

**An Evaluation of First-Year Activity
of the
Health Distance Education Partnership
of the University of Alaska**

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University of Alaska Health Distance Education Partnership

First Year Evaluation Report

Table of Contents

Executive Summary	i
Introduction.....	1
Instructional Design and Development.....	3
Delivery of Courses	11
Student/Faculty Support.....	15
Summary and Recommendations	20
HDEP Recommendations	22
UA System Recommendations	23
Appendix A – Program-Specific Information.....	24
Appendix B – Student and Faculty Instruments	26

Executive Summary

Introduction

The Health Distance Education Partnership (HDEP) is an ongoing effort by the University of Alaska to support faculty in high demand health degree programs to develop or transition existing courses into effective distance delivery formats. HDEP is an outgrowth of the University's commitment to increase Alaska's pool of health workers by extending training opportunities throughout the state.

The effort includes the three Major Academic Units (MAUs) of the university system and is an arm of the Allied Health Alliance (AHA), which includes the deans and directors of the colleges and departments responsible for health programs and which operates under the leadership of the Associate Vice President for Health Affairs for the UA system.

HDEP's funding flows from a variety of sources, including the US Department of Education, the Denali Commission, UA Nursing Expansion and Bio Terrorism and Bio Defense contracts with the Alaska Department of Health and Social Services and the University of Washington. These resources support instructional design (ID) staff who work with faculty in migrating courses to appropriate formats, including Web-based, video conferencing, audio conferencing and blended mediums.

HDEP serves certificate and degree programs in nursing, pharmacy technician, dental assisting, radiography, medical laboratory, community health aide/practitioner, medical office, health care reimbursement, personal care

attendant, certified nurse assistant and community wellness advocate. In addition, HDEP addresses continuing education for practicing health care professionals.

Activities for the first year of operation—Summer 04 through Summer 05—were directed at instructional design of selected courses in the covered programs, delivery of courses to distance sites and provision of student and faculty support services. An evaluation of these efforts was conducted in Spring 05 by an independent contractor. The evaluation utilized interviews with faculty, instructional design and University of Alaska administrative staff; surveys of a sample of faculty and students involved with the health courses; and visits to three receiving sites: Bethel, Aniak and Juneau.

Findings

Overall, the evaluation found that the HDEP program had a very successful first year. Despite challenges in all three of its areas of activity, HDEP assisted nursing, allied health and behavioral health programs of the University of Alaska to design, deliver and support distance delivery to sites around the state.

Through instructional design staff supported by HDEP funding, 48 courses were touched in some way during the period from Summer 04 to Summer 05 and an additional five courses received help from the general instructional design units of the MAUs. Forty-four faculty received training and/or design support from HDEP staff, with 9 other nursing staff receiving training through the general ID units.

HDEP courses have been designed for a variety of delivery formats: audio/video conferencing, CD and Web-based. The most common format appears to be audio/video conferencing supported by Blackboard, although information for Fall 05 indicates that more and more courses are migrating to Web-based.

The evaluation found that faculty are using multiple technologies and instructional strategies in their courses. Most common technologies are links to Websites, discussion boards, textbooks, on-line quizzes and on-line articles. Of these, students and faculty both found textbooks, quizzes and discussion boards the most helpful. With respect to instructional strategies, students found exams and quizzes, discussions, homework and term papers the most helpful.

Although HDEP funding for Summer 04 through Summer 05 focused on design assistance, the expectation was that courses would also be delivered. In the Fall 04 and Spring 05 semesters, a total of 34 HDEP distance courses were delivered by the UA system in nursing, allied health and behavioral health. These courses greatly expanded access to training in high-need, high-demand health professions, to the expressed appreciation of students and regional health authorities alike.

HDEP programs involved an enrollment of 614 students, of which 56 percent were in nursing, 28 percent in allied health, 6 percent in behavioral health and 10 percent in professional development CEUs. While statistical data on student performance was not available, two-thirds of the students surveyed reported that they had learned more or much more in their distance

courses than in most other courses and that they had been more actively involved in that learning. More than half (59%) believe that their progress toward meeting learning objectives was more or much more in their distance courses.

In terms of satisfaction with their distance experience, 82 percent of surveyed students and all surveyed faculty reported that they were satisfied or very satisfied. Ninety-three percent of the students and 100 percent of the faculty stated that they would take or teach another course using the same technologies in the future.

Using the data and information collected on the instructional design function, it is possible to provide at least partial answers to questions raised by HDEP staff early in the evaluation..

Question 1: *What is the most efficient approach to faculty support for distance-delivered course development in terms of courses developed and faculty satisfaction?*

From faculty responses thus far, it would appear that considerable hands-on assistance is essential, particularly for their first experience with distance delivery. As faculty become more adept at distance delivery, the need shifts more to advice and consultation, with, however, continued assistance with the routine and technical aspects. With more proficient faculty, the most efficient approach might be a greater reliance on the general ID units for consultation with hands-on technical assistance provided within faculty units. In FY06, HDEP will be looking at ways to accomplish this transition.

Question 2: *What instructional strategies and student supports are most successful in terms of student persistence and student satisfaction?*

Although a great deal more research and information is needed to determine the most successful instructional strategies, this evaluation did gather information on student satisfaction concerning methodologies used. These data indicate that students are most comfortable with strategies that they are already familiar with: exams and quizzes, homework, term papers, etc. These findings indicate that most distance courses to date are utilizing fairly standard classroom technologies and methodologies. The findings appear to support the concern expressed by faculty and ID staff that courses have not yet fully migrated to effective distance pedagogies—pedagogies that are more interactive, involve students with the material and with their peers, empower students to take control of their own learning and provide alternative means of authentic assessment.

Question 3: *What are the ideal qualifications for instructional design personnel?*

Some suggestions about the ideal qualifications flow from the ID services that faculty need. For example, as most faculty would like assistance in designing more effective strategies for distance courses, some knowledge of pedagogy seems essential. This is particularly true for ID team leads who, in the opinion of most of persons interviewed, should have some faculty experience in addition to high technical knowledge and skills.

Question 4: *Is there an optimal resource mix to support both course development and delivery at participating campuses and for the UA system as a whole?*

From information obtained through evaluation activities, it appears that the optimal resource mix to support course distance delivery is one that requires attention at the system as well as the program level. Many of the current administrative and academic support problems that distance students encounter could be lessened if not resolved by having people at each campus or MAU tasked with coordinating distance activities. A point person for distance delivery within each program could also help resolve many of the day-to-day issues that arise. Long-term, however, effective student and faculty support will require that the policies, procedures and systems of the university as a whole take distance and cross-MAU delivery of programs into account.

Question 5: *What incentives appear most successful in supporting faculty buy-in and success?*

It appears that incentives are currently provided on a seemingly ad hoc basis, with little commonality within or among MAUs; therefore, no one or one group of incentives emerged as most successful. However, for those faculty who are willing to accept off-contract extensions, these may be more effective than academic year course releases or course overloads, primarily because there are fewer demands on faculty time in the summer months. More hands on assistance with the tedious aspects of course development also appears to be successful in gaining faculty buy-in.

From the above information and analysis, the evaluator offers a few recommendations for the future. The first set of recommendations is to the HDEP program. The second set of recommendations address those findings that have larger implications and are made to the university system as a whole.

HDEP Recommendations

Recommendation 1. Engage in joint planning and closer coordination with the general ID units of the MAUs, both internally and across the UA system.

Recommendation 2. Provide more hands-on assistance to faculty in the technical aspects of course design, perhaps through the utilization of employees at the media technician level or student workers/teaching assistants.

Recommendation 3. Work with system-wide efforts to develop a common set of quality standard for distance courses and forward the standards to faculty senates for review and adoption.

Recommendation 4. Develop a database of students admitted to HDEP certificate and degree programs that will allow program managers to track student persistence and performance over time.

Recommendation 5. Provide effective communication links between sending and receiving faculty and sites. This may involve supporting a distance education coordinator at each MAU.

Recommendations 6. Consider involving local health professionals as mentors to distance students.

Recommendation 7. Create a developmental English course based on

medical terminology to increase the academic preparedness of students entering distance health-related programs.

Recommendation 8. Either create or work with others to create an “Introduction to Distance Education” on-line course which could cover a variety of topics and which would help assure that students are ready to learn when they enroll in a distance course.

Recommendation 9. Assure that outreach faculty involved in delivering HDEP programs are provided opportunities for meaningful interaction with home campus faculty.

UA System Recommendations

Recommendation 10. Expedite the development of the Instructional Design Job Family and assure that experience and knowledge of pedagogy are incorporated into position qualifications.

Recommendation 11. Provide increased general fund support for instructional design services, not only for health programs but also for general ID units at each MAU.

Recommendation 12. Address the student support issues identified in this evaluation and other reviews, particularly those that stem from university-wide policies, procedures and systems.

Introduction

The Health Distance Education Partnership (HDEP) is an ongoing effort by the University of Alaska to support faculty in high demand health degree programs to develop or transition existing courses into effective distance delivery formats. HDEP is an outgrowth of the University's commitment to increase Alaska's pool of health workers by extending training opportunities throughout the state.

The effort includes the three Major Academic Units (MAUs) of the university system and is managed by a program director assigned to the College of Health and Social Welfare at the University of Alaska Anchorage. HDEP is an arm of the Allied Health Alliance (AHA), which includes the deans and directors of the colleges and departments responsible for health programs and which operates under the leadership of the Associate Vice President for Health Affairs for the UA system.

HDEP was begun in May 2004 funded from a variety of sources: the US Department of Education, the Denali Commission, UA Nursing Expansion, UAA Chancellor Bonus Fund, Allied Health Alliance, SB 137 workforce development funds, and Bio Terrorism and Bio Defense contracts with the Alaska Department of Health and Social Services and the University of Washington. These resources support instructional design (ID) staff who work with faculty in migrating courses to appropriate formats, including Web-based, video conferencing, audio conferencing and blended mediums.

The following health certificate and degree programs are included in HDEP:

University of Alaska Anchorage (UAA)

- Nursing
 - Practical Nurse Certificate
 - Associate of Applied Science
 - Bachelor of Science completion
 - Master's of Science.
- Allied Health
 - Pharmacy Technician
 - Dental Assisting
 - Radiography
 - Medical Laboratory

University of Alaska Fairbanks/College of Rural Alaska (UAF/CRA)

- Allied Health
 - Community Health Aide/Practitioner (CHA/P)
 - Health Care Reimbursement
- Behavioral Health

University of Alaska Southeast (UAS)

- Health Sciences
 - Personal Care Attendant
 - Certified Nursing Assistant
 - Community Wellness Advocate

In addition, HDEP addresses continuing education for practicing health care professionals.

The initial funding supported activities from Summer 2004 through Summer 2005. This first round of activity is intended to build “maximum capacity in instructional design team development, faculty capacity building, and supplemental student support services, based on the needs of each program and campus¹.” In operational terms, the partnership supported a 3.5 Full-time Equivalent (FTE) instructional design team housed at UAA and a half-time course development lead at UAF/CRA, with limited funding to UAS for the development of one course.

In February, 2005, the HDEP program let a contract to conduct both a formative and summative evaluation of first year efforts. The ambitious goal for the evaluation was to answer the following questions:

- What is the most efficient approach to faculty support for distance-delivered course development in terms of courses developed and faculty satisfaction?
- What instructional strategies and student supports are most successful in terms of student persistence and student satisfaction?
- What are the ideal qualifications for instructional design personnel?
- Is there an optimal resource mix to support both course development and delivery at participating campuses and for the UA system as a whole?
- What incentives appear most successful in supporting faculty buy-in and success?

None of the above questions could be answered definitively in the short period of program implementation and evaluation. Although the evaluation questions require a longer time horizon and a more mature effort, the evaluation did begin to gather data around the three dimensions outlined in the HDEP statement of purpose, quoted above:

- Instructional Design and Development
- Delivery of Courses and
- Student/Faculty Support

For each of these areas, the evaluator collected and analyzed existing quantitative data and gathered more qualitative information through surveys, interviews and visits to sites receiving distance programming.. The resulting information, which is discussed at some length below, provides insights into the five evaluation questions and suggests courses of action for the future.

¹HDEP program description found on its Website: <http://nursing.uaa.alaska.edu/hdep/>

Instructional Design and Development

The original HDEP plan, as outlined on its Website, called for the development of 52 courses, broken out as follows: Nursing (25), Allied Health (20), Behavioral Health (4) and health gateway courses² (3).

The work of developing the planned courses fell primarily on programs offered by UAA, which accounted for 39 of the courses on the original list. UAF was assigned responsibility for nine courses and UAS, which has limited programming in health, was assigned responsibility for one. Gateway courses were intended to be a system-wide effort, with no one campus assigned total responsibility. This original list was massaged several times during the course of the year, as other courses emerged as either ready for or in need of launch.

In all, HDEP instructional design staff report that 48 courses have had or are currently undergoing some development assistance during the period from Summer 04 to Summer 05. Of these, 37 are UAA courses, 10 are UAF/CRA courses and one is a UAS course. Five other health courses have been assisted with Title III funds, bringing the total to 53. Thirty-two of the courses were on the original list. Included in the HDEP total are 22 nursing, 22 allied health, two behavioral health course and two continuing education courses for health care professionals.

Not all courses have been touched to the same degree. Development assistance has ranged from a faculty training session to substantial hands-on assistance in course design/redesign, including developing learning objects and creating audio/video files.

In reviewing HDEP activities, the evaluator identified several circumstances that hampered the development efforts. First was the severe time crunch. It would have been virtually impossible to fully develop the planned 52 courses in one year under the best of circumstances. And, of course, the best of circumstances did not prevail.

For example, the UAA instructional design team operated most of the year with only 2.5 members. Efforts to fully staff the team were delayed by classification issues and the relative paucity of applicants, particularly for positions requiring highly technical skills.

Compounding the problems occasioned by limited staffing was the fact that many of the faculty assigned to distance coursework were either new to teaching or new to distance education, and thus required a greater degree of assistance than was the case with more experienced faculty. ID staff interviewed also cited problems with securing adequate time with faculty to do course planning, partly because of the very short time period in which to develop courses—some were being developed as they were being delivered—partly because not all faculty had release time to work on course development and partly because faculty had other priorities.

² Health gateway courses are those prerequisites that are common among two or more health degrees, such as Anatomy and Physiology and Human Biology.

A further challenge that emerged was the shifting agenda for course development. As mentioned earlier, HDEP is an outgrowth of the Allied Health Alliance, which is tasked, among other duties, with the coordinated planning and distance-delivery of programs identified by the allied health industry as high need.

A parallel effort of the university system is the Nursing Expansion project, charged with doubling the capacity of the university to help address the critical nursing shortage in Alaska. With heavy funding by the health industry, the nursing expansion project is extending the practical nurse and associate degree nursing programs to many communities in Alaska and adding a masters degree in nursing education to begin to “grow our own” faculty. To meet these objectives, the expansion project developed plans for significantly improving the distance delivery of nursing courses. Because of the importance of nursing expansion both to the industry and to the university, the original Alaska Distance Education Technology Consortium (ADETC) proposal (that became the core HDEP funding) identified the instructional design needs of nursing as well as allied health.

About the time of the original planning for HDEP, university efforts in the field of behavioral health increased. The demands for training in this area, particularly in rural Alaska, led to a push to include some behavioral health coursework in this first round of HDEP development. The somewhat conflicting demands of these three areas—allied health, nursing and behavioral health—coupled with the urgency of need and the limited resources available, has made it difficult to establish and hold to firm plans for course development.

A further shift in emphasis occurred when one of the planned activities under Denali Commission funding—the development of a CHA/P training center in the Interior—could not be accomplished. Instead, the funding was reprogrammed to support development of distance-delivered course work for the CHA/P program.

Both ID staff and faculty expressed some concern that time constraints and the other factors discussed above has meant that some courses have been launched before they were fully developed. All agreed that the quality of the courses is uneven and all expressed the need for continuing revision and improvement.

HDEP staff were interested in obtaining information about the number of delivery formats used in the developed courses. These data were not available for AY04/05, primarily because no composite list of delivered courses indicating format could be found, either at UAOnline or in the individual campus course schedules. Some information concerning formats was obtained from random sample surveys of 135 students and 25 faculty. The student survey had a 56 percent rate of return (76 responses); the faculty survey 32 percent (eight responses). Survey results indicate that the primary delivery format was audio/video conferencing supported by Blackboard.

A listing of the health courses which will be distance delivered system-wide in Fall 05—many of which were developed between Summer 04 and Summer 05—indicates that of the 51 courses to be offered, 11 will be by audio/video conferencing, 14 by CD and 26

via the Web. The AY05/06 evaluation will obtain information from the on-going system-wide distance education efforts to update information on the number of formats used.

HDEP staff also asked the evaluator to determine the number of courses with multiple instructional strategies. Because the evaluator did not have instructor access to all courses, it was not possible to get a firm figure. However, information from the student and faculty surveys indicate that the most frequently-used strategies were links to websites, discussion boards and readings from textbooks. Evaluation plans for the coming year call for a more in-depth review of developed courses to ascertain the variety of instructional and assessment strategies used.

A total of 44 faculty have been involved in the AY04/05 development efforts. Of these, 27 received some form of training, either from HDEP instructional design staff, through the instructional design units of the various campuses (Anchorage's e-Media, CRA's Center for Distance Education, or Sitka's Title III Instructional Design Center) or by attendance at national conferences. E-Media also provided training for nine nursing staff, including adjuncts, graduate assistants and administrative staff. Thirty-one faculty had some level of design assistance, again either through the HDEP design staff or the campus ID center or a combination of both.

Ways in which this assistance was delivered varied by MAU. Two distinct instructional development philosophies emerged as the evaluator interviewed faculty and staff at both UAA and UAF/CRA. The UAA instructional design team early on established a relatively intensive, hands-on approach that included assisting faculty with uploading print materials, identifying/creating learning objects and creating audio and video files. By contrast, the CRA instructional design philosophy centered more on providing faculty with information on technology and distance pedagogies rather than hands-on assistance. These differing philosophies resulted in some frustration on the part of faculty, most of who wanted and needed assistance in the technical aspects of course development.

The relationship between HDEP instructional design staff and the institution's general instructional design units also differed by campus. At UAA, the HDEP instructional design team did refer some faculty to both e-Media and CDE, primarily for assistance with a particular task that the HDEP team did not have the time or expertise to handle. Some CRA faculty did access the services of CDE, but on an ad hoc and piecemeal basis.

The evaluator was asked to obtain information on faculty/staff perceptions of the instructional design process. The evaluator addressed this request through the faculty survey and interviews with selected CRA faculty as well as with HDEP and general institutional instructional design staff. The following information has been obtained from the eight faculty survey respondents, and from interviews with seven faculty³, four HDEP ID staff and nine general ID unit staff.

In general, faculty survey respondents reported receiving training in available technologies and distance education methodologies. Seven of the eight survey

³ Two of the interviewed faculty also responded to the survey.

respondents said that they had received help in selecting appropriate technologies, and six indicated that they had received help in the technical aspects, such as posting items on Blackboard and converting text files.

However, faculty interviewed cited the need for more help with these technical aspects, as they are among the most time-consuming and tedious of course development. Some faculty also felt that they need more assistance in choosing the appropriate technology for a particular objective or learning activity.

HDEP ID staff perceptions of service effectiveness focused on the lack of time for thorough and careful development for this first round of courses, but expressed the hope that the courses would be revisited and improved over time. As mentioned above, ID staff also had some difficulty in securing sufficient time with faculty. This appears to be particularly true for general ID unit staff and led to some confusion about what the faculty was requesting.

Some faculty and HDEP ID staff expressed the need for more time to reflect on the overall objectives of the course and how these objectives could best be met using distance technologies and methodologies. Again, the hope is that this will improve with future iterations.

One of the biggest concerns of general ID unit staff was the lack of joint planning and coordination between their units and the HDEP development effort. Both e-Media and CDE indicated that they could have been more useful in supporting the HDEP had they been better apprised of timelines and work efforts. Both units indicated that they could have freed up staff to assist, although CDE—which exists on program receipts—also indicated that it would have needed some financial support from HDEP. The philosophical issues regarding ID assistance would also need to be resolved. However, because all HDEP ID staff cited understaffing as their biggest problem, it appears that closer ties between HDEP and these general ID units would be beneficial. With the high demand distance course delivery makes on the MAU's Information Technology resources, closer coordination and planning with these units also seems warranted.

HDEP ID staff were asked a series of questions about aspects of their work. The four staff interviewed reported that in general they had access to the hardware and software that they needed to perform their functions. However, three of the four felt that they could not always adequately provide their faculty with the tools needed to create course materials, such as headsets, specialized software, etc. Staff also expressed some concern over the opportunities for their own professional development, partly as a function of a very heavy workload and partly because they lacked funding. Both of these concerns could be addressed if ID staff were assigned and had control over a small budget for travel and supplies. The biggest concern for all, however, was that the HDEP design teams were understaffed.

One of the evaluation tasks for this first year was to identify distance strategies that have the most positive impact on student success. This question cannot be fully addressed in the short time period under evaluation, since the answer requires longer-term follow up of

student persistence and performance. However, the evaluator did obtain information concerning faculty and student perceptions of effectiveness through the surveys.

Both students and faculty were asked to identify the technologies used in their course(s). The following table shows the technologies most-often listed by both parties as well as the rank.

Technology Used	% Students	Rank	% Faculty	Rank
Links to Websites	96%	1	100%	1
Discussion Boards	91%	2	88%	2
Textbooks	86%	3	100%	1
On-line Quizzes	80%	4	75%	3
On-line articles	78%	5	63%	4

Half the students and almost two-thirds of the faculty reported using on-line animations (learning objects) and about half of both groups reported using audio files.

Of the technologies used, both students and faculty were asked to rank the three they found the most useful, with the following results.

Technology Most Helpful	% Students	Rank	% Faculty	Rank
Textbooks	74%	1	63%	1
On-line Quizzes	53%	2	50%	2
Discussion Boards	37%	3	50%	2

Half of the faculty rated “links to Websites” as one of the most effective technologies, but only about one-fourth of the students found them so. It is interesting to note that the most useful technology for both students and faculty remains the textbook. This finding could indicate that most distance health courses have yet to migrate to more interactive technology for delivering course content; however, textbooks will probably long remain a viable source of information.

The surveys also collected perceptions on instructional methodologies. Both groups were asked to rate a series of methodologies on a five point scale, with “1” being “very ineffective” and “5” being “very effective”. The following table shows student responses. The first percentage reflects the number of students reporting using the methodology. The second percentage is the number of those using the methodology who rated it either “effective (4)” or “very effective (5)”.

Methodology	% Students reporting using	% Students ranking as effective
Quizzes	83%	95%
Exams	83%	89%
Threaded discussions	82%	81%
Homework	75%	88%
Term papers	68%	81%
Team projects	67%	57%
Real time discussions	64%	73%
Case studies	58%	64%
Student presentations	50%	55%

Almost half of the students who had student presentations in their course(s) found them “ineffective” or “very ineffective”. Team projects also ranked fairly low. These findings may indicate that faculty need to find better ways of handling student presentations and of encouraging groups to work together via distance.

The following methodologies were used by almost all reporting faculty:

- Quizzes
- Threaded discussions
- Homework
- Term papers
- Exams
- Student presentations

In general, if a faculty member indicated that they had used a methodology, he/she found it effective. Few faculty reported using group projects—although 67 percent of students said they had experienced them in their courses—journaling or informal discussions.

A final item under Instructional Design about which the evaluator was asked to provide information was in determining the “ideal” qualifications for ID staff. This information was deemed to be helpful in informing the system-wide review of the Instructional Design Job Family, which is slated for the future.

In interviews with faculty and both HDEP and general unit ID staff, the question of qualifications was addressed. UA ID staff members come from a variety of backgrounds,

pursuing several different paths to their current position. Of the nine staff interviewed, seven were new to their job within the past year or so. Four staff qualify for their position on the basis of prior experience in business or industry. One has a degree in educational technology, but no prior experience. Four have both prior experience and some coursework in educational technology, ranging from a few courses up to a master's degree.

Five staff indicated that they either had been or were now teaching faculty. Two have or have had a full-time faculty position, while three are or have been adjuncts. They come from a variety of fields: pharmacology, physics, early childhood education, educational technology and philosophy.

When asked how important faculty experience is to an instructional designer, 4 of the 9 rated such experience as "essential", particularly for those involved in the actual design of the course. It was considered less essential for technical staff, such as multimedia and graphic specialists, although staff in those positions expressed the need to have some grounding in pedagogy, either through prior experience or through professional development once on the job.

Faculty expressed the desire for instructional design staff who were not only well-versed in the technologies available for distance delivery but also could help faculty choose the appropriate technology to achieve a particular objective or learning outcome. This implies some training in pedagogy for all ID staff.

Considering the perceived importance of faculty experience from both the faculty and instructional design staff point of view, a fresh look at the proposed ID Job Family may be warranted, in particular, the possibility of faculty rank for ID coordinators and managers.

Overall, the instructional design function of HDEP provided essential services to faculty. However, some issues in the design function remain. A major issue is joint planning and coordination between HDEP and the on-going ID units of the various campuses. At present, HDEP staff need to call on the expertise of these units to support their own efforts. But unit managers also need to know in advance what assistance will be required, when and in what form. This coordination will become more important as MAUs and the UA system as a whole move to streamline and improve distance delivery. It is also essential for assuring long-term instructional design assistance for health programs after HDEP funding phases out.

The challenge of longer-term planning is exacerbated by the organizational structure of HDEP itself, and by the complexities of its funding base. Organizationally, HDEP is overseen by the AHA, but HDEP services are not confined to allied health programs. The allied health, nursing and later behavioral health programs were all included in HDEP and led to some tensions. When interviewed, deans and others expressed somewhat conflicting views. On the one hand, some felt that HDEP had been "captured by nursing" and a focus of allied health had been lost or at least lessened. Others felt that the inclusion of behavioral health, which has enormous development needs, threatens existing plans. In

addition, the inclusion of behavioral health extends responsibility to other academic units such as arts and sciences—units that are not currently represented in HDEP or AHA.

The complex funding base also makes planning somewhat difficult and certainly complicates reporting and accountability. For example, a major change occurred in the Denali Commission grant when the proposed CHA/P training center partner pulled out of the project and funds were reallocated by the affected academic unit to developing distance-delivered training modules.

A final issue is that of academic quality. Most involved in the HDEP effort agree to the uneven quality of the courses that were developed, due primarily to the very tight timeline but also linked to faculty inexperience with educational technology and distance education. Well-designed distance courses require a shift of emphasis from teaching to learning. They require attention to authentic assessment; to engaging students with content, the instructor and their peers; and to empowering students through self-assessment and reflection. This shift does not come quickly, easily or without assistance.

ID staff and faculty agreed that a common set of quality standards for distance courses throughout the system could help assure greater quality. Both UAA and CRA, through their general ID units, have developed draft standards. Adoption by faculty senates of a single set of standards for use by all programs and all MAUs would be an essential first step in upgrading the quality of UA distance offerings.

Through faculty training and one-on-one consultation, HDEP ID staff have begun to assist the transition to a more student-centered approach and faculty report that they plan on reworking and refining their courses in the future. One way in which HDEP could provide additional support is to free faculty and ID staff from the more tedious aspects of course development—converting text, posting syllabi and course outlines on Blackboard, entering quiz questions, etc.—so that the focus could be on pedagogy and course redesign. This could be accomplished by providing faculty with media technician-level employees or trained student workers or teaching assistants, perhaps assigned to a particular group of faculty or to a particular academic program.

Despite the many challenges discussed above, the design accomplishments of this first operational year are quite impressive. Forty-eight courses were touched in some way directly by HDEP staff and five more by general instructional design units under Title III funding. Forty-four faculty—many of whom are new to teaching and most all of whom are new to distance delivery—received training and assistance and are now including a mix of technologies and methodologies in their course designs. What is next to be examined is how these courses were delivered and how they were received.

Delivery of Courses

Determining the exact number of distance-delivered courses in the selected fields in AY 2004/2005 was somewhat difficult, since there is no one readily-available list. As mentioned above, few of the courses appeared on UAOnline. A review of the Spring 05 course schedules (Fall 04 were no longer available) provided little information as it was not possible to easily identify courses delivered by distance. The evaluator did obtain a list of courses to be delivered system-wide in Fall 05. This listing is an outgrowth of the university's effort to bring more standardization and coherence to UA distance education programs and it is hoped that such a list will continue to be available in the future.

Working with less official information, the evaluator identified 52 health-related distance courses scheduled to be offered in Fall 04/Spring 05 semesters, of which 32 had been touched by HDEP ID staff. Of the HDEP total, 28 were delivered by UAA and four by CRA; 16 were in nursing, 12 in allied health and 2 in behavioral health. Two were professional development (CEU) courses for health professionals. Two of the CRA courses were delivered both fall and spring semesters. The semester breakdown is as follows:

Fall 04	14
Spring 05	20

In order to gather some information on how these courses were being delivered to and received at distance sites, the evaluator visited Juneau, Bethel and Aniak. Both Juneau and Bethel receive nursing and selected allied health programs. Aniak received only allied health. The three programs visited in the Yukon-Kuskokwim region are discussed in some detail in Appendix A of this report.

All of the programs are being received at distance sites with a great deal of enthusiasm and support both by the community campuses and by the health authorities in the region. In particular, the Yukon-Kuskokwim Health Corporation (YKHC) staff are very appreciative of university efforts to extend training, not only in nursing—long a crisis need in the region—but also in radiography and medical laboratory. Although there are some issues, which will be discussed below, overall the delivery of courses in this first year of HDEP operation appears to have gone very well.

In order to determine how many students were taking advantage of the HDEP-developed courses, enrollment figures for Fall 04 and Spring 05 semester were obtained from the UAA Office of Institutional Planning, Research and Assessment and from CRA class lists. Enrollments by category are displayed below. UAS will deliver its first HDEP course in Summer 05.

Semester/Category	Students Enrolled		
	UAA	CRA	Total
FALL 04			
Nursing	155		155
Allied Health	90	7	97
Behavioral Health		15	15
			267
SPRING 05			
Nursing	186		186
Allied Health	62	14	76
Behavioral Health		22	22
Professional Development (CEUs)	63		63
			347

In addition to identifying the number of students served, the evaluator was asked to obtain quantitative data on the number of students successfully completing courses and the persistence of students from one semester to the next. Gathering data on student success requires either student transcripts or course grade lists, neither of which the evaluator could access during this evaluation period. One evaluation recommendation is that a student database—similar to that created by the statewide Early Childhood Education program—be established and maintained so that student performance and persistence can be tracked over time.

However, some anecdotal and survey information about success is available. For example, three of the ten AAS students in the Bethel nursing cohort have already dropped out and one more is expected to do so. While some of the problem stems from lack of academic preparation, at least two of the drop-outs also had student support issues of the kind addressed in the final section of this report.

The student and faculty surveys asked respondents about their perceptions of student learning in their distance course(s) as compared to most other courses. The responses to the four questions in this area are displayed in the following table. As can be seen, seven of the eight responding faculty felt that student learning, progress and involvement in distance courses was “more” or “much more” than most courses. All faculty felt that the feedback they gave students was greater than in other courses. Although students were somewhat less enthusiastic, a good majority rated distance courses over other courses.

Statement	% Students	% Faculty
Learning in this course has been more or much more than in most other courses	63%	88%
Progress toward learning objectives has been more or much more than in other courses	59%	88%
Active involvement in learning has been more or much more than in other courses	64%	88%
The feedback I got from my instructors was more or much more than in other courses	52%	100%

Both groups were also queried about the effort that they put into their distance courses. Seventy-five percent of the students and 88 percent of faculty reported that they put in more or many more hours per week on their distance courses than in other courses. Students and faculty also reported on the frequency with which they checked into the course management site per week. Eight-four percent of students and 100 percent of faculty indicated that they checked in at least once a day. Most faculty indicated several times a day.

The evaluator was also asked to provide information about student and faculty satisfaction with their distance education experience. The following figures indicate a very high level of satisfaction.

	Satisfactory	Very Satisfactory
Students	51%	32%
Faculty	50%	50%

Because of indications from interviews that students and faculty were experiencing some difficulty with the use of technology, both groups were asked about their comfort level with the technologies used. Results are displayed below.

	Pretty Comfortable With	Enjoy A Lot
Students	58%	33%
Faculty	38%	63%

Although the above responses seem to indicate that both students and faculty deal well with new technologies, results do vary among sub-groups. For example, rural students appear to have more difficulty with the technology both because of band-width issues and because of less prior computer experience than most urban students. Also, it can probably be assumed that those faculty who responded to the survey were the most involved with the program and thus perhaps the most technology-literate. Whatever the reasons behind the high survey ratings, other information suggests that some students and faculty need assistance in dealing with and effectively using the available technologies.

Perhaps the greatest proof of how well courses are valued is whether or not students and faculty would repeat the experience. When asked if they would take or teach another course using the same technologies, 93 percent of the students and 100 percent of faculty said that they would do so.

Receiving site staff did raise a few delivery issues that are program-specific. The major problems stemmed from a perceived lack of communication between the sending and receiving campus. For example, receiving campuses complained that they did not always have complete information as to the software requirements for certain HDEP courses and were thus unprepared to help student access and download these programs. Differences in open and close dates also caused problems; for example when a program scheduled an exam on a day that the receiving campus was closed so that either students could not gain access to the computer lab or special arrangements had to be made with local IT staff. Receiving sites also stated that they did not always have accurate, early information as to what was being offered via distance or what was expected in the way of clinicals, causing problems in student advising, registration and financial aid.

In reviewing all of the information available on course delivery, it is apparent that the first year of HDEP effort has been well subscribed and well received. Despite some technical and communication problems, students, faculty and regional health corporations are excited about the new opportunities that distance delivery brings. One student response reflects the attitude of many surveyed or interviewed: *“Good experience. It opened up an opportunity I wouldn’t have due to my remote location. Thanks.”*⁴

One factor that contributes to the success of distance offerings is effective student and faculty support. The following section deals with evaluation findings about such support services.

⁴ Individual response to Question 12 of the HDEP Student Survey Spring 2005.

Student/Faculty Support

Support services begin the moment that a student evidences interest in a course or program and includes such systems as registration, advising and financial aid as well as services designed to assist a student to succeed in his/her course of study. Support services involve both the sending and the receiving campus and in many cases are prescribed or influenced by university-wide procedures and systems such as BANNER. The evaluation gathered information on how well these systems operated from student survey responses and student services staff interviews at receiving sites.

The evaluation scope of work specifically singled out IT services and faculty incentives as two supports to be studied. In the course of interviews, the evaluator identified a larger range of support issues facing HDEP students and faculty. Because of their importance to program success, they are reported here at some length.

With respect to IT support, the evaluator was asked to determine the number of students and faculty utilizing the help desk or call center of their home or the sending campus. It was not possible to determine a number because calls are not tracked by program. However, student, faculty and ID staff perceptions about help desk support were gathered through the surveys and interviews. In response to the statement “*Technical support from the Help Desk or Call Center has been readily available to assist me with technical problems*”, 84 percent of students and 88 percent of faculty indicated “yes”. When asked a similar question, however, ID staff ranked IT support as a “3” on a scale of 1 (low) to 5 (high). IT support could be higher with more joint and comprehensive planning among the HDEP ID staff, general ID units and MAU IT personnel.

The evaluation work plan also asked for a description of current faculty incentives for distance course development at each MAU. However, the evaluator could not discover any common practice at any MAU. Instead, faculty incentives seem to be allocated based on availability of funding, other demands on faculty time, faculty decisions as to summer work and other variables. As a result, incentives vary within and across MAUs. A fairly common incentive is a course release for a semester. However, ID staff reported that the use of the release time is seldom monitored, so that some faculty receiving the release do not complete the course development.

Another common practice is to provide a contract extension for summer development. The device appears to be more effective than an academic year release, probably because other demands on faculty time are less in the summer. However, not all faculty respond to summer work opportunities and some are teaching during the summer. A third practice is to pay faculty for development time, either as an overload or as an outright stipend. Figures cited for this additional compensation ranged from \$3,000—the size of an average 3-credit overload—to \$10,000, although the evaluator could not identify faculty who had actually received the higher amount. Whatever the case, it does appear that faculty incentives vary quite substantially from case to case and that some standardization is essential not only for equity purposes but also for accountability.

With respect to other student and faculty support, the picture that emerged is not unique to HDEP programs. Indeed, the problems identified in this evaluation with respect to student services mirror problems encountered in recent evaluations of the statewide Early Childhood Education AAS degree and with other surveys conducted by the university. Although the solution to most of these problems lies beyond the scope of HDEP, they are presented here as one more source of information for those charged with addressing these issues.

The student survey asked about course information and ease of registration. Sixty-eight percent of the students felt that the information they had about their distance classes prior to registration was about the same or better than for most classes. However, 35 percent reported that the effort required to register for their distance course was more or much more than most.

The first finding concerning information about courses was somewhat surprising, given much more negative responses from other programs and with the difficulties encountered in getting information for this evaluation from course schedules and UAOnline. The finding suggests that the individual HDEP programs are doing a better job of communicating with their distance students than is the university as a whole. That one-third of the students found the effort to register more for distance than for other courses is very similar to findings from other programs, and is occasioned partly because some students take courses from multiple campuses to fulfill degree requirements. The university system has yet to establish a system whereby students can register and pay for classes at a single point of contact, regardless of where the course originates.

Eighty-two percent of the students surveyed indicated that they knew the technical requirements for their course prior to signing up for the course. This finding represents an improvement over past years, when technology requirements were not always clearly spelled out in the course schedules. Given the difficulty that the evaluator had in identifying distance courses in the semester schedules, particularly at UAA, the fact that students had this information again implies that the various HDEP programs are providing targeted information for their students. Because at least some of the programs operate on a cohort model, this program-specific communication is fairly easy to provide and should be encouraged.

The student support issues identified through the site visits fall into two categories: financial/administrative and academic. Financial issues include multiple billings if a student is enrolled on more than one campus; lateness of billing, particularly for sponsored students; and on-campus fees charged to off-campus students (for example, athletic or facility use). Financial aid also has been an issue for students who may be admitted to a UAA program but are taking some courses or have room and board for another campus. As an admitted UAA student, the aid comes through that campus but there does not appear to be an easy method for transferring a portion of that aid to the receiving campus.

Academic support issues can begin as soon as a student attempts to purchase books. Until recently, for example, the UAA bookstore did not send book orders to post office boxes,

even though most rural mail is only delivered to P.O. boxes. Again, rural students are accustomed to receiving book orders C.O.D. from the Center for Distance Education. When they transition to a UAA program such as nursing they are required to use a credit card, which many students do not have. UAS distance students purchase books from an on-line supplier, which also requires a credit card.

Once a student has signed up for a program at a distant campus, the academic calendar will probably be different from that of the home campus. If the student is taking co-requisites at the home or another campus, this means different start and end times, different exam schedules and different spring breaks, all of which can cause confusion and resentment.

The MAUs also have different course management systems. For example, UAS does not use Blackboard but has its own system. Students who have had both UAA and UAF courses indicate that there are some differences between these MAUs in the way that they set up and utilize Blackboard. Also, if a student is taking courses from several campuses, he/she will be assigned multiple e-mail addresses. While it is possible to set up e-mail accounts so that all e-mails will go to one address, knowledge of how to do this is not available to all students. Thus, some end up having to check two or three e-mail accounts each day.

Sometimes even a simple activity such as taking an exam can become quite complicated for distance students. For example, it can happen that an exam is scheduled at a time that the local campus or the local computer lab is unavailable. Or, if a proctor is required, it may not be possible to find a suitable person, since the university does not allow family members or employers to proctor. In some villages, that rules out most of the available pool.

Some distance students also lack either the required academic or computer skills necessary to succeed in their courses. Some of the academic preparedness issue for HDEP courses could be addressed by creating a developmental English course built around medical terminology. Faculty currently teaching the regular Medical Terminology course have expressed interest in this idea. Computer skills could be enhanced by developing an introduction to distance education on-line course that assisted students in downloading and navigating commonly-used software before they enrolled in a program course.

It is clear that most of these student support issues are system-wide and will require a system-wide solution. Mike Sfraga, UA Associate Vice President of Student and Enrollment Services, speaking to AHA at its September 6, 2004 meeting noted many of the same concerns expressed above. He indicated that he is working with a task force to create integrated, system solutions to problems occasioned by the fact BANNER, Blackboard and many UA processes were not designed to facilitate joint program delivery⁵.

⁵ Summary of AHA Meeting Minutes, 3/15/05

In addition to technical fixes, students would be well served by having a distance education coordinator at each campus or at least at each MAU. Such a position could provide information about offerings, assist students to access courses and programs, and work with local faculty and student support staff to facilitate student success. HDEP is funding such a position for UAS during the FY06 grant year.

These local coordinators would be greatly assisted if each distance-delivered program also had a person who could serve as a student advocate. A student advocate has access to program faculty and to administrative types and can come from many places. The YKHC staff who work with the med lab tech and radiographic tech programs, for example, serve this role. Kuskokwim Campus staff cited a departmental secretary in the nursing program in Anchorage who helped solve student problems with fees and billings and who could run interference when necessary.

A final student support item that surfaced during visits and interviews was mentoring. Mentors are used successfully in several other statewide distance programs and could provide essential student motivation and support. Nursing staff at the Yukon-Kuskokwim Regional Hospital expressed interest in mentoring students and staff from other involved hospitals might do the same.

With respect to faculty supports, faculty have been generally pleased with the training and design assistance. The following quotes from the faculty survey capture the feeling expressed by most both in survey responses and in interviews:

The instructional design people were outstanding and give immediate assistance and feedback when needed.

I am looking forward to learning more techniques for delivering my course in innovative, engaging and stimulating ways⁶.

However, despite this overall satisfaction, issues remain. Most interviewed faculty expressed concern over the lack of time for reflection on pedagogy and for development of a truly quality course. Many faculty agreed with the following survey response: “Having an assistant that could help load things onto Blackboard or to research learning tools for Elluminate Live would have helped more.” Some faculty were also bothered by the inequality and inconsistency in faculty incentives that were offered.

Some faculty issues are more program-specific. For example, distance-site nursing clinical faculty had some concerns specific to the way the nursing program is structured. Part of the difficulties experienced results from out-stationing MAU faculty—in this case, UAA—to another campus. Because the out-stationed faculty does not have ready access to his/her peers and since much program planning and decision-making takes place at the originating campus, a two-tiered faculty situation can result or at least appear to result. This feeling of “second class citizenship” was expressed by the clinical faculty interviewed for this report. Although clinical faculty do participate—generally via video-conference—in departmental faculty meetings and do serve on departmental committees,

⁶ Responses to Question 15 on the HDEP Faculty Survey, Spring 2005.

clinical faculty did not feel that they were fully accepted or valued as part of the team. This feeling was reinforced by the fact that clinical faculty were not granted faculty access to Blackboard or to itemized student quiz and exam results.

Some of the communication and respect issues raised by out-stationed nursing faculty will be addressed in the coming academic year by the creation of a distance education coordinator in the School of Nursing. Clinical faculty expressed great pleasure at the appointment to this position of a retiring faculty who has worked in the distance program and who understands the challenges faced at receiving sites. The UAS distance program coordinator, funded for FY06 under HDEP, should also help.

Problems occasioned by isolation from peers are particularly grave for tenure-track faculty, who will be evaluated by faculty with whom they have had little connection and who do not have first-hand knowledge of their work at the receiving campus. These tenure and promotion issues are not unique to nursing, and should be addressed at the system-level.

Based on available information, it is clear that student and faculty support is the most problematic of the three areas evaluated. While some of the difficulties are program-specific, most stem from weaknesses in system-wide procedures and policies that were developed around campus-based programs. These more pervasive problems can only be identified by HDEP and forwarded to other groups for solution.

Summary and Recommendations

Overall, the evaluation found that the HDEP program had a very successful first year. Despite challenges in all three of its areas of activity, HDEP assisted nursing, allied health and behavioral health programs of the University of Alaska to design, deliver and support distance delivery to sites around the state.

Through instructional design staff supported by HDEP funding, 48 courses were touched in some way during the period from Summer 04 to Summer 05 and an additional five courses received help from the general instructional design units of the MAUs. Forty-four faculty received training and/or design support from HDEP staff, with 9 other nursing staff receiving training through the general ID units. The importance of these faculty services was highlighted by one dean who credited them with assisting the university to retain new health program faculty.

HDEP courses have been designed for a variety of delivery formats: audio/video conferencing, CD and Web-based. The most common format appears to be audio/video conferencing supported by Blackboard, although information for Fall 05 indicates that more and more courses are migrating to Web-based.

The evaluation found that faculty are using multiple technologies and instructional strategies in their courses. Most common technologies are links to websites, discussion boards, textbooks, on-line quizzes and on-line articles. Of these, students and faculty both found textbooks, quizzes and discussion boards the most helpful. With respect to instructional strategies, students found exams and quizzes, discussions, homework and term papers the most helpful.

Although HDEP funding for Summer 04 through Summer 05 focused on design assistance, the expectation was that courses would also be delivered. In the Fall 04 and Spring 05 semesters, a total of 34 HDEP distance courses were delivered by the UA system in nursing, allied health and behavioral health. These courses greatly expanded access to training in high-need, high-demand health professions, to the expressed appreciation of students and regional health authorities alike.

HDEP programs involved an enrollment of 614 students, of which 56 percent were in nursing, 28 percent in allied health, 6 percent in behavioral health and 10 percent in professional development CEUs. While statistical data on student performance was not available, two-thirds of the students surveyed reported that they had learned more or much more in their distance courses than in most other courses and that they had been more activity involved in that learning. More than half (59%) believe that their progress toward meeting learning objectives was more or much more in their distance courses.

In terms of satisfaction with their distance experience, 82 percent of surveyed students and all surveyed faculty reported that they were satisfied or very satisfied. Ninety-three percent of the students and 100 percent of the faculty stated that they would take or teach another course using the same technologies in the future.

Using the data and information collected on the instructional design function, it is possible to provide at least partial answers to the original evaluation questions.

Question 1 *What is the most efficient approach to faculty support for distance-delivered course development in terms of courses developed and faculty satisfaction?*

From faculty responses thus far, it would appear that considerable hands-on assistance is essential, particularly for their first experience with distance delivery. This assistance is needed for all aspects of course design—from the original selection of effective distance strategies to achieve expected student outcomes through the identification and selection of appropriate technologies to the technical details of actually posting materials to course management software. These needs imply a fairly close, one-on-one interaction between faculty and ID staff. As faculty become more adept at distance delivery, the need shifts more to advice and consultation, with, however, continued assistance with the routine and technical aspects. As faculty become more proficient, the most efficient approach might be a greater reliance on the general ID units for consultation with hands-on technical assistance provided within faculty units. In FY06, HDEP will be looking at ways to accomplish this transition.

Question 2: *What instructional strategies and student supports are most successful in terms of student persistence and student satisfaction?*

Although a great deal more research and information is needed to determine the most successful instructional strategies, this evaluation did gather information on student satisfaction concerning methodologies used. These data indicate that students are most comfortable with strategies that they are already familiar with: exams and quizzes, homework, term papers, etc. These findings indicate that most distance courses to date are utilizing fairly standard classroom technologies and methodologies. The findings appear to support the concern expressed by faculty and ID staff that courses have not yet fully migrated to effective distance pedagogies—pedagogies that are more interactive, involve students with the material and with their peers, empower students to take control of their own learning and provide alternative means of authentic assessment.

Question 3: *What are the ideal qualifications for instructional design personnel?*

Some suggestions about the ideal qualifications flow from the ID services that faculty need. For example, as most faculty would like assistance in designing more effective strategies for distance courses, some knowledge of pedagogy seems essential. This is particularly true for ID team leads who, in the opinion of most of persons interviewed, should have some faculty experience in addition to high technical knowledge and skills.

Question 4: *Is there an optimal resource mix to support both course development and delivery at participating campuses and for the UA system as a whole?*

From information obtained through evaluation activities, it appears that the optimal resource mix to support course distance delivery is one that requires attention at the system as well as the program level. Many of the current administrative and academic support problems that distance students encounter could be lessened if not resolved by

having people at each campus or MAU tasked with coordinating distance activities. A point person for distance delivery within each program could also help resolve many of the day-to-day issues that arise. Long-term, however, effective student and faculty support will require that the policies, procedures and systems of the university as a whole take distance and cross-MAU delivery of programs into account.

Question 5: What incentives appear most successful in supporting faculty buy-in and success?

Since incentives are currently provided on a seemingly ad hoc basis, with little commonality within or among MAUs, no one or one group of incentives emerged as most successful. It does appear, however, that for those faculty who are willing to accept off-contract extensions, these may be more effective than academic year course releases or course overloads, primarily because there are fewer demands on faculty time in the summer months. More hands on assistance with the tedious aspects of course development also appears to be successful in gaining faculty buy-in.

From the above information and analysis, the evaluator offers a few recommendations for the future. The first set of recommendations is to the HDEP program. The second set of recommendations address those findings which have larger implications and are made to the university system as a whole.

HDEP Recommendations

Recommendation 1. Engage in joint planning and closer coordination with the general ID units of the MAUs, both internally and across the UA system. Joint efforts can bring additional resources to bear on HDEP course development and can assure sustainability after HDEP funding is no longer available.

Recommendation 2. Provide more hands-on assistance to faculty in the technical aspects of course design, perhaps through the utilization of employees at the media technician level or student workers/teaching assistants.

Recommendation 3. Work with system-wide efforts to develop a common set of quality standard for distance courses and forward the standards to faculty senates for review and adoption. Once adopted, use these standards for the design of new and the revision of current distance courses.

Recommendation 4. Develop a database of students admitted to HDEP certificate and degree programs that will allow program managers to track student persistence and performance over time. The database should provide information on selected student demographics such as race and age.

Recommendation 5. Provide effective communication links between sending and receiving faculty and sites. This may involve supporting a distance education coordinator at each MAU. In addition, encourage HDEP programs to appoint an internal distance

education coordinator or other point person that can advocate for distance students and faculty with the home campus.

Recommendation 6. Consider more fully involving local health professionals as mentors to distance students. Some interest has been expressed by nursing faculty at the Yukon-Kuskokwim Health Corporation in providing this service and staff at other clinical sites may also be interested.

Recommendation 7. Create a developmental English course based on medical terminology to increase the academic preparedness of students entering distance health-related programs. Current faculty have expressed interest in developing such a course, which could be used across the UA system.

Recommendation 8. Either create or work with others to create an “Introduction to Distance Education” on-line course which could cover a variety of topics and which would help assure that students are ready to learn when they enroll in a distance course.

Recommendation 9. Assure that out-reach faculty involved in delivering HDEP programs are provided opportunities for meaningful interaction with home campus faculty. This is particularly crucial for tenure-track faculty who will eventually be evaluated by their home-campus peers. A full solution to the problem of out-reach faculty will require action at the system-level, but much can be done within individual programs to assure that a “two tier” faculty situation does not develop.

UA System Recommendations

Recommendation 10. Expedite the development of the Instructional Design Job Family and assure that experience and knowledge of pedagogy are incorporated into position qualifications. Explore the possibility of faculty rank for senior or lead designers, with a commensurate salary level.

Recommendation 11. Provide increased general fund support for instructional design services, not only for health programs but also for general ID units at each MAU.

Recommendation 12. Address the student support issues identified in this evaluation and other reviews, particularly those that stem from university-wide policies, procedures and systems.

The above recommendations are offered in the spirit of building on the considerable successes achieved by the HDEP program in its first year of operation. The evaluator thanks those who contributed data, information and perspectives to this report, including UA health program deans and directors, HDEP staff, faculty, students, support services staff and regional health corporation staff.

Appendix A – Program-Specific Information

April 2005

The evaluator traveled to the Yukon-Kuskokwim Health Corporation (YKHC) region in April, 2005, to gather first-hand information on how the nursing and selected allied health programs supported under HDEP were being delivered. The evaluator visited the local campus in Bethel and clinical sites at the YKHC regional hospital and the Aniak Sub-Regional Health Clinic. She interviewed program and general education faculty, student support staff, health corporation officials and some students. Information from this visit and a less-extensive visit to the Juneau nursing cohort is used for the following program descriptions.

Nursing

As can be seen by the development and delivery statistics contained in the body of the first year evaluation report, nursing is by far the largest program to be supported by HDEP. Although some course development has been done at the bachelor and master's level, most of the effort in AY2004/05 has been on associate degree coursework to support programs in Fairbanks, Juneau, Ketchikan, Bethel and Kodiak.

The AAS nursing model is built on a student cohort supported by an on-site nursing faculty who is in charge of arranging and supervising clinical experiences in local medical facilities. The on-site faculty also provide support for students as they receive the didactic portion of the program primarily via video conferencing and Blackboard. Distance cohorts (with the exception of Fairbanks) travel to Anchorage periodically for more intensive clinics.

Although the nursing program appears to be operating well, both clinical faculty and students mentioned problems in communication between the distance site and Anchorage. These communication problems surfaced in particularly in relation to clinicals. Both students and faculty at receiving sites expressed considerable concern at the way that off-site clinical experiences were handled. This concern was two-fold; first that the clinical expectations had not been clearly spelled out at the beginning of the program and second, that local clinical sites were perhaps being undervalued and underutilized.

The lack of advance notice about clinicals was most bothersome to students. At the time of the evaluator visits—late April, 2005—details as to the planned Fall 05 Anchorage clinicals were just being finalized. Students were upset by the fact that the clinicals in Anchorage were longer than they had been expecting, that they had not had enough advance notice to fold the costs of the clinic experiences into their financial aid packages for AY 05/06 and that the clinical schedule left some downtime over the weekends.

On-site clinical staff shared the students' concerns, but had further issues about the relevance of and necessity for extended Anchorage clinicals. Faculty at both Bethel and Juneau felt that students could get much more on-site experience than was credited by the Anchorage program. Both faculty felt that a re-evaluation at local facilities was in order.

Distance faculty and students met via video conference with Anchorage faculty to discuss these concerns. While Anchorage faculty agreed to take these concerns under advisement, neither the distance students nor the clinical faculty interviewed felt that they were being heard.

Another communication issue dealing with course delivery raised by on-site faculty was that they did not have instructor access to Blackboard or to itemized student quiz results. This lack of access sometimes prevented on-site faculty from providing needed assistance to local students and from tracking student progress.

Medical Laboratory

UAA has been delivering medical laboratory coursework to the Y-K Delta since 2000, first through correspondence using textbooks and manuals and now more through the Web. Lab work is done at a local health clinic. YKHC has assigned a staff member to oversee the program for the region. This staff member is attached to the Aniak Sub-Regional health Clinic and travels to receiving sites in the region to support and motivate students and supervise clinical experiences. She also runs interference for students when problems arise either with technology or with student support. The first graduate of the clinical assistant certificate program, also in Aniak, is now enrolled in the associate degree.

The only delivery problems reported for this program were that the technology sometimes failed and that not all students had the computer skills necessary to access the new Web-based curriculum. With technology failures, it is not always clear who has responsibility for the fix: the local campus—Kuskokwim in Bethel—or Anchorage. YKHC is reportedly working to extend the telemedicine network in the region. Once that is in place, the current technology problems, many of which are occasioned by lack of bandwidth, could be solved.

Radiography

The Radiographic Technician AAS program is available via distance delivery in several sites, including Fairbanks, Ketchikan and Juneau, as well as Anchorage. A Limited Radiographer certificate program was developed in AY04/05 and extended as a pilot program in the YKHC region. The YKHC program utilizes a cohort model, similar to the nursing AAS degree. It also has a regional health corporation staff who helps with recruitment and student support. Students are located in Bethel and in each of the seven sub-regional clinics. Didactic instruction is by audio conference, supplemented by Blackboard. Students come into Bethel for clinical experience. Both the Bethel and Juneau sites reported that the programs are working well, with no problems noted.

Appendix B – Student and Faculty Instruments

Student Survey Questions:

1. What are the primary means used to deliver the lecture content of the distance course(s) you are enrolled in this semester? Check all that apply
 - Audio conferencing
 - Video conferencing
 - Blackboard
 - Elluminate Live
 - Real-time interactive sessions via the Web, using whiteboard or other teaching aides
 - Mailed documents or videos

2. Distance courses use a variety of technologies for course enhancement. The following features are being used in my distance course(s) this semester? Of those used, which of the technologies are most helpful to you in meeting the learning objectives of the course(s)? (Choose your top 3 so we can get a clear idea of what to prioritize in the future).

Used (check all)	Most helpful (check 3)
Audio files	Audio files
Flash movies (things that move on the screen, with audio)	Flash movies (things that move on the screen, with audio)
Discussion boards	Discussion boards
Videos (mailed or delivered via Internet)	Videos (mailed or delivered via Internet)
Chat rooms	Chat rooms
Interactive games	Interactive games
on-line quizzes (self correcting)	on-line quizzes (self correcting)
Ellumiante Live	Ellumiante Live
Real-time interactive class sessions	Real-time interactive class sessions
audio conferences (via telephone)	audio conferences (via telephone)
video conferencing	video conferencing
Links to on-line websites	Links to on-line websites
On-line articles to supplement the text	On-line articles to supplement the text

3. A variety of teaching practices may be used during a course. On a scale from 1 = Ineffective to 5 = Very Effective, please rate the effectiveness of only those practices used as part of the distance course(s) you are enrolled in this semester.

Individually assigned term papers or projects	1	2	3	4	5
Problems or questions assigned by the instructor for group discussion (threaded discussions)					
Projects in which students work together in teams					
Case studies, simulations, or role playing					
Journals or logs required of students					
Chat rooms or other informal discussions					
Face to face, audio or video (real time) conferences with the instructor					
Homework assignments					
Student presentations					
Quizzes					
Exams (Midterm and final)					

4. For the following statements, select the response closest to you view:

- 1 - much less than most courses
- 2 - less than in most
- 3 - about the same
- 4 - more than most
- 5 - much more than most courses

My learning in my distance course(s) has been	1	2	3	4	5
My progress toward achieving the course objectives has been	1	2	3	4	5
My distance course(s) actively involves me in what I am learning	1	2	3	4	5
The hours per week I put into my distance course(s) are	1	2	3	4	5
The feedback I get from my I instructor(s) in my distance course(s) is					
The information I had about my distance course(s) before registration was	1	2	3	4	5
The effort of registering for my distance course(s) was	1	2	3	4	5

5. Please respond to the following statements, with 1=definitely no; 5=definitely yes.

I knew the technical requirements needed for my distance course(s) prior to signing up for the courses.	1	2	3	4	5
Technical support from the Help Desk or call center has been readily available to assist me with technical problems.					
I would take another course using these technologies					

6. In general, the technology aspect of my distance course(s) (check 1)
 - is something I'm struggling with a lot
 - is something I'm pretty comfortable with
 - is something I enjoy a lot
7. The number of times I check into the course website per week is _____
8. Any other comments you wish to make concerning your distance education experience this semester:

Faculty Survey Questions:

1. What are the primary means you use to deliver the lecture content of the distance course(s) you are teaching in this semester? Check all that apply
 - Audio conferencing
 - Video conferencing
 - Blackboard
 - Elluminate Live
 - Real-time interactive sessions via the Web, using whiteboard or other teaching aides
 - Mailed documents or videos

2. Distance courses use a variety of technologies for course enhancement. Which of the following features are you using in your distance course(s) this semester? Of those used, which of the technologies are most helpful to you in delivering your course? (Choose your top 3 so we can get a clear idea of what to prioritize in the future).

Used (check all)	Most helpful (check 3)
Audio files	Audio files
Flash movies (things that move on the screen, with audio)	Flash movies (things that move on the screen, with audio)
Discussion boards	Discussion boards
Videos (mailed or delivered via Internet)	Videos (mailed or delivered via Internet)
Chat rooms	Chat rooms
Interactive games	Interactive games
on-line quizzes (self correcting)	on-line quizzes (self correcting)
Ellumiante Live	Ellumiante Live
Real-time interactive class sessions	Real-time interactive class sessions
audio conferences (via telephone)	audio conferences (via telephone)
video conferencing	video conferencing
Links to on-line websites	Links to on-line websites
On-line articles to supplement the text	On-line articles to supplement the text

3. A variety of teaching practices may be used during a course. On a scale from 1 = Ineffective to 5 = Very Effective, please rate the effectiveness of only those practices you have used as part of the distance course(s) you are teaching this semester.

Individually assigned term papers or projects	1	2	3	4	5
Problems or questions assigned by the instructor for group discussion (threaded discussions)					
Projects in which students work together in teams					
Case studies, simulations, or role playing					
Journals or logs required of students					
Chat rooms or other informal discussions					
Face to face, audio or video (real time) conferences with the instructor					
Homework assignments					
Student presentations					
Quizzes					
Exams (Midterm and final)					

4. For the following statements, select the response closest to you view:

- 1 - much less than most courses
- 2 - less than in most
- 3 - about the same
- 4 - more than most
- 5 - much more than most courses

Student learning in my distance course(s) has been	1	2	3	4	5
Student progress toward achieving the course objectives has been	1	2	3	4	5
My distance course(s) actively involves students in what they are learning	1	2	3	4	5

The hours per week students put into my distance course(s) are	1	2	3	4	5
The hours per week I put into preparing my distance classes are					
The feedback I give to my students in my distance course(s) is					

5. Please respond to the following statements, with 1=definitely no; 5=definitely yes.

I received training/support in distance education methodologies while I was developing my course(s)	1	2	3	4	5
I received training/support in distance education technologies while I was developing my course(s)					
I received assistance in selecting the technologies appropriate for my course content and leaning objectives					
I received assistance in the technical aspects of course development (posting items on Blackboard, incorporating learning objects, converting text files, etc.)					
Technical support from the Help Desk or call center has been readily available to assist me with technical problems					
I would teach another course using these technologies					

6. In general, the technology aspect of my distance course(s) (check 1)

- is something I'm struggling with a lot
- is something I'm pretty comfortable with
- is something I enjoy a lot

7. Any other comments you wish to make concerning your distance education experience this semester: