

Health Studies Discipline Review

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Portland Community College Health Studies Faculty 2017 – 18 Academic Year

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The Health Studies Faculty are involved in the following PCC District Committees, Standing Committees, Task Forces, and Workgroups 2012-2017

- Academic and Student Affairs Master Plan Workgroup
- Bridges to Baccalaureate Program PI
- Community-based Advisory Learning Committee
- Curriculum Committee
- Degrees and Certificates Committee
- Education Abroad Committee
- Educational Advisory Committee
- EXITO
- Faculty Department Chair Institute Committee
- FERPA Task Force
- Gen Ed / Majors Workgroup
- Health and Physical Education Conference Workgroup
- PCC DL Observation Workgroup
- PCC Dual Credit Workgroup
- PCC Employee Wellness Committee
- PCC Family and Human Services Advisory Committee
- PCC Health Professions Task Force
- PCC Lactation Education Advisory Group
- PCC Sustainable Agriculture Task Force
- SPARC
- Student Development Committee

Health Studies 2018 Discipline Review Contents

PORTLAND COMMUNITY COLLEGE HEALTH STUDIES FACULTY 2017 – 18 ACADEMIC YEAR.....1

THE HEALTH STUDIES FACULTY ARE INVOLVED IN THE FOLLOWING PCC DISTRICT COMMITTEES, STANDING COMMITTEES, TASK FORCES, AND WORKGROUPS 2012-20171

HEALTH STUDIES 2018 DISCIPLINE REVIEW CONTENTS2

ACRONYMS LIST4

1. PROGRAM/DISCIPLINE OVERVIEW:5

A. WHAT ARE THE EDUCATIONAL GOALS OR OBJECTIVES OF THIS PROGRAM/DISCIPLINE? HOW DO THESE COMPARE WITH NATIONAL OR PROFESSIONAL PROGRAM/DISCIPLINE TRENDS OR GUIDELINES? HAVE THEY CHANGED SINCE THE LAST REVIEW, OR ARE THEY EXPECTED TO CHANGE IN THE NEXT FIVE YEARS? 6

B. BRIEFLY DESCRIBE CURRICULAR, INSTRUCTIONAL, OR OTHER CHANGES THAT WERE MADE AS A RESULT OF YOUR SAC’S RECOMMENDATIONS IN THE LAST PROGRAM REVIEW AND/OR ADMINISTRATIVE RESPONSE..... 8

2. OUTCOMES AND ASSESSMENT10

A. COURSE-LEVEL OUTCOMES 10

B. ADDRESSING COLLEGE CORE OUTCOMES 12

C. ASSESSMENT OF COLLEGE CORE OUTCOMES..... 12

3. OTHER INSTRUCTIONAL ISSUES15

A. PLEASE REVIEW THE DATA FOR COURSE ENROLLMENTS IN YOUR SUBJECT AREA. ARE ENROLLMENTS SIMILAR TO COLLEGE FTE TRENDS IN GENERAL, OR ARE THEY INCREASING OR DECREASING AT A FASTER RATE? WHAT (IF ANY) FACTORS WITHIN CONTROL OF YOUR SAC MAY BE INFLUENCING ENROLLMENTS IN YOUR COURSES? WHAT (IF ANY) FACTORS WITHIN CONTROL OF THE COLLEGE MAY BE INFLUENCING ENROLLMENTS IN YOUR COURSES?..... 15

B. PLEASE REVIEW THE GRADES AWARDED FOR THE COURSES IN YOUR PROGRAM. WHAT PATTERNS OR TRENDS DO YOU SEE? ARE THERE ANY COURSES WITH CONSISTENTLY LOWER PASS RATES THAN OTHERS? WHY DO YOU THINK THIS IS THE CASE, HOW IS YOUR SAC ADDRESSING THIS? 17

C. WHICH OF YOUR COURSES ARE OFFERED ONLINE AND WHAT IS THE PROPORTION OF ON-CAMPUS AND ONLINE? FOR COURSES OFFERED BOTH VIA DL AND ON CAMPUS, ARE THERE DIFFERENCES IN STUDENT SUCCESS? IF YES, DESCRIBE THE DIFFERENCES AND HOW YOUR SAC IS ADDRESSING THEM. 18

D. HAS THE SAC MADE ANY CURRICULAR CHANGES AS A RESULT OF EXPLORING/ADOPTING EDUCATIONAL INITIATIVES? 19

E. ARE THERE ANY COURSES IN THE PROGRAM THAT ARE OFFERED AS DUAL CREDIT AT AREA HIGH SCHOOLS? IF SO, DESCRIBE HOW THE SAC DEVELOPS AND MAINTAINS RELATIONSHIPS WITH THE HS FACULTY IN SUPPORT OF QUALITY INSTRUCTION..... 21

F. PLEASE DESCRIBE THE USE OF COURSE EVALUATIONS BY THE SAC. HAVE YOU DEVELOPED SAC-SPECIFIC QUESTIONS? HAS THE INFORMATION YOU HAVE RECEIVED BEEN OF USE AT THE COURSE/PROGRAM/DISCIPLINE LEVEL?..... 22

4. NEEDS OF STUDENTS AND THE COMMUNITY.....23

A. HAVE THERE BEEN ANY CHANGES IN THE DEMOGRAPHICS OF THE STUDENT POPULATIONS YOU SERVE? IF THERE HAVE BEEN CHANGES, HOW HAS THIS IMPACTED CURRICULUM, INSTRUCTION OR PROFESSIONAL DEVELOPMENT? 23

B. WHAT STRATEGIES ARE USED WITHIN THE PROGRAM/DISCIPLINE TO FACILITATE SUCCESS FOR STUDENTS WITH DISABILITIES? IF KNOWN, TO WHAT EXTENT ARE YOUR STUDENTS UTILIZING THE RESOURCES OFFERED BY DISABILITY SERVICES? WHAT DOES THE SAC SEE AS PARTICULARLY CHALLENGING IN SERVING THESE STUDENTS? 25

C. WHAT STRATEGIES ARE USED WITHIN THE PROGRAM/DISCIPLINE TO FACILITATE SUCCESS FOR ONLINE STUDENTS? WHAT DOES THE SAC SEE AS PARTICULARLY CHALLENGING IN SERVING ONLINE STUDENTS? 25

D. HAS FEEDBACK FROM STUDENTS, COMMUNITY GROUPS, TRANSFER INSTITUTIONS, BUSINESS, INDUSTRY OR GOVERNMENT BEEN USED TO MAKE CURRICULUM OR INSTRUCTIONAL CHANGES? IF SO, DESCRIBE..... 26

5. FACULTY: REFLECT ON THE COMPOSITION, QUALIFICATIONS AND DEVELOPMENT OF THE FACULTY	27
A. PROVIDE INFORMATION ON HOW THE FACULTY INSTRUCTIONAL PRACTICES REFLECT THE STRATEGIC INTENTIONS FOR DIVERSITY, EQUITY AND INCLUSION IN PCC’S STRATEGIC PLAN, THEME 5. WHAT HAS THE SAC DONE TO FURTHER YOUR FACULTY’S INTER-CULTURAL COMPETENCE, AND CREATION OF A SHARED UNDERSTANDING ABOUT DIVERSITY, EQUITY AND INCLUSION?	27
B. REPORT ANY CHANGES THE SAC HAS MADE TO INSTRUCTOR QUALIFICATIONS SINCE THE LAST REVIEW AND THE REASON FOR THE CHANGES	31
C. HOW HAVE PROFESSIONAL DEVELOPMENT ACTIVITIES OF THE FACULTY CONTRIBUTED TO THE STRENGTH OF THE PROGRAM/DISCIPLINE? IF SUCH ACTIVITIES HAVE RESULTED IN INSTRUCTIONAL OR CURRICULAR CHANGES, PLEASE DESCRIBE.	32
6. FACILITIES, INSTRUCTIONAL AND STUDENT SUPPORT	34
A. DESCRIBE HOW CLASSROOM SPACE, CLASSROOM TECHNOLOGY, LABORATORY SPACE, AND EQUIPMENT IMPACT STUDENT SUCCESS.	34
B. DESCRIBE HOW STUDENTS ARE USING THE LIBRARY OR OTHER OUTSIDE-THE-CLASSROOM INFORMATION. IF COURSES ARE OFFERED ONLINE, DO STUDENTS HAVE ONLINE ACCESS TO THE SAME RESOURCES?	35
C. DOES THE SAC HAVE ANY INSIGHTS ON HOW STUDENTS ARE USING ACADEMIC ADVISING, COUNSELING, STUDENT LEADERSHIP AND STUDENT RESOURCE CENTERS? WHAT OPPORTUNITIES DO YOU SEE TO PROMOTE STUDENT SUCCESS BY COLLABORATING WITH THESE SERVICES?	36
8. RECOMMENDATIONS	38
A. WHAT IS THE SAC PLANNING TO DO TO IMPROVE TEACHING AND LEARNING, STUDENT SUCCESS, AND DEGREE OR CERTIFICATE COMPLETION, FOR ON-CAMPUS AND ONLINE STUDENTS AS APPROPRIATE?	38
B. WHAT SUPPORT DO YOU NEED FROM ADMINISTRATION IN ORDER TO CARRY OUT YOUR PLANNED IMPROVEMENTS?	39
APPENDICES	41
APPENDIX A: AGREEMENTS AMONG FULL-TIME FACULTY.....	41
APPENDIX B: HEALTH STUDIES VOTING PROCESS	42
APPENDIX C: COURSE EQUIVALENCY TRANSFER LIST	47
APPENDIX D: HEALTH STUDIES CROSSWALK WITH PCC DEGREES, CERTIFICATES, JOB-READY ENTRANCE SKILLS, AND FOCUS AWARDS	48
APPENDIX E: HEALTH STUDIES FOCUS AWARD.....	50
APPENDIX F: HEALTH STUDIES SAC STRATEGIC / WORK PLAN - DRAFT	51
APPENDIX G: INSTITUTIONAL EFFECTIVENESS HEALTH STUDIES (HE) ANALYSIS REPORT	54
APPENDIX H: CLASSROOM ASSESSMENT STRATEGIES EXAMPLES	59
APPENDIX I: UPDATED CORE OUTCOMES MAPPING MATRIX.....	60
APPENDIX J: HEALTH STUDIES SAC OUTCOMES REPORTS	61
APPENDIX K: HEALTH STUDIES STUDENT DEMOGRAPHICS BY CAMPUS	62
APPENDIX L: CLASSES TAUGHT BY HEALTH STUDIES FACULTY FALL 2012-SPRING 2017	63

Acronyms List

Acronym	Full Name
AAC&U	Association of American Colleges and Universities
AAOT	Associate of Arts Oregon Transfer Degree
AAS	Associate of Applied Science Degree
AS	Associate of Science Degree
ASPH	Associated Schools of Public Health
AY	Academic Year
CA	Cascade Campus
CLWEB	Classroom and Web class
D2L	Desire to Learn
DL	Distance Learning or Online Learning
FDC	Faculty Department Chair
FT	Full-time faculty member
HE	Health Studies
IE	Office of Institutional Effectiveness
NIH	National Institutes of Health
PCC	Portland Community College
PSU	Portland State University
PT	Part-time faculty member
RC	Rock Creek Campus
SAC	Subject Area Committee
SE	Southeast Campus
SFTE	Student Full Time Equivalent
SY	Sylvania Campus

1. PROGRAM/DISCIPLINE OVERVIEW:

The Health Studies Mission:

Health Studies faculty support student success and guide student progress in meeting their personal, academic, and/or professional goals by providing high-quality instruction and curriculum.

Health Studies Vision:

Empowers examination and engagement with personal, social, political, economic, cultural, and environmental factors impacting the health and wellness of individuals and society.

The Health Studies SAC Mission and Vision statements were voted upon, and unanimously approved, on April 25, 2017. These two statements, comprised of only a small collection of words, in actuality represent a significant amount of work, dedication, and growth by the HE SAC over the past five years.

The HE SAC experienced a change in its full-time faculty composition since the previous HE Discipline Review. This shift in personnel revealed a strained working relationship among the full-time faculty members, and this revelation provided an opportunity for the HE SAC to improve. Health Studies faculty recognized that there was a need to articulate a cohesive vision of the group. Concurrently, there was a critical need to systematize and address the required work of the HE SAC.

The college supported the request for an external communications facilitator during the 2014-15 AY to meet with the FT faculty. Through this process, a number of agreements were adopted by the FT HE SAC faculty (Appendix A: Agreements Among Full-time Faculty). With the agreements in place, the HE SAC was able to develop a HE SAC Voting Process (Appendix B: Health Studies Voting Process). With a voting process in place, a mission/vision was able to be drafted. And, with this shared mission and vision, a strategic plan and work was able to be created, developed, and acted upon.

The Health Studies SAC is a multi-campus SAC, providing a variety of on-campus, CLWEB, and DL lower-division transfer health courses. As noted in the Health Studies Vision, the HE SAC courses aim to encourage students to think critically about health, the systems that influence individual and community health, and strategies that promote health and well-being within themselves, communities, and the environment.

I learned an abundance and gained knowledge that will follow me throughout my life.
- DL HE student, Fall 2017

All PCC Health Studies courses transfer as lower-division electives (Appendix C: Course Equivalency Transfer List). Several health courses meet specific PCC degree and certificate requirements, provide job-ready entrance skills, and support the Health Studies Focus Award (Appendix D: Health Studies Crosswalk with PCC Degrees, Certificates, Job-Ready Entrance Skills). Health Studies courses are also part of PCC's Dual-credit program. Health Studies SFTE decreased from 439.9 in the 2012-13 AY to 392.8 in the 2016-17 AY, with different patterns on each campus. More will be discussed in Section 3A. Part-time faculty numbers and membership remained fairly consistent over the past five years. Health Studies courses are offered at Cascade, Rock Creek, Southeast, and Sylvania campuses, as well as Newberg Center, Hillsboro Center, and

some high schools participating in the Dual Credit program. HE courses are no longer offered at Willow Creek Center or Scappoose High School.

A. WHAT ARE THE EDUCATIONAL GOALS OR OBJECTIVES OF THIS PROGRAM/DISCIPLINE? HOW DO THESE COMPARE WITH NATIONAL OR PROFESSIONAL PROGRAM/DISCIPLINE TRENDS OR GUIDELINES? HAVE THEY CHANGED SINCE THE LAST REVIEW, OR ARE THEY EXPECTED TO CHANGE IN THE NEXT FIVE YEARS?

The educational goals and objectives of the Health Studies SAC were recently updated and added to the Health Studies SAC Strategic / Work plan (Appendix F: Health Studies SAC Strategic / Work Plan). The plan includes a mission, vision, six focus areas with goals, objectives and strategies. The goals of the HE SAC were

Health (and well-being) is becoming a lifestyle now, rather than just a subject learned!
 - DL HE student, Fall 2017

intentionally linked to the PCC mission, core themes and college core outcomes. For example, one of the HE SAC goals states that “Content and curriculum are applicable, relevant, inclusive and current.” This goal aligns with the College Mission as well as two Core Themes, *Quality Education* and *Diversity, Equity, and Inclusion*. The focus areas and goals are identified in Table 1.

Table 1: Health Studies SAC Strategic / Work Plan:

Focus Area	Goal
#1. Curriculum & Course Design	#1: Content and Curriculum are applicable, relevant, inclusive, and current.
	#2: Course design, revision, and offerings are data driven and reflective of real-world economic demand (Link to Focus Area 4: HE SAC Processes)
#2. Pedagogy	#1: Use and continuously improve, pedagogical practices that include all communities
#3. Faculty Development	#1: Support HE SAC mission and vision by enhancing the skills and knowledge of HE SAC faculty
#4. HE SAC Processes	#1: The Health Studies SAC Policies are in alignment with PCC’s Policies and Procedures
	#2: Follow and address the administrative responsibilities of the HE SAC
#5. Institutional Relations	#1: The Health Studies SAC is an integral part of the institution
	#2: The Health Studies SAC is a visible part of the campus community
#6. Community Partnerships	#1: The Health Studies SAC is a visible part of the community at large
	#2: The Health Studies SAC partners with 4-year institutions to develop guided pathways

Depending on the course topic and the specific institute's degree requirements, HE courses serve to fulfill specific degree requirements, graduation requirements, and/or electives. PCC's HE course offerings are consistent community colleges in Oregon and the US.

The HE SAC continues to stay abreast of national trends related to the discipline and this is Goal #1 in the HE Studies Strategic / Work Plan. The World Health Organization identifies health as *a key contributor to a wide range of societal goals*. Coursework in Health Studies at PCC provides individuals with information and skills that will facilitate development of optimal health and well-being at the individual, social, and community level. Health is not merely the absence of disease but a state of complete physical, mental, social, intellectual, and spiritual well-being. Health Studies students explore the well-being of the individual and the community from a multi-dimensional perspective.

[My Health Studies class] made me want to pursue a career in health.
- On-Campus student, Fall 2017

Undergraduate public health education has grown rapidly in the last decade since the Institute of Medicine recommended that "...all undergraduates should have access to education in public health." This aligns with the increase of undergraduate student interest and engagement in public health, global health, and related disciplines over the last decade. In addition to a rise in undergraduate majors, there has been an increase in public health concentrations, minors, and general education courses, as well as public health-focused summer programs, internships, international experiences, clubs, and other extra-curricular activities (Association of Schools and Programs of Public Health). Health knowledge, concepts, and skills can be integrated into curricular and co-curricular undergraduate educational opportunities to enable students to become more active participants in their own and their community's health.

Healthy People 2020, a national program for improving the nation's health, includes objectives to increase the number of 4-year colleges and universities that offer a minor or major in public health. Integrative curricula provide opportunities to make evidence-based public health information available to a large number of undergraduates. In addition, national efforts to promote health literacy are reflected in PCC HE courses and course revisions. The *National Action Plan to Improve Health Literacy* seeks to engage organizations, professionals, policymakers, communities, individuals, and families in a linked, multi-sector effort to improve health literacy.

The HE SAC continues to explore ways to integrate these trends into current course offerings, the Health Studies Focus Award, as well as potential new courses that prepare students for transfer degrees in health studies. The relationship between the number of jobs available and the number of individuals receiving graduate and undergraduate degrees in public health will need to be followed closely, as will the impact of bachelor's degree graduates on the public health workforce.

Another direction that the HE Faculty are following in higher education is movement towards inclusive STEM education. For example, a FT HE faculty worked with colleagues at SY to develop a *Humanitarian Engineering Summer Camp* that worked with young people of all backgrounds on thinking critically about local and global humanitarian challenges. Faculty in the HE SAC continue to explore ways to connect with STEM programming, such as linking issues of food justice with STEM as well how to connect STEM occupations with public health.

The real life applications help.
- On-Campus student, Fall 2017

The goals of the Health Studies SAC have been modified since the last program review. The goals for the discipline have been refocused since the strategic plan, SWOT analysis, and environmental scan that occurred in Spring 2016. While some of the language is similar, the goals are more specific with

objectives and strategies to help guide the HE SAC with implementation. Additionally, Goal #4 from the previous review “to support Health Professions programs at Rock Creek” has been eliminated due to the changes that have happened at the college level and the recommendation of discontinuation of the Lactation Consulting program. The HE SAC expects its goals to stay similar over the next 5 years, but will also reassess as needed based on changes in the health and public health fields, changes at the college level, and changes in education at the state and national level.

B. BRIEFLY DESCRIBE CURRICULAR, INSTRUCTIONAL, OR OTHER CHANGES THAT WERE MADE AS A RESULT OF YOUR SAC’S RECOMMENDATIONS IN THE LAST PROGRAM REVIEW AND/OR ADMINISTRATIVE RESPONSE.

The Health Studies SAC has made a number of changes as a result of the 2013 program review and has addressed nearly all of the recommendations from the previous program review.

A 2013 recommendation was made to revisit the SAC structures and processes due to an expanding discipline. Since then, the SAC has worked to create more streamlined and transparent processes that are equitable among faculty on each campus. The HE SAC has implemented structured and timed agendas for meetings that focus on the six points noted in Table 2; a HE SAC voting process was created, voted on and approved; and FT faculty were assigned as lead instructors for each HE course. The lead instructor would be responsible for facilitating the work-group when revisions occur and ensuring that the course’s CCOGs are up-to-date and are assessable. Additionally, the HE SAC received funding to hire a consultant to help initiate a strategic plan with mid- and long-term goals. The HE SAC continues to experiment with strategies to improve HE SAC processes.

Table 2: Structure of HE SAC Meetings

Giving information
Getting information or advice
Problem solving or decision making
Planning and goal setting
Improving interpersonal relationships & communication
Engaging HE SAC members

At the Spring 2013 SAC meeting, the HE SAC voted and approved to change the name to “Health Studies”. The name was changed because the faculty felt that “Health” was not fully representative of what the discipline entails. Additionally, Health often gets confused with Allied Health and the name “Health Studies” differentiated itself from Allied Health. Lastly, “Health Studies” is more in alignment with the names of the discipline from other colleges and universities around the country.

I received credit necessary for transferring.
- On-Campus student, Fall 2017

The HE SAC has worked with the Office of Institutional Effectiveness department to gather data as to whether establishing prerequisites for HE courses would be beneficial.

The HE SAC used HE 242 and HE 250, the most offered courses affecting the greatest number of students (3,440 students in 2016-17 AY). Using four years of data,

the Office of Institutional Effectiveness compared the success rate of students who had completed at least one of the standard pre-requisites to the success rate of students who had not completed at least one of the standard pre-requisites. The Office of Institutional Effectiveness determined that the relationship “is not very strong” for F2F and DL HE 250 and HE 242, and that for HE 250 DL, “there is not a reliable relationship.” The Office of Institutional Effectiveness additionally did a cost-analysis and found that pre-requisites for HE 242 and HE 250 would, under the most conservative estimates, cost students an additional \$2.28 million in additional tuition (Appendix G: Institutional Effectiveness HE 242 and HE 250 Pre-requisite report).

A 2013 recommendation was to strengthen the crosswalk between course outcomes and College Core Outcomes while simultaneously integrating robust assessment strategies. Since then, the HE SAC has developed a plan for revisions of all its courses on a regular basis using the model developed for the 2014 – 15 AY HE 250: Personal Health course revision. As the HE SAC revises courses, faculty revisit the CCOGs and make sure they are in alignment with the College Core Outcomes. Each year, the HE SAC works to improve its assessment processes. Last year, the HE SAC participated in the Multi-state Collaborative project in hopes of getting some useful data. (This will be covered in further detail in section 2.2.C.)

A 2013 recommendation was to review course offerings across the district and balance the offerings. In the 2014 – 15 AY, the four deans agreed to redistribute the number of DL offerings at each campus. The four Faculty Department Chairs worked together to develop a district wide spreadsheet that reflects this. The chairs also worked together to develop a plan to offer the “specialty” courses on a rotational basis, based on student enrollment, student demand, degree completion, and faculty interest.

The HE SAC continues to maintain a relationship with the American Red Cross and have developed a formal Authorized Provider Agreement that is revisited every two years.

The HE SAC continues to explore ways to integrate undergraduate health literacy and preparation for the students based on national trends. The first of three Introductory Public Health courses is offered Winter 2018. This course is the first in the set that supports preparation for degrees in public health based on League of Innovations proposed curricula as well as other national trends.

Critically thinking about changes we can all make in our health and those around us.
- DL student, Fall 2017

The HE SAC has been working on strengthening transfer success for PCC students on various levels. Recently, transfer maps have been created between PCC Health Studies SAC and Portland State University School of Public Health to help students who are interested in degrees in public health transfer more easily into their junior year at PSU. Currently, a Memorandum Agreement is also being constructed between PCC and PSU. The SAC has also updated the Health Studies Focus Award and continued to offer Dual Credit options for students.

Based on a recommendation from the 2013 part-time faculty survey, the SAC has invited PCC colleagues from various student services, as well as local public health professionals, to come to HE SAC meetings and help to enhance professional development.

2. OUTCOMES AND ASSESSMENT

A. COURSE-LEVEL OUTCOMES

I. WHAT IS THE SAC PROCESS FOR REVIEW OF COURSE OUTCOMES IN YOUR CCOGS TO ENSURE THAT THEY ARE ASSESSABLE?

The Health Studies SAC is developing a process in its Strategic / Work Plan regarding reviewing outcomes during the course revision process. Previously, CCOGs have been reviewed on an as-needed basis. When courses are revised, the CCOGs are the first items to review.

Starting with the most current CCOGs, revision team members from across the college, both FT and PT, revise the CCOGs with the guiding principles identified in Table 3 and following the process depicted in Figure 1:

Table 3: Health Studies SAC CCOG Revision Principles

<u>Intentional, planned, and collaborative</u>
<u>Assessment and evaluation driven</u>
<u>Aligned with PCC and HE SAC mission, vision, goals, and priorities</u>
<u>Student-success focused</u>
<u>Academically rigorous</u>

Whenever possible, draft revisions are shared at a college-wide HE SAC meeting to gather input, suggestions, and approval. And more recently, if one of the course-level outcomes complements one of the college's core outcomes, an assessment tool is designed with one of the LEAD Rubrics so that artifacts can be shared at the college-level, if needed.

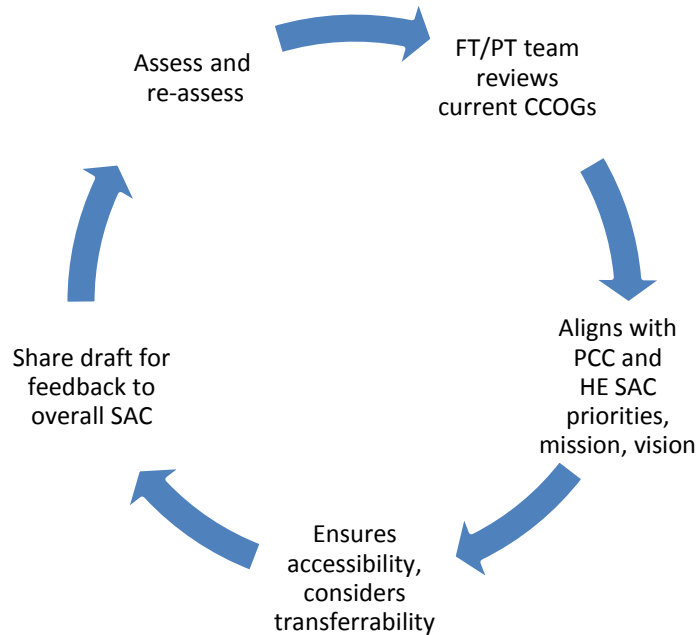
The Health Studies SAC has a long-running tradition of sharing assignments which are designed to assess course-level CCOGs. These are developed in a number of ways:

- An instructor develops a resource and shares
- A collaborative pair creates and shares
- An intentionally developed collaborative team from around the college with both Full- and Part-time faculty works together to develop a variety of tools to assess course-level outcomes

As more instructors become familiar and skilled at designing assessment strategies using Universal Design from the onset, instructors have used a wide variety of innovative and thoughtful assessment techniques that they employ in their course to improve upon student-learning (Appendix H: Classroom Assessment Strategies examples).

The HE SAC is continuing to build upon its 'culture of sharing', where instructors share resources during HE SAC meetings, on the HE SAC Site, or contributing to the Distance Learning HE SAC Shells.

Figure 1: Health Studies SAC CCOG Revision Process



II. IDENTIFY AND GIVE EXAMPLES OF CHANGES MADE IN INSTRUCTION, TO IMPROVE STUDENTS’ ATTAINMENT OF COURSE OUTCOMES, OR OUTCOMES OF REQUISITE COURSE SEQUENCES THAT WERE MADE AS A RESULT OF ASSESSMENT OF STUDENT LEARNING.

Students’ attainment of course-level outcomes are made in numerous ways and affect change in instruction. This includes instructor-level opportunities, such as class-level check-ins, assessments including questions that ask students to connect the content to the course-level outcomes, and community based learning opportunities.

I feel that I have greatly expanded my knowledge of my personal health and how to keep myself healthy as well as the health of my community, country, and world and health issues on all levels.
 - On-campus student, Fall 2017

This has increased as the culture of the HE SAC has shifted to increase instructor flexibility around curriculum enabling development and delivery of curriculum that simultaneously leverages individual faculty members’ creativity and strengths to effectively meet and assess the course-level outcomes. Additionally, faculty are continuing their professional development to develop alternate ways of assessing course-level outcomes, including presentations, projects, community-based learning, etc.

Systemically, the Health Studies SAC has built processes to improve students’ attainment of course-level outcomes. Following the major revision of HE 250: Personal Health, the most common HE course, the Health Studies SAC utilized the Learning Assessment process to assess the course’s outcomes. During that same time, the HE SAC applied for, and was awarded, an OER grant. In developing resources, assessment tools were built into the course that assessed course-level outcomes.

B. ADDRESSING COLLEGE CORE OUTCOMES

I. UPDATE THE CORE OUTCOMES MAPPING MATRIX.

Appendix I: Updated Core Outcomes Mapping Matrix

Table 4: Health Studies Updated Core Outcomes Mapping Matrix

Course	Course Name	CO1	CO2	CO3	CO4	CO5	CO6
HE 110	CPR/AED for Prof Rescuers & Health Care Providers	2	1	2	1	2	1
HE 112	Standard First Aid & Emergency Care	2	1	2	1	2	1
HE 125	First Aid & Industrial Safety	2	1	2	1	2	1
HE 207	Seminar in Biomedical, Behavioral & Health Sciences	2	1	1	1	2	2
HE 212	Women's Health	2	2	2	3	0	3
HE 213	Men's Health	2	2	2	2	0	3
HE 242	Stress & Human Health	2	1	2	1	0	3
HE 250	Personal Health	2	2	2	2	0	3
HE 251	Community & Public Health Issues	2	3	3	3	1	2
HE 252	First Aid - Basics & Beyond	2	2	3	1	2	3
HE 254	Weight Management & Health	2	2	2	2	1	2
HE 255	Film & Public Health	2	3	3	3	0	2
HE 262	Children's Health, Nutrition & Safety	2	2	2	2	1	2
HE 264	Health, Food Systems & the Environment	2	3	3	2	0	3
HE 278	Human Health & the Environment	2	3	3	2	0	3
HE 295	Health & Fitness for Life	2	1	2	1	1	3

C. ASSESSMENT OF COLLEGE CORE OUTCOMES

I. REFLECTING ON THE LAST FIVE YEARS OF ASSESSMENT, PROVIDE A BRIEF SUMMARY OF ONE OR TWO OF YOUR BEST ASSESSMENT PROJECTS, HIGHLIGHTING EFFORTS MADE TO IMPROVE STUDENTS' ATTAINMENT OF THE CORE OUTCOMES.

The 2012-2017 Health Studies College-level Core Outcomes Assessment process is presented in Table 5.

Table 5: Health Studies College-level Core Outcomes Assessment Process

	2012-13 AY	2013-14 AY	2014-15 AY	2015-16 AY	2016-17 AY
Assessed	Critical Thinking / Problem Solving HE 213 Self-Reflection HE 242	Critical Thinking / Problem Solving HE 250	Cultural Awareness HE 242	Course-level Assessment HE 250	MSC Critical Thinking HE 250 (Reassessed 2018)
Re-assessed		Self-Reflection HE 242	Self-Reflection HE 242		

The assessment project that we will highlight is the Self-reflection Core Outcome that was assessed using the HE 242 Summary Paper. A rubric was developed using the standards outlined in the Core Outcomes Mapping Matrix.

Most instructors utilized a similar version of the Summary Paper, both F2F and DL. Artifacts were randomly collected. Then, for the following two years, educational interventions were conducted and the same assignment and Core Outcome were assessed (Attachment J: HE SAC Outcome Reports).

The Health Studies SAC is most proud of its evolution in the understanding of the Assessment of College Core Outcomes process over the past five years, which mirrored the college’s general understanding of assessment as well.

I think my health class has helped me develop extra self-awareness.
- On-campus student, Fall 2017

The HE SAC’s Assessment process always aimed to include sections from across the district and in both F2F and DL modalities. The HE SAC developed its own rubrics based on the standards outlined in the Core Outcomes Mapping Matrix. Artifacts were collected, but assessed by a only few

faculty. Beginning in the Spring 2014 HE SAC meeting, the HE SAC would designate time during the Spring SAC meeting time so all members present would evaluate after a norming process.

In the 2016-2017 AY, the HE SAC decided it wanted to increase its understanding and participation in the College-level Core Outcome Assessment process. The Health Studies SAC decided to participate in the Multi-State Collaborative. It was recognized that this would help further improve the HE SAC’s assessment process.

Emily Gaige represented the HE SAC at the MSC assignment workshop. She brought the information back to the team and assisted in applying LEAD’s Critical Thinking Rubric to a common assignment used in the HE 250 class (which had 91 sections in 2016-17 AY).

Samples were collected by the Dean of Academic Affairs office comparing students who had earned between 0 - 22 credits and students above who had earned 67 or more credits. For the following Academic Year, the Health Studies SAC is going to use the internal scores as the baseline, conduct an educational intervention, and reassess in the following year.

II. DO YOU HAVE EVIDENCE THAT THE CHANGES MADE WERE EFFECTIVE BY HAVING REASSESSED THE SAME OUTCOME? IF SO, PLEASE DESCRIBE.

Yes, following the process of assessing and reassessing the Self-reflection outcome in the HE 242 Summary Paper. Presented in the 2014-15 End of Year report, the HE SAC concluded: "Based on the re-assessment results of 2015, the HE SAC is pleased with the outcomes of the modified wording of Section 5 of the HE 242 Summary Paper. The HE SAC feels that the modification supports the students in practicing self-reflection at a level the SAC is hoping to get from students." (Attachment J: HE SAC Outcome Reports).

III. EVALUATE YOUR SAC'S ASSESSMENT CYCLE PROCESSES. WHAT HAVE YOU LEARNED TO IMPROVE YOUR ASSESSMENT PRACTICES AND STRATEGIES?

The Health Studies SAC's assessment cycle is a continuous work in progress. The HE SAC understood the assess-reassess process, but at a level that made the process one of an institutional process, not as an agent of continuous improvement. The HE SAC is improving its understanding of the process as the college as a whole does as well. The HE SAC is intentionally building assessment of college-level outcomes during current and future course revision process. It has decided to keep the LEAD rubrics available when developing assignments. Additionally, the HE SAC's decision to participate in the MSC process and send a representative to the workshop was very beneficial.

IV. ARE THERE ANY CORE OUTCOMES THAT ARE PARTICULARLY CHALLENGING FOR YOUR SAC TO ASSESS? IF YES, PLEASE IDENTIFY WHICH ONES AND THE CHALLENGES THAT EXIST.

Yes, the College-level Core Outcome of Professional Competence is difficult for the HE SAC to assess. In reviewing the description of the Professional Competence Core Outcome, most of our courses do not assess these or include them in the course-level outcomes, and when possible, can do so at only a cursory level. This is partly because the course outcomes do not directly address this as part of the foundational knowledge of the course.

3. OTHER INSTRUCTIONAL ISSUES

- A. PLEASE REVIEW THE DATA FOR COURSE ENROLLMENTS IN YOUR SUBJECT AREA. ARE ENROLLMENTS SIMILAR TO COLLEGE FTE TRENDS IN GENERAL, OR ARE THEY INCREASING OR DECREASING AT A FASTER RATE? WHAT (IF ANY) FACTORS WITHIN CONTROL OF YOUR SAC MAY BE INFLUENCING ENROLLMENTS IN YOUR COURSES? WHAT (IF ANY) FACTORS WITHIN CONTROL OF THE COLLEGE MAY BE INFLUENCING ENROLLMENTS IN YOUR COURSES?

In order to review how Health Studies' enrollment and FTE trends compare with that of the institution's, the Health Studies SAC compared the college-wide LDT FTE rates to the HE FTE rates. This is presented in Table 6.

Table 6: LDT FTE compared to HE FTE

	2012-13 AY	2013-14 AY	2014-15 AY	2015-16 AY	2016-17 AY	5-Year Quotient
LDT FTE ¹	18710	17909	17064	16210	16254	0.87
HE FTE ^{2,3}	439.9	495.8	455.8	422.5	392.8	0.89

¹ <https://www.pcc.edu/ir/factsheet/Factbook/201516/CW-swrafte.pdf>

² https://www.pcc.edu/ir/program_profiles/201617/HE.pdf ;

³ Excludes D6

While the college's LDT FTE has reduced 13% from 2012-2017, Health Studies FTE has decreased 11%. Changes in individual On-campus HE enrollment are similar to the changes experienced on the individual campuses at the college-level.

Individual campus FTE variations can be attributed to multiple factors. This can include staffing changes and facility availability. Also, how individual on-campus enrollment can affect other campus trends is an area that continues to be studied in PCC.

The largest individual campus FTE shifts can be seen when On-campus FTE (including TV and CLWEB) is compared to DL FTE.

Table 7: Comparing 5-year of On-Campus and DL FTE generated by campus

	2012-13 On-Campus FTE	2016-17 On-Campus FTE	5-year On- Campus Quotient	2012-13 DL FTE	2016-17 DL FTE	5-year DL Quotient	Total 5-year FTE Trend
Cascade	56.87	28.15	0.49	48.86	50.04	1.02	0.74
Rock Creek	64.5	61.75	0.96	85.56	64.81	0.76	0.84
Southeast	56.24	49.05	0.87	45.21	49.42	1.09	0.97
Sylvania	76.49	59.2	0.77	5.82	35.09	6.03	1.14
Total	254.1	198.15	0.78	185.45	199.36	1.07	0.89

¹ Calculated manually using SWRSECT (CRNH * WK * ENRL / 510)

² CLWEB and TV FTE were added to On-campus FTE

³ D6 (Hillsboro Center) included with RC On-Campus FTE. NEC On-Campus FTE counted in SY On-Campus FTE.

When looking at Table 7, which includes individual campus 2012-13 and 2016-17 comparison (combining on-campus and DL), the following observations can be seen:

- Cascade’s FTE has decreased 26%, with all of it occurring in the On-campus venue
- Rock Creek’s FTE has decreased 16%, with most of it occurring in the DL redistribution
- Southeast’s FTE has decreased 3%, with all of it occurring in the On-campus venue
- Sylvania’s FTE has increased 14%, with all of it occurring Online
- In 2012-13 AY, 42% of FTE generated by HE classes was Online
- In 2016-17 AY, 50% of FTE generated by HE classes was Online

The four Health Studies FDCs have been working together in an effort to develop a scheduling plan for both F2F and DL courses. Though the process continues to be a work in progress, there is improvement each academic year.

The HE SAC faculty, Faculty Department Chairs, and Division Deans work together to:

- Complement course schedules so that classes are offered on different days and times
- Schedule the classes that the district can support one or two sections at a time on a rotational basis that accommodates the student, campus, and district needs
- Promote each other’s classes, through flyers, PowerPoint advertisements, or word of mouth
- Work with Advising and Counseling to recruit and direct students
- Work with Portland State University’s School of Public Health to ensure course alignment
- Work with Part-time faculty to complement schedules

Areas that the HE SAC are currently addressing to increase enrollment include:

- Looking for appropriate opportunities to cross-list courses
- Exploring the possibility of expanding the AAOT Health and Wellness degree component options
- Exploring the possibility of proposing the appropriate courses to the General Education list
- Supporting the new AAS in Family and Human Services degree as one of the their 13-credit 'Concentration Area Electives'
- Maintaining our relationship with PSU and planning to work with other transfer institutions

B. PLEASE REVIEW THE GRADES AWARDED FOR THE COURSES IN YOUR PROGRAM. WHAT PATTERNS OR TRENDS DO YOU SEE? ARE THERE ANY COURSES WITH CONSISTENTLY LOWER PASS RATES THAN OTHERS? WHY DO YOU THINK THIS IS THE CASE, HOW IS YOUR SAC ADDRESSING THIS?

The following grades awarded using data secured from:

https://www.pcc.edu/ir/program_profiles/201718/gradespercentcw.html

- College-wide, the percent of A/B/C/P grades awarded during the 2016-17 AY
 - HE 110 – 100%
 - HE 112 – 92.7%
 - HE 125 – 100%
 - HE 212 – 75.6%
 - HE 213 – 69.7%
 - HE 242 – 78.9%
 - HE 250 – 81.7%
 - HE 251 – 76.5%
 - HE 252 – 89.2%
 - HE 254 – 64.7%
 - HE 255 – 73.9%
 - HE 262 – 68.3%
 - HE 264 – 74.3%
 - HE 278 – 78.1%
 - HE 295 – 81.0%
- The courses with skills-based curriculum, HE 110, HE 112, HE 125, and HE 252 all have the highest percentages of A/B/C/P grades awarded.
- Courses that have lower pass rates tend to be offered mostly online.
- The HE SAC is addressing this by:
 - Identifying Pedagogy as Focus Area #2 in the Health Studies SAC Strategic / Work Plan
 - At HE SAC meetings, holding conversations about strategies to address student success for both On-campus and DL courses. These conversations are grounded in these three themes:
 - Be collaborative, inclusive, connected, supportive, receptive (*HE SAC future vision*)
 - While being holistic and social-justice minded, about self-improvement, enhance skills, address challenging topics, bridge gaps, create safe spaces, and meet students where they are (*HE SAC self-identified strengths*)
 - Move towards student success, eradicate achievement gaps, take collective responsibility for student success, and collaborate (*President Mitsui's Fall 2017 'Welcome Back' email*)

C. WHICH OF YOUR COURSES ARE OFFERED ONLINE AND WHAT IS THE PROPORTION OF ON-CAMPUS AND ONLINE? FOR COURSES OFFERED BOTH VIA DL AND ON CAMPUS, ARE THERE DIFFERENCES IN STUDENT SUCCESS? IF YES, DESCRIBE THE DIFFERENCES AND HOW YOUR SAC IS ADDRESSING THEM.

The Health Studies SAC has 9 DL courses. During the 2016-17 Academic Year, PCC offered 119 sections compared to the 109 sections of their On-campus counterparts. This is presented in Table 8.

Table 8: Number of On-Campus and DL sections offered

	Name	Number of On-Campus Sections 2016-17 AY	Number of DL Sections 2016-17 AY
HE 212	Women's Health	3	9
HE 213	Men's Health	1	6
HE 242	Stress and Human Health	23	25
HE 250	Personal Health	56	35
HE 251	Community and Public Health Issues	3	4
HE 262	Children's Health, Nutrition, & Safety	1	9
HE 264	Health, Food Systems, and the Environment	1	5
HE 278	Human Health and the Environment	0	3
HE 295	Health and Fitness for Life	21	23

In looking at the three classes with the greatest enrollment, it is evident that there are differences in success rates based on if the class is taught On-Campus or if the class is taught Online. This is presented in Table 9.

The HE faculty cannot fully explain these grade disparities, however, many faculty do experience greater attrition rates in their DL Courses when compared to their On-Campus classes. There is a greater rate of 'ghosting', where students are registered but not attending the course. These students express no interest in successfully completing the course.

Table 9: Comparing On-Campus and Online Student Success rates for HE's three largest classes

	On-Campus HE 242 2016-17 AY % Success Rate (597 Students)	DL HE 242 2016-17 AY % Success Rate (592 Students)	On-Campus HE 250 2016-17 AY % Success Rate (1407 Students)	DL HE 250 2016-17 AY % Success Rate (831 Students)	On-Campus HE 295 2016-17 AY % Success Rate (413 Students)	DL HE 295 2016-17 AY % Success Rate (530 Students)
Cascade	63.2	65.1	61.7	64.8	63.0	72.2
Rock Creek	89.8	81.6	88.3	82.1	90.9	84.1
Southeast	82.8	75.6	90.3	73.8	85.5	79.4
Sylvania	90.3	85.5	85.3	81.7	81.9	79.5
Average	81.5	76.9	81.4	75.6	80.3	78.8

https://www.pcc.edu/ir/program_profiles/success%20rates/DL-WEB_201617.pdf

There were two important things I learned from my first aid class. First, being able to take charge of a situation is paramount. [...] The second thing I learned from this class was that being able to manage the aforementioned situation is just as important as taking charge. [...] In summary, I believe that being a good leader is the most important skill I learned from my first aid class.

On-Campus student, Fall 2017

The HE SAC has addressed this with instructors experimenting with various methods to encourage engagement. These include an Orientation Assignment to complete before the NS period expires during Week 1 of the term. Multiple opportunities to connect with students by personal email, group email, CPNs, or phone call check-ins.

During district-wide SAC meetings, the HE SAC has begun a practice to incorporate time to share strategies that work. Additional challenges and strategies are addressed in 4.C.

D. HAS THE SAC MADE ANY CURRICULAR CHANGES AS A RESULT OF EXPLORING/ADOPTING EDUCATIONAL INITIATIVES?

Yes, the Health Studies SAC has made curricular changes as a result of exploring/adopting educational initiatives. In Spring 2015, The HE SAC was awarded a grant to develop OER materials for HE 250: Personal Health, the class with the largest student enrollment. Valerie Limbrunner-Bartlett was instrumental in securing this grant. During the 2015-16 AY, up to ten HE SAC members collaboratively worked to produce materials for the OER HE 250. Universal Design was adopted at the onset of development. The materials were piloted in Spring 2016, during the 2016-17 AY, the materials were refined even further. In Fall 2017, six F2F HE 250: Personal Health sections were using OER.

It provided me with new information and it was great to be part of a class with open educational resources.

- On-Campus student, Fall 2017

Community Based Learning is another area that many HE instructors engage with. Projects continue to change and grow. These include projects in HE 242, HE 250, HE 251, and HE 264.

Additionally, the benefits of the Study Abroad program are recognized as important in the application of the course objectives. Currently, a section of HE 264: Health, Food Systems, and the Environment is scheduled to run in Cuba in Summer 2018. Elona Cassady has worked to make this a reality.

My health class has given me vital tools to help me be successful throughout my education and beyond!

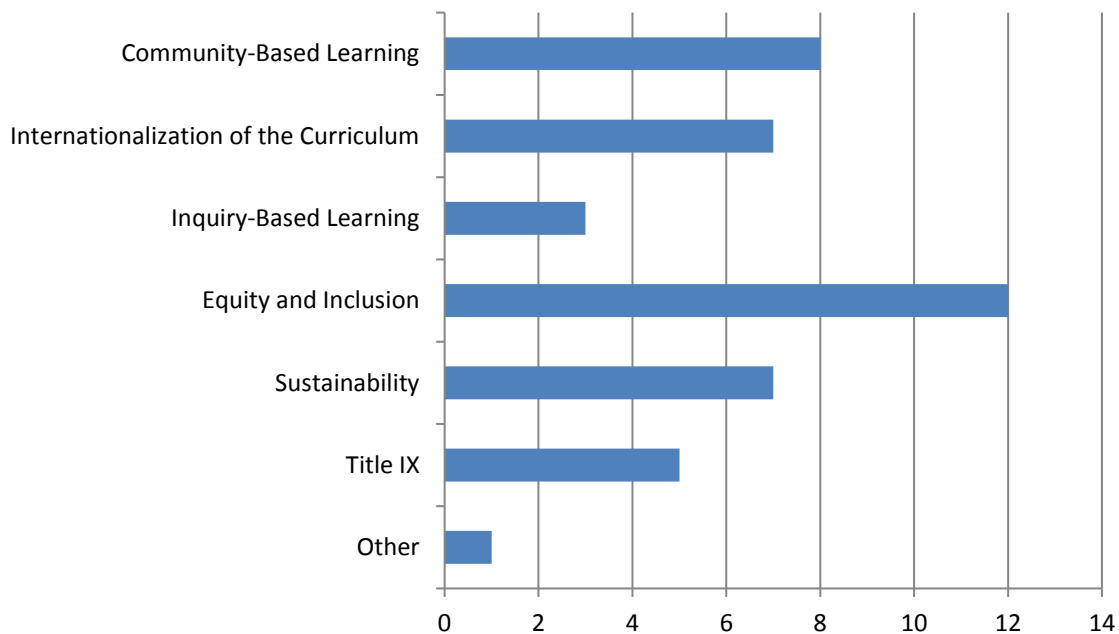
- On-Campus student, Fall 2017

Professional Development opportunities are a wonderful opportunity for our faculty to become better professionals in their classrooms and for the institution. HE SAC members are then invited to share learned experiences at SAC meetings with the rest of the group. Faculty have participated in the Teaching Men of Color, National

Conference on Race and Ethnicity in American Higher Education, Summer Institute for Intercultural Communication, Social justice trainings, the Anderson Conference, and various TLC events.

At the beginning of the 2017-2018 academic year, the HE SAC conducted an anonymous online Qualtrics survey to all HE faculty at PCC. The purpose of the HE Faculty Survey was to collect written record of what is working well and what can be improved within the HE discipline. This exact question was included in the HE Faculty Survey. Figure 2 demonstrates the initiatives that Health Studies faculty have participated in.

Figure 2: Initiatives Health Studies faculty have participated in



Examples of curricular changes as a result of these opportunities include:

- Listed Title IX in syllabus.
- Equity and Inclusion are discussed in class when teaching relevant topics
- Incorporation of CBL
- Effort for inclusivity starts the first day (asked for preferred name and pronouns)
- Internationalization of the curriculum

Additional examples from the HE Faculty Survey include:

"I've included materials and activities that allow for investigation and critical thinking related to culture, socioeconomics and international issues for stress, women's health and community health. I also provide choice related assignments and term long projects that include inquiry strategies and community based learning."

"I have included a volunteer component to Children's Health at a neighborhood PPS charter elementary school with a focus on garden/nutrition/mindfulness/yoga and a mission to serve students of color and low income students and close the opportunity gap Equity and Inclusion - more video lecture material from experts in health who are people of color, partnership with charter school mentioned above

"For sustainability my students visit a Rose Garden for an experiential learning activity about Eco-therapy for the Stress and Human Health class"

"For HE 242 (Stress & Human Health) I have added an Everyday Discrimination Scale to assessments that we have students complete. This is important as we ask students about many of the stressors they experience in their lives but never ask about discrimination which happens on a regular basis to many of our students. I have also made changes in assignments, group activities, and discussions to ensure they are inclusive and understanding."

E. ARE THERE ANY COURSES IN THE PROGRAM THAT ARE OFFERED AS DUAL CREDIT AT AREA HIGH SCHOOLS? IF SO, DESCRIBE HOW THE SAC DEVELOPS AND MAINTAINS RELATIONSHIPS WITH THE HS FACULTY IN SUPPORT OF QUALITY INSTRUCTION.

Yes, HE 112, HE 250, and HE 252 are offered as Dual Credit at area High schools. The enrollments are:

- 2012-13 AY
 - HE 252 Aloha HS - 4 students
 - HE 250 Century HS - 31 students
 - HE 252 Beaverton HS - 90 students
- 2013-14 AY
 - HE 252 Aloha HS - 11 Students
 - HE 252 Beaverton HS - 86 students
- 2014-15 AY
 - HE 252 Aloha HS - 13 students
 - HE 112 Century HS - 65 students
 - HE 250 Century HS - 15 students
- HE 252 Beaverton HS - 80 students
- 2015-16 AY
 - HE 252 Aloha HS - 7 students
 - HE 112 Century HS - 50 students
 - HE 112 Liberty HS - 97 students
 - HE 252 Beaverton HS - 82 students
- 2016-17 AY
 - HE 112 Aloha HS - 52 students
 - HE 112 Liberty HS - 61 students
 - HE 112 Glencoe HS - 84 students
 - HE 252 Beaverton HS - 104 students

A FT faculty member and two PT faculty members, Emily Gaige and Lisa Regan Vienop, have worked with the Dual Credit office and Dual Credit Instructors during this time period. PCC HE faculty and Dual Credit Instructors meet once a year at the Dual Credit Symposium where they share ideas, strategies, and resources.

After the HE SAC developed OER materials for HE 250, they were shared with the HE 250 Dual Credit Instructor.

Before a Dual Credit class is taught, the syllabus is reviewed thoroughly to ensure that it meets the PCC Syllabus Standards. Dual Credit Instructors are assessed following the guidelines set by the Dual Credit office. And, relationships are maintained so that Dual Credit Instructors are comfortable reaching out when questions arise.

F. PLEASE DESCRIBE THE USE OF COURSE EVALUATIONS BY THE SAC. HAVE YOU DEVELOPED SAC-SPECIFIC QUESTIONS? HAS THE INFORMATION YOU HAVE RECEIVED BEEN OF USE AT THE COURSE/PROGRAM/DISCIPLINE LEVEL?

The Health Studies SAC does not use SAC-specific questions in the course evaluations. Some individual faculty use additional questions in their course evaluations to refine their courses. Once the HE SAC completes its Strategic Plan, it is hoping to incorporate SAC-specific questions. Faculty have made curricular changes as a result of reviewing course evaluations. For example:

- Strive to grade papers in a timelier manner.
- Providing a more interactive classroom with in-class activities
- Utilizing universal design
- Changes in the types of activities
- Exam and quiz modification
- Providing more in-depth feedback

91% of faculty that responded to the HE Faculty Survey have made changes to their courses as a result of reviewing the end of the quarter course evaluations. When asked this question on the survey, faculty said:

“Making sure that my grading is done in a timely manner and taking the time to give clear feedback to the students concerning online grades. Making sure to leave time for questions and giving clear guidelines as to what is required for the class.”

“I’ve included materials and resources for people of color, gender and sexual orientation. I’ve also increased materials related to resiliency and poverty as well as social justice”

4. NEEDS OF STUDENTS AND THE COMMUNITY

A. HAVE THERE BEEN ANY CHANGES IN THE DEMOGRAPHICS OF THE STUDENT POPULATIONS YOU SERVE? IF THERE HAVE BEEN CHANGES, HOW HAS THIS IMPACTED CURRICULUM, INSTRUCTION OR PROFESSIONAL DEVELOPMENT?

Student demographics have changed in recent years, as experienced by Community Colleges across the United States as well as by disciplines across PCC's campuses. The "non-traditional" student has now become more common.

However, PCC has also faced younger students in the past few years due to the lessening influence of the recession on student enrollment. Table 10 reflects the changing Health Studies student demographics. Despite younger students across the district, students are still often coming to PCC after work experience, starting families, military service, and deciding to change careers.

There have also been noted differences in student demographics particular to each of the four campuses (Appendix K: Health Studies Student Demographics by Campus). The composition of each community where PCC campuses are located has also changed; as they have experienced increases in students from newly arrived immigrant groups, shifts in demographics as gentrification and urban development has impacted neighborhoods, the implementation of new policies at the local, state, and national level, and the emerging of public health challenges-- such as the opioid drug epidemic, food insecurity, and the housing crisis.

According to the Community College Shifting Enrollment Landscape Report (EAB, 2016) first-generation students comprise the core audience of many community colleges. Reflecting this need, Health Studies courses have been designed to develop college readiness skills.

[My Health Studies class] expanded my knowledge of global health disparities.
- On-Campus student, Fall 2017

Table 10: Health Studies Demographics

		2012-13 AY Health Studies Students	2016-17 AY Health Studies Students
Age	Under 20 years old	23.6%	34.3%
	20-24 years old	27.9%	30.6%
	25-49 years old	45.5%	32.9%
	50+ years old	3.1%	2.2%
Gender	Female	63.3%	60.3%
	Male	35.8%	37.9%
	Unreported	0.9%	1.7%
Race/Ethnicity	African American	7.8%	6.3%
	Asian	6.5%	9.2%
	Hispanic	10.0%	13.0%
	Multi-Racial	4.3%	7.3%
	Native American	1.5%	0.7%
	Pacific Islander	0.7%	0.8%
	Unreported	7.9%	6.4%
	White	61.3%	56.3%

https://www.pcc.edu/ir/program_profiles/index.html

In response to demographic changes, Health Studies faculty analyzes their curriculum, pedagogy, and plans for professional development. For example, Health Studies faculty have participated in the following activities:

- Participated in PCC Drug & Alcohol courses to teach about the opioid epidemic and treatment
- Developed community-based learning projects that focus on community public health and social justice issues
- Planned and implemented community events on raising awareness and resources for pressing public health issues, e.g. veteran’s health
- Incorporated information on Title IX and Housing/Food Insecurity into class material
- Organized workshops on local public health issues, mental health first aid, HIV/AIDS, and more
- Moved one AAOT course to an Open Educational Resources (OER) platform

I've reevaluated how I live and am moving forward with helpful knowledge.
 - On-Campus student, Fall 2017

Section 5 of this report provides additional examples of how the Health Studies SAC has met demographic changes proactively, in order to meet student needs.

B. WHAT STRATEGIES ARE USED WITHIN THE PROGRAM/DISCIPLINE TO FACILITATE SUCCESS FOR STUDENTS WITH DISABILITIES? IF KNOWN, TO WHAT EXTENT ARE YOUR STUDENTS UTILIZING THE RESOURCES OFFERED BY DISABILITY SERVICES? WHAT DOES THE SAC SEE AS PARTICULARLY CHALLENGING IN SERVING THESE STUDENTS?

The Health Studies SAC has sought to increase success and accessibility to students with disabilities. Faculty have expressed challenges in knowing how to implement accommodations and challenges communicating with students about their disability accommodation. In response, the HE SAC

Having a good comprehension about personal health and environment effects of health.
- On-Campus student, Fall 2017

organized a workshop for Health Studies faculty led by Disability Services Director, Kaela Parks. The Health Studies SAC has worked with the Disability Advocate for Online courses during DL course revisions, including HE 212, HE 242, HE 295 and others. Additionally, the HE SAC has met with textbook publishers and emphasized the need for accessible material. One of the strategies used to facilitate student success includes creating courses using Universal Design to ensure courses are accessible. Finally, the Health Studies SAC has included a section in the emerging Strategic Plan on diversity and accessibility.

C. WHAT STRATEGIES ARE USED WITHIN THE PROGRAM/DISCIPLINE TO FACILITATE SUCCESS FOR ONLINE STUDENTS? WHAT DOES THE SAC SEE AS PARTICULARLY CHALLENGING IN SERVING ONLINE STUDENTS?

The Health Studies SAC has sought to increase student success for DL students by collaborating in the design of DL shells. Diverse revision teams work together and provide multiple perspectives while developing comprehensive assignments and content. Similarly, DL course shells have been developed to be “80% complete”, allowing for more instructor autonomy and presence. This model also keeps the technical skills of instructors fresh and current. Health Studies also offers CLWEB courses, which often better serve non-traditional student needs.

These classes have helped me to build a foundation to move forward in my education.
- Online student, Fall 2017

Additionally, several Health Studies faculty have taken advantage of PCC’s opportunities to develop online teaching skills, including participation in the *Improving Your Online Course*, a hands-on training that uses the Quality Matters rubric to improve accessibility and accessibility of online courses.

Finally, each HE SAC meeting includes time for the sharing of best practices in pedagogy, focusing on face-to-face and online methodologies.

As reported from the 2017 HE Faculty Survey, challenges to online teaching and learning revolve around inconsistent implementation of enrollment policies by faculty as well as in the level of engagement among students. Because some HE classes are usually, if not always, held online, the students who prefer in-person learning may be at a disadvantage in online courses. Students who learn best in a more supportive environment, as well as students who are new to online learning, may fall through the cracks if not met with innovative pedagogical techniques. This is why Health Studies faculty continually introduces, assesses and reassesses best practices in online teaching. These include:

- Establishing rapport and consistency early on
- Tailoring feedback, follow-up through phone calls, emails, and CPNs
- Clearly communicating expectations and communication standards
- Weekly announcements and emails
- Revised courses using more cutting-edge pedagogical styles, including adoption of OER-style information sharing

D. HAS FEEDBACK FROM STUDENTS, COMMUNITY GROUPS, TRANSFER INSTITUTIONS, BUSINESS, INDUSTRY OR GOVERNMENT BEEN USED TO MAKE CURRICULUM OR INSTRUCTIONAL CHANGES? IF SO, DESCRIBE.

Several changes in the needs of industry and within four-year Universities have framed Health Studies SAC activities in the last several years. To answer the needs of four-year partners and to bring equitable success to our

students, Health Studies faculty have worked with Portland State University (PSU) to develop a memorandum of understanding (MOU) and improved advising guides. These new dimensions of a partnership with PSU are further supporting students transferring into the School of Public Health. Students can now take an expanded list of courses at PCC that can be fully transferred – thus enabling students to save time and financial resources. MOUs with other partners are expected to develop in the next few years.

The Health Studies SAC has also worked with other PCC Faculty to collaborate on the new Human Services Degree. Faculty from Health Studies participate on the degree advisory committee, contributing to critical interdisciplinary work of the HE SAC.

Additionally, given the current shortage of engineers in Oregon, along with the field’s lack of diversity, faculty from the Health Studies SAC, along with Engineering and Environmental Studies Faculty and local partners, developed and implemented a Summer Camp for a diverse group of students with interests in global health, international development, and engineering. The development of this course received funding from the Oregon Department of Education to meet state and national demands for more STEM-track, including public health, students.

I started to make my mental health more of a priority.
- On-Campus student, Fall 2017

Table 11: New Partnerships

New partnerships after changes in industry	Results
Portland State University	Memorandum of Understanding & Transfer Maps
AVID and Beaverton Schools, STEM Hubs	Humanitarian Engineering Camp
Veterans Resource Center	Summer Retreat for Veterans

Finally, conversations on equity and higher education have led to the implementation of HB 2998B. This bill is looking at how credits earned at community colleges can be consistently transferred to four-year institutions in an equitable way across the state. These conversations, and others, have been leading to discussions on how transfer pathways can be created to better support students to successfully earn degrees and enter meaningful careers. The Health Studies SAC is staying abreast of these conversations and will be prepared to develop a health transfer pathway if and when requested.

5. FACULTY: REFLECT ON THE COMPOSITION, QUALIFICATIONS AND DEVELOPMENT OF THE FACULTY

A. PROVIDE INFORMATION ON HOW THE FACULTY INSTRUCTIONAL PRACTICES REFLECT THE STRATEGIC INTENTIONS FOR DIVERSITY, EQUITY AND INCLUSION IN PCC’S STRATEGIC PLAN, THEME 5. WHAT HAS THE SAC DONE TO FURTHER YOUR FACULTY’S INTER-CULTURAL COMPETENCE, AND CREATION OF A SHARED UNDERSTANDING ABOUT DIVERSITY, EQUITY AND INCLUSION?

The Health Studies discipline’s commitment to diversity, equity and inclusion strongly aligns with PCC’s Strategic Plan regarding diversity, equity and inclusion and actively supports PCC’s 2017 Affirmative Action Plan for Minorities and Women.

<https://www.pcc.edu/about/equity-inclusion/documents/2016-wfa-summary.pdf>

Over that last 5 years, the Health Studies discipline has maintained five full-time faculty positions with at least one full-time faculty member “anchoring” the discipline on each campus.

While the number of part-time faculty declined by two, the total number of part-time faculty district-wide remained relatively stable. It is noted that, of the 37 faculty teaching in 2013, 22 were teaching in Fall 2017.

I have been able to increase my love for health and decided this is a good career path for me.
- On-Campus student, Fall 2017

While the Health Studies discipline is pleased to note a slight increase in racial, ethnic, and gender diversity over the last five years among both full- and part-time and new hires, the Health Studies discipline plans to continue working toward the goal of increasing district-wide diversity among both full- and part-time Health Studies faculty.

With regards to Health Studies faculty having a shared understanding about diversity, equity, and inclusion:

In the recent HE Faculty Survey, HE faculty were asked “Do you perceive the Health Studies SAC is representative of our student population?” responses were almost equally divided among “YES,” “NO,” and “UNSURE”.

A sample “YES” response described the HE SAC as representative because: “... many of us are from diverse background, went to community colleges, and grew up low income and share similar experiences”.

A representative “NO” response described the HE SAC as: “...mostly white women and many faculty do not represent students of color.”

These responses suggest that in 2016, the Health Studies discipline was on target in developing the Health Studies Strategic/Work Plan which intentionally placed a strong emphasis on developing culturally inclusive curriculum, sharing and streamlining accessible instructional methods, supporting culturally competent and responsive instructors and increasing the diversity among the ranks of full and part time faculty (Appendix F: Health Studies Strategic / Work Plan).

In parallel with PCC’s strong commitment to Theme 5 of the Strategic Plan, Health Studies faculty apply racially conscious systems of analysis, including Critical Race Theory, to generate awareness of disparities and initiate actions at dismantling systems of inequality.

I have learned so much and I would not have been able to have such a positive term if not for such great professors.

- On-Campus student, Fall 2017

The Health Studies SAC has also examined course assignments, textbooks, learning multimedia, and other course content with inclusivity in mind. For example, the Health Studies SAC recently changed the textbook for HE 242: Stress and Human Health to one that includes more inclusive data and information on gender expression and norms. Similarly, a widely used

assignment for HE 212: Women’s Health was revised to include an analysis of media’s impact on several disadvantaged groups including girls, women of color, and LGBTQ youth. Changes like these have been made throughout the curricula of Health Studies Courses. In the HE Faculty Survey, faculty have reported HE SAC approaches as utilizing “a multidimensional, social justice framework” in their course design. Health Studies Faculty have also made change to enhance inclusivity of students who do not identify with their gender assigned at birth by including clauses in syllabi and other student protections. Likewise, Health Studies Faculty have worked on food insecurity issues on campus and have directed student CBL projects. Similarly, much of the content delivered in many HE courses revolves around looking at health through a diverse and inclusive socio-ecological lens.

The Health Studies SAC’s strong commitment to Theme 5 goals and to a creating shared understanding about diversity, equity, and inclusion is evidenced by the degree of faculty participation in Diversity, Equity,

and Inclusion initiatives. Within the last 5 years, all respondents to the HE Faculty Survey engaged in a professional development activity dedicated to strengthening intercultural competence and increasing awareness of diversity, equity and inclusion issues. The following is a sample of Professional Development Opportunities Health Studies faculty participated in:

- White Ally Group (bi-weekly for two quarters)
- Facilitated workshops for Social Justice at the Anderson Conference
- Hosted YESS Break-Out Sessions
- Mentored students through a Faculty Diversity Internship Program
- Co-facilitated events for Whiteness History Month
- Directed a NIH Bridges Program
- Mentored students through the NIH BUILD EXITO program
- Participated in the Lead Academy, focusing on strategies to increase diversity in hiring
- Participated in program to improve teaching Men of Color At Community Colleges
- Participated in program focused on Working Across Differences
- Organized a Mental Health First Aid workshop for faculty
- Participated on a panel on Climate Change and Social Activism, sponsored by the Multicultural Center.
- Implemented grant from Oregon Department of Education focused on increasing diversity in STEM
- Conducted workshops on Food Insecurity and organized student projects alongside ASPCC

Through participation in the Diversity, Equity, and Inclusion trainings and initiatives, faculty instructional practices were modified, or in some cases newly created, to increase inter-cultural competence and generate a shared understanding about equity, diversity and inclusion. Some examples are presented in Table 12.

Articulated in PCC's strategic plan is the priority of creating globally aware, culturally conscientious and engaged students, staff and faculty. To this achieve this end, the Health Studies discipline:

- Developed a new course, HE299D on Global Health
- Organized community events to support global communities of adolescent girls as a force for change via THE GIRL EFFECT
- Collaborated with PCC departments and community organizations for World AIDS Day to raise awareness and initiate action to address HIV/AIDS locally and internationally
- Engaged PCC students internationally by starting a chapter of the Student Global AIDS coalition

Table 12: Instructional Practice and Examples

Instructional Practice Impact	Specific Examples
<p>Modified An Existing Assignment</p> <p>Example: Included questions for critical thinking related to race /gender Clarified instructions</p>	<ul style="list-style-type: none"> • Edited an assignment to include an analysis of how media can negatively affect the health of specific vulnerable groups, including girls, LGBTQ+ youth, and people of color.
<p>Created a New Assignment</p> <p>Example: Stressed term-long project focusing on culture, race, socioeconomics, or gender</p>	<ul style="list-style-type: none"> • HE 250: Health Education Teaching & Learning Assignment • HE students develop, teach and assess language-level appropriate health education information to ESOL students.
<p>Increased Diversity of Guest Speakers/Lecturers</p> <p>Example: Seek out NGO's that serve communities of color. Utilize videos lectures and speakers with background and knowledge of diversity issues.</p>	<ul style="list-style-type: none"> • PCC World AIDS Day collaboration with RESULTS, Cascade AIDS Project, Mercy Corps and Zimbabwe Artists Project. Speakers included gay HIV positive activist and Free HIV testing and counseling provided by LGBTQ male and female practitioners. • Lecture & video content was modified to address unique barriers and specific needs of US Veterans with regards to stress management and relaxation techniques. • Added lecture content, online resources and campus field trip to examine social stressors unique to community college students, such as food insecurity, and financial/housing/job insecurity and how this impacts working college students.

According to PCC's Strategic Plan Theme 5, PCC aims to improve access, advancement, climate, and education of historically under-served populations of students, faculty, and staff. While district-wide diversity among the Health Studies faculty does not mirror district-wide diversity of the PCC student body, the Health Studies discipline is highly committed to both increasing diversity among the ranks of Health Studies faculty and to improving equitable student success. Examples of Health Studies support for PCC's Theme 5 include:

[My Health Studies class] helped me realize how important my own personal health is and that it needs to be a priority for me.

- DL student, Fall 2017

- Supporting the YES to Equitable Student Success (YESS) initiative through participation on the EAC
- Collaborating on development of the Resource Guide for Hiring Part-Time Faculty to Increase Diversity and Enhance Cultural Competency via the LEAD Academy
- Mentoring prospective minority part-time faculty through the Faculty Diversity Internship Program

As discussed above, frequent collaboration with the Office of Equity and Inclusion, the Multi-Cultural Center, the Women’s Resource center and other community groups improves curriculum, instruction, and instructor competency.

B. REPORT ANY CHANGES THE SAC HAS MADE TO INSTRUCTOR QUALIFICATIONS SINCE THE LAST REVIEW AND THE REASON FOR THE CHANGES

The Health Studies SAC offers an integrated and interdisciplinary focus to human health and impacting issues. As such, among the Health Studies faculty can be found an impressive range (14) of undergraduate degrees leading to increasingly smaller numbers of human-health focused Master Degrees (5) and Doctoral degrees (2). These are presented in Table 13.

Table 13: Health Studies Faculty degree composition:

Bachelor Degrees	Master Degrees	Doctoral Degrees
Biology Business Administration Communication Exercise Physiology Fine Arts Liberal Arts Nutrition Psychology Public Health Recreation Administration Religion Russian Language Social Work Sociology	Exercise Physiology Health Science Psychology Public Health Teaching	Chiropractic Naturopath

Instructor qualifications were shored up within the last five years to be reflective of current HE SAC norms, values, curricular needs, and changes at higher-degree granting institutions. The updated instructor qualifications served to facilitate an increased depth and breadth among Health Studies faculty by allowing greater hiring flexibility for Health Studies Department Chairs and Health Studies division deans.

Revised and approved Health Studies Instructor Qualifications as of January 2015:

<https://www.pcc.edu/resources/academic/instructor-qualifications/he.html>

C. HOW HAVE PROFESSIONAL DEVELOPMENT ACTIVITIES OF THE FACULTY CONTRIBUTED TO THE STRENGTH OF THE PROGRAM/DISCIPLINE? IF SUCH ACTIVITIES HAVE RESULTED IN INSTRUCTIONAL OR CURRICULAR CHANGES, PLEASE DESCRIBE.

Health Studies encompasses a wide range of areas focusing on human health. Consequently, Health Studies Faculty hold many additional professional certifications. 72% of Health Studies recently faculty answered “YES” when asked: “Do you have any certifications that contribute to the success of your position?” Health Studies Training and Certifications listed included:

- American Red Cross First AID and CPR
- Emergency Medical Responder
- Global Health
- Health Coaching
- Health Education Specialist
- Meditation Teacher
- Mental Health First Aid
- Personal Training
- Registered Dietitian
- Registered Yoga Instructor
- Research, Education and Project Management
- Teaching Adult Learner

A third (n=8) of respondents to the HE Faculty Survey indicated that their participation in professional development activities in the past 5 years resulted in instructional or curricular changes and directly contributed to the strength of the Health Studies SAC. Five examples are related in Table 14 below:

Table 14: Professional Development Activities and their impact on instruction and HE SAC

Professional Development Activity Example #1:

Landmark International Self Expression & Leadership Program (SELP)

Instructional Change	Impact on Health Studies SAC
<ul style="list-style-type: none"> • Development of Movement-with-Meaning, an initiative that provides PCC students opportunities to create and participate in public health, curriculum-based community events and to develop community partnerships. • Modifications to Health Studies curriculum including videos and guest speakers introduce students to public health issues (i.e. veteran suicide, gender discrimination & poverty) 	<ul style="list-style-type: none"> • Movement-with Meaning strengthens the Health SAC by creating opportunities for Health Studies students and faculty to create internal PCC and external community partnerships to empower the health and wellness of individuals and society.

Professional Development Activity Example #2:
Teaching Men of Color

Instructional Change	Impact on Health Studies SAC
<ul style="list-style-type: none"> • Providing Tools to enhance student success among men of color as well as the general student population. • Multiple techniques to reduce barriers to student success for men of color. 	<ul style="list-style-type: none"> • Shared with HE SAC, including the importance of validating feelings, public praise, using warm language and avoiding any stereotypes. • Early interventions with students who did not complete the first assignment to check in with them and see how to help them succeed in class. • Added material into some Stress and Human Health courses that that discusses the impact of racism and discrimination on levels of stress.

Professional Development Activity Example #3:
Social Justice Workshops Parts 1 & 2

Instructional Change	Impact on Health Studies SAC
<ul style="list-style-type: none"> • Receiving the deck of cards with characteristics of diverse individuals that should be considered when any decision is being made 	<ul style="list-style-type: none"> • Practice of using the cards to use an equity lens when creating class assignments, lectures, exams, etc. • When preparing to discuss exercise and nutrition in a Stress and Human Health course, used the deck of cards and went through them to make sure the material presented was inclusive to all individuals.

Professional Development Activity Example #4:
Mental Health First Aid for Adults Workshop

Instructional Change	Impact on Health Studies SAC
<ul style="list-style-type: none"> • Modifications to Health Studies curriculum were made to include more robust course content and learning methodologies to cover mental health issues including anxiety, depression, psychosis, and substance use. Additionally, certified faculty can now provide support for students who are experiencing mental health emergencies with their training. 	<ul style="list-style-type: none"> • The Health Studies SAC can provide support for students who face mental health challenges. • Many Health Studies faculty now also provide expertise and collaborate with other departments on mental health issues.

Professional Development Activity Example #5:
Sexuality Education and Sexual Violence Workshops (Presented by Oregon Health Authority and PSU)

Instructional Change	Impact on Health Studies SAC
<ul style="list-style-type: none"> • Health Studies courses were complimented with new evidence-based material on how to prevent assault and sexual violence, both at the time of assault, and with more primary or "upstream" prevention methods. HE 250 OER and HE 251 now include this material. 	<ul style="list-style-type: none"> • Health Studies faculty collaborate with the WRC and other groups on preventing sexual violence. Faculty can provide advocacy and technical guidance on issues around sexual assault and violence at PCC.

Additional Professional Development Activities that have impacted HE instruction and HE SAC

<ul style="list-style-type: none"> American Public Health Association Conference Association for the Advancement in Sustainability in Higher Education Community Based Learning Conflict Management Environments (WISE) Equity and Inclusion Conference Health & PE Higher Ed Conference NIH BUILD EXITO 	<ul style="list-style-type: none"> Northwest Environmental Conference Oregon Health Authority – Adolescent Public Health & Education Oregon Public Health Association Conference Quality Matters Sexual Health Summit Society for Public Health Education (SOPHE) Conference Teaching Squares Wellness in School
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Faculty participation in the above selection of professional development opportunities has strengthened the ability of the Health Studies discipline to respond to students equitably and appropriately. Faculty continually improves their ability to provide culturally competent support and instruction through collaboration, participation in professional development opportunities, and critical self-awareness. The HE SAC recognizes that more opportunities are needed to reflect on professional development activities faculty have participated in and how these opportunities affect instructional strategies.

6. FACILITIES, INSTRUCTIONAL AND STUDENT SUPPORT

A. DESCRIBE HOW CLASSROOM SPACE, CLASSROOM TECHNOLOGY, LABORATORY SPACE, AND EQUIPMENT IMPACT STUDENT SUCCESS.

The bond expansion impacted the availability of general classroom space, storage and Health Studies course scheduling and enrollment limits. With new buildings, for the first time Cascade has a dedicated Health Studies classroom thus allowing for term-to-term predictability, stability and flexibility of scheduling.

I benefited a lot from my health class. I never noticed that my eating habit was bad until I took this class.
 - On-Campus student, Fall 2017

Since the previous report, RC, CA, and SY campuses have a designated HE Classroom. This is extremely helpful in running classes that meet the needs to the students. It should be noted that SE could use an officially designated HE room.

At the beginning of the 2017 – 18 AY, the Health Studies SAC conducted an anonymous online Qualtrics survey to all HE faculty at PCC. The purpose of the HE Faculty Survey was to collect written record of what is working well and what can be improved within the Health Studies discipline. Questions A-C in this section was included in the survey.

Overall the faculty comments were positive about most rooms being equipped well and the space ideal. Access to the Internet and projectors benefits the students greatly. Some part-time faculty noted that bigger classrooms are preferred to stimulate discussion, to move around in and to allow for furniture

movement. Several HE Faculty Survey respondents mentioned preferring more learning “pods” and less traditional lecture spaces.

A few faculty quotes are listed below:

“The traditional classroom seating with teacher in the front can be inhibiting if you want to do active learning and group work.”

“Occasionally with students who are uncomfortable and minimally knowledgeable with technology, doing something like accessing content or turning in files online is an additional barrier.”

“Some classrooms have a few whiteboards while others just have one. It can be helpful when working on group projects to have a few of these in the classrooms.”

B. DESCRIBE HOW STUDENTS ARE USING THE LIBRARY OR OTHER OUTSIDE-THE-CLASSROOM INFORMATION. IF COURSES ARE OFFERED ONLINE, DO STUDENTS HAVE ONLINE ACCESS TO THE SAME RESOURCES?

Library Services

Students use books and articles on reserve in the library for assignments and also locate primary research in peer-reviewed journals. Instructors show videos in class and DL classes also view videos. Some students use the textbooks on hold in the library instead of buying them. The HE SAC strives to have a copy of all required textbooks on each campus where the course is taught. Several Health Studies faculty have implemented OER fully or partially into their courses. The HE SAC utilizes several Library Research Guides which are updated periodically with the assistance of the Library.

The HE SAC understands the importance of information literacy and strives to integrate information literacy into the curriculum. Partnerships between librarians and classroom faculty are vital in the design of curriculum for student outcomes for finding, accessing, retrieving, analyzing, synthesizing and using information effectively and ethically.

I immediately started to practice the concepts which we learned and I found that my mental and physical health improved.
- On-Campus student, Fall 2017

Several faculty utilize the librarian’s expertise when developing new assignments and find opportunities for librarians to present workshops in their classes. The HE SAC appreciates how the library faculty are always improving the peer-review resources and processes.

Other Services

All faculty surveyed spoke about the resources they refer students to, including the Writing Center, Computer Labs, and the Student Learning Center

My life is truly changing throughout this class.
- On-Campus student, Fall 2017

Many mentioned that more students would benefit from these services and it isn't always clear why students don't access them. One faculty member requires students to identify or engage with these services during Week 1 of the term in a required Scavenger Hunt/Course Participation assignment.

One faculty noted that non-traditional students taking classes part-time tend to have multiple jobs and kids creating barriers to utilizing student support services and meeting with instructors outside of class times. It was suggested that students be given a list of the resources and more reminders concerning the resources.

For outside-the-classroom information resources, some students attend a lecture, health fair, or other health oriented activity at different community organizations. All resources for some classes are on Google Drive, which is very accessible.

If courses are offered online, do students have online access to the same resources?

Most faculty were unaware if DL students were utilizing the same resources as on campus students. It was suggested that PCC needs more virtual support for students. DL students have access to the library research guides and some students are utilizes the library chat feature when they have research questions.

With DL students, Health Studies faculty often cover these resources on the syllabus. If an DL student appears to be struggling with coursework, it is suggested that they connect with the appropriate resource and information is sent.

C. DOES THE SAC HAVE ANY INSIGHTS ON HOW STUDENTS ARE USING ACADEMIC ADVISING, COUNSELING, STUDENT LEADERSHIP AND STUDENT RESOURCE CENTERS? WHAT OPPORTUNITIES DO YOU SEE TO PROMOTE STUDENT SUCCESS BY COLLABORATING WITH THESE SERVICES?

Overall the feedback on the HE Faculty Survey was positive with most faculty engaging with services and centers. Examples include:

- Adding syllabus statements about services available
- Having a representative from services and centers guest present
- Partnering with centers for CBL projects
- Utilizing the gym for activities
- Having scavenger hunt activities to encourage engagement
- Personally referring students to resources and services
- Tying centers and services into the curriculum (ex: counseling during mental health day, women's + QRC during social determinant of health talk etc...)
- Partnering with centers on events

Other comments are listed below.

"I believe these resources are used by some but underused overall. Making sure the students know they are there. Having coordinators and student leaders come in for class raps. Promoting events that the centers have can get students more involved."

"My students seem to be using these resources. It might be helpful to have speakers come from these different resources so students can see what they offer. I think that it is very important to collaborate with these services and they are very important for student success."

"I promote these by offering extra credit for speakers that are relevant to coursework. I also encourage students to do community-based learning at PCC."

"I have had VERY positive feedback related to students utilizing Women's Resources, Queer resource center and Multicultural center at SE. Rut offers many student centered events that build community and individual skills. I spend 4-5 minutes at the beginning of class sharing campus events and resources."

Several instructors mentioned in the HE Faculty Survey that they would like to hear more about advising and counseling, i.e. what they do and have to offer. The HE SAC has invited colleagues from these areas in the past to HE SAC meetings and will do so again in the future.

8. RECOMMENDATIONS

A. WHAT IS THE SAC PLANNING TO DO TO IMPROVE TEACHING AND LEARNING, STUDENT SUCCESS, AND DEGREE OR CERTIFICATE COMPLETION, FOR ON-CAMPUS AND ONLINE STUDENTS AS APPROPRIATE?

The HE SAC will continue to carry out a variety of tasks that improve the aforementioned items. A list of ways the HE SAC will do this and how it connects to the Health Studies Strategic / Work Plan is provided:

Focus Areas:

1. Curriculum & Course Design
2. Pedagogy
3. Faculty Development
4. HE SAC Processes
5. Institutional Relations
6. Community Partnerships

SAC Recommendations

- A. Complete the Health Studies Strategic / Work Plan and execute tasks accordingly. The HE SAC will revisit and revise the plan every 2 years (Focus Area #4).
- B. Continue to bring PCC colleagues and health professionals to HE SAC meetings to enhance professional development of full-time and part-time faculty (Focus Areas #1 – #6).
- C. Continue professional development in diversity, equity, and inclusion to expand on knowledge (Focus Areas #1 and #3).
- D. Continue to support and engage in professional development activities as time and funds permit (Focus Area #3).
- E. Continue to revise in-person and distance education courses with new technologies and best practices. This may include community-based learning, study abroad opportunities, Open Educational Resources, etc. (Focus Areas #1 and #2).
- F. Continue to work with 4-year university partners and develop clear degree pathway maps and Memorandum of Understanding for PCC students who plan to transfer into upper-level health areas (Focus Area #6).
- G. Define what the Health/Wellness/Fitness component of the AAOT and AS degree means for PCC (Focus Areas #1, #5, and #6).
- H. Look into expanding the Health/Wellness/Fitness degree component and/or specific Health Studies classes into AAS degrees, as applicable and student-centered (Focus Areas #1, #5, and #6).
- I. Keep informed and engaged as the college defines General Education, core outcomes, and core themes, and see where Health Studies courses naturally align (Focus Areas #1 and #5).
- J. Partner with community health providers to provide robust CBL opportunities for students (Focus Areas #1 and #6).
- K. Communicate professional career options for current and potential PCC HE students (Focus Areas #1 and #6).
- L. Continue to offer OER sections of HE 250 and evaluate other courses for OER potential (Focus Area #1).

B. WHAT SUPPORT DO YOU NEED FROM ADMINISTRATION IN ORDER TO CARRY OUT YOUR PLANNED IMPROVEMENTS?

1. We are requesting an additional FT HE Faculty member because of the following reasons:
 - a. 83% of HE sections offered in the 2016 – 17 AY were taught by PT faculty. This is higher than the LDT average.
 - i. Addressing regular administrative functions such as assessing our courses and core outcomes, coordinating regular in-person and DL course revisions, adding more OER to courses, revising CCOGs, developing strategies to minimize costs, developing OER materials, meeting with and maintaining collaborative relationships with 4-year partner institutions, expanding professional development opportunities, and offering more health-related workshops on campus
 - b. It is challenging to accomplish the HE SAC duties and goals in a way that is sustainable for the current FT and PT faculty. The HE SAC is interested to explore various models to support an additional FT HE Faculty member, including one position split between two campuses. (Recommendations A – L).
2. The HE SAC recommends that a FT HE Faculty member is the FDC for the HE discipline at each of the four main campuses when the size and FTE generated warrant it. There is tremendous value in having the department chair is a part of the discipline because there is a greater understanding of the program as well as the needs of the program at the district and campus level along with the needs of the faculty who teach in HE and the students who take HE classes (Recommendations A – L).
3. In order to encourage a greater proportion of part-time faculty to participate in HE SAC related duties, greater support and funding is needed for these activities as well as an easy process for obtaining funds. The current process for some funding opportunities through POD and shareable DL SAC Shells is, while appreciated, cumbersome and difficult to manage (Recommendations A – E, and L).
4. Creating transfer guides and articulation agreements with 4-year partner institutions to support student success requires full-time faculty to meet with partner institutions, develop agreements and meet with advisors. The HE SAC requests additional support and resources to help with this process (Recommendation F).
5. The HE SAC recommends that the third funded SAC day be flexible so SACs can decide when it would work best for them. Currently, the funded SAC meetings are during September, October, and April. The HE SAC recommends that the funding for the September SAC meeting be built in a way that would allow SACs to have that funded meeting in September, or during winter quarter, or when it makes the most sense for their program (Recommendations A and B).
6. Support for the Learning Assessment Council and additional funding for part-time faculty to participate in the assessment process. The amount of funding currently available does not match the time needed to complete the process set forth by the college at the level desired (Recommendations A and D).
7. The HE SAC recommends that funding and opportunities be made available to support the development of part-time faculty beyond pedagogy, similar to what is available for full-time faculty. For example, developing leadership skills (Recommendations A - L).

8. Based on information provided at the Fireside Chats by President Mitsui, the Health Studies SAC would like to be in conversations with Allied Health Professions as they move to a more integrated approach. Based on national recommendations regarding public health literacy for all students noted in section 1, some of our courses align well with the allied health programs and could add depth and help provide further knowledge and skills for students to be successful in the health field (Recommendations H and K).
9. The HE SAC would appreciate strategies for engaging and supporting an even greater part-time faculty team to build a stronger HE SAC (Recommendations A – L).
10. Health Studies faculty members are on a variety of college and campus committees. The HE SAC would like recommendations as to other committees or groups that would be advantageous for its members to be participating on as college and state guidelines change (Recommendations A and I).
11. The Health Studies SAC recommends that PCC administrators involve Health Studies faculty in conversations surrounding the development and implementation of grants, academic programs, partnerships and other activities related to the college's priorities of expanding STEM education and equity (Recommendations A, C, D, and I).
12. The Health Studies SAC would like to request that when policies and events that relate to 'health' are considered for PCC, that HE Faculty are consulted as content experts in their field. (Recommendations B, C, and D).
13. In order to help our Division Deans and Faculty Department Chairs support PCC's Strategic Plan, Theme 5: "To create a nationally renowned culture for diversity, equity, and inclusion," help with the development and support of a hiring process for the part-time faculty pool that is grounded in critical race theory (Recommendations A – L).

Appendices

Appendix A: Agreements among Full-time Faculty

As a [full-time] member of the Health [Studies] Faculty, we agree to...

- Be forthright when conversations lack of resolution and we will either deal with it, plan to deal with it, or put it to rest.
- Dialogue with each other in a balanced, inclusive, collaborative manner.
- Speak honestly and authentically without being aggressive
- Remain curious, seek more information & acknowledge what we heard without judgment.
- Create a safe, inclusive environment where people's ideas are valued and accepted.
- Advocate positivity, fun and laughter.
- Keep the process moving and stay on the trajectory.

Agreed upon 3/17/15

Appendix B: Health Studies Voting Process

Summary shared at Fall 2015 HE SAC meeting:

- Introduced at Spring 2015 HE SAC meeting
- Created a Workgroup
- Sent out survey Fall 2015
- Workgroup took all the information to develop process

Question 1: Who has the right to vote?

Themes:

- Aim for consensus
- Allow for discussion
- Name and capture concerns
- Keep the process moving

Proposal:

- Requirement for proposal to be put up for a vote
- All FT faculty must be present or connected virtually
- Ideal
 - Face to face
 - Some topics only voted on during designated HE SAC meetings that are district compensated
 - Allow for Allowances
 - Informed and engaged virtual participation allowed
 - 2/3 votes motion passes
 - Discussion is timed
- For this one vote, only:
 - Full-time, Part-time with Assignment Rights

Date	HE Voting Members Present	HE Voting Members Not Present
October 27, 2015	7	0

<p>BACKGROUND INFORMATION</p> <ul style="list-style-type: none"> • Academic Policies and Standards Handbook A701 – Subject Area Committees • All FT and PT w/assignment rights vote • April 2013 Administrative Response to Discipline Review • HE SAC Voting introduced spring 2015 SAC meeting which determined the Workgroup • Sent out survey Fall 2015 to PT HE faculty • Workgroup took all information to develop the following proposals

<p>OUTCOME OR GOAL OF VOTE</p> <ul style="list-style-type: none"> • Define who can vote in the SAC
--

<p>PROPOSAL OR QUESTION</p> <ul style="list-style-type: none"> • Shall PT HS Faculty without Assignment Rights be able to vote
--

<p>CONCERNS NOTED</p> <ul style="list-style-type: none"> • Multiple people expressed concern about how “informed and engaged” will be defined. Informed and engaged varies based on experience. • How will those w/o assignment rights who are informed and engaged have a voice in the SAC • An inequitable distribution of PT-ers with assignment rights potentially creates a district-wide imbalance in voting power.

<p>MORE INFORMATION NEEDED</p> <ul style="list-style-type: none"> • Who and how many part-timers have assignment rights? • How do PTers know if they have assignments rights?
--

VOTE CALLED	AGREE & SUPPORT	AGREE WITH CONCERNS	DO NOT SUPPORT	# % 2/3
<u>Yes</u> No	5	2	0	7 100% 7/7

VOTE PASS	<u>Yes</u>	No
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<p>CONCERNS CAPTURED</p> <ul style="list-style-type: none"> • Multiple people expressed concern about how “informed and engaged” will be defined. Informed and engaged varies based on experience. • How will those w/o assignment rights who are informed and engaged have a voice in the SAC • An inequitable distribution of PT-ers with assignment rights potentially creates a district-wide imbalance in voting power.
--

Question 2: How to vote?

Themes:

- Aim for consensus
- Allow for discussion
- Name and capture concerns
- Keep the process moving
- Anonymous or public?
- In person, electronic, or virtual connection?
- Right to abstain

How to implement Voting process

- Background/Topic/Issue
- Proposal
- Discussion
 - Individually capture concerns
 - Preliminary Discussion
 - Noted Concerns
 - Gather additional information
 - Use Preliminary Discussion to guide conversation and next steps
- Ideal
 - Face to Face
 - As much advanced notice as possible
 - Confidential voting (surrender this if using some forms of technology)
 - Agree & Fully Support
 - Agree & has concerns about the proposal (captured)
 - Do not agree with the proposal (captured)
 - Right to abstain
- Allow for allowances
 - If unable to participate in the discussion in person, technological options are available for participation
 - Transparent in considering alternative voting processes
 - Being flexible with technological solutions
- If requirement of FT faculty isn't met, the vote is tabled.
- SAC members have the right to move to revisit non-passing (2/3) issues in the future.

Date	HE Voting Members Present	HE Voting Members Not Present
October 27, 2015	16	0

<p>BACKGROUND INFORMATION</p> <ul style="list-style-type: none"> • Themes to consider: <ul style="list-style-type: none"> ○ Aim for consensus ○ Allow for discussion ○ Name and capture concerns ○ Keep process moving • Shall voting be anonymous, private or public? • In person, electronic, or conference call? • Right to abstain
--

<p>OUTCOME OR GOAL OF VOTE</p> <ul style="list-style-type: none"> • Clarify define the process for “how” the HE SAC votes

<p>PROPOSAL OR QUESTION</p> <ul style="list-style-type: none"> • Shall HE Faculty use the following voting process to vote? <ul style="list-style-type: none"> ○ Voting will be public and confidential if member is present ○ Voting will public and NOT private if member is NOT present ○ Voting members must have participated in the discussion ○ The Quorum is 2/3 of all voting members present for the discussion ○ Voting Members include all HE Faculty who are informed and engaged in the issue ○ Votes are tabled if all Full-Time Faculty are not present
--

<p>CONCERNS NOTED</p> <ul style="list-style-type: none"> • Transparency in considering alternative voting processes • Keeping the process moving forward if all FT faculty are not present to vote • Will there be a process to revisit proposals that are voted on but do not pass • Will email or technology be allowed to facilitate voting and discussion • How do we ensure that small changes/edit are not made after the vote. • How will use of technology to vote or discuss impact engagement and participation in other SAC issues
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<p>MORE INFORMATION NEEDED</p> <ul style="list-style-type: none"> • Who and how many part-timers have assignment rights? • How do PTers know if they have assignments rights?
--

VOTE CALLED	AGREE & SUPPORT	AGREE W/CONCERNS	DO NOT SUPPORT	ABSTAIN	#	%	2/3
<u>Yes</u> No	8	8	0	0	16	100%	16/16

VOTE PASS?	<u>Yes</u>	No
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CONCERNS CAPTURED

- Access to technological alternatives for participating remotely
- Transparency in the voting process
- Flexible use of technological solutions to voting process
- Tabling votes if all FT faculty are not present
- Having a process to revisit non-passing (2/3) issues in the future.
- Ensuring that small changes/edit are not made after the vote.
- Use of technology for discussions and voting may negatively impact engagement/participation in other SAC issues

Appendix C: Course Equivalency Transfer List

PCC Course	PSU Equivalent	OSU Equivalent
HE 110: CPR/AED for Professional Rescuers and Health Care Providers	LDT	PAC LDT
HE 112: Standard First Aid and Emergency Care	LDT	PAC LDT
HE 125: First Aid & Industrial Safety	LDT	PAC LDT
HE 207: Seminar in Biomedical, Behavioral and Health Sciences	LDT	H LDT
HE 212: Women's Health	PHE 451 ¹	H LDT
HE 213: Men's Health	PHE 445 ¹	H LDT
HE 242: Stress and Human Health	PHE 275	H LDT
HE 250: Personal Health	PHE 295	H LDT
HE 251: Community and Public Health Issues	PHE 250	H LDT
HE 252: First Aid - Basics and Beyond	LDT	PAC LDT
HE 254: Weight Management and Personal Health	LDT	H LDT
HE 255: Film and Public Health	PHE 455 ¹	H LDT
HE 262: Children's Health, Nutrition & Safety	LDT	H LDT
HE 264: Health, Food Systems, and the Environment	LDT	NUTR LDT
HE 278: Human Health and the Environment	LDT	H LDT
HE 295: Health and Fitness for Life	PHE 295	HHE 231: Lifetime Fitness for Health

¹ Transfers in as LDT and satisfies requirement allowing students to opt for different upper division electives

<https://www.pdx.edu/cupa/cupa/sites/www.pdx.edu.cupa/files/Kris%20HS%204-26.pdf>

<http://admissions.oregonstate.edu/course-equivalencies-portland-community-college>

Appendix D: Health Studies Crosswalk with PCC Degrees, Certificates, Job-Ready Entrance Skills, and Focus Awards

Course	Title	Catalog and Program Referencing	On-campus	Online
HE 110	CPR/AED for Professional Rescuers and Health Care Providers	Radiography AAS Degree Gerontology Elective	X	
HE 112	Standard First Aid and Emergency Care	Early Education and Family Studies Less Than One-Year Certificate Childcare Aide Elective Early Childhood Education AAS Degree Gerontology Program Electives Early Childhood Education Less Than One-Year: Career Pathway Certificate Childcare Aide Less Than One-Year: Career Pathway Certificate	X	
HE 125	First Aid & Industrial Safety	Dental Laboratory Technology AAS Degree Dental Laboratory Technology Two-Year Certificate	X	
HE 207	Seminar in Biomedical, Behavioral and Health Sciences	EXITO	X	
HE 212	Women's Health	Health Studies Focus Award Women's Studies Focus Award Gerontology Program Electives	X	X
HE 213	Men's Health	Health Studies Focus Award Gerontology Program Electives	X	X
HE 242	Stress and Human Health	Associate of Arts Oregon Transfer (AAOT) Degree Requirements Associate of Science (AS) Degree Requirements Health Studies Focus Award Dental Laboratory Technology Degree Electives Gerontology Program Electives	X	X
HE 250	Personal Health	Associate of Arts Oregon Transfer (AAOT) Degree Requirements Associate of Science (AS) Degree Requirements Health Studies Focus Award Gerontology Program Electives Activity Assistant Less Than One-Year: Career Pathway Certificate Activity Director Less Than One-Year: Career Pathway Certificate Dental Assisting Prerequisites	X	X
HE 251	Community and Public Health Issues	Health Studies Focus Award Gerontology Program Electives	X	X
HE 252	First Aid - Basics and Beyond	Gerontology Program Electives	X	
HE 254	Weight Management and Personal Health	Associate of Arts Oregon Transfer (AAOT) Degree Requirements Associate of Science (AS) Degree Requirements	X	

Course	Title	Catalog and Program Referencing	On-campus	Online
		Gerontology Program Electives		
HE 255	Film and Public Health	Health Studies Focus Award Gerontology Program Electives	X	
HE 262	Children's Health, Nutrition & Safety	Early Education and Family Studies Less Than One-Year Certificate Childcare Aide Early Childhood Education AAS Degree Early Childhood Education Less Than One-Year: Career Pathway Certificate Childcare Aide Less Than One-Year: Career Pathway Certificate		X
HE 264	Health, Food Systems, and the Environment	Health Studies Focus Award Social Justice Focus Award Sustainability Focus Award Gerontology Program Electives	X	X
HE 278	Human Health and the Environment	Health Studies Focus Award Sustainability Focus Award Gerontology Program Electives		X
HE 295	Health and Fitness for Life	Associate of Arts Oregon Transfer (AAOT) Degree Requirements Associate of Science (AS) Degree Requirements Exercise Science (FT) Health Studies Focus Award Aviation Science Program Electives Gerontology Program Electives Emergency Medical Technician-Paramedic AAS Degree Exercise Science AAS Degree Personal Trainer Less Than One-Year Career Pathway Certificate Healthy Older Adult Fitness Less Than One-Year: Career Pathway Certificate Activity Assistant Less Than One-Year: Career Pathway Certificate Activity Director Less Than One-Year: Career Pathway Certificate Dental Assisting Prerequisites Group Fitness Leader Less Than One-Year Career Pathway Certificate This course is listed as a Corequisite to PE 295: Health and Fitness for Life Lab This course is listed as a Prerequisite for FT 103, FT 104, and FT 202	X	X

Appendix E: Health Studies Focus Award

The Health Studies Award provides students with an introductory body of knowledge in Health Studies to prepare them for further academic study and transfer to a four-year institution. Benefits of this award include:

- Opportunities to build their understanding of the complex factors, forces and institutions that influence individual, community, environmental and global health;
- Academic support, guidance, and encouragement through faculty-student mentoring; and
- Opportunities to network with local four-year universities and colleges.

The Health Studies Award prepares students to pursue health studies and related programs at the bachelor level. In Oregon, these programs can be found at Portland State University, Oregon State University, Western Oregon University and other schools in the Oregon University System and private colleges.

Students receiving the Health Studies Award will have successfully completed a minimum of 15 credits (with a C or better) from the following choices, which must include:

- Core Health Courses
- An additional course from Elective Health Courses
- Remainder of credits from Elective Health Courses or Approved Related Course List

Health Core Required Courses – Choose one of the following:

HE 242	Stress and Human Health	4 Credits
HE 250	Personal Health	3 Credits
HE 251	Community and Public Health Issues	4 Credits
HE 295 & PE 295	Health and Fitness for Life and Lab	3 Credits

Elective Health Courses – One required, additional may be selected:

HE 212 ¹	Women's Health	4 Credits
HE 213	Men's Health	4 Credits
HE 255 ¹	Film and Public Health	4 Credits
HE 264	Health, Food Systems, and the Environment	3 Credits
HE 278	Human Health and the Environment	3 Credits

Approved Related Courses:

ESR 171	Environmental Science: Biological Perspectives	4 Credits
FN 225	Nutrition	4 Credits
PSY 215	Human Development	4 Credits
PSY 231	Human Sexuality	4 Credits
SOC 231	Sociology of Health and Aging	4 Credits

¹Lower division courses that will be accepted as equivalent to PSU's upper division courses. Transfer students will still need to complete upper division credit requirements for the university and/or college.

Appendix F: Health Studies SAC Strategic / Work Plan - Draft

Draft as of: Fall 2017

Focus Area	Goal	Objective
#1: Curriculum & Course Design	Goal #1: Content and Curriculum are applicable, relevant, inclusive, and current.	Content and curriculum utilize various health models
		Content and Curriculum is inclusive and accessible to all
		Content and Curriculum makes use of the student services on campus where applicable
		Content and Curriculum critically analyzes health issues
		Content and Curriculum utilizes evidence-based research where applicable
	Goal #2: Course design, revision, and offerings are data driven and reflective of real-world economic demand (Link to Focus Area 4: HE SAC Processes)	Curriculum design for continuation, development, and inactivation follow HE SAC processes
		Development and assessment of guided pathways
#2: Pedagogy	Goal #1: Use and continuously improve, pedagogical practices that include all communities	Support and encourage inclusion of adult learning principles
		Incorporate intentional assessment practices
		Use technology where applicable
		Use evidenced-based practices where applicable
#3: Faculty Development	Goal #1:	Provide opportunities to share resources and ideas among HE SAC

	Support HE SAC mission and vision by enhancing the skills and knowledge of HE SAC faculty	members
		Provide HE SAC members current information about professional developmental opportunities and resources within PCC
		Advocate for professional developmental opportunities to attend conferences and workshops outside of PCC
#4: HE SAC Processes	Goal #1: The Health Studies SAC Policies are in alignment with PCC's Policies and Procedures	Review information from the NWCCU
		Review PCC's College Core Outcomes, Mission Statement, and information from the President
	Goal #2: Follow and address the administrative responsibilities of the HE SAC	Develop a plan to address S701
		Remain current and involved with emerging conversations
#5: Institutional Relations	Goal #1: The Health Studies SAC is an integral part of the institution	Be represented at multiple institutional tables
		Collaborate with other Disciplines and centers
	Goal #2: The Health Studies SAC is a visible part of the	Create various outreach opportunities that include Part-time faculty, Staff, and Students

	campus community	Identify and partner with other campus events
#6: Community Partnerships	Goal #1: The Health Studies SAC is a visible part of the community at large	Create various outreach efforts that include Part-time faculty, Staff, and Students
	Goal #2: The Health Studies SAC partners with 4-year institutions to develop guided pathways	Develop guided pathways opportunities

Timeline in developing the Health Studies SAC Strategic / Work Plan

2014-15 recognize shared strategic plan needed
 Fall 2015 HE SAC meeting agreed
 Winter 2016 Secured funds for facilitator
 Winter 2016 interviewed a few facilitators
 Spring 2016 HE SAC meeting SWOT Environmental Scan
 Spring 2016 FT compiled information Creating Version 1.0
 Spring 2016 secured funds for PT involvement (30 hours total)
 Summer 2016 7 PT staff funded to edit V 1.0
 Fall 2016 FT team compiled edits creating V 1.5

Shared at Fall 2016 HE SAC meeting collected input
 Winter 2017 FT team compiled input into V1.99
 Winter 2017 HE SAC meeting

- Shared Mission/Vision statement to vote on in Spring 2017 HE SAC meeting
- Shared Version 1.99 for input

Spring 2017 HE SAC meeting

- Vote on Mission/Vision statement
- Collected input on Version 2

Appendix G: Institutional Effectiveness Health Studies (HE) Analysis Report

Health Studies (HE) Analysis

The Take-away

- The percent of successful completions without completing one or more pre-requisite courses (RD 115 and/or WR 121) is, e.g. 72% (HE 242, Face-to-face instruction (F2F), AY 2013-14, Outcome = Success, Pre-requisite Completion = No).
- The percent of successful completions with completing one or more pre-requisites is, e.g. 81% (HE 242, Face-to-face instruction (F2F), AY 2013-14, Outcome = Success, Pre-requisite Completion = Yes).
- The difference between the percentages above is 9%.
- For HE 242, web based (WEB) or face-to-face instruction (F2F), there is a relationship between completing one or more pre-requisite courses and the outcome - receiving a passing grade (A, B, C, P) versus receiving an unsatisfactory grade (D, F, NP, W). The data support evidence of a relationship between completing one or more pre-requisite courses and the outcome for HE 242 course – the number of A, B, C, P grades increases as the number of students completing one or more of the pre-requisites increases. However, this relationship is not very strong. At best, one would expect to see 2 students who have completed one or more pre-requisite courses successfully complete HE 242 for every 1 student who did not complete a pre-requisite course and was unsuccessful in HE 242. Another way to speak to the relative weakness of the relationship is detailed in the first three bullets comparing the percent of successful completions between pre-requisite completers and pre-requisite non-completers - a difference of 9%, but both groups experience a successful outcome.
- For HE 250, face-to-face instruction, the same above take-away applies.
- For HE 250, web based instruction, there is not a reliable relationship between completing one or more pre-requisite courses and the outcome. Statistical significance was not found for 3 out 4 academic years.

Categorical Analysis Contingency Tables

HE 242 – F2F							
Variable: Pre-requisite Completion		Outcome		Total	Chi-Sq	Prob	Odds Ratio
		Success (Grade = A,B,C,P)	Not Success (Grade = D,F,NP,W)				
AY 2013-14							
YES	Frequency	122	28	150	4.987	.0255	1.696
	%	81.33	18.67				
NO	Frequency	280	109	389			
	%	71.98	28.02				
Total		402	137	539			
AY 2014-15							
YES	Frequency	197	31	228	7.982	.0047	1.918
	%	86.4	13.6				
NO	Frequency	255	77	332			
	%	76.81	23.19				
Total		452	108	560			

AY 2015-16							
YES	Frequency	240	38	278	3.362	.0667	1.528
	%	86.33	13.67				
NO	Frequency	219	53	272			
	%	80.51	19.49				
Total		459	91	550			

HE 242 – F2F								
Variable: Pre-requisite Completion		Outcome			Total	Chi-Sq	Prob	Odds Ratio
		Success (Grade = A,B,C,P)	Not Success (Grade = D,F,NP,W)					
AY 2016-17								
YES	Frequency	76	12	88	3.181	.0745	1.979	
	%	86.36	13.64					
NO	Frequency	80	25	105				
	%	76.19	23.81					
Total		156	37	193				

HE 242 – WEB								
Variable: Pre-requisite Completion		Outcome			Total	Chi-Sq	Prob	Odds Ratio
		Success (Grade = A,B,C,P)	Not Success (Grade = D,F,NP,W)					
AY 2013-14								
YES	Frequency	74	17	91	6.382	.0115	2.025	
	%	81.32	18.68					
NO	Frequency	389	181	570				
	%	68.25	31.75					
Total		463	198	661				
AY 2014-15								
YES	Frequency	147	40	187	3.460	.0629	1.475	
	%	78.61	21.39					
NO	Frequency	289	116	405				
	%	71.36	28.64					
Total		436	156	592				
AY 2015-16								
YES	Frequency	191	46	237	4.700	.0301	1.563	
	%	80.59	19.41					
NO	Frequency	231	87	318				
	%	72.64	27.36					
Total		422	133	555				
AY 2016-17								
YES	Frequency	92	21	113	3.209	.0732	1.763	
	%	81.42	18.58					
NO	Frequency	82	33	115				
	%	71.3	28.7					
Total		174	54	228				

Result: Reject the null hypothesis; there is a general association between completing one or more pre-requisite courses and the outcome of HE 242. There is statistical significance at the .10 alpha level; however, the strength of the relationship, described by the Odds Ratio, suggests that the odds of observing a group of students completing one or more pre-requisite courses and successfully completing HE 242 compared to a group of students not completing any pre-requisite courses and were unsuccessful in HE 242 is not very strong; barely twice as likely.

HE 250 – F2F							
Variable: Pre-requisite Completion		Outcome		Total	Chi-Sq	Prob	Odds Ratio
		Success (Grade = A,B,C,P)	Not Success (Grade = D,F,NP,W)				
AY 2013-14							
YES	Frequency	316	65	381	1.950	.1626	1.233
	%	82.94	17.06				
NO	Frequency	1222	310	1532			
	%	79.77	20.23				
Total		1538	375	1913			
AY 2014-15							
YES	Frequency	591	103	694	10.87	.0010	1.539
	%	85.16	14.84				
NO	Frequency	805	216	1021			
	%	78.84	21.16				
Total		1396	319	1715			
AY 2015-16							
YES	Frequency	666	84	750	17.43	<.0001	1.8343
	%	88.8	11.2				
NO	Frequency	657	152	809			
	%	81.21	18.79				
Total		1323	236	1559			
AY 2016-17							
YES	Frequency	196	20	216	6.858	.0088	2.0158
	%	90.74	9.26				
NO	Frequency	316	65	381			
	%	82.94	17.06				
Total		512	85	597			

Result: Reject the null hypothesis; there is a general association between completing one or more pre-requisite courses and the outcome of HE 250 for face-to-face instruction. There is statistical significance at the .05 alpha level for 3 out of 4 academic years; however, the strength of the relationship, described by the Odds Ratio, suggests that the odds of observing a group of students completing one or more pre-requisite courses and successfully completing HE 250 compared to a group of students not completing any pre-requisite courses and were unsuccessful in HE 250 is not very strong; barely twice as likely.

HE 250 – WEB							
Variable: Pre-requisite Completion		Outcome		Total	Chi-Sq	Prob	Odds Ratio
		Success (Grade = A,B,C,P)	Not Success (Grade = D,F,NP,W)				
AY 2013-14							
YES	Frequency	94	33	127	.0001	.9933	1.001
	%	74.02	25.98				
NO	Frequency	617	217	834			
	%	73.98	26.02				
Total		711	250	961			
AY 2014-15							
YES	Frequency	208	47	255	11.08	.0009	1.829
	%	81.57	18.43				
NO	Frequency	462	191	653			
	%	70.75	29.25				
Total		670	238	908			
AY 2015-16							

YES	Frequency	306	68	374	2.207	.1373	1.294
	%	81.82	18.18				
NO	Frequency	365	105	470			
	%	77.66	22.34				
Total		671	173	844			
AY 2016-17							
YES	Frequency	122	33	155	.8986	.3432	1.275
	%	78.71	21.29				
NO	Frequency	142	49	191			
	%	74.35	25.65				
Total		264	82	346			

Result: Fail to reject the null hypothesis; there is no general association between completing one or more pre-requisite courses and the outcome of HE 250 (web based instruction) for 3 out of 4 academic years.

Cost Analysis

The categorical analysis explored a possible relationship between completing one or more pre-requisite courses (RD 115 and/or WR 121 and the outcome of HE 242 course and HE 250 course. The cost analysis looks at the cost to students identified as not completing one or more pre-requisite courses in the categorical analysis AND these students' placement into reading and writing courses based on Compass scores.

Students not meeting the standard pre-requisites for general education courses based on placement by Compass score were selected for the cost analysis. These standards can be found [here](#). Specifically these standards are as follows: for writing a, "successful completion (grade C or higher) of WR 115 or placement into WR 121," and for reading, "successful completion (grade C or higher) of RD 115 or equivalent test scores" (PCC website). Therefore, the categorical analysis uses a slightly higher pre-requisite standard (i.e. completing WR 121 versus completion of WR 115 or placement into WR 121).

The tables on the following page explore the costs to students.

Course Placement	Count	Success Rate	Tuition Expenses	1 Attempt Count	Cost	2 Attempt Count	Cost	Total Cost
WR Below 80	253							
WR 80	290							
WR 90	898	73.2%	\$ 384.10	657	\$ 252,482.76	241	\$ 92,439.04	\$ 344,921.80
(+)WR 115				738	\$ 360,072.50	160	\$ 77,971.90	\$ 438,044.40
WR 115	513	82.2%	\$ 487.80	422	\$ 205,698.43	91	\$ 44,542.97	\$ 250,241.40
Totals	1954							\$ 1,033,207.60

Course Placement	Count	Success Rate	Tuition Expenses	1 Attempt Count	Cost	2 Attempt Count	Cost	Total Cost
RD Below 80	52							
RD 80	313							
RD 90	963	73.8%	\$ 384.10	711	\$ 272,977.57	252	\$ 96,910.73	\$ 369,888.30
(+)RD 115				737	\$ 359,359.82	226	\$ 110,391.58	\$ 469,751.40
RD 115	846	76.5%	\$ 487.80	647	\$ 315,699.28	199	\$ 96,979.52	\$ 412,678.80
Totals	2174							\$ 1,252,318.50

Combined Total Cost \$ 2,285,526.10

The frequency counts of course placements are displayed above for students who did not meet the standard pre-requisites for general education courses. Based on analysis of success rates in high enrolling courses for fall 2016, the expected success rates are shown. Success rate documentation can be found

[here](#). Where an expected success rate was known, the cost analysis was computed for the frequency of course placement and the number of courses required to meet the standard pre-requisites.

The following is an example of how the above table should be read. There were 898 students identified as being academically prepared or placed into WR 90 by their Compass Score. The success rate for WR 90 is 73.2%; therefore, not all 898 students will pass the course on a first attempt. The cost analysis model assumes that on the second attempt, the remaining 160 students will pass; however, it should be conceded that there is a possibility that some proportion of the 898 students may never pass WR 90. For students that can pass WR 90 on the first attempt, the cost will be \$384.10 (the expense of tuition, fees, and books). After passing WR 90 these students will need to pass WR 115 at a cost of \$487.80; therefore, for students able to pass both WR 90 and WR 115 on the first attempt, the total cost to the individual student is \$828.90. Some of these students will also require reading courses if they did not meet the standard pre-requisite. The table also shows placement into courses below WR 90; therefore, the lower the initial placement the higher the expected cost to the individual student. The table displays costs in the aggregate as one reads across the fields.

The entire analysis has not explored the following: the amount of permanent FTE lost to HE courses due to a percentage of students not ever passing courses in order to meet the standard pre-requisites, and the magnitude of FTE latency in HE courses due to a percentage of students experiencing delays in their educational path in order to meet the standard pre-requisites.

Appendix H: Classroom Assessment Strategies examples

- The first day of class I ask them to write down one question they would like answered by the end of the term. We go over the questions as they come up each lesson. We also look at all the questions again the last day of class and evaluate in groups if their questions have been answered and discuss new questions that came up.
- I print out a list of learning objectives for all weeks. We go over them before each lesson and they use them as a study guide. I ask the students to review each learning objective they covered the previous week and rate on a scale of 1-5 (1= know very little about the topic 5= feel comfortable teaching someone else the information). Any learning objectives they rate below a 4 or 5, I ask them to list 1-3 strategies they could do to bring themselves up to a 4 or 5.
- After an in-class activity, students evaluate themselves on the process (what worked well, what didn't, suggestions for improvement)
- Hold a conversation surrounding study skills---how much they should be studying, how much the reading ties into the exams, and I also learn what they're needing (more group work, visuals, etc)
- I use a short questionnaire during week 4 or 5 checking in with students about lecture format, clarity, use of text/ppt...kind of a "how's it going".
- Each time we watch a film clip or have a guest speaker, I ask them to write a short PIN paper (3 positive, 2 interesting 1 negative).
- I am continuously asking them to give feedback and inform discussions where they have expertise. I keep an open discussion in all classes! They can even debate exam questions, etc. for extra points!
- I'm trying something new this term...the students will be developing 3 essay questions RELATED to a specific course outcome on the syllabus (for the final exam). These take home essay questions will (I hope) bring together the main points/topics/discussions/ materials that we have investigated for a specific course outcome not just the last 3 weeks...
- I have questions at the end of my last exam that ask about all of the assignments (with a 1 to 5 scale) as well as soliciting general feedback. I usually ask students on the day they turn in their assignments how it went, what they learned, if they liked it, if they think it should remain in the class, and any other feedback they might have.
- I also use a anonymous fill in the blank questionnaire during tests to determine study habits of my students...are they reading the book, using the study guides, etc.
- I write on the board what we're covering and how it fits into the whole course. Then revisit it again at the end of class. We do this with the course calendar in front of us. I also have these in my ppts, but I found that students were not connecting the dots (ESL/adult learner/drug affected brain issues?).

Appendix I: Updated Core Outcomes Mapping Matrix

Course	Course Name	CO1	CO2	CO3	CO4	CO5	CO6
HE 110	CPR/AED for Prof Rescuers & Health Care Providers	2	1	2	1	2	1
HE 112	Standard First Aid & Emergency Care	2	1	2	1	2	1
HE 125	First Aid & Industrial Safety	2	1	2	1	2	1
HE 207	Seminar in Biomedical, Behavioral & Health Sciences	2	1	1	1	2	2
HE 212	Women's Health	2	2	2	3	0	3
HE 213	Men's Health	2	2	2	2	0	3
HE 242	Stress & Human Health	2	1	2	1	0	3
HE 250	Personal Health	2	2	2	2	0	3
HE 251	Community & Public Health Issues	2	3	3	3	1	2
HE 252	First Aid - Basics & Beyond	2	2	3	1	2	3
HE 254	Weight Management & Health	2	2	2	2	1	2
HE 255	Film & Public Health	2	3	3	3	0	2
HE 262	Children's Health, Nutrition & Safety	2	2	2	2	1	2
HE 264	Health, Food Systems & the Environment	2	3	3	2	0	3
HE 278	Human Health & the Environment	2	3	3	2	0	3
HE 295	Health & Fitness for Life	2	1	2	1	1	3

Appendix J: Health Studies SAC Outcomes Reports

Double-Click on the icon to view report.



2012 13 LAC
Report.pdf



2013 14 LAC CTPS
Report.pdf



2013 14 LAC SR
Report.pdf



2014 15 LAC CA
Report.pdf



2014 15 LAC SR
Reassess Report.pdf



2015 16 LAC
Report.pdf



2016 17 LAC SR
Report.pdf

Appendix K: Health Studies Student Demographics by Campus

*All numbers in percent

		2012-13 AY CA	2016-17 AY CA	2012-13 AY RC	2016-17 AY RC	2012-13 AY SE	2016-17 AY SE	2012-13 AY SY	2016-17 AY SY
Age	Under 20 years old	14.9	22.4	24.3	39.1	19.0	31.1	30.7	35.0
	20-24 years old	27.1	31.9	28.1	29.3	27.2	33.5	28.0	29.9
	25-49 years old	54.8	43.1	45.0	30.1	49.6	32.3	38.6	32.7
	50+ years old	3.1	2.6	2.7	1.5	4.2	3.1	2.8	2.4
Gender	Female	65.5	66.7	64.1	59.6	69.7	64.1	57.0	58.3
	Male	33.3	31.7	35.0	38.6	29.6	34.6	42.2	39.9
	Unreported	1.2	1.6	0.9	1.8	0.6	1.4	0.8	1.8
Race/Ethnicity	African American	11.9	8.5	4.5	5.0	12.1	9.1	5.2	5.1
	Asian	3.6	6.6	5.9	9.1	9.3	13.9	7.0	6.7
	Hispanic	7.9	12.3	12.5	15.6	7.9	12.0	10.1	10.5
	Multi-Racial	4.4	8.9	3.9	7.5	4.6	7.6	3.6	6.5
	Native American	1.7	0.6	1.8	0.7	1.3	0.6	0.9	0.7
	Pacific Islander	0.8	0.5	0.8	0.5	0.3	0.8	0.8	1.2
	Unreported	8.1	5.2	7.8	7.5	7.0	4.5	8.2	7.4
	White	61.6	57.5	62.8	54.4	57.4	51.4	64.2	61.9

https://www.pcc.edu/ir/program_profiles/index.html

Appendix L: Classes taught by Health Studies Faculty Fall 2012-Spring 2017

Note: CLWEB are counted in the F2F column

Name	HE 110	HE 112 (HE 113)	HE 125	HE 207	HE 212	HE 212DL	HE 213	HE 213DL	HE 242	HE 242DL	HE 250	HE 250DL	HE 251	HE 251DL	HE 252	HE 254	HE 255	HE 262	HE 262DL	HE 264	HE 264DL	HE 278	HE 278DL	HE 295	HE 295DL	HE 299G	
Bear, E.										X	X																
Beil, K.									X	X													X				
Boak, R.											X	X															
Bucuvalas, A.									X	X	X	X													X	X	
Carr, S.		X			X				X	X	X				X										X		
Casady, E.					X	X			X	X	X	X	X						X	X	X						
Christopher, S.											X	X								X						X	
Diep, T.							X	X	X	X	X	X															
Eaton, A.																									X		
Farrar, C.										X	X																
Francis, E.									X		X																
Gaige, E.		X			X				X	X	X	X	X	X							X						
Gibbs, R.					X	X					X	X				X			X	X					X	X	
Grenier, S.		X				X			X	X	X	X	X														
Hartje, B.									X		X														X		
Hunsberger, M.																						X					
Johnson, Ge.		X					X		X	X	X	X				X									X	X	X
Johnson, Gl.								X	X	X	X	X													X	X	
Katter, R.		X							X	X	X	X			X					X	X	X					
Kumar, G.										X	X	X															
Lampson, E.	X	X	X	X											X												
Leavitt, A.										X	X	X	X								X	X	X	X			
Lesselroth, H.										X	X	X											X	X			
Limbrunner-B, V.									X	X	X	X													X	X	
McGlasson, E.									X	X	X	X															X
McKenzie, T.										X		X															X
Meagher, M.		X						X	X	X				X	X												
Meeks, C.							X		X		X																
Meyer, M.				X					X		X				X		X								X		
Morgan, K.																									X		
Nelson, C.																											X
Pedersen, S.										X		X		X						X							
Playford, C.					X					X	X	X	X	X			X										
Poetter, D.			X																								
Raveaux, R.																											
Regan Vienop, L.		X							X	X	X	X			X									X	X	X	
Rierson, E.		X		X		X	X		X	X	X	X								X	X	X			X	X	
Rochelle, S.				X		X			X	X	X	X		X						X					X		
Rowland, M.									X		X																
Sauve, L.											X																
Smith, M.		X																									
To-Haynes, N.						X			X	X	X	X	X	X						X							
Van Ness, G.									X		X																
Veeman, T.		X								X	X	X						X	X						X	X	
Weir, T.										X															X	X	