fairmont. July 2015. Fairmont, WV
- Ashcraft AM, Stubbs VT, **Leary JM**, Murray PJ. (2014) Adult Perceptions of Adolescent Health Education Research Participation. West Virginia Rural Health Conference Oct. 15-17, 2014 in Morgantown, WV
- Leary JM.**, Murray PJ., Downs J., & Veltre V. (2013) Communication & Consent: IRB & Clinic Perspectives. Panel presentation for the Office of Adolescent Health, Admin. on Children, Youth and Families' and CDC/Division of Reproductive Health's Third Annual Teenage

- Pregnancy Prevention Conference. May 20- 22, 2013.
- Murray PM & **Leary, JM.** (2013) Teen Video Study. Wheeling-Ohio County Annual Public Health Conference. June 28, 2013, Oglebay Resort, WV.
- Banyika-Leaseburg M, Olfert M, **Leary JM**, Murray PJ (2012) "Car calories" Presentation to Prevention Research Center Seminar Series at CDC, Atlanta, GA 11/13/2012.
- Leary, J.L.**, Komosinski, M., Cottrell, L., Giroir, J., Sims, T., Walker, N., Dino, G., & Prendergast, E. (2011) Community-Based Participatory Research: WV Health Needs Assessment. West Virginia State Health Education Council Conference. April 12-14, 2011.
- Leary, JM.**, Ice, C., & Cottrell, L. (2011) Decide to Care for YOU : A Pilot Study. West Virginia State Health Education Council Conference. April 12-14, 2011.
- Ice, C L, McCartney, K., **Leary, JM**, Neal, WA & Cottrell, L. (2011, March). Health in rural Appalachia: Feeding styles and childhood obesity. Poster presented at the Biannual meeting of the Society for Research in Child Development, Montreal, Canada.
- Bryant, LL, Keyserling, TC, Vu, MB, Ice, C., McMilin, C., & **Leary, JM.** (2010) Problem-solving intervention to reduce risk of cardiovascular disease in adults with complicated lives: Cardiovascular Health Intervention Research and Translation Network. 138th annual meeting of the American Public Health Association Annual Meeting, Denver, CO, November 6-10, 2010.
- Komosinski, M., Cottrell, L.A., **Leary, J. M.**, Giroir, J., Sims, T., Walker, N., Dino, G., & Prendergast, E. (2010) Broadening the definition of health researcher: Community collaborations defining the research agenda. 138th annual meeting of the American Public Health Association Annual Meeting, Denver, CO, November 6-10, 2010.
- Leary, JM.** & Cottrell, L (2010) Community-Based Participatory Research: Health Needs Assessment. Presentation of a state-wide needs assessment to the WV Eastern Panhandle Community Planning Group. September 2, 2010. {invited lecture}
- Leary, JM.**, Ice, C., & Cottrell, L. (2010) Decide to care for you: A pilot study. West Virginia Physical Activity Symposium, Charleston, WV, June 17-18, 2010.
- Nolan JA, **Leary J**, Ice CL, Murphy E, Cottrell L, Olfert MD, & Dino, G. (2010) "Cumulative Parent Risk Behavior and Child Weight Status," West Virginia Physical Activity Symposium, Charleston, WV, June 17-18, 2010.
- Leary, JM.**, Cottrell, L., & Ice, C. (2009) Measuring parent-child relationship influences on child food and physical activity autonomy. International Conference on Diet and Activity Methods (ICDAM7). Washington, DC, June 5-7, 2009.
- Leary, JM.**, Ice, CL., Neal, WA., & Cottrell, L. (2009) Psychometric analysis of an activity preference survey. 137th American Public Health Association Annual Meeting, Philadelphia, PA, November 7-11, 2009.
- Baldwin, D., Gaines, S., Wold, J., Williams, A., & **Leary, JM.** (2009) Role Strain, Perceived Health Status and Mammography Use in Low-Income African American Women. International Council on Women's Health Issues Congress: Women's Health and Well-Being, November 15-18, 2006. University of Western Sydney, Sydney, Australia.
- Cottrell, L., Ice, C., **Leary, J.**, Neal, W., Minor, V., & Murphy, E. (2009) A statewide examination of childhood overweight and obesity trends. Biannual Meeting of the Society of Research in Child Development, Denver, CO April 2009.

- Strange, CE, Choudhary, E, **Leary, JM**, Nolan, J, Bossarte, RM, & Pack, R (2008) Perceived racial misclassification: Implications for health. 136th APHA Annual Meeting and Exposition. October 25-29, 2008. San Diego, CA.
- Leary, JM.**, Adams, D., Gaines, S., and Wold, J. (2006). Preschooler Activity Preferences. 134th American Public Health Assoc. Annual Meeting, Nov. 4-8, 2006. Boston, MA.
- Baldwin, D., Gaines, S., Wold, J., Williams, A., & **Leary, JM**. Mammography Use in Low-income African American Women Employed in a Community Setting. National Prevention Summit: Prevention, Preparedness, and Promotion, Association for Prevention Teaching and Research, October 25-26, 2006, Washington, D.C.
- Baldwin, D., Gaines, S., Wold, J., Williams, A., & **Leary, JM**. The Perceived Health Status of Low- Income African American Women and Their Use of Mammography Screening. Annual Primary Care and Prevention Conference & Eleventh Annual HeLa Women's Health Conference, September 11-13, 2006, Atlanta, Georgia.
- Leary, JM.**, Gaines, S., and Wold, J. (2006). Physical Activity Preferences of Preschoolers, Parents, and Providers. Presented at the 2006 Georgia Early Learning Conference- Bright Beginnings: Promising Futures, April 27-29, 2006.
- Leary, J.**, Adams, D., Gaines, S., and Wold, J. (2006). Preschooler Activity Preferences. Poster presentation: International Congress on Physical Activity and Public Health. April 17-20, 2006.
- Wold, J., Gaines, S., Williams, Baldwin, D, and **Leary, JM**. (2005) Health risks of child care providers: Health promotion and disease prevention. Presented at 133rd American Public Health Association Annual Meeting, December 10-14, 2005.
- Gaines, S., Wold, J, Bean, M., and **Leary, JM**. (2004) Sustaining child care health consultation to promote child well-being. Presented at 132nd American Public Health Association Annual Meeting. November 6-10, 2004.
- Baldwin, D., Gaines, S., Wold, J, Williams, A, and **Leary, JM**. (2004). Health Behaviors of Female Child Care Providers: Implications for Quality of Care in Children. Presented at 132nd American Public Health Association Annual Meeting, November 6-10, 2004.
- Williams, A., Wold, J., Gaines, S., and **Leary, JM**. (2004). Obesity in rural and African-American Women. Presented at 132nd American Public Health Association Annual Meeting, November 6-10, 2004.
- Gaines, S., Wold, J, and **Leary, JM**. (2003) Building a statewide public health nurse infrastructure to support healthy child care. Presented at 131st American Public Health Association Annual Meeting, November 15-19, 2003.
- Gaines, S., Wold, J., Spencer, L., and **Leary, JM**. (2003) Survey of child care health needs and practices. Presented at 131st American Public Health Association Annual Meeting, November 15-19, 2003



### Grants

- Leary, JM.** (2019) West Virginia Remote Online Collaborative Knowledge System (WVROCKS) grant, “Understanding Health Literacy, RHLT402”. \$3,000
- Leary JM,** Sidwell, A, & Shroyer, A (2017). Foundation Fellow Award. Fairmont State University. April 19, 2017. \$1,500.
- Leary, JM.** & Sidwell, A. (2015) West Virginia Rural Health Initiative: West Virginia Public Undergraduate Programs Grant Opportunity. \$15,000. Submitted but not funded.

### Highlighted Student Publications & Presentations

- Travis, C. (2018) What Are Parent Perceptions About Sex Education? Celebration of Student Scholarship Conference presentation. April 25, 2018. Fairmont State University. (Student research project for HLTA 4440-4445, Fall 2017/Spring 2018)
- Bland, N. (2016) The Burden on Women as Dementia Caregivers. Tracts: A Journal of Student Scholarship. 12(1), 12-17. (student risk assessment paper for HLTA 2210, Spring 2015)
- Bland, N. (2016) The Burden on Women as Dementia Caregivers. Celebration of Student Scholarship Conference presentation. April 19, 2016. Fairmont State University. (student risk assessment paper for HLTA 2210, Spring 2015)
- Watson, SM\*, Moilanen, KL, & **Leary, JM.** (2015). The Link Between Parent-Teen Communication and Young Adults' Sexual Behavior. Poster session for the Biennial Meeting of the Society for Research in Child Development, Philadelphia, PA. March 20, 2:25 to 3:40pm, Penn CC, 200 Level, Exhibit Hall A.
- Stubbs, VT\*, **Leary, JM,** & Murray, PJ (2013) Adults’ Perceptions About Adolescent Health Education Research Participation. Journal of Adolescent Health 52: 2, Suppl 1, S94–S95 (published abstract) doi: 10.1016/j.jadohealth.2012.10.223

### Awards and Honors

- 2019 Nominated for the William A. Boram Award for Teaching Excellence.
- 2019 Nominated for the Faculty Recognition Award.
- 2016 Nominated for Faculty Advising Award
- Recipient of the 2011 WVU Behavioral and Biomedical Sciences Training Scholarship Award (\$1,512) for the purchase of pedometers.
- Recipient, with S. Gaines, J. Wold, and M. Bean of the 2004 “Forging Partnerships through Collaboration” Award, Georgia Division of Public Health, Office of Nursing for work done with Healthy Childcare ETC in Health District 1-1.

### Public Service Activity

- 2015-present United Way of Harrison County Holiday Gift Wrap Booth fundraiser
- 2018 ≈30 hours volunteering
- 2017 ≈70 hours volunteering
- 2016 ≈30 hours volunteering
- 2015 ≈24 hours volunteering

- 2014-present Harrison County Court Appointed Special Advocate (CASA) volunteer
  - Teach cultural competencies for CASA volunteers
  - Participate in recruitment and community education events
- 2019-present Case 4
- 2017 – 2018 Case 3
- 2016 – 2017 Case 2
- 2015 – 2016 Case 1
- 2018 Humane Society of Harrison County- Fostering pregnant cats through the weaning of kittens (Summer/Fall 2018 2 females and a total of 10 kittens)
- 2015 Harrison County Grand Jury, served as jury secretary at the request of judge

**Student Mentoring**

- 2015-current GA teaching assistants, Personal Health Nathaniel Arnold, Anthony Ellis, Gregory Crickard, Jacob Whitmore
- 2015 Dissertation Committee member Crystal Sheaves
- 2012-2013 McNair Scholar Stephanie Michelle Watson
- 2012 PhD teaching assistant Adam Baus
- 2012 MPH intern Veronte Stubbs

**University & School Service**

- 2013-present Fairmont State University 2018- current Grants
- Committee
- 2018- current Healthy Campus Initiative
- 2017- current Presidential Perception Survey Committee
- 2017- current Committee on Admissions and Credits
- 2017- current Technology Committee
- 2015- current IRB Review Committee (19-26 proposals each Academic Year)
- 2018, Summer Faculty Search Committee, Assist. Professor of Education (20180091)
- 2018, Spring Faculty Search Committee, Assist. Professor of Special Educ. (20180040)
- 2018, Spring Faculty Search Committee, Assist. Professor of Special Educ. (20180039)
- 2018 HLTA 3330: Introduction to Epidemiology & Biostatistics- redesign course to be offered online
- HLTA 4446 Health Program Management course development
- 2017 HLTA 3390: Certified Health Education Specialist Prep course- new course development
- 2017 Search Committee, Autism Individualized Mentoring & Support Services (AIMSS) Coordinator
- 2017 Community Health Education Curriculum revision

2016- 2017	Student Publication Board
2015- 2017	General Studies Curriculum Committee
2014- 2017	Campus Collaborative for Recruitment & Retention (CCRR)-Statistical Analysis Subcommittee
2016	Community Health Education Curriculum revision
2016	HHP Exercise Science Faculty Search Committee
2016	HLTA 4445: Health Research Implementation- new course development
2015	Community Health Education Curriculum revision
2015	HLTA 4440: Health Research Design & Measurement- new course development
	HLTA 4451: Field Practicum in Community Health Education- major course redesign
	HLTA 4452: Field Practicum in Community Health Education Portfolio- new course development
2014	HLTA 2210: Disease Etiology- new course development
	HLTA 3360: Communication Techniques for Health Professionals- new course development
2014	SofEd Physical Education Faculty Search Committee, (20140057)
2013-2014	Faculty Senate, Library Sub-committee
2013	HHP Outdoor Recreation Faculty Search Committee, (20140029)
2013	HLTA 1100: Personal Health, Revise and secure approval for General Studies classification
2013	HHP Marketing & Development Committee
2013	HHP Faculty Scholarship Committee

**Other Professional Service**

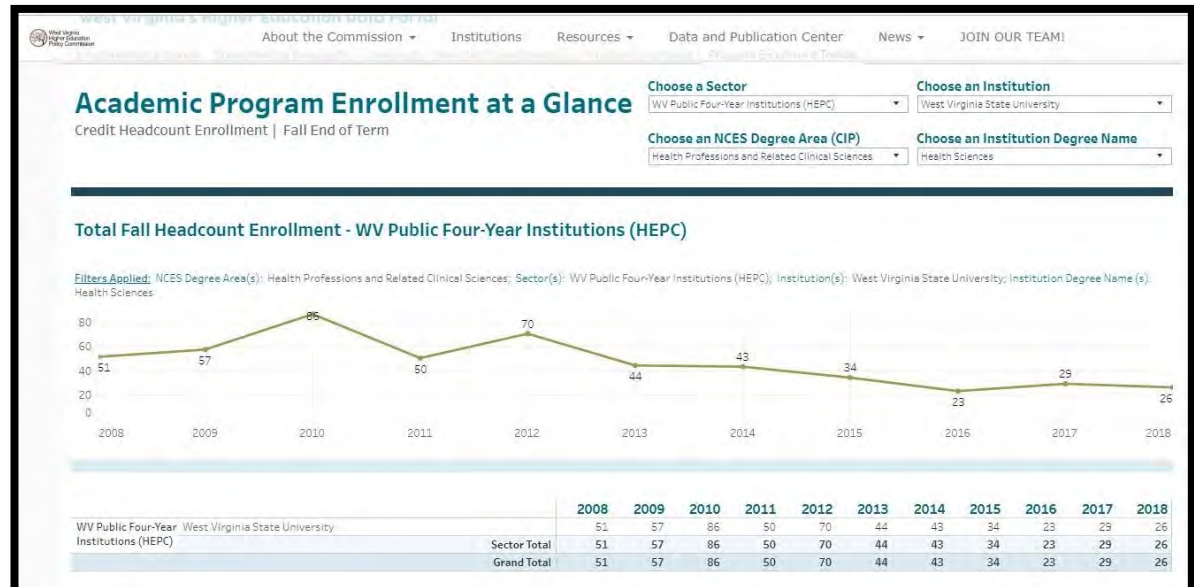
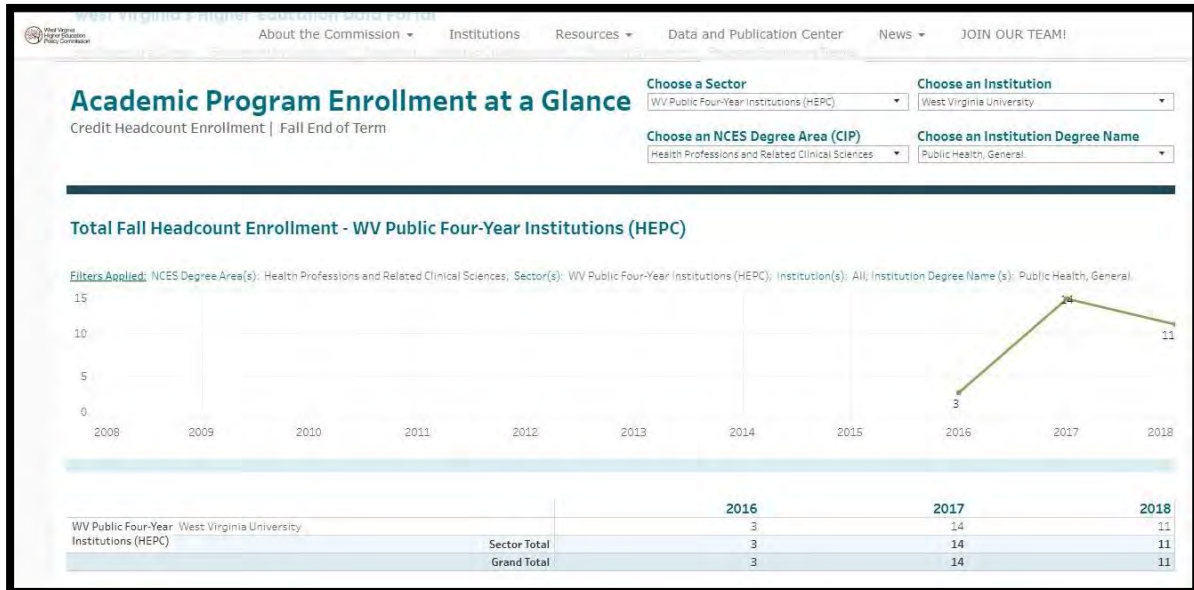
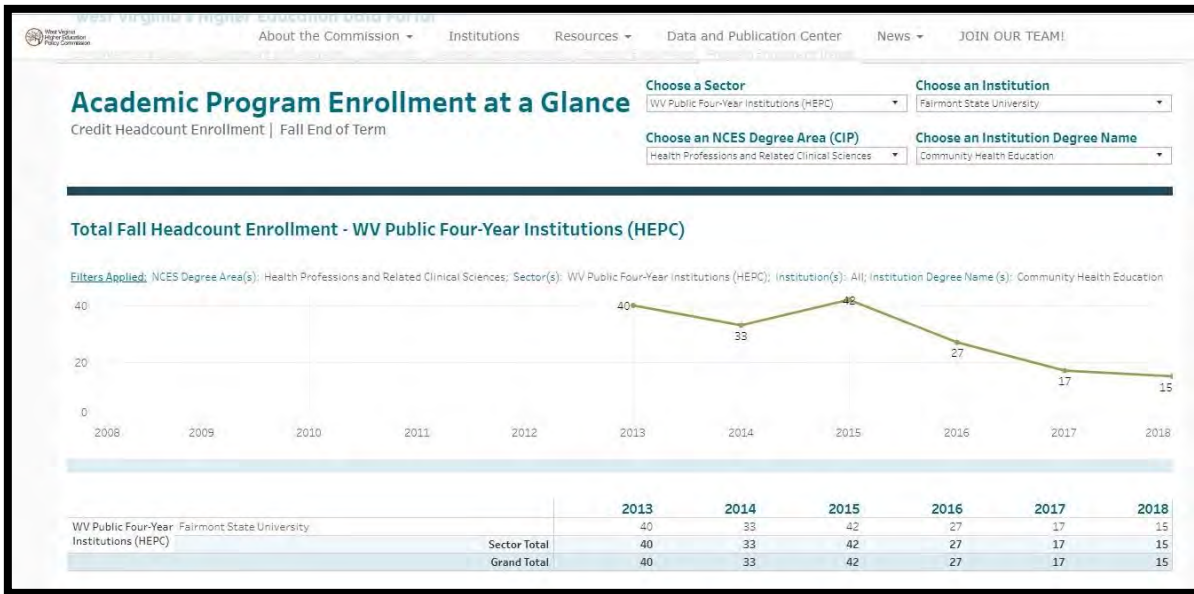
2012- 2018	Reviewer, Quality of Life Research Journal
2012- 2018	Reviewer, American Journal of Preventive Medicine
2013	WVU School of Public Health, Department of Social Behavioral Health Sciences; Faculty Search committee
2011	Reviewer, Commune Bonum: The Public Good
2011	Reviewer, Journal of Health Care for the Poor and Underserved
2011	Reviewer, Journal of Adolescent Health
2010	Student Coordinator, WVU Obesity & Metabolic Disease Workgroup
2009	Interventionist, Decide to Care for You, a Cardiovascular Health Intervention Research and Translation Network (CHIRTN) pilot project

**Professional Experience outside of West Virginia**

2002 – 2008	Atlanta Medical Center, GSU Student Clinic Immunization Office-Medical Records
2005 – 2006	Emory University, Lillian Carter Center for International Nursing

Administrative Manager  
2002 – 2005 Georgia State University, Byrdine F. Lewis School of Nursing Project  
Coordinator, Child Care Advantage Network (HRSA funded)  
2002 – 2002 Atlanta Research and Educational Foundation Administrative Assistant  
2001 – 2002 Louisiana State Univ. HSC, School of Nursing Nursing Research & Evaluation  
Program Manager  
1998 - 2001 Georgia State University  
Administrative Specialist, Byrdine F. Lewis School of Nursing  
Admission Specialist, College of Education. Office of Academic  
Assistance Assistant to the Director, University Health Services  
1995 – 1998 Association on Battered Women of Clayton County Shelter Manager

# APPENDIX IX: OTHER PROGRAMS



## APPENDIX X: GRADUATE UPDATES

### 2015 Spring/Fall graduates                      3 respondents

#### Employment Status

Employed full-time                      3

#### Salary Ranges

\$40,001-50,000                      1

\$50,001-60,000                      1

\$30,001-40,000                      1

#### Current Employers

WVU Extension Service-Harrison Co.

Westaff (recruiter/HR)

Wilson Martino Dental

#### Job Title

Youth Health Educator

Personnel Supervisor

Treatment Coordinator

#### Time in positions

1 month

2 years

3.5 years

#### Graduate school and/or professional certifications

Certified Health education Specialist

Certificated Personal Trainer (CPT)

Community Health Advisor

CPR/AED

Certificated Staffing Professional (CSP)

### 2016 Spring/Fall graduates                      5 respondents

#### Employment Status

Employed full-time                      4

Employed part-time                      1

#### Salary Ranges

\$25,001-30,000                      4

\$40,001-50,000                      1

#### Current Employers

Woodforest National Bank

I own my own business

WVU Department of Emergency Medicine

Nicholas Co Child Nutrition

Government

#### Job Title

Retail Banker II\*

Self- Employed

Patient Navigator

Dir. & Wellness Coord.

Threat Intake Examiner

#### Time in position

2 years

6 months

2 years

20 months

2 years

\* As of Fall 2019, changed to a job in the insurance industry

#### Graduate School and/or professional certifications

Towson University, Community Health graduate prog.

Did not finish (very costly & got pregnant)

WVU School of Public Health, Master of Public Health in Epidemiology

Graduated May 2019

Certified Health Education Specialist

**2017 Spring/Fall graduates 7 respondents**

**Employment Status**

Employed-full time	4
Employed part-time	2
Full-time student	1
Part-time student	1
Volunteering	1

**Salary Ranges**

<\$20,000	2
\$60,001-65,000	1
\$30,001-40,000	3

**Current Employers**

Aetna, a CVS Health Company  
 Saudi FDA: Riyadh, Saudi Arabia  
 WVU Heart and Vascular Institute  
 Mon Health Heart & Vascular & Med Express  
 Just Blinds Miami (full-time nursing student)  
 WV DHHR

**Job Titles**

Audit Senior Consultant  
 Volunteer  
 Patient Navigator  
 Registered Medical Assist.  
 Personal assistant  
 CPS Worker\*\*

**Time in position**

1 month  
 3 months  
 3 months  
 1 year  
 3 months  
 1.5 years

\*\* As of Fall 2019, began dream job as a Sanitarian

**Graduate school and/or professional certifications**

Benedictine University  
 Master of Public Health with a concentration in health education and promotion  
 Currently enrolled  
 Certified Health Education Specialist  
 Fortis University, Accelerated RN program.  
 Estimated Grad date Dec 2020  
 First Aid, CPR, BLS

**2018 Spring/Fall graduates 2 respondents**

**Employment Status**

Employed full-time 2

**Salary Ranges**

\$30,001-40,000	1
\$25,001-30,000	1

**Current Employers**

Harrison Co. Family Resource Network  
 Harrison Co. Family Resource Network

**Job Titles**

Partnerships for Success Coord.  
 Coord. for Sub Abuse & Coalition

**Time in position**

Less than a year  
 2 months

**Graduate school and/or professional certifications**

Certified Health Education Specialist

**2019 Spring graduates**

**1 respondent**

**Employment Status**

Employed part-time 1 (process of becoming full-time)

**Salary Ranges**

<\$20,000	1
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**Current Employers (time in position)**

Fairmont State University

**Job Titles**

Fitness and Wellness Coord.

**Time in position**

3 months

**Graduate School and/or professional certifications**

NASPower, Certified Coach  
 NASM- CPT ---- IN PROGRESS

# APPENDIX XI: EXTERNAL REVIEWER LETTER





STATE OF WEST VIRGINIA  
DEPARTMENT OF HEALTH AND HUMAN RESOURCES  
Bureau for Public Health  
Office of Community Health Systems  
and Health Promotion

Bill J. Crouch  
Cabinet Secretary

Catherine C. Slemp, MD, MPH  
Commissioner & State Health Officer

October 30, 2019

Janie M. Leary, PhD, MPH, BSW, CHES  
Associate Professor  
Community Health Education Program  
Fairmont State University  
1201 Locust Avenue  
Fairmont, WV 26554

Dear Dr. Leary,

Thank you for the opportunity to review Fairmont State University's Community Health Education Program curriculum. I am impressed with the class descriptions provided and felt that the topics covered are very much used in practice in the field of public health. The competencies (per the Certified Health Education Specialist/National Commission for Health Education Credentialing) are used as basis for the priorities of the curriculum and skills for the graduates of Fairmont State University program. Representing the state health department for West Virginia, skills in these areas of community assessment, program planning, program implementation, grant writing and being able to communicate evaluation outcomes to selected stakeholders are critical skills and competencies needed to make the biggest impacts for our state.

As a preceptor for one of the students of this program, I found this student prepared for the tasks we gave him. He was familiar with community needs assessment processes, logic models, writing SMART (specific, measurable, attainable, realistic, timebound) objectives. He engaged in our discussions on chronic disease prevention and management topics, assisted in selecting priority goals for our Division given our current context and capacity, assisted in community mini grant reviews with one of our partnering organizations and was able to make site visits at trainings that one of our partnering organizations was implementing. I was very impressed with the caliber of his skills and Fairmont State University's preparation in these needed areas.

I do appreciate the quality improvement processes that you are facilitating for the Community Health Education Program in keeping this curriculum appropriate for the knowledge, skills and abilities for your graduates. Please do keep me informed if there is any support I can provide to you as you move forward.

Thank you very much for all your work!

Sincerely,

Jessica G. Wright, Director  
Division of Health Promotion and Chronic Disease

/JGW