



2021 ANNUAL ACADEMIC ASSESSMENT REPORT FORM (Due October 15 to the dean)

PROGRAM SECTION (Due to the dean on October 15)

Submission date: 10/15/2021

Submitted by: Ken Hamrick, Academic Workforce Dir., kehamrick@alaska.edu

Program(s) covered in this report: Children's Behavioral Health OEC

If you selected "Other" above, please identify. (100 characters or less)

College: College of Health

Campuses where the program(s) is delivered: ⊠Anchorage □KOD □KPC □MSC □PWSC

Specialized accrediting agency (if applicable): N/A

If explanation is necessary, such as only some of the certificates and degrees are covered by the specialized accreditation, briefly describe:

INSTITUTIONAL STUDENT LEARNING CORE COMPETENCIES

In 2020, UAA launched a consensus-based, deliberative process to identify the key skillsets that help students achieve academic and post-graduation success. After a year-long process that included students, faculty, staff, administrators, alumni, and employers, the UAA community identified four "core competencies" at the heart of a quality UAA education. Students develop mastery of these competencies through curricular (e.g., courses), co-curricular (e.g., internships, conferences), and extracurricular (e.g., student clubs) learning experiences.

After the stakeholder-based process in AY20, UAA conducted a pilot project focusing on the core competency of Personal, Professional, and Community Responsibility (PPCR). This decision was based on input from the 2020 Annual Academic Assessment Retreat.

Question #1 below is designed to engage program faculty in thinking about how they can or already do promote student learning in this core competency.

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- 1. Personal, Professional, and Community Responsibility: The knowledge and skills necessary to promote personal flourishing, professional excellence, and community engagement.
 - What would you hope a student would say if asked where in your program or support service they had the opportunity to develop proficiency in this Core Competency? (500 characters or less)
 - All work in behavior change is a Team vs individual process. Each focus person should be an integral part of the planning process and consent to behavior change strategies. A global perspective that includes cultural respect and competency is essential to meeting community expecatations and standards in a meaningful way. Simply manipulating consequences to stop an undesireable behavior without teaching a desireable alternative skill is unacceptable. Teach new skills that work better.
 - - If yes, please briefly describe. (500 characters or less)
 - The Prevent Teach Reinforce Behavior Rating Scale is a qualitative measurement tool for documenting initial progress in behavior change. Once acceptable progress is made it can then be used to teach the focus person self-evaluation and management strategies for the routine or skill. The ability to self manage is an incredibly helpful skill to develop for people with challening behaviors and facilitates greater independence and inclusion in their chosen community and environments.
 - Do you have any ideas about where your program or the university might develop other intentionally designed opportunities for students to develop proficiency in this core competency? ☑Yes ☐No
 - If yes, please briefly describe. (500 characters or less)

Another of our classes addresses trauma informed care for youth. Preparing students to understand, be able to assess, and develop trauma informed care plans for youth is desperatedly needed in Alaska. Trauma history influences the lives of most of the kids in our child welfare system in a negative way. Delveloping a well versed entry level workforce that is proficient in understanding and providing trauma informed care can have a huge positive impact on the lives of so many Alaskans.

PROGRAM STUDENT LEARNING OUTCOMES

Please list the Program Student Learning Outcomes your program assessed in AY21. For each outcome, indicate one of the following: Exceeded faculty expectations, Met faculty expectations, or Did not meet faculty expectations.

Example: Communicate effectively in a variety of contexts and formats – Exceeded faculty expectations.

Our OEC is a small program with only four classes and relatively small number of students so we

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assess all four Student Learning Outcomes each year.

- 1. Use knowledge of therapeutic techniques, child development and cultural responsiveness to interpret treatment plans in therapeutic settings for children and youth. Met Faculty Expectations
- 2. Apply an array of strategies to support and shape behavior of children and youth with challenging behaviors. Met Faculty Expectations
- 3. Abide by professional practices accepted in the field of children's behavioral health. Met Faculty Expectations
- 4. Blend concepts and skills to develop Trauma-informed practices in children's behavioral health services. Met Faculty Expectations
- 3. Describe your assessment process in AY21 for these program student learning outcomes, including the collection of data, analysis of data, and faculty (and other, e.g., advisory board) conversations around the findings. (750 characters or less)

There were a total of 49 (duplicated) enrollments in the four courses ranging from 8-16 students per class. A survey is sent to all students in the spring to elicit feedback from program participants with two additional reminder emails. This year, nine participants responded to the survey. The survey responses were generally good, and consistent with previous assessment survey results. Based on the results, there were no faculty suggestions for any changes in the assessment survey or methods.

4. What are the findings and what do they tell the faculty about student learning in your program? (750 characters or less)

79% (7/9) participantswere satisfied with the training and technical assistance received; 88% (8/9) participants felt they could do their job better as a result of taking OECCBH; A pre-post questionaire using a 1 - 5 likert scale is used to assess specific content areas. Communication & Relationships Pre= 3, Post= 4.6; Professionalism Pre=4.0 Post= 4.6; Planning Pre= 2.6, Post= 4.3; Family Support Pre= 3.3, Post= 4.6; Child Development Pre= 3.3 Post= 4.6; Attachment Separation & Trauma Pre= 3.0 Post= 4.6; Teaching Strategies & Services Pre= 2.6 Post= 4.3; Crisis Response Pre= 3.0 Post= 5.0; Suicide prevention Pre= 3.3, Post= 4.6; Physical & Medical Needs Pre=3.3 Post= 4.3; and Self-determination & advocacy Pre=3.0 Post= 4.6.

5. Based on the findings, did the faculty make any recommendations for changes to improve student achievement of the program student learning outcomes? Please describe the recommended action, what improvement in student learning the program hopes to see with this change, the proposed timeline, and how the program will know if the change has worked. If no recommendations for changes were made, please explain that decision. (750 Characters or less)

Findings were consistent with previous assessments, and there were no suggested changes in the assessment process. The assessment plan is outdated and needs to be updated. There is only one staff member for the program, and two instructors. The program has been awarded a 5 year Strategic Investment Grant intended to expand the curriculum and make it more responsive to

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community and industry needs. Working with potential employers, offerng scholarship support to students, moving toward using the program within a DOL Apprenticeship model are all strategies intended to improve participation in the program and address critical workforce needs. Updating the Assessment Plan in conjunction with the grant process will be necessary.

PROGRAM IMPROVEMENTS AND ASSESSING IMPACT ON STUDENT LEARNING

In the past academic year, how did your program use the results of previous assessment cycles to
make changes intended to improve student achievement of the program student learning
outcomes? Please check all that apply.
□ Course curriculum changes
⊠Course prerequisite changes
□ Changes in teaching methods
⊠ Changes in advising
□Degree requirement changes
□Degree course sequencing
□Course enrollment changes (e.g., course capacity, grading structure [pass/fail, A-F])
□Changes in program policies/procedures
□Changes to Program Student Learning Outcomes (PSLOs)
□College-wide initiatives (e.g., High Impact Practices)
□Faculty, staff, student development
□Other
□No changes were implemented in AY21.
If you checked "Other" above, please describe. (100 characters or less)
Pre-requisite requirements have been eased; advising for the program is primarily through HUMS.

7. Do you have any information about how well these or other past improvements are working? Are they achieving their intended goals? Please include any data or assessment results that help you

demonstrate this. (750 characters or less)

There have been more HUMS degree seeking students than in the past where the target student was a working direct service professional in need of additional training. The Strategic Investment Grant should help to bring those working students back into the program which will enrich the learning experience for all participants. The program has always been available statewide via distance delivery and will continue with that format. The past two years were more difficult due to Covid, not distance delivery issues. Several students contracted the virus and it affected their participation. There was more emotional stress within students. One student was referred to the UAA Care team for support.

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- 8. Programs are not required to respond to question #8 below for their report due on October 15, 2021. Question #8 will be required for the next round and moving forward.
- Do you have any examples of post-graduate success you want to highlight? For example, major scholarships, the percent of students who pass licensure examinations, the percent of students accepted to graduate programs, the percent in post-graduation employment in the field or a related field. (750 characters or less)

Our program was designed to improve the skills and abilities of employed Direct Service Professionals supporting youth with disabilities. Over time we have moved toward more HUMS degree seeking students and fewer employed DSPs. Many of our degree seeking students have used the HUMS degrees as a stepping stone toward pursuit of more advanced degrees. Several of our students have started as DSPs never taking a college class before and realized their own potential to academically succeed. We have several examples of graduates who have gone on to pursue advanced degrees in Social Work, Psychology, one student successfully completed programs to become a Board Certified Behavior Analyst (BCBA), and others have become Registered Behavior Techs

DEAN SECTION (Due to the program on January 15)

- 1. Based on the program's responses above, what guidance and support do you have for the program moving forward? Is there a particular area the program should focus on? (750 characters or less)

 The Children's Behavioral Health OEC effectively promotes personal, professional, and community responsibility for direct service professionals and increasingly for students in Human Services. I commend the program for diversifying its student population. This provides an important opportunity for the program to grow. It is also an important opportunity for students to learn from each other. Assessment data clearly show that students are successfully achieving program student learning outcomes. I support the continued expansion of the program, and the revision of the assessment plan. I encourage the program to examine equity gaps in student success and address those gaps.
- 2. Is there something the program is doing particularly well in terms of its processes for the assessment and improvement of student learning, including the closing of equity gaps, that might serve as a model for other programs? If yes, please explain. You may skip this question. (750 characters or less)

Dean's signature: Date: 1/6/2022

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