Code # 2016G\_NHP18

**New Course Proposal Form**

[ ]  **Undergraduate Curriculum Council** - Print 1 copy for signatures and save 1 electronic copy.

[x]  **Graduate Council** - Print 1 copy for signatures and send 1 electronic copy to pheath@astate.edu

|  |
| --- |
| [x] **New Course or** [ ]  **Experimental Course (1-time offering) (Check one box)***Please complete the following and attach a copy of the bulletin page(s) showing what changes are necessary.*  |

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**Department Curriculum Committee Chair** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**COPE Chair (if applicable)** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**Department Chair:**  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**General Education Committee Chair (If applicable)**   |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 8/30/2016**College Curriculum Committee Chair** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**Undergraduate Curriculum Council Chair** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 8/30/2016**College Dean** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**Graduate Curriculum Committee Chair** |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**Vice Chancellor for Academic Affairs** |

1. Contact Person (Name, Email Address, Phone Number)

Susan Hanrahan, PhD, Dean

hanrahan@astate.edu

870-972-3112

2. Proposed Starting Term and Bulletin Year

Summer 2018

3. Proposed Course Prefix and Number (Confirm that number chosen has not been used before. For variable credit courses, indicate variable range. *Proposed number for experimental course is 9*. )

AT 6302

4. Course Title – if title is more than 30 characters (including spaces), provide short title to be used on transcripts. Title cannot have any symbols (e.g. slash, colon, semi-colon, apostrophe, dash, and parenthesis). Please indicate if this course will have variable titles (e.g. independent study, thesis, special topics).

IPE Internship

5. Brief course description (40 words or fewer) as it should appear in the bulletin.

Expands on skills previously acquired and introduces new skills related to current coursework focusing on an interprofessional, service learning approach to enhance student learning.

6. Prerequisites and major restrictions. (Indicate all prerequisites. If this course is restricted to a specific major, which major. If a student does not have the prerequisites or does not have the appropriate major, the student will not be allowed to register).

1. Are there any prerequisites? No
	1. If yes, which ones?

Enter text...

* 1. Why or why not?

 Enter text...

1. Is this course restricted to a specific major? Choose an item.
	1. If yes, which major? Athletic Training

7. Course frequency(e.g. Fall, Spring, Summer). *Not applicable to Graduate courses.*

Enter text...

8. Will this course be lecture only, lab only, lecture and lab, activity, dissertation, experiential learning, independent study, internship, performance, practicum, recitation, seminar, special problems, special topics, studio, student exchange, occupational learning credit, or course for fee purpose only (e.g. an exam)? Please choose one.

practicum

9. What is the grade type (i.e. standard letter, credit/no credit, pass/fail, no grade, developmental)?

standard letter

10. Is this course dual listed (undergraduate/graduate)?

No

11. Is this course cross listed? (If it is, all course entries must be identical including course descriptions. It is important to check the course description of an existing course when adding a new cross listed course.)

No

1. If yes, please list the prefix and course number of cross listed course.

 Enter text...

1. Are these courses offered for equivalent credit? Choose an item.

 Please explain. Enter text...

12. Is this course in support of a new program? Yes

a. If yes, what program?

 Masters in Athletic Training

13. Does this course replace a course being deleted? No

a. If yes, what course?

Enter text...

14. Will this course be equivalent to a deleted course? No

a. If yes, which course?

Enter text...

15. Has it been confirmed that this course number is available for use? Yes

 *If no: Contact Registrar’s Office for assistance.*

16. Does this course affect another program? No

If yes, provide contact information from the Dean, Department Head, and/or Program Director whose area this affects.

Enter text...

**Course Details**

17. Outline (The course outline should be topical by weeks and should be sufficient in detail to allow for judgment of the content of the course.)

|  |  |  |
| --- | --- | --- |
| **DATE** | **TOPIC** | **READINGS** |
| Week 1 | Course Syllabi, Introduction to Course, Internship Expectations | Chapter 1 |
| Week 2 | Challenges facing health care system | Chapter 2 |
| Week 3 | Core competencies needed for health care professionals | Chapter 3 |
| Week 4 | Core competencies continued | Chapter 4 |
| Week 5 | Health Professions Oversight and Reform  | Chapter 5, 6 |
| Week 6 | IPE Case Study Project Presentations |  |

Enter text...

18. Special features (e.g. labs, exhibits, site visitations, etc.)

Week 1-5 are delivered online and Week 6 the students will meet face to face for their presentations- this allows for immersion into the internship experience while the students completes review modules in an online environment

19. Department staffing and classroom/lab resources

See new program proposal.

1. Will this require additional faculty, supplies, etc.?

 Enter text...

20. Does this course require course fees? No

 *If yes: please attach the New Program Tuition and Fees form, which is available from the UCC website.*

**Course Justification**

21. Justification for course being included in program. Must include:

 a. Academic rationale and goals for the course (skills or level of knowledge students can be expected to attain)

Athletic trainers work as part of an interdisciplinary health care team to provide optimal care to patients. Following the Institute of Medicines Core competencies for health care professionals, interprofessional collaboration is essential to provide optimal health care to patients. From this internship experience it is expected that students will learn how to interact with other health care professionals.

b. How does the course fit with the mission established by the department for the curriculum? If course is mandated by an accrediting or certifying agency, include the directive.

 The course also helps the AT program meet the following accreditation standards: 42. The content of the curriculum must include formal instruction in the current version of the athletic training knowledge, skills, and abilities. 43. Formal instruction must involve teaching of required subject matter in structured classroom, clinical, or laboratory environments. 44. Students must interact with other medical and health care personnel (see glossary). 47. Clinical education must provide students with authentic, real-time opportunities to practice and integrate athletic training knowledge, skills, and clinical abilities, including decision-making and professional behaviors required of the profession in order to develop proficiency as an Athletic Trainer.

c. Student population served.

Graduate students admitted to the Masters in Athletic Training program

d. Rationale for the level of the course (lower, upper, or graduate).

Graduate- The proposed athletic training program is a Masters in Athletic Training.

**Assessment**

**University Outcomes**

22. Please indicate the university-level student learning outcomes for which this new course will contribute. Check all that apply.

|  |  |  |
| --- | --- | --- |
| * 1. [x] Global Awareness
 | * 1. [x] Thinking Critically
 | * 1. [x] Information Literacy
 |

**Relationship with Current Program-Level Assessment Process**

23. What is/are the intended program-level learning outcome/s for students enrolled in this course? Where will this course fit into an already existing program assessment process?

**Masters in Athletic Training Program Outcomes**

Students will be able to:

1. Demonstrate evidence based clinical practice and decision‐making in providing athletic training services

2. Demonstrate the importance of ethical decision-making in patient care decisions.

3. Effectively communicate with patients, parents, supervisors, physicians, coaches, and peers.

4. Recognize the role of athletic trainers as a healthcare provider as part of a multi-disciplinary team within the healthcare system.

24. Considering the indicated program-level learning outcome/s (from question #23), please fill out the following table to show how and where this course fits into the program’s continuous improvement assessment process.

*For further assistance, please see the ‘Expanded Instructions’ document available on the UCC - Forms website for guidance, or contact the Office of Assessment at 870-972-2989.*

|  |  |
| --- | --- |
| **Program-Level Outcome 1 (from question #23)** | 1. Demonstrate evidence based clinical practice and decision‐making in providing athletic training services |
| Assessment Measure |  Reflective journal, preceptor evaluation, IPE case study and presentation |
| Assessment Timetable | Summer- weekly |
| Who is responsible for assessing and reporting on the results? | Clinical Director |
| **Program-Level Outcome 2 (from question #23)** | 2. Demonstrate the importance of ethical decision-making in patient care decisions |
| Assessment Measure | Reflective journal, preceptor evaluation, IPE case study and presentation  |
| Assessment Timetable | Summer- weekly |
| Who is responsible for assessing and reporting on the results? | Clinical Director |
| **Program-Level Outcome 3 (from question #23)** | 1. Effectively communicate with patients, parents, supervisors, physicians, coaches, and peers.
 |
| Assessment Measure | Reflective journal, preceptor evaluation, IPE case study and presentation  |
| Assessment Timetable | Summer- Weekly |
| Who is responsible for assessing and reporting on the results? | Clinical Director |
| **Program-Level Outcome 4 (from question #23)** | 1. Recognize the role of athletic trainers as a healthcare provider as part of a multi-disciplinary team within the healthcare system
 |
| Assessment Measure | Reflective journal, preceptor evaluation, IPE case study and presentation |
| Assessment Timetable | Summer Weekly |
| Who is responsible for assessing and reporting on the results? | Clinical Director |

 *(Repeat if this new course will support additional program-level outcomes)*

**Course-Level Outcomes**

25. What are the course-level outcomes for students enrolled in this course and the assessment measures and benchmarks for student-learning success?

|  |  |
| --- | --- |
| **Outcome 1** | Communicate your professional role and responsibilities clearly to other care professionals and explain the roles and responsibilities of other care providers and how you will work together as a team to meet patient care needs. |
| Which learning activities are responsible for this outcome? |  Internship experience, journals, IPE case study and presentation |
| Assessment Measure and Benchmark | Preceptor evaluations, grading rubric for case report and presentation, completion of internship hours  |
| **Outcome 2** | Understand the relationship between effective team communication and improved patient safety and health outcomes and choose effective communication techniques to facilitate discussion and interactions that enhance team function. |
| Which learning activities are responsible for this outcome? | Internship experience, journals, IPE case study and presentation |
| Assessment Measure and Benchmark | Preceptor evaluations, grading rubric for case report and presentation, completion of internship hours |
| **Outcome 3** | Demonstrate skills at effective interprofessional teamwork and patient-centered communications that integrate the knowledge and experience of other health professionals and patients to provide appropriate care of the patient. |
| Which learning activities are responsible for this outcome? | Internship experience, journals, IPE case study and presentation |
| Assessment Measure and Benchmark | Preceptor evaluations, grading rubric for case report and presentation, completion of internship hours |

*Repeat if needed for additional outcomes)*

**Bulletin Changes**

|  |
| --- |
| **Instructions**  |
| **Please visit** [**http://www.astate.edu/a/registrar/students/bulletins/index.dot**](http://www.astate.edu/a/registrar/students/bulletins/index.dot) **and select the most recent version of the bulletin. Copy and paste all bulletin pages this proposal affects below. Follow the following guidelines for indicating necessary changes.** **\*Please note: Courses are often listed in multiple sections of the bulletin. To ensure that all affected sections have been located, please search the bulletin (ctrl+F) for the appropriate courses before submission of this form.** - Deleted courses/credit hours should be marked with a red strike-through (~~red strikethrough~~)- New credit hours and text changes should be listed in blue using enlarged font (blue using enlarged font). - Any new courses should be listed in blue bold italics using enlarged font (***blue bold italics using enlarged font***)*You can easily apply any of these changes by selecting the example text in the instructions above, double-clicking the ‘format painter’ icon 🡪 , and selecting the text you would like to apply the change to.* *Please visit* [*https://youtu.be/yjdL2n4lZm4*](https://youtu.be/yjdL2n4lZm4) *for more detailed instructions.* |

Paste bulletin pages here...