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UNIVERSITY OF IDAHO

SUBJECT

Approval of Full Proposal to Create a Doctorate in Athletic Training

APPLICABLE STATUTE, RULE, OR POLICY

Idaho State Board of Education Governing Policies & Procedures, Section III. G., 5.a.v.

BACKGROUND/DISCUSSION

The University of Idaho (UI) proposes to create a new advanced clinical Doctorate in Athletic Training (DAT). The program consists of academic coursework focused on advanced training of the entry-level professional and on advanced clinical mentorship. Cohorts will be initially set at a maximum of 30 students annually with plans to admit a new cohort beginning summer 2011, if approved.

The program will be housed on the UI main campus within the College of Education, Department of Health, Physical Education, Recreation, and Dance. The DAT program will be a self-support two-year cohort professional graduate program utilizing a professional residency model to include two accelerated summers on-campus in Moscow and distance education during the traditional fall and spring semesters to include completion of clinical rotations. This will expose students to a variety of clinical sites outside of Moscow, Idaho and enable the UI to recruit students statewide and across the nation without burdening the student to relocate for a two-year period.

Currently, there are no similar programs in the region and no advanced clinical doctorate athletic training programs in the United States. The approval of the program could bring national prominence to the University and its program.

Consistent with Board Policy III.G., an external peer-review was conducted on the proposed doctorate program, which consisted of a paper and on-site review followed by a report and recommendations issued by the panel. The external peer-review panel consisted of two members and was selected by the Board's Chief Academic Officer and the requesting institution's Chief Academic Officer. A copy of the report is provided along with the full proposal.

IMPACT

The UI will reallocate existing state-appropriated funds for FY12 and FY13. During these years, the program director and the tenure track faculty will remain on state appropriation salaries for the academic year. Summer salaries will be paid from program revenues. A clinical coordinator will be hired in the second year to assist in transition and to accommodate the higher enrollment targets. If enrollment targets are met, two full-time faculty will be hired for the third year

(FY14). A half-time administrative assistant will be hired for FY12. The UI anticipates that the program will become entirely self-supported by FY 14, funded by program fees charged to students in accordance with Board Policy V.R.3.b.v.

Under a separate request, the University of Idaho will be submitting a Notice of Intent per policy III.G. to discontinue their undergraduate program in Athletic Training. The UI also has plans to bring a Master of Science in Athletic Training forward for approval. The full proposal is currently under review and slated for the Board's April meeting.

ATTACHMENTS

Attachment 1 – Full Proposal and External Peer Review Report Page 5

STAFF COMMENTS AND RECOMMENDATIONS

The University of Idaho's proposed program to create a new advanced clinical Doctorate in Athletic Training would be the first of its kind in-state and nationwide. Currently there are no such degrees offered in the state, region or nation. Boise State University has entry-level undergraduate programs in Athletic Training offering a Bachelor of Science.

This degree differs from the clinical doctorates in other fields in that it is pursued after the student becomes an entry-level professional. With the unique delivery model of the program, there is potential for the University of Idaho to partner with other Idaho institutions as well as other out-of-state institutions to develop clinical sites at their respective institutions during fall and spring semesters.

This new program would provide a unique opportunity to students, advance the Athletic Training profession, and bring national prominence not only for the program but also for the University of Idaho.

The University of Idaho has developed a short term and long term strategy to evaluate the program for fiscal sustainability on an annual and long-term basis. Specifically, a short term strategy has been developed for making annual decisions regarding staffing, operational, and capital expenses, and a long term strategy has been developed for making decisions regarding program continuance or discontinuance.

The Council on Academic Affairs and Programs (CAAP) has reviewed the proposal and recommends approval. Board staff recommends approval as presented.

BOARD ACTION

I move to approve the request by the University of Idaho to create an advanced clinical Doctorate in Athletic Training as set forth in the attached Full Proposal.

Moved by _____ Seconded by _____ Carried Yes _____ No _____

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FS-10-051b UCC-10-077b

IDAHO STATE BOARD OF EDUCATION

ACADEMIC/PROFESSIONAL-TECHNICAL EDUCATION

FULL PROPOSAL

to initiate a

NEW, EXPANDED, COOPERATIVE, DISCONTINUED, PROGRAM COMPONENT OR OFF-CAMPUS INSTRUCTIONAL PROGRAM OR ADMINISTRATIVE/RESEARCH UNIT

Submitted by:

University of Idaho

Institution Submitting Proposal

College of Education

Name of College, School, or Division

Department of Health, Physical, Education, Recreation, & Dance

Name of Department(s) or Area(s)

A New, Expanded, Cooperative, Contract, or Off-Campus Instructional Program Leading to:

Doctor of Athletic Training

Degree/Certificate & 2000 CIP

Program Change, Off-Campus Component

Summer 2011

Proposed Starting Date

This proposal has been approved by:

Chief Fiscal Officer (Institution) — Date 06 Jan 11

Chief Academic Officer (Institution) — Date 1-7-11

President — Date 1-7-11

SBOE/OSBE Approval — Date

Approved Keith E Ickes 1/6/11

Before completing this form, refer to "Board Policy Section III.G. Program Approval and Discontinuance.

1. Describe the **nature of the request**. For example, is this a request for a new on-campus program? Is this request for the expansion or extension of an existing program, or a new cooperative effort with another institution or business/industry or a contracted program costing greater than $150,000 per year? Is this program to be delivered off-campus or at a new branch campus? Attach any formal agreements established for cooperative efforts, including those with contracting party(ies). Is this request a substantive change as defined by the NWASC criteria?

   The College of Education at the University of Idaho proposes to create an Advanced Clinical Doctorate in Athletic Training (DAT) program. The DAT will be a **self-support** two-year (6 semesters) cohort professional graduate program utilizing a professional residency model. To enter the program, students will be required to have a minimum of a bachelor's degree and be a certified athletic trainer (ATC-BOC). Cohorts will be initially set at a maximum of 30 students annually. This program will be housed on the University of Idaho Moscow campus, within the College of Education, in the Department of Health, Physical Education, Recreation, and Dance (HPERD). The program plans to admit a new cohort beginning summer 2011. The proposed DAT program provides for exciting opportunities in four major areas: 1) Value enhancements for students 2) National prominence for the program/university 3) Advancement of the Athletic Training profession, 4) Sustainable growth with a new professional program that is closely tied with the University's strategic plan. This proposal is a substantive change as defined by the NWASC criteria. The cost of the proposed program will exceed $150,000 per year when fully implemented (see Section 6.II).

   The program will utilize a unique delivery model. A summer on-campus residency model will be used, coupled with a distance education model during the traditional fall and spring semesters. This will enable students to be exposed to a variety of clinical sites outside of Moscow, Idaho. It will also allow the University to recruit students from across the state of Idaho and across the nation, without undue burden on the student to relocate for a 2 year period. The program will have a clearly defined exit strategy (see details in Section 6.II.e.3), should revenue streams not be realized as projected in the future.

2. **Quality** – this section must clearly describe how this institution will ensure a high quality program. It is significant that the accrediting agencies and learned societies which would be concerned with the particular program herein proposed be named. Provide the basic criteria for accreditation and how your program has been developed in accordance with these criteria. Attach a copy of the current accreditation standards published by the accrediting agency.

   Further, if this new program is a doctoral, professional, or research, it must have been reviewed by an external peer-review panel (see page 7, "Guidelines for Program Review and Approval). A copy of their report/recommendations must be attached.

   An external peer-review was conducted for this proposed program in accordance with the "Guidelines for Program Review and Approval." The report provided by the external reviewers is found in Appendix A. Throughout this proposal, we have identified where we have incorporated the recommendations made by the external review team. All recommendations made by the team were accepted and incorporated into this final proposal.

   This program will ensure quality through adherence to the standards set by the University's regional accrediting body. The University of Idaho is regionally accredited by the Northwest Commission on Colleges and Universities (NWCCU). The UI is currently accredited at all degree levels (B, M, D), and has been continuously accredited since 1918.

   The new DAT program will also ensure quality by adhering to concepts normally found in healthcare residency programs. The Athletic Training profession is currently developing standards for professional graduate residency programs, and these draft documents were used as a guide when creating the proposed curriculum. The program is a combination of academic coursework focused on the advanced training of the entry-level professional and on advanced clinical mentorship. All DAT candidates will identify a clinical mentor who agrees to mentor promising professionals in an effort to transition the new professional from student to clinician. All mentors will be vetted by MSAT and DAT program faculty and agree to the philosophy and standards of the program.

   To further ensure program quality and in accordance with the recommendation of the external review team, the program will seek accreditation by the Post-Professional Education Council of the National Athletic Trainer's Association (NATA). This accreditation will be sought once the program is implemented and functional. We tentatively plan to initiate this process in year 3 of the program, but no later than year 5 of the program. Unlike entry level athletic training programs, accreditation of advanced preparation programs is not mandated by the NATA and

is not necessary in order for graduates of the program to practice professionally. However, it is our intent to seek accreditation in order to ensure that we meet recognized standards for post-professional training in athletic training.

All DAT students will be expected to challenge their current clinical knowledge and critically analyze their clinical practice. Students will

a. Complete comprehensive exit testing that will ensure that knowledge regarding advancement of clinical knowledge has been retained.
b. Complete research pertaining to evidence-based clinical practice.
c. Be evaluated twice each semester by their clinical mentor, and the student must receive satisfactory evaluations in order to proceed in the program.
d. Complete an evaluation of their chosen mentor, and these evaluations will aide in the programs evaluation of the clinical mentors.
e. Receive, as part of their clinical rotations, continual feedback from the mentors and the faculty serving as the clinical residency course coordinators.
f. Complete, as a part of their coursework, journals that chronicle their development into advanced clinicians. Each journal will bear the signature of the clinical mentor.
g. Complete a culminating clinical project ("dissertation"-like experience) to demonstrate his/her advancement in their clinical practice. [Note: This is consistent with the recommendation made by the external review team.]

Post graduation employment surveys will be sent to each graduate's employer asking them to evaluate the employee's clinical competency. Feedback from these surveys and measures will inform the decisions regarding future curricular improvements.

a. Curriculum – describe the listing of new course(s), current course(s), credit hours per semester, and total credits to be included in the proposed program.

In the table below is a summary of the two-year course delivery model. Coursework delivery will utilize a summer residency model, where students will reside on campus in summer and complete the bulk of their combined didactic and psychomotor competency training. The remainder of the coursework will be delivered via distance education during the fall and spring semesters, during which time they will complete clinical rotations. The summer residency is the preferred model. It allows students to learn with the benefit of total immersion, which enables them to apply this knowledge throughout the entire year in their clinical rotations. The summer residency model also allows the students to complete their clinical rotations at selected sites across the country. This design will allow the ATEP access to expert clinical instructors throughout the country.

The program will accept certified athletic trainers with a minimum of a bachelor's degree. The total credits required for the program is 63 cr. Catalog descriptions for each course are provided Appendix B. The DAT faculty will assess successful completion of the degree through a culminating project that will be completed in AT 624 and AT 625. These courses have been designed to provide a formal review of the student's advancement in their clinical practice through completion of a culminating clinical project with the quality and rigor of a dissertation-like experience. This is in accordance with the recommendations of the external review team.

Summer I (on-campus)		**Fall I (distance)**		**Spring I (distance)**	
Course	Credits	Course	Credits	Course	Credits
AT 606	3	AT 630	3	AT 631	3
AT 610	3	AT 621	3	AT 622	3
AT 620	3	AT 640	6	AT 641	6
Semester Total	**9**	**Semester Total**	**12**	**Semester Total**	**12**
Summer II (on-campus)		**Fall II (distance)**		**Spring II (distance)**	
AT 611	3	AT 632	3	AT 633	3
AT 623	3	AT 624	3	AT 625	3
		AT 642	6	AT 643	6
Semester Total	**6**	**Semester Total**	**12**	**Semester Total**	**12**

b. Faculty – include the names of full-time faculty as well as adjunct/affiliate faculty involved in the program. Also, give the names, highest degree, rank and specialty. In addition, indicate what percent of an FTE position each faculty will be assigned to the program. Are new faculty required? If so, explain the rationale including qualifications.

A total of 2.0 faculty FTE and 0.5 TA FTE will be required to deliver the proposed Doctorate in Athletic Training Education Program when it is fully subscribed. This distribution of faculty ensures appropriate faculty loads for delivery of a quality curriculum. The individual faculty and qualifications are outlined in the table below, as is the timeline for creation of positions. Additionally, we plan to hire adjunct specialty faculty to augment the program as recommended by the external review team.

Proposed Faculty	Notes
Alan Nasypany, EdD, LAT, ATC DAT ATEP Director (1.0 FTE) Senior Instructor, HPERD Non tenure track	Continuing position for FY11, FY12, and FY13. This will become a new position in FY14, funded from program revenues. At this time, Dr. Nasypany will work solely in the MSAT new degree program.
Tenure track faculty (1.0 FTE)	Proposed new position in FY14 funded from program revenues. Earned doctorate, evidence of scholarly activity within the field of Athletic Training, 5 years of certified athletic training experience.
Teaching Assistant – doctoral level (0.5 FTE)	Proposed new position in FY12 funded from program revenues. Will be a doctoral student in HPERD; one year of BOC certified experience required.

b. Student – briefly describe the students who would be matriculating into this program.

This program will attract three different types of students.

i. Students who have completed a Council on Accreditation of Athletic Training Education (CAATE) accredited Bachelor degree in Athletic Training
ii. Students who have completed a CAATE accredited entry-level master degree.
iii. Students who have completed a Post Professional Education Council (PPEC} accredited masters program in athletic training.

All students will have completed, at minimum, an entry level athletic training program and successfully passed the Board of Certification Examination. From these groups, the program will target certified athletic trainers interested in improving their clinical practice through structured academic and clinical coursework.

c. Infrastructure support – clearly document the staff support, teaching assistance, graduate students, library, equipment and instruments employed to ensure program success.

With regard to personnel, this program will require a 0.2 FTE administrative assistant (combined with MSAT, this represents a 0.5 FTE position) and 1 doctoral teaching assistant. See Sections 2.b, 6.III.a, and 6.III.b for more detailed information regarding these personnel. These positions have been included in the budget and will be funded through revenues generated by the program.

Current library resources are adequate for delivery of this program. The program will share resources with the proposed MSAT. However, additional funds ($3000 annually) have been budgeted from program revenues to accommodate program enrollment growth.

The program will utilize the laboratory space, equipment, and instruments currently available for the undergraduate ATEP. This equipment and space is adequate for initial delivery of the program. Current space allocation includes MGYM B1, B2, and B4 as teaching laboratory space, and PEB 112/113A, a newly renovated research laboratory in human performance. Current equipment includes plinths, therapeutic modalities (electrical stimulation, therapeutic ultrasound, whirlpools, light therapy, mechanical modalities, etc), rehabilitation equipment, evaluation tools, emergency response kits, etc. The existing undergraduate program met the accreditation standards for laboratory and equipment resources in 2009, at which time it was granted a 10 year accreditation approval. The proposed program will purchase additional equipment as size of the program increases. Beginning in FY13, the DAT program budget includes lab equipment purchases and lab renovations (see 6.II and 6.III). Additional monies for laboratory remodel and capital equipment purchases have been included in the budget for the proposed MSAT program. We will also target our development efforts to procure funds to purchase additional equipment and complete lab renovations to current space. As recommended by the external review team, renovation efforts will modernize space to accommodate and integrate the capital equipment and technology needed to deliver a state of the art clinical education experiences and online instruction at multiple sites across the country.

d. Future plans – discuss future plans for the expansion or off-campus delivery of the proposed program.

Enrollment targets are outlined below and included in the attached budgets. Maximum annual enrollments in this program are 60. When maximum enrollments are realized, the program will be re-evaluated for potential expansion.

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016
Yr One Cohort	10	17	30	30	30
Yr Two Cohort	0	10	17	30	30
Annual Enrollment	10	27	47	55	60

3. **Duplication** – if this program is unique to the state system of higher education, a statement to that fact is needed. However, if the program is a duplication of an existing program in the system, documentation supporting the initiation of such a program must be clearly stated along with evidence of the reason(s) for the necessary duplication.

This program is unique to the state of Idaho system of higher education and for athletic training education in the nation. Currently, there are no advanced clinical doctorate athletic training programs in the U.S. Like programs are developing across the country, placing the University of Idaho DAT on the forefront of the academic trend.

Describe the extent to which similar programs are offered in Idaho, the Pacific Northwest and states bordering Idaho. How similar or dissimilar are these programs to the program herein proposed?

There are no similar programs in the region.

4. **Centrality** – documentation ensuring that program is consistent with the Board's policy on role and mission is required. In addition, describe how the proposed program relates to the Board's current Statewide Plan for Higher Education as well as the institution's long-range plan.

The Doctorate of Athletic Training is directly aligned with the Role and Mission of University of Idaho to "offer doctoral and professional graduate programs and also coordinate[s] and conduct[s] research that [is] consistent with state needs." The external review panel concurred with this statement and the evidence provided to them regarding alignment. The creation of this program will enhance the research capabilities for students and faculty, consistent with the Role and Mission of the UI as defined by SBOE. Positioning new graduate programs at the state's flagship research institution allows the programs to have access to the resources and infrastructure that can support research-focused professional graduate programs. The proposed program has also been designed to meet department, college, and university strategic missions and goals.

The DAT is a professional doctoral program that will seamlessly merge research into practice, and this focus will position the program students and faculty to apply for translational research grants from the National Institutes of Health. The athletic trainers prepared by the DAT will be capable of leading the state's battle against burdens imposed by preventable musculoskeletal diseases and disorders, through application of research-supported healthcare. This is consistent with the land grant mission of the University of Idaho.

The creation of an innovative advanced clinical degree will allow to University of Idaho's Athletic Training Program to better match the University's vision and mission in the following ways:

- **The program is "committed to graduate research education with extension services responsive to Idaho and the region's business and community needs."** (UI Mission as stated in UI Catalog).
- **The program would combine "research, graduate, and professional education."** (UI Vision Statement)
- **The program allows the UI to "build and sustain competitive advantages through innovative curricula of distinction"** (UI Strategic Action Plan, Goal 1, Objective A) by "expand[ing] partnerships with industry, government, schools, and foundations that emphasize active learning opportunities such as internships, practica, athletics, and the arts" (Strategy 4), "invest[ing] in field work and outreach as a means of contributing to learning and the land-grant responsibilities of the University" (Strategy 5), "develop[ing] flexible course schedules and year-round programs to meet student needs throughout the University" (Strategy 6), and "establish[ing] curricular content that utilizes interdisciplinary student teams to solve complex learning tasks" (Strategy 7).
- **The program allows the UI to "promote an environment that increases faculty engagement in interdisciplinary scholarship"** (UI Strategic Action Plan, Goal 2, Objective A) by strengthening the research relationships with doctoral programs in WWAMI, Neuroscience, and Exercise Science.

- **The program allows the UI to "deliver undergraduate, graduate, continuing professional education, and Extension programs and opportunities for lifelong learning"** (UI Strategic Action Plan, Goal 3, Objective B) by "promot[ing] access to program/course delivery statewide" (Strategy 1), "implement[ing] a fee structure that provides adequate budgetary support based on a realistic costs matrix (Strategy 4), and "grow[ing] and support[ing] community internships and service learning activity as opportunities for students and communities to engage for mutual benefit" (Strategy 6).

The University is categorized as a highly active research, land-grant institution and as such, it would be well-served to create innovative graduate curricula to fill emerging needs in professional areas of study that serve Idahoans as well as the broader U.S. population. This proposal would allow the athletic training education program to better match the research extensive, land grant mission of the University of Idaho. The proposed DAT program will continue to utilize HPERD's joint faculty positions with the Neuroscience Program and with the WWAMI medical school (which provides access to the Translational Health Sciences Center at the University of Washington). The DAT is a professional doctoral program that will seamlessly merge research into practice, and this focus will position students and faculty in the DAT to apply for translational research grants. Development of this program will also create synergies and increased resources for the PhD program in Exercise Science within the Health, Physical Education, Recreation and Dance department and will position the University of Idaho to assume a national leadership role in the profession of athletic training.

Justification for adding the program is four-fold. First, the proposed program is important for the advancement of the athletic training profession, as described below in Section 5.a. Second, this program will enhance the national presence of the University of Idaho and position the University as a leader in post-professional athletic training education. It will be the first advanced clinical doctorate athletic training program in the U.S. Third, as the state's flagship research institution, the University of Idaho has the infrastructure in place to support doctoral programs. This proposal is consistent with the UI's charge to develop graduate programs and professional programs. Fourth, the proposed program is a self-support program, providing long term sustainability with no additional burden to the state of Idaho.

5. **Demand** – address student, regional and statewide needs.

   a. Summarize the needs assessment that was conducted to justify the proposal. The needs assessment should address the following: statement of the problem/concern; the assessment team/the assessment plan (goals, strategies, timelines); planning data collection; implementing date collection; dissemination of assessment results; program design and on-going assessment. (See the Board's policy on outcome assessment.)

   This is a new program for the profession of athletic training. Currently, no advanced clinical doctorate programs exist in the US. Because ~70% of ATs have at least a master's degree, the DAT would meet the need of recent and past AT graduates nationwide. Additionally, ATs that have a master's degree may be inclined to obtain the DAT, since it would be considered the "terminal clinical degree" for the profession. While there has been much controversy since the inception of clinical doctorates at universities, the number of universities offering clinical doctorates (practitioner's degrees) has steadily risen. Medicine was the first health profession to utilize the clinical doctorate. In 1950, pharmacy adopted the clinical doctorate as its terminal clinical degree. Since 1950, physical therapy, occupational therapy, nursing, physician assistant, and respiratory therapy programs have followed suit, citing the need for advanced training to solve today's complex clinical issues. Most recently the American Physical Therapy Association has mandated a transition to the entry-level doctorate. As the amount of knowledge within a field increases, there must be corresponding changes to the curricula to support such growth. Clinical doctorates have been developed at both the entry-level (e.g. DPT, PharmD) and the advanced clinical level (e.g. DScPT, DOT), depending on the need for such programs. Clinical doctorates (in health professions) are treated similar to academic master's degrees in the marketplace; however, the students with a terminal degree have a competitive advantage (good for publicity at workplace). It is anticipated that the DAT will be considered the terminal clinical degree for the athletic training profession, given current trends in the professions.

   Athletic training professionals have had many discussions about the need to transition to entry-level doctorates. In Athletic Training the traditional route to entry-level certification (and, therefore, practice) has been the bachelor's degree. From the early 1950's until the early 1990's, the bachelor's degree was the only route to certification. As the knowledge base increased demands on entry-level practitioners, increased demands for stronger curricula were presented. Entry-level master's degrees (ELMs) began to emerge in the mid 1990's. Though the governing professional organization for athletic training, the National Athletic Trainer's Association (NATA), has yet to mandate a transition to an entry-level master's degree, the transition is occurring. Twenty-three accredited ELMs currently exist nationwide, with 13 of the 23 existing programs receiving their initial accreditation since 2005. Students graduating from ELM programs compete with students graduating from entry-level bachelor's programs, and hold a competitive advantage over the bachelor's level graduates.

Paralleling this graduate transition from entry-level bachelor's degrees to entry-level master's degrees is controversy regarding the preparation of students in clinical skills and practice. Since the inception of academic curricula in athletic training, there has been the belief that athletic trainers who are prepared at the entry-level have enough academic training to begin clinical practice. However, approximately 70% of athletic trainers with bachelor's degrees pursue a master's degree (Retrieved 1-3-10 from http://www.nata.org/sites/default/files/AT_Facts.pdf, p.3), for the primary purpose of obtaining a graduate assistantship during their master's preparation to work as a certified athletic trainer and develop their clinical skills and practice under an experienced athletic trainer. Only 10% of those master's degrees are advanced degrees in athletic training; the majority of the degrees are in other related fields (e.g. education, exercise science, biomechanics). The creation of the Entry-level Master's (ELM) in the mid 1990's changed the traditional route to entry-level practice. Students graduating from ELM programs now also compete with students graduating from other master's degree programs including advanced clinical master's degrees.

In the process of creating the ELM degrees, athletic training has lost much of the residency style of post graduate learning that has been considered to be integral to the profession. Given that ELM degrees will continue to expand, the creation of an Advanced Clinical Degree in Athletic Training (DAT) represents a solution to this problem. Students entering the DAT will hold an entry-level degree in athletic training and have successfully achieved certification as an Athletic Trainer. The DAT will provide them the means to pursue advanced clinical training through a clinical mentorship/residency model. Such a model will foster the transition from entry-level professional to advanced clinician. The proposed DAT incorporates the best from post professional athletic training programs with the best from residency/mentorship style programs. Creation of this program at the DAT level (advanced clinical graduate degree level) is necessary to encourage ELM students to pursue post entry-level training in athletic training. Currently, the only options for advanced work for ELM graduates are the advanced degree masters in AT (which many consider a lateral step) or an academic doctorate which is considered to be of little benefit to clinicians and their patients. The proposed DAT provides an option for students in ELM programs to pursue additional clinical training at the next degree level.

This degree is an advanced clinical degree and is not an academic doctorate. This degree does differ from the clinical doctorates in other fields in that the DAT is an advanced clinical degree that is undertaken after the student becomes an entry-level professional. Most other clinical doctorates in the health professions are considered entry-level and occur pre-credential. The advantage of the post credential degree is that the program and the university can ensure that the degree is worthy of the highest clinical degree in the field. This proposed DAT represents a program that upholds the standards and associations with the term doctorate by encouraging entry-level professionals (especially ELMs) to pursue further clinical training beyond the entry-level. As in other health professions, the DAT will be a clinician's degree and is not assumed equivalent to the academic doctorate. As in other health care professions, the assumption is that this advanced clinical degree would not constitute qualifications to hold positions in academic programs other than clinical positions (e.g. in Physical Therapy, the clinician with the DPT may only hold clinical positions within academic curriculums; an academic doctorate is required for academic faculty positions). The clinical doctorate programs have been very popular in the health care professions, and they represent a positive trend towards advancing the knowledge in a field whether through a post-credential (e.g. DAT) or the doctorate in Physical Therapy (entry-level doctorate). Academic doctorates represent the highest level of education and training in academia, and clinical doctorates represent the highest level of education and training in clinical practice. Both are necessary and can complement each other. Individuals choosing a career in academia or research may eventually choose a DAT/Ph.D route, similar to what is required in medicine for faculty holding non-clinical roles.

b. Students – explain the most likely source of students who will be expected to enroll (full-time, part-time, outreach, etc.). Document student demand by providing information you have about student interest in the proposed program from inside and outside the institution. Differentiate between the projected enrollment of new students and those expected to shift from other program(s) within the institution.

The students in the proposed DAT program will be full-time. As stated above in Section 2.b., this program will attract three different types of students.

i. Students who have completed a Council on Accreditation of Athletic Training Education (CAATE) accredited Bachelor degree in Athletic Training
ii. Students who have completed a CAATE accredited entry-level master degree.
iii. Students who have completed a Post Professional Education Council (PPEC} accredited masters program in athletic training.

Within these three groups, there are approximately 26,000 existing certified athletic trainers, comprising a significant recruitment pool (Retrieved 1-3-10 from http://www.nata.org/sites/default/files/AT_Facts.pdf, p.3). Few of these have

formal advanced clinical training and would benefit in the marketplace from a clinical doctorate, given that 70% of athletic trainers that already have a master's degree. Additionally, approximately 4000-5000 students graduate annually from entry-level bachelor's and master's programs. Because 70% of these graduates go on to earn the terminal clinical degree in the field, an additional pool of 2800 to 3500 individuals can be targeted annually for recruitment into the program.

Finally, in an informal survey completed in March 2008, 100 percent (n= 60) of current athletic training students surveyed expressed interest in the DAT. All said that they would complete the program if it is offered.

c. Expansion or extension – if the program is an expansion or extension of an existing program, describe the nature of that expansion or extension. If the program is to be delivered off-campus, summarize the rationale and needs assessment.

This section is not applicable to the proposed MSAT program.

6. **Resources** – fiscal impact and budget

On this form, indicate the planned FTE enrollment, estimated expenditures, and projected revenues for the first three fiscal years (FY) of the program. Include both the reallocation of existing resources and anticipated or requested new resources. Second and third year estimates should be in constant dollars. Amounts should reflect explanations of subsequent pages. If the program is a contract related, explain the fiscal sources and the year-to-year commitment from the contracting agency(ies) or party(ies).

I. PLANNED STUDENT ENROLLMENT

	FY 12		FY 13		FY 14	
	FTE	Headcount	FTE	Headcount	FTE	Headcount
A. New enrollments	13.8	10	35.9	27	62.5	47
B. Shifting enrollments						

II. EXPENDITURES

	FY 12		FY 13		FY 14	
	FTE	Cost	FTE	Cost	FTE	Cost
A. Personnel Costs						
1. Faculty (including fringe)	0.75	66,662	0.50	48,851	2.0	192,940
2. Administrators						
3. Adjunct faculty				18,212		18,212
4. Graduate/instructional assistants			0.50	25,250	0.5	25,250
5. Research personnel						
6. Support personnel	0.2	9,900	0.20	10,402	0.2	10,678
7. Fringe benefits						
8. Other:						
Total FTE Personnel And Costs;	**0.95**	**76,522**	**1.20**	**102,715**	**2.70**	**247,080**

	FY 12	FY 13	FY 14
B. Operating expenditures			
1. Travel	10,000	10,000	30,000
2. Professional services	5,000	5,000	7,250
3. Other services			
4. Communications	15,000	15,000	20,000
5. Utilities	2,000	2,000	2000
6. Materials & supplies	6,000	11,000	25,000
7. Rentals			
8. Repairs & maintenance	8,000	8,000	30,000
9. Materials & goods for manufacture & resale			
10. Miscellaneous	5,000	11,000	30,000
Total Operating Expenditures:	**51,000**	**62,000**	**144,250**

	FY 12	FY 13	FY 14
C. Capital Outlay			
1. Library resources	3,000	3,000	5,000
2. Equipment	27,000	67,900	76,827
Total Capital Outlay:	**30,000**	**70,900**	**81,827**
D. Physical facilities Construction or major Renovation	**35,753**	**130,900**	**200,000**
E. Indirect costs (overhead)			
GRAND TOTAL EXPENDITURES:	**193,275**	**366,515**	**673,157**

III. REVENUES

	FY 12	FY 13	FY 14
A. Source of funds			
1. Appropriated funds -- Reallocation – MCO	66,662	48,851	0
2. Appropriated funds -- New – MCO			
3. Federal funds			
4. Other grants			
5. Fees	160,000	432,000	752,000
6. Other:			
GRAND TOTAL REVENUES:	**226,662**	**480,851**	**752,000**

	FY 12	FY 13	FY 14
B. Nature of Funds			
1. Recurring*	226,662	480,851	752,000
2. Non-recurring**			
GRAND TOTAL REVENUES:	**226,662**	**480,851**	**752,000**

* Recurring is defined as ongoing operating budget for the program which will become part of the base.

** Non-recurring is defined as one-time funding in a fiscal year and not part of the base.

a. Faculty and Staff Expenditures

Project for the first three years of the program, the credit hours to be generated by each faculty member (full-time and part-time), graduate assistant, and other instructional personnel. Also indicate salaries. After total student credit hours, convert to an FTE student basis. Please provide totals for each of the three years presented. Salaries and FTE students should reflect amounts shown on budget schedule.

FY2012

Name, Position, and Rank	Annual Salary Rate (inc. fringe)	FTE Assignment to this Program	Program Salary Dollars (inc. fringe)	Projected Student Credit Hours	FTE Students
Alan Nasypany, Senior Instructor Program Director	$76,773	0.5	$38,387	220	9
Jeff Seegmiller, Assistant Professor Tenure-Track Faculty Member	$112,940	0.25	$28,235	110	4.8
Totals		**0.75**	**$66,662**	**330**	**13.8**

FY2013

Name, Position, and Rank	Annual Salary Rate (inc. fringe)	FTE Assignment to this Program	Program Salary Dollars (inc. fringe)	Projected Student Credit Hours	FTE Students
Alan Nasypany, Senior Instructor MSAT Program Director	$79,076	0.25	$19,769	294	13.25
Jeff Seegmiller, Assistant Professor Tenure-Track Faculty Member	$116,328	0.25	$29,082	166	6.875
Mentor Clinical Instructors	$16,663		$18,212		
Doctoral Teaching Assistant Instructor	$25,250	0.5	$25,250	401	15.25
Total		**1.0**	**$92,313**	**861**	**35.9**

FY2014

Name, Position, and Rank	Annual Salary Rate (inc. fringe)	FTE Assignment to this Program	Program Salary Dollars (inc. fringe)	Projected Student Credit Hours	FTE Students
Non Tenure Track, Senior Instructor Program Director	$96,470	1.0	$96,470	513	21.375
Assistant Professor Tenure-Track Faculty Member	$96,470	1.0	$96,470	423	17.625
Mentor Clinical Instructors	$16,663		$18,212		
Doctoral Teaching Assistant Instructor	25,250	0.5	$25,250	564	23.5
Total		**2.5**	**$236,402**	**1500**	**62.5**

b. Administrative Expenditures

Describe the proposed administrative structure necessary to ensure program success and the cost of that support. Include a statement concerning the involvement of other departments, colleges, or other institutions and the estimated cost of their involvement in the proposed program

This program will ultimately be administered by the Department Chair for the Department of Health, Physical Education, Recreation, and Dance, and by the Dean of the College of Education. This administration will be a continuation of the administrative practice for the current undergraduate program in Athletic Training, and will result in no additional cost. Eventually, these costs will be recovered through the revenue sharing that will occur after year 3 of the program. Additionally, transitioning this program to a graduate level program will require administration by the

Dean of the College of Graduate Studies. This administration will occur at minimal cost to the institution. This cost will also be covered by the revenue sharing that will occur after year 3 of the program.

FY2012

Name, Position, and Rank	Annual Salary Rate (inc. fringe)	FTE Assignment to this Program	Program Salary Dollars (inc. fringe)	Percent of Salary Dollars to Program
Administrative Assistant	$17,250	0.2	$9900	100%
Totals		**0.2**	**$9900**	

FY2013

Name, Position, and Rank	Annual Salary Rate (inc. fringe)	FTE Assignment to this Program	Program Salary Dollars (inc. fringe)	Percent of Salary Dollars to Program
Administrative Assistant	$17,250	0.2	$10,402	100%
Total		**0.2**	**$10,402**	

FY2014

Name, Position, and Rank	Annual Salary Rate (inc. fringe)	FTE Assignment to this Program	Program Salary Dollars (inc. fringe)	Percent of Salary Dollars to Program
Administrative Assistant	$17,250	0.2	$10,678	100%
Total		**0.2**	**$10,678**	

c. Operating Expenditures (travel, professional services, etc.) Briefly explain the need and cost for operating expenditures.

Operating expenditures are as follows:

Travel – Travel for faculty development as well as travel to develop and monitor clinical sites outside of Moscow.
Professional services – Expenses for continuing education units for faculty, malpractice insurance, licenses, and accreditation expenses.
Communications – Expenses for student recruitment and for program correspondence.
Materials and supplies – Expenses for books, course supplies, copy costs, lab supplies, and other expendables related to instruction.
Repair and restoration – Expenses to maintain infrastructure in teaching laboratories and classrooms for instructional delivery.
Miscellaneous – Expenses for Blackboard use ($330/student), faculty and staff searches, accreditation, etc.

d. Capital Outlay

(1) Library resources

Library resources that exist for the current undergraduate program are adequate for success of the proposed program. The program will share resources with the proposed MSAT. However, additional funds have been budgeted annually from program revenues to accommodate program enrollment growth.

(b) Indicate the costs for the proposed program including personnel, space, equipment, monographs, journals, and materials required for the program.

There are no anticipated additional costs associated with this proposed program at this time. However, additional funds have been budgeted annually from program revenues to accommodate increased costs that may occur.

(c) For off-campus programs, clearly indicate how the library resources are to be provided.

During the fall and spring semesters, when students are off-campus, they will access on-line journals through the library and have access to journals through professional memberships (required). They will also have access to interlibrary loan just as on-campus students. However, additional funds have been budgeted annually from program revenues to increased costs in this area.

(2) Equipment/Instruments

Describe the need for any laboratory instruments, computer(s), or other equipment. List equipment, which is presently available and any equipment (and cost) which must be obtained to support the proposed program.

We are currently seeking development funds to purchase the equipment identified below. We will continue to partner with the UI Department of Athletics to use their equipment until these items can be purchased. These items will be shared with the proposed MSAT program.

# Currently Owned	Equipment/Supplies	# Needed	Cost/Unit	Total Cost
	Plinths			
2	Standard Treatment Tables			
	Plinths (adjustable, split leg)	2	$500	$1,000
4	Portable Treatment Tables			
1	Taping Tables			
	Modalities		-	
1	E-stim/ultrasound/combo/light therapy	2	$8,500	$17,000
2	Biofeedback/EMG			
1	Whirlpool units			
	Intermittent compression with cryounits	2	$2,500.00	$5,000
	Shortwave diathermy unit	1	$5,000.00	$5,000
	Hydroculator	1	$800.00	$800
	Hydro packs (assorted sizes)	1	$15.00	$15
	Hydor covers (assorted sizes)	1	$15.00	$15
	Ice Machine	1	$1,500.00	$1,500
	Refrigerator	1	$500.00	$500
	Traction Lumbar/Cervical	1	$2,500.00	$2,500
				$0
	Evaulation		-	$0
	Otoscope	1	$300.00	$300
2	Reflex hammers	4	$35.00	$140
4	BP Cuffs	4	$30.00	$120
4	Stethoscopes	4	$75.00	$300
2	12" goniometer	5	$25.00	$125
2	6" goniometer	5	$18.00	$90
	Inclinometers	6	$80.00	$480
	Treadmill	1	$800.00	$800
	Rehabilitation		-	

	Durable Supplies/Equipment			
	Therabands (color rainbow)			
	Yellow Box	1	$75.00	$75
	Red Box	1	$75.00	$75
	Blue Box	1	$75.00	$75
	Green Box	1	$75.00	$75
	Black Box	1	$75.00	$75
	Silver Box	1	$75.00	$75
	Gold Box	1	$75.00	$75
	Wobble board	1	$100.00	$100
	Dyna disks	1	$40.00	$40
	Slant boards	2	$75.00	$150
	Resistance Trainer (Optum S.P.S)	1	$200.00	$200
	Jump-stretch bands	3	$20.00	$60
	Foam rollers (hard, soft)	2	$20.00	$40
2	Bike			
1	Eliptical			
	Cuff wts 1-15 lbs	1	$100.00	$100
	Dumbells 1-5 lbs	1	$40.00	$40
	Plyo toss (with minitramp)	1	$300.00	$300
	Physioballs (assorted sizes)	1	$15.00	$15
	Foot management kits	3	$40.00	$120
	Emergency Response		-	
	AED	1	$2,000.00	$2,000
	O2 Setup	1	$500.00	$500
4	Epipen trainer			
	Crutches	5	$25.00	$125
	Ankle Braces (ASO)s			$0
	x-small	2	$30.00	$60
	small	2	$30.00	$60
	medium	2	$30.00	$60
	large	2	$30.00	$60
	x-large	2	$30.00	$60
	Biohazard Container	1	$30.00	$30
	Sharps Container	1	$30.00	$30
	CPR Masks	5	$8.00	$40
	Sam Splint	3	$20.00	$60
	Splint Kits	2	$300.00	$600
	Adjustible Arm Sling	3	$8.00	$24
	Care and Prevention		-	
	Shark	5	$20.00	$100
	Superpro Scissors	5	$40.00	$200

	Learning Aids			
2	Foot & Ankle Model			
3	Knee Model			
5	Shoulder Model			
3	Elbow Model			
2	Wrist & Hand Model			
3	Full Body Model			
1	Spine Model			
	TOTALS			**$41,384**

e. Revenue Sources

(1) If funding is to come from the reallocation of existing state appropriated funds, please indicate the sources of the reallocation. What impact will the reallocation of funds in support of the program have on other programs?

Reallocation of existing state-appropriated funds will occur only in FY12 and FY13. During these transition years, the DAT Program Director and the tenure-track instructional faculty will remain on state appropriation salaries for the academic year. Their summer salaries will be paid from the program revenues. Because the students in the undergraduate AT program will have completed their theory courses and will only be completing clinical education courses and experiences, the existing faculty will be able to assume responsibility for course delivery in the MSAT. The enrollment targets identified for these first two years are small. When combined with the undergraduate enrollments, the total enrollments are equal to a fully subscribed undergraduate program. These faculty, with a continuing doctoral TA, will be able to handle the student numbers for FY12. For FY 13, a Clinical Coordinator will be hired to assist in this transition year and to accommodate the higher enrollment targets.

(2) If an above Maintenance of Current Operations (MCO) appropriation is required to fund the program, indicate when the institution plans to include the program in the legislative budget request.

Not applicable.

(3) Describe the federal grant, other grant(s), special fee arrangements, or contract(s) to fund the program. What does the institution propose to do with the program upon termination of those funds?

This program is defined as a **self-support** program and will charge a program fee, in accordance with the policies set forth in Section V.R.3.b.v of the Idaho State Board of Education Governing Policies and Procedures. For the first three years of the program (FY12, FY13, FY14), one hundred percent of the program fee will be returned directly to the Department of HPERD for administration of the proposed program. During the first two years of the program, the salaries of the Program Director and one tenure-track faculty member will continue to be funded by state appropriations. This is acceptable, given that both faculty will continue to provide oversight and instruction for the undergraduate B.S.P.E. in Athletic Training, which is a state-approved program, funded by state appropriations, and accredited by the Commission on Accreditation of Athletic Training Education. In FY14, the DAT program will become entirely self-support, funded by the program fee charged to each student.

In the fourth year of the program, revenue sharing will be implemented for profits realized from the program (i.e., the balance of funds remaining once all program expenses have been paid). The formula for revenue share will be an equal split (i.e., 25% each) among four entities: the program, the Department of HPERD, the College of Education, and the University of Idaho. **The budget presented above for the first three years shows a "profit" for** each of the first three years. The institution has agreed to allow these "profits" to be returned to the program for these first three years to provide the program flexibility during this implementation period. These monies will be used for the following purpose: 1) to provide necessary coverage for the teach out of the undergraduate program in athletic training; 2) to cover shortfalls that may occur if enrollment targets are not met or if budgeted expenses are higher than planned; and 3) to accelerate the purchase of capital equipment and/or space renovations to enhance program delivery.

The initial program fee for each student will be $16,000.00 per student per 12 months, for a total of $32,000.00 for the entire program. This fee will be increased 3% for each new cohort. The fee includes all administrative costs and costs associated with instruction, including faculty and staff salaries, program travel costs necessary for accreditation and instruction, books, materials, supplies, technology costs, capital equipment and renovation costs, and repair and restoration. This fee does not include room and board or travel. However, the proposed summer residency model will minimize room and board costs for each student, requiring only that they pay for room and board while they are in residence during the summer term. Once the program is fully implemented and enrollment targets are met in years 4 and 5, we intend to allocate funding in the form of scholarships and teaching assistantships to offset room, board, and travel costs.

This cost is below that of clinical doctorate programs in other professions, and is also below the cost of doctoral degrees for out-of-state students attending the University of Idaho (annual costs would be $18,900 for a comparable program delivered across three semesters as outlined in this proposal).

A short term and long term strategy has been developed to evaluate the program for fiscal sustainability on an annual and long-term basis. Specifically, a short term strategy has been developed for making annual decisions regarding staffing, operational, and capital expenses, and a long term strategy has been developed for making decisions regarding program continuance or discontinuance.

Short Term Strategy – Key Elements

a. The staffing plan for both programs (including faculty and administrative support) has been designed to align with the projected enrollment targets (to ensure appropriate student-to-faculty ratios for quality instruction) and with the projected revenues generated by these enrollments (to ensure a fiscally viable program). As enrollment targets are exceeded or not met, personnel hires will be adjusted accordingly.
b. To ensure the practice described in 'a' for the first three years of the program, application, admission, and enrollment numbers will be evaluated every 3 months so that appropriate decisions can be made regarding staffing for the upcoming fiscal year. This decision process will include review and input by the Program Director, the Department Chair, the College Dean, and the Executive Director for Planning and Budget.
c. Operational and capital expenses will be evaluated every three months as projections about revenue are examined. This will ensure that we remain within budget throughout each fiscal year as the program is launched.
d. At the end of year three, the frequency of these evaluations will be reviewed to determine whether frequency can be decreased (assuming program continuance).

Long Term Strategy – Key Elements

a. Trend analysis will be utilized to make decisions about program continuation. Inputs for the trend will include market demand (i.e., employment projections, placement of graduates, number of applicants, etc.) and market supply (number of competitive programs, cost of competitors, etc.).
b. We anticipate a minimum of three years in order to provide ample opportunity to determine whether the programs are viable. The University of Idaho has made a commitment to allocate funding for up to three years to the program so that students are appropriately served in the event that the program is not deemed fiscally sustainable. These funds will be provided primarily through existing allocations in the form of equipment that is currently owned, space that is currently allocated, and state appropriations that are currently allocated to personnel and operation of the BSPE AT program.
c. Decisions about program continuance will be made in August, prior to the beginning of the admission cycle for the entering cohort in the subsequent summer.
d. Where tenure-track faculty lines are created using program revenues, contract language regarding employment status will be very explicit. In the event that program discontinuance occurs, the contract letters will state clearly at the time of hire, that termination of employment will be a consequence of program discontinuance, as the funding source for the position will also be discontinued.

An annual report will be generated by the Department of HPERD each year in June, detailing the results of the analyses that have been conducted for each of the programs. This report will be provided to the Provost, the College Dean, and the Executive Director for Planning and Budget. This will enable the institution to make appropriate decisions in August regarding program continuance.

Appendix A

External Review Report

External Review: Doctorate in Athletic Training
University of Idaho

Dr. Ken Knight
Dr. Leamor Kahanov

External Review: Doctorate in Athletic Training
University of Idaho

I. Commendations and Recommendations

The evaluation team agrees with the report that this is an innovative and entrepreneurial program that will lead the profession of athletic training and its educational processes upward along a natural evolutionary path. The proposal reflects accurate and in depth knowledge of the trends in the athletic training discipline and medical model of education. The program provides a guided clinical education experience that requires an understanding of evidence-based medical research, representative of a doctoral level degree. The program advances the mission of the university as a highly active research institution that promotes innovative graduate curricula to fill emerging needs in professional areas of study.

The faculty champions, Dr. Alan Nasypany and Dr. Jeff Seegmiller, have a depth of knowledge and research skills necessary to guide students in the DAT, and they are well supported by the administration. A unique budgetary model will provide revenue to support the program and future required capital needs. The budgetary model reduces risk to the university and will promote diversification of revenue to the university.

The evaluation team recommends the DAT program be implemented, with changes to the facilities and proposed curriculum. The proposed 2-year track (6 semesters) should be the only educational option for students entering the program. The proposed 1-year option for students of select backgrounds should be eliminated. There were no course syllabi to outline the depth of the program as discussed by the faculty. We trust that the courses, once developed, will display the rigor that is intended for the academic program. The current planned activities for evaluating student competence should be formalized into a course experience to indicate a "dissertation" like experience at the end of the program (culminating clinical project).

The current classroom structure should be remodeled to 1) create an environment that provides state of the art technology to broadcast classroom activities via an online-classroom model, and 2) a clinical laboratory to provide hands-on-activities during summer residency courses.

The DAT should also consider obtaining PPEC accreditation once the program is implemented and functional.

II. Introduction

a. Summary of site visit activities:

The evaluation team had discussion with 7 key faculty and administrators in addition to a tour of the facilities.
The following individuals contributed to the evaluation discussions:
Doug Baker PhD, Provost University of Idaho
Jeanne Christiansen PhD, Associate Provost Academic Affairs
Cori Mantle-Bromley PhD, Dean College of Education
Jerry McMurtry PhD, Associate Dean, College of Graduate Studies
James Gregson PhD, Associate Dean of Graduate Programs
Kathy Browder PhD, Associate Dean of College of Education, and Chair HPERD
Alan Nasypany EdD, Athletic Training faculty
Jeff Seegmiller EdD, Athletic Training faculty

b. Summary of basic facts about the degree in review

The doctorate of athletic training (DAT) is a proposed post professional athletic training degree. If implemented, this will be the first of its kind in the world, although there are other intuitions investigating the possibility of the degree.

The DAT is a 63 credits, 2-year, 6 semester hybrid academic model. Both years, students will participate in instructor-student face-to-face interaction courses beginning with a summer residency program on the University of Idaho campus, followed by two semesters of on online – distance coursework.

c. Organization of report

The report was well organized and provided the necessary information to prepare inquiry as an evaluation team.

III. Background and Mission

a. Mission

The DAT proposal aligns with the university and college mission statements.

b. Justification

The proposed program fills a void in the athletic training educational process and forges a leadership role in providing a framework for the current academic and medical trends. The DAT is a unique entrepreneurial model that is self-supporting, thus minimizing the state system's monitory risk. In addition, graduates will fill a medical need in Idaho as well as across the United States.

IV. Review of Proposal

a. Nature of Request

The proposed program is a new program to the University, State, and Country.

b. Quality

i. Curriculum

The 2-year curricular model is an in-depth and well-coordinated clinical education experience that imbeds evidence based research into clinical decision making. The rigor and coursework is indicative of a clinical doctorate degree in other health professions. The evaluation team recommends some modification to the proposed DAT program to define one educational track. The current 2-year track, 6 semester program should be the only educational option for students entering the program. The proposed 1-year option for students of select backgrounds should be eliminated. The evaluation team expects the course syllabi to reflect the depth of experiences and rigor discussed with the faculty. The evaluation team recommends that the current planned activities for evaluating student competence formalized into a course experience to indicate a "dissertation" like experience at the end of the program (culminating clinical project). The quality and rigor of the planned experiences are a "dissertation" like experience.

ii. Faculty

The faculty are passionate and display the necessary initiative to create an exceptional educational program. The hiring of a program director and clinical coordinator for the DAT, as indicated in the report, is necessary. In addition, the evaluation team suggests investigating the potential for hiring adjunct specialty faculty to augment the program.

iii. Student

The Doctorate in Athletic Training will attract three different types of students. Students who have completed a Council on Accreditation of Athletic Training Education (CAATE) accredited Bachelor degree in Athletic Training, a CAATE accredited entry-level master degree and a Post Professional Education Council (PPEC} accredited master's program in athletic training. All students will have completed, at minimum, an entry level athletic training program and successfully passed the Board of Certification Examination.

iv. Infrastructure

The current infrastructure is adequate, however renovation of the classrooms to integrate the technology needed for a state of the art clinical education experience is suggested. Technology to broadcast classroom activities via the online classroom structure is needed.

c. Duplication.

The Doctorate in Athletic Training is unique to the Idaho state system of higher education as well as the athletic training educational system. Currently no advanced clinical doctorate in athletic training program exists. Thus, there are no similar programs in the United States. However, like programs are developing across the country, placing the U of I DAT on the forefront of the academic trend.

d. Centrality

We agree with the report that the DAT proposal is consistent with the university mission.

e. Demand

Projection of demand for this program is difficult to assess, however the DAT proposal has appropriately outlined the potential for student enrollment.

f. Resources

The estimated expenditures and revenue outlined in the proposal will diversify the university's revenue stream and allow for program autonomy.

Appendix B

Proposed DAT Course Descriptions

AT 606 Professional and Post-Professional Education in Athletic Training (3 cr)
This course is designed to introduce historical background of professional and post-professional education for heath care professions. Theoretical foundations and models of health care education will be compared and contrasted. The impact of educational models to health care will be explored. Development of criteria to govern the practicing professional in their chosen residency will be accomplished.
Prereq: Permission

AT 610 Seminar in Athletic Training I (3 cr)
Selected readings from peer reviewed articles will be examined and discussed. Translation of research findings to current clinical practice will be emphasized.
Prereq: Permission

AT 611 Seminar in Athletic Training II (3 cr)
Selected readings from peer reviewed articles will be examined and discussed. Translation of research findings to current clinical practice will be emphasized.
Prereq: Permission

AT 620 Clinical Research in Athletic Training I (3 cr)
This course introduces common research performed in Athletic Training. Development of in-depth understanding in areas and types of research underlying quantitative research design will be explored. Introduction to critiquing literature for the purpose of developing a theoretical framework will be included.
Prereq: Permission

AT 621 Clinical Research in Athletic Training II (3 cr)
This course introduces Statistical methods employed in clinical research. Topics including statistical terminology, measures of central tendency, Hypothesis testing and common parametric tests will be the content for the course.
Prereq: Permission

AT 622 Clinical Research in Athletic Training III (3 cr)
This course applies statistical methods to common measures in clinical research and introduces survey research and other qualitative measures.
Prereq: Permission

AT 623 Clinical Research in Athletic Training IV (3 cr)
This course sets the foundation for action research in clinical practice. Development of a research question and justification with literature review will be employed. Purpose and methods of institutional review will be evaluated. Further discussion will elucidate the importance of becoming a scholarly practitioner.
Prereq: Permission

AT 624 Clinical Research in Athletic Training V (3 cr)
This continues the process of action research in clinical practice. Development of methods to test a chosen hypothesis will be created. Exploration of statistical methods to test the clinician's hypothesis will be compared. Data collection will begin.
Prereq: Permission

AT 625 Clinical Research in Athletic Training VI (3 cr)
This continues the process of action research in clinical practice. Data analysis of the student's research will be performed. Introduction to manuscript writing, dissemination of knowledge in written, oral and poster presentation and a focus on journal review will be the context for this course. Student will successfully present their findings and prepare manuscript in journal ready format.
Prereq: Permission

AT 630 Current Issues in Clinical Practice I (3 cr)
This course explores current topics in clinical practice that influence quality care and methods of measurement and evaluation for quality assessment. Exploration to common instrumentation utilized by clinicians will be discussed and compared to literature utilizing the instruments for research purposes.
Prereq: Permission

AT 631 Current Issues in Clinical Practice II (3 cr)
This course explores current topics and causes of musculoskeletal injuries to the extremities. An in-depth look at epidemiology,

biomechanics and other topics related to musculoskeletal injuries of the extremities will be emphasized.
Prereq: Permission

AT 632 Current Issues in Clinical Practice III (3 cr)
This course explores current topics of interest areas of practicing professionals. An in-depth look at theory, research, and art of the chosen interest area will be explored. Focus will be in critically analyzing areas such as; anatomy, pathophysiology, biomechanics, theoretical framework or ethical principles to explain the students chosen topic.
Prereq: Permission

AT 633 Current Issues in Clinical Practice IV (3 cr)
This course explores current topics of interest areas of practicing professionals. An in-depth look at theory, research, and art of the chosen interest area will be explored. Focus will be in critically analyzing areas such as; anatomy, pathophysiology, biomechanics, theoretical framework or ethical principles to explain the students chosen topic.
Prereq: Permission

AT 640 Clinical Residency I (3 cr)
This course is designed to improve the clinical skills of the practicing Athletic Training professional in a mentor guided model. Improvement in a selected area of clinical practice will be measured via formative and summative assessment that employs quantitative measures. Impact of the skill improvement to the organization and profession will be demonstrated.
Prereq: Permission

AT 641 Clinical Residency II (3 cr)
This course is designed to improve the clinical skills of the practicing Athletic Training professional in a mentor guided model. Improvement in a selected area of clinical practice will be measured via formative and summative assessment that employs quantitative measures. Impact of the skill improvement to the organization and profession will be demonstrated.
Prereq: Permission

AT 642 Clinical Residency III (3 cr)
This course is designed to improve the clinical skills of the practicing Athletic Training professional in a mentor guided model. Improvement in a selected area of clinical practice will be measured via formative and summative assessment that employs quantitative measures. Impact of the skill improvement to the organization and profession will be demonstrated.
Prereq: Permission
Spring Semester Year Two (1 year and 2 year students)

AT 643 Clinical Residency IV (3 cr)
This course is designed to improve the clinical skills of the practicing Athletic Training professional in a mentor guided model. Improvement in a selected area of clinical practice will be measured via formative and summative assessment that employs quantitative measures do demonstrate improved patient care. Impact of the skill improvement to the organization and profession will be demonstrated. Summary of all impact of clinical residencies will be presented to the participant's organization
Prereq: Permission

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SUBJECT

P20 to Workforce State Longitudinal Data System (SLDS) Needs Assessment

REFERENCE

August 11, 2010	Board directed staff to do a needs assessment that includes the technical, fiscal, and governance requirements for a P-20 and Workforce SLDS.

BACKGROUND/DISCUSSION

In August, 2010, the State Board of Education requested the Office of the State Board of Education prepare a needs assessment that included the technical, fiscal and governance requirements for a P-20 and Workforce SLDS.

While Idaho is one of the last states to implement a P-12 statewide longitudinal data system (SLDS), we have made great progress and are in a position to take advantage of the work of other states. As of October 1, 2010, the State Department of Education began collection of student-level data in the K-12 SLDS. At the postsecondary level, data exists in eight varied systems that do not communicate with each other. Postsecondary data must be consolidated to meet the September 30, 2011, America Recovery and Reinvestment Act (ARRA), State Fiscal Stabilization Fund (SFSF) requirements. While the ARRA SFSF requires that states have a P-16 longitudinal data system, they do not mandate a singular system to meet the 2011 deliverables. There are gaps, barriers, and risks that must be addressed as Idaho moves forward with student level statewide longitudinal data collection. Creating a postsecondary repository, gathering postsecondary data, and linking to the K-12 SLDS is an appropriate first step to meet the required September 2011, P-16 SLDS ARRA requirements.

The needs assessment is intended to provide the State Board of Education with an appropriate overview of the current status of statewide longitudinal data collection, the needs, gaps, barriers, and risks associated with collecting educational data and recommendations for developing a system.

The needs assessment recommends the construction of a P-20W over time and in a four phased approach.

- Phase 1 would require the development of a postsecondary repository and link to the K-12 SLDS for a P-20 SLDS.
- Phase 2 would require maturation of the P-20 SLDS environment.
- Phase 3 would require finalization of the design and implementation of a complete postsecondary data warehouse.
- Phase 4 would be the final stage, transforming to a P-20W SLDS with Business Intelligence solutions.

A four phased approach allows Idaho to meet federal deadlines and reporting requirements in a manner that will preserve resources and aid proper planning and design. The four phased approach limits the burden on the institutions and still meets the requirements of the various grant information needs and reporting requirements.

IMPACT

The needs assessment recommends a four phased approach requiring the allocation of funds to support the development and implementation of a postsecondary data repository and maturing that environment over subsequent years into a P-20W SLDS. Phases could be accelerated or even combined depending on resources.

ATTACHMENTS

Attachment 1 – P-20W SLDS Needs Assessment Page 3

STAFF COMMENTS AND RECOMMENDATIONS

Staff recommends the Board accept the recommendations and move forward with the direction outlined in the needs assessment.

BOARD ACTION

I move to accept the recommendations and direct staff to move forward with Phase 1 and Phase 2 for a P-20W SLDS as outlined in the needs assessment.

Moved by _____ Seconded by _____ Carried Yes _____ No _____

I move that the Board form a Data Management Council as outlined in the needs assessment and authorize the Executive Director to determine the composition and appoint the members of said Council.

Moved by _____ Seconded by _____ Carried Yes _____ No _____

OFFICE OF THE STATE BOARD OF EDUCATION

State of Idaho

Statewide Longitudinal Data System Needs Analysis

Submitted
January 31, 2011

This document provides the current state of Statewide Longitudinal Data System (SLDS) efforts in Idaho, describes the options, and makes recommendations for maturing to a P-20 to Workforce SLDS.

Table of Contents

Executive Summary

The Needs Analysis is intended to provide the State Board of Education with an appropriate overview of the current status and the needs for longitudinal educational data collection, the gaps, barriers, and risks, and finally to provide recommendation regarding the most appropriate path forward for collecting student level data over time.

While Idaho is one of the last states to implement a P-12 statewide longitudinal data system (SLDS), we have made great progress and are in a position to take advantage of the work of other states. As of October 1, 2010, the State Department of Education began collecting student-level data in the K-12 SLDS. The postsecondary data exists in eight varied systems that do not communicate with one another. Postsecondary data must be consolidated to meet the September 30, 2011, America Recovery and Reinvestment Act (ARRA), State Fiscal Stabilization Fund (SFSF) requirements. While the ARRA SFSF requires that states have a P-16 longitudinal data system, they do not mandate a singular system to meet the 2011 deliverables. There are gaps, barriers and risks that must be addressed as Idaho moves forward with student level, statewide longitudinal data collection. Creating a postsecondary repository, gathering postsecondary data, and linking to the K-12 SLDS is an appropriate first step to meet the required September 2011, P-16 SLDS ARRA requirements.

To successfully implement a P-20W SLDS requires a clear strategy, proper planning and design, participation and commitment from all stakeholders, support, and data management oversight.

Staff recommends the Board accept the recommendations and direct staff to move forward with Phase 1 and Phase 2 for a P-20W SLDS. Staff will work with the institutions and the State Department of Education to construct a P-20W SLDS. Phase 1 would require the development of a postsecondary repository and link to the K-12 SLDS for a P-20 SLDS. Phase 2 would require maturation of the P-20 SLDS environment. Phase 3 when approved would require finalization of the design and implementation of a complete postsecondary data warehouse. Phase 4 when approved would be the final stage, transforming to a P-20W SLDS with Business Intelligence solutions. A four phased approach allows Idaho to meet federal deadlines and reporting requirements in a manner that will preserve resources and aid proper planning and design. The four phase approach limits the burden on the institutions and still meets the requirements of the various grant information needs and reporting requirements. Phase 1 gathers the data and allows Idaho to start making data driven decisions. It is a functional solution and will provide a solid foundation for designing the P-20W SLDS. The scope of Phase 2 may be expanded when Phase 1 is completed if the institutions have available resources, or other data sources can be engaged (such as private or for-profit institutions).

Overview

History

In 2008, the Idaho Legislature appropriated $2.5M in one-time money to the State Department of Education to consolidate data collection and begin the efforts to create a K-12 data collection system. In May, 2009, Idaho was awarded a federal statewide longitudinal system (SLDS) grant in the amount of $5.9M to fund the development of a K-12 SLDS. The development and implementation of the K-12 SLDS, also known as the Idaho System for Education Excellence (ISEE), is anticipated to have a completion date of April 30, 2012. While Idaho was among one of the last states to implement a K-12 statewide longitudinal data system, since 2007 the Idaho State Department of Education (SDE) has made remarkable progress.

In late, 2009 another federal SLDS grant was released due to the availability of ARRA money. While developmentally Idaho was not in a position to move forward, the Office of the State Board of Education (OSBE) worked with SDE and requested funding to support both the expansion of the K-12 SLDS and implementation of an institutional data warehouse at each public institution of higher education, and the implementation of the P-20 to Workforce Statewide Longitudinal Data System (P-20W SLDS) that would combine data from the postsecondary institutional warehouses, the K-12 SLDS, and the Department of Labor systems. Unfortunately that proposal was not funded.

Without that funding, the approach outlined in the grant proposal for the P-20W SLDS is not financially feasible at this time. The design of the P-20W SLDS will still need to accommodate the heterogeneous nature of the postsecondary institutions' systems from which data must be extracted and linked with the K-12 SLDS.

Current Status

- **K-12**
  - The K-12 SLDS, ISEE, began student-level data collection October 1, 2010. Pilot data loads were planned from October 1 through December 31, 2010. The system is slated to have validated data and be the official record for average daily attendance for funding. The design of the initial data "cubes" (attendance and student performance on assessments) was scheduled to be complete by December 31, 2010. Rollout of the Schoolnet application is scheduled for January 2011. Schoolnet is intended to provide teachers immediate access to data on their students; including historical information such as standardized test scores, prior class lists, student conduct information,

and more, with the end goal being able to do formative assessments to guide student achievement.

- **Postsecondary**
  - A single, consolidated postsecondary database does not exist and information is not currently collected in any central location.
  - The transactional systems at the eight public postsecondary institutions' Enterprise Resource Planning (ERP) systems are varied, consisting of PeopleSoft, Banner, Datatel, and Jenzabar.
  - OSBE Staff evaluated the viability of using the current K-12 infrastructure to house postsecondary data. A high level comparison was conducted comparing the Idaho K-12 extract, transform, and load (ETL) data elements to the Oregon University System ETL templates. The overall result was a less than 40% match of the required data elements in the current K-12 SLDS collection. There are several critical factors that complicate the ability to consolidate postsecondary data in the K-12 SLDS. Some of those factors are:
    - Postsecondary institutions have different federal and state reporting requirements than K-12. Consequently, the manner in which the data fields are defined, collected, and retrieved are fundamentally different. Institutional knowledge and history play a vital role in accommodating these requirements. The complexity and development of the ERP systems at the postsecondary institutions are far more advanced than the data collection systems in the districts, with decades of historical data.
    - The stated priority of ISEE is to get data into the classroom for teachers. They are not in a position to support changes to allow loading postsecondary data into the K-12 SLDS without the engagement of additional contracted developers and personnel to perform the entire implementation. Funding is also not available to support such an effort.
    - The postsecondary institutions were not involved in the design and development of the K-12 SLDS and their needs are not actively being incorporated into the system at present.
    - Based on OSBE staff and institutional work with SDE on the implementation of the unique student identifier (EDUID) application, it became clear there is a strong possibility that incorporation of the postsecondary education data into the K-12 SLDS would not only cause delays to the K-12 SLDS schedule but completion of the P-20 SLDS.

- In September 2010, a project was initiated by OSBE to extend the use of the EDUID application developed by SDE and used for K-12 to all public postsecondary institutions. To date, five of the eight public postsecondary institutions have successfully executed the process and created EDUID's for 2010 fall enrollment. The majority of the remaining institutions are planning to finish in early 2011.

Need for P-20 to Workforce SLDS

Federal Requirements

- Idaho is one of the last states to implement a P-12 Statewide Longitudinal Data System (SLDS). By accepting ARRA SFSF, the state agreed to four assurances, one of which consisted of implementing the 12 elements of the America COMPETES Act by September 30, 2011, which requires a P-16 SLDS. Idaho currently meets seven of the 12 elements of the Act.

Future Initiatives and Grants

- For Idaho to pursue future grant opportunities, Idaho must have the ability to track student level data from K-12 through postsecondary education. Currently, Idaho is not eligible for many of the grant opportunities because the state cannot measure student progress and achievement. As part of Idaho's participation in the Complete College America (CCA) initiative, we are required to track the progress on outcomes over time and through systems.

Strategic Plans

- The State Board of Education, in its Strategic Plan, has established the goal to have a P-20W SLDS developed and implemented by 2015. SDE is also dependent on an SLDS that includes postsecondary data to meet their goal of students prepared to continue their education without the need for remediation. In addition, the Board has set the goal that 60% of 25-34 year olds have a postsecondary degree or credential by 2020. Idaho needs the capacity to track students over time and place to conduct the analysis of where students are falling out of the educational pipeline, and to measure the effects of changes in education delivery against this goal.

Issues

Gaps

- Although a list of potential questions has been developed that the P-20 SLDS could help answer, a clear definition of the needs of the potential users has not been completed.
- Data security is a major concern. OSBE will Leverage SDE's K-12 SLDS security solutions to duplicate these successful strategies. As part of this process Idaho will also evaluate other states' implementations to guide Idaho's P-20 SLDS security implementation. Conducting an appropriate evaluation will ensure that confidential data is properly secured during transmission and storage.
- Previously, Professional Technical Educations (PTE) data needs for secondary were satisfied by the IBEDS (FoxPro) system. When SDE replaced IBEDS with the current K-12 SLDS they did not provide for PTE's information requirements to track students in technical programs. A development effort using contracted resources is underway at PTE's expense to add these elements into the K-12 SLDS.
- The proposed use of the Oregon University System (OUS) data collection templates do not include the elements necessary for PTE to produce their federal postsecondary reports for Workforce Improvement Act (WIA) and Perkins. These data elements have been identified and a final review with PTE will be required before implementation. PTE has supplied the reports they are required to produce and the necessary data elements have been identified and added to the OUS model.
- A critical requirement of any database is controlling data quality (i.e. data accuracy, standards, integrity, and completeness) from both an I.T. and business perspective. A Data Management Council will need to be established by the State Board of Education to create and steer the development of the policies and procedures necessary to properly manage the data in the P-20W SLDS and serve as the primary review point for all data management activities. The site visit from the U.S. Department of Education reported: "Data Management processes are just beginning to be implemented at the IDOE [SDE K-12 SLDS]. These processes are not yet mature. The other P-20W participating agencies are in a similar state as regards data management."[1] The Data Management Council responsibilities will include:
  - Development and oversight of a Data Management Plan. This plan will:
    - Detail the processes & procedures needed to determine access to the data and data reports at the

several levels to prevent intentional or unintentional misuse and/or misinterpretation of the data.
- Define user acceptance testing standards to ensure that the data and functions of the SLDS meet the needs of the stakeholders.
- Guide development of solutions.
- Coordinate the efforts of stakeholders.
- Define the data exchange requirements.
- Manage the Data Dictionaries for the SLDS to ensure consistent management and use of the information.

▪ Serve as the point of contact for all SLDS data issues.

o The processing of postsecondary enrollment information for the purposes of issuing an EDUID has exposed instances where matching students to existing K-12 EDUID records should have occurred, but instead, a new EDUID was created.
  ▪ Auditing and reconciliation are manual processes, very time consuming, and have not been done on any of the school district EDUID uploads.
  ▪ No statistics regarding EDUID match rate are provided during the matching process.
  ▪ A detailed analysis of the issue has not been completed.
  ▪ It is left to the school districts and institutions to provide clean data. With the wide variety of systems the school districts and institutions utilize, it is not practical to assume perfect data.
  ▪ Additional data sources are going to have to be accessed to determine the magnitude of the issue and address it.

o The data collection requirements between K-12 and postsecondary are both very different, which is causing issues in the EDUID matching on collecting and reporting names, name changes, gender, social security number (SSN), etc. Agreements that best satisfy both SDE and postsecondary system requirements must still be made to eliminate and/or reduce these issues.

o **Agreements**
  ▪ The long-term success of the P-20W SLDS depends upon establishing clear agreements (such as MOUs) with the non-education agencies to ensure data is provided despite any changes in staff or administration. A discussion with all of the institutions regarding the concerns they have with student privacy needs to be conducted and all issues addressed through a statewide agreement on student privacy and the P-20 SLDS.

- **FERPA violation and disclosure of Personally Identifiable Information**
  - The Family Educational Rights and Privacy Act of 1974, also known as FERPA is federal legislation in the United States that protects the privacy of students' personally identifiable information (PII). The act applies to all educational institutions that receive federal funds.[2]
    - The penalties regarding FERPA violations are limited to loss of federal money. However, the exposure can be very damaging to the reputation of the state or institution, and cost the state or institution millions of dollars to notify students of breaches in security of that data. Institutions could also be responsible for credit monitoring to detect identity theft after a release of PII. The P-20 SLDS will be constructed to meet FERPA requirements and the Data Management Council will be tasked with ensuring FERPA compliance.

- **Stakeholder Engagement**
  - Communication with stakeholders has been limited to this point. Although stakeholders have been identified, they need to be formally engaged in the review and execution of the entire P-20W project. Meeting regularly with them will be necessary to review the data elements. A communications plan will need to be established to ensure an informed and engaged process.

- **Student tracking**
  - ARRA SFSF requires Student-level information about the points at which students exit, transfer in, transfer out, drop out, or complete pre-K through postsecondary education programs. To track students transitioning from K-12 into postsecondary, data will be pulled from the K-12 SLDS and uploaded into the National Student Clearinghouse (NSC). With regard to postsecondary transitions, Idaho will also use the National Student Clearinghouse to meet this reporting requirement. OSBE will use the contract currently in place to track postsecondary transitions. The current agreement with NSC only covers postsecondary. The Council of Chief State School Officers (CCSSO) is working on national pricing agreement that would cover K-12, but no timeline has been provided.

Barriers

- **Confidential Information and Requests**
  - Due to the necessity to collect sensitive data such as personally identifiable information, Social Security Numbers (SSN's), and labor data to build a P-20W SLDS. The design of the postsecondary

repository and data collection methods will be complicated and time consuming.

- The common theme of other states that have already developed their SLDS is to highly restrict student identifiable data, provide only the required level of information, and set return/destruction dates on the data usage. An SLDS provides a wealth of information that will attract requests for information, therefore it is critical that the proper processes and procedures are in place before requests are received.

- **Distance / Location**
  - The eight public postsecondary institutions are throughout Idaho, making it difficult and expensive to conduct face to face meetings. As much as possible remote meeting technologies will be utilized to ensure participation.

- **Time**
  - Due to the requirement to have a P-16 SLDS in place by September 2011, a lengthy development cycle must be avoided by continuing to make use of the progress SDE and other states have already made.

- **Budget**
  - Current funding for constructing the postsecondary repository is limited and precludes the development of a Request for Proposal to contract out the design or development of the P-16 SLDS, or incorporating postsecondary data into the K-12 SLDS. Leveraging the OUS data dictionary, leveraging existing OSBE and institution staff, limiting consulting, leveraging the existing SDE SQL cluster, and phasing the implementation provides the most economical solution with the least amount of risk for establishing the P-20W SLDS.

- **Competing Priorities**
  - There are other major projects currently underway at both SDE and several institutions that preclude leveraging some internal resources. These include, but are not limited to, the continuing development of the K-12 SLDS, Idaho State University's conversion to Banner, Boise State University's PeopleSoft upgrade. It is anticipated that involvement by these entities will still be necessary to ensure the success of the P-20 SLDS plans for Phase 1. As much

lead-time and flexibility will be provided to minimize the impact to other projects.

- **Data Availability**
  - The end goal is the capability to track students from pre-school to the workforce. There are several hurdles to be overcome:
    - Obtaining enrollment and graduation data from Private and For-Profit institutions will be a lengthy process. There may be interest on their part to track outcomes for their students, and OSBE could provide that link in exchange for enrollment and graduation information from those entities. A recent financial aid report from the Federal Application for Free Student Aid shows over 100,000 students receiving financial aid in Idaho. The current public postsecondary enrollment for fall 2010 showed an enrollment of 69,737 students, which indicates there are at least 30,000 students enrolled in private or for-profit institutions which have not been accounted for.
    - Labor data is an important component to this effort. Typically Unemployment Insurance wage data is utilized. Currently, the only field to match labor data on is the SSN. The K-12 SLDS does not require SSN and postsecondary typically only collects it if the student applies for financial aid; therefore, there is a gap in identifying students who go directly to the workforce from K-12 or those who leave postsecondary education and enter the workforce. It may be possible to link through another agency that has both demographic data and the SSN, but this will be time consuming and may require executive order.
    - Connecting to a multitude of other state agencies will have to be negotiated individually, but other states have been successful in this endeavor.
    - Graduates who join the military or take a federal job are another group that need to be identified and the agreements created to access this information. This is another area where the efforts of other states can be used as a model.

Risks

- **FY 2012 State Budget**
  - Continuing state budget issues may limit or remove institution resources needed for the P-20W SLDS. The proposal is to utilize money identified for the FY2012 Technology Incentive Grant (TIG) program to fund Phase 1. Phase 1 includes the P-20 SLDS ETL development and provides the public institutions with

funding for their ETL development to provide the necessary data, participation in report development, and reviewing the reports generated.

- **Personally Identifiable Information Release**
  - The P-20W SLDS will contain student level data to allow linking or extraction from multiple data sources. To mitigate the risk of exposing personally identifiable information, this data will be segregated in separate tables that can be secured and the access limited to only the required and approved personnel.
  - To safeguard personally identifiable information, any public information requests will require data extracts of the results by internal resources, aggregation, approval from the Data Management Council and the owning institutions.
    - Discussions will be planned with other state agencies who routinely deal with sensitive information to ensure that the proper safeguards are in place, including system vulnerability patching, tape storage, administration account control, and access logging.
  - MOUs will be developed to manage data extracts for matching to labor data or other data exchanges.

Recommendation

The construction of the P-20W SLDS should be completed over a period of time, through a four-phased approach. It is recommended to first build a P-12 SLDS and separate postsecondary repository (to form the P-20 SLDS). This will allow for the immediate use of the required data pursuant to the ARRA requirements. Then as time and resources allow, incorporate additional data sources, and improve the functionality and use of the SLDS by maturing to a P-20W SLDS. Continuing implementation by adding a Data Warehouse and Decision Support System increases the usability and removes the dependency on technical resources to retrieve information.

Adding additional functionality in a phased approach provides early wins, allows Idaho to meet the Federal ARRA reporting requirements, assist the Board of Education in making progress toward its Strategic Plan objectives, and increases stakeholder satisfaction.

The State Board of Education should be the entity to lead the development of the P-20W SLDS toward a common vision across all of education. It is critical that all Idaho education and labor agencies work together toward a common SLDS goal. In a recent Institute of Education Sciences grant

conference, the consensus was that the biggest obstacles states face is a lack of commitment to find ways to share data. Many states experience constant battles and discussions (often taking years), over data privacy, ownership, and dealing with differing FERPA interpretations that often require legislation or executive order to resolve. The goal of an SLDS is to provide the necessary data for education improvement at all levels. Idaho has an advantage in its unique education governance structure that can allow us to succeed in the timeframe available. The SBOE's role as the policy-making body for all of public education provides an opportunity to eliminate these barriers and streamline the process. However, challenges will remain in aligning the various institutions and agencies towards the common goal of tracking students from the time they enter preschool through entry into the workforce.

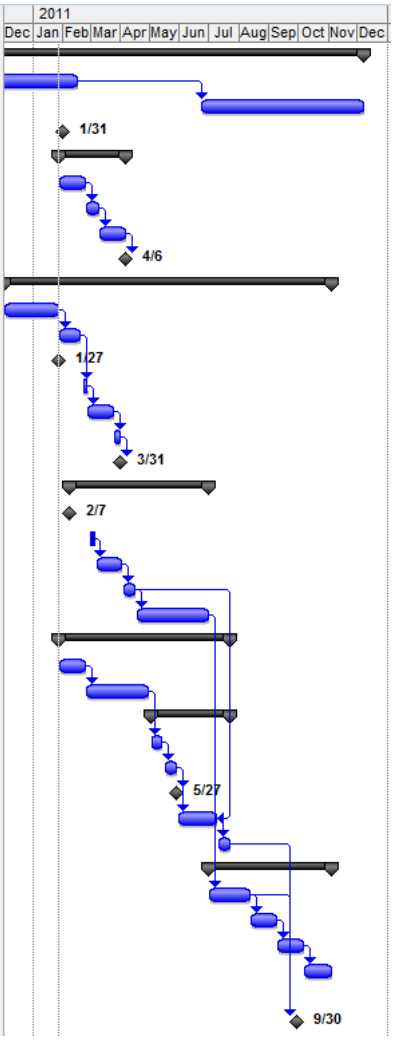
For the SLDS to be built in a timely manner, a commitment is required from all parties involved to make this a priority and to apply the necessary resources to complete tasks when scheduled. The participants required are the State Board of Education, the Office of the State Board of Education, the State Department of Education, the Division of Professional Technical Education, the Department of Labor, possibly the Department of Transportation, the Department of Corrections, all public postsecondary institutions, and if possible, the private and for-profit institutions. Ideally, ample lead time and as much flexibility as possible will be provided when engaging the institutions and departments. However, the reality is that there will be times when the P-20W SLDS will likely need to be given priority over other internal projects and initiatives.

Execution Plan

Phase 1 – Postsecondary Repository and link to K-12 SLDS for P-20 SLDS

Below is a proposed execution plan and timeline for development.

	Task Name	Duration	Start	Finish
1	**P-20 to Workforce SLDS Development**	**308 days?**	**Fri 10/1/10**	**Tue 12/6/11**
2	Establish EDUID in Postsecondary	98 days?	Fri 10/1/10	Tue 2/15/11
3	Pursue EDUID with independent and for-profit institutions	120 days	Wed 6/22/11	Tue 12/6/11
4	Needs Assessment	0 days	Mon 1/31/11	Mon 1/31/11
5	**Establish Data Management Committee**	**50 days**	**Thu 1/27/11**	**Wed 4/6/11**
6	Outline requirements	20 days	Thu 1/27/11	Wed 2/23/11
7	Determine members	10 days	Thu 2/24/11	Wed 3/9/11
8	Develop Charter	20 days	Thu 3/10/11	Wed 4/6/11
9	Schedule Initial Meeting	0 days	Wed 4/6/11	Wed 4/6/11
10	**Phase 1 - Postsecondary Repository**	**241 days**	**Thu 12/2/10**	**Thu 11/3/11**
11	Data Dictionary - ETL templates	40 days	Thu 12/2/10	Wed 1/26/11
12	Incorporate PTE requirements	17 days	Thu 1/27/11	Fri 2/18/11
13	Request travel grant - PEN for OUS	0 days	Thu 1/27/11	Thu 1/27/11
14	Meet with OUS - review templates	3 days	Tue 2/22/11	Thu 2/24/11
15	Develop updated Idaho Data Dictionary	20 days	Fri 2/25/11	Thu 3/24/11
16	Review and Finalize Proposed Data Dictionary	5 days	Fri 3/25/11	Thu 3/31/11
17	Publish Idaho Data Dictionary	0 days	Thu 3/31/11	Thu 3/31/11
18	**SQL Server - Developer**	**104 days**	**Mon 2/7/11**	**Thu 6/30/11**
19	MOA signed	0 days	Mon 2/7/11	Mon 2/7/11
20	Database Instance Created	4 days	Tue 3/1/11	Fri 3/4/11
21	Obtain DBA / Developer	20 days	Mon 3/7/11	Fri 4/1/11
22	Build postsecondary repository tables	10 days	Mon 4/4/11	Fri 4/15/11
23	Develop ETL scripts - P-20 SLDS	54 days	Mon 4/18/11	Thu 6/30/11
24	**Institutions**	**127 days**	**Thu 1/27/11**	**Fri 7/22/11**
25	Meet with each public postsecondary institution	20 days	Thu 1/27/11	Wed 2/23/11
26	Develop ETL scripts from ERP system	47 days	Thu 2/24/11	Fri 4/29/11
27	**Data Load**	**60 days**	**Mon 5/2/11**	**Fri 7/22/11**
28	Run trial extracts from ERP systems	10 days	Mon 5/2/11	Fri 5/13/11
29	Verify data and adjust scripts	10 days	Mon 5/16/11	Fri 5/27/11
30	Initial Data Request	0 days	Fri 5/27/11	Fri 5/27/11
31	Initial Production ETL from ERP systems	30 days	Mon 5/30/11	Fri 7/8/11
32	Initial Data load verified and available	10 days	Mon 7/11/11	Fri 7/22/11
33	**Reports**	**90 days**	**Fri 7/1/11**	**Thu 11/3/11**
34	Develop base set of reports	30 days	Fri 7/1/11	Thu 8/11/11
35	Produce CCA reports	20 days	Fri 8/12/11	Thu 9/8/11
36	Evaluate IPEDS reports	20 days	Fri 9/9/11	Thu 10/6/11
37	Incorporate all applicable OSBE report requests	20 days	Fri 10/7/11	Thu 11/3/11
38				
39	ARRA requirements met	0 days	Fri 9/30/11	Fri 9/30/11



- The EDUID implementation into the postsecondary institutions project is underway with five out of the eight institutions having generated an EDUID for their fall 2010 enrollment of students. The goal is to populate all of the public postsecondary ERP systems with unique student ID's generated via the K-12 EDUID engine by January 31, 2011. OSBE has initiated discussions to include the private institutions in this project. Implementation of the EDUID provides the link necessary between the proposed postsecondary repository and the K-12 system. It also provides the link to produce reports on postsecondary enrollment and remediation needs for first time students who

have graduated from high school in Idaho and are now in Idaho postsecondary institutions, as required by ARRA, SFSF requirements. The cost for this effort is being covered by the institutions.

- Due to the complexity, the short timeframe of the 2011 deliverables, limited resources, and lessons learned from other states, the P-20W SLDS should be implemented in a "building block" phased implementation approach. The potential opportunities to reduce costs by leveraging other states efforts, the fact that the design is not finalized, and that a Request for Proposals would need to be executed to define costs, the Phase 3 and beyond costs should be considered as rough estimates that will be further defined during Phase 2.

- Accept K-12 offer of housing the postsecondary data in a separate instance in the K-12 SQL Server 2008 cluster. SQL Server 2008 supports multiple independent databases (instances) running on the same hardware. The instances are kept logically separated and basically do not know the other instances are running. It is possible to confine each instance to a specific amount of CPU utilization to prevent performance issues. SDE has created a cluster environment which also provides protection from hardware failure, which is a very robust and fault-tolerant solution.

    - Cost: $50K for a developer (with SQL Server DBA experience) and FY 2011 ETL assistance.
        - Outline requirements and acquire a developer with SQL Server expertise
        - Sufficient work to keep a developer busy for at least a year. Requirement for report development would be satisfied by this position.
            - Despite the current labor market, it could be difficult to find resources with the expertise needed in the price-range planned.

    - Advantages
        - SDE's offer to provide the instance minimizes cost.
        - Data would reside on the same hardware as K-12 data –any data transfers and/or linkage to K-12 data would be local.
        - SDE is an education entity under the State Board of Education, and under current interpretation, FERPA allows for this arrangement.
        - SDE's is a secure environment not exposed to the Internet
        - Cost of space will be minimal and is anticipated to be $3,000 or less annually.

- Able to leverage SDE server expertise to build environment.
- Eventually plan to leverage the development used for the K-12 SLDS ETL process to create the postsecondary load scripts.

o Disadvantages
- Sharing the SQL Server environment adds additional monitoring requirements to SDE regarding CPU utilization, memory, and storage (which is manageable). An MOA is required to define the arrangement.
- User creation and access processes and procedures will have to be mutually agreed upon.

o Open items:
- The Support model with SDE needs to be agreed upon with a Memorandum of Agreement (in process) to specify access and responsibility. The intention would be for the SQL Server instance that is set up for postsecondary to be completely isolated and under the control of OSBE and the institutions.
- The SDE datacenter is on a different network subnet. Would need to determine a solution for directly linking to the server (which is a minor issue).
- The Oregon University System (OUS) has provided their data load (ETL) templates, which have saved at least six months of research and analysis efforts to define the data elements required. These templates will be reviewed with the institutions and the Division of Professional Technical Education, then modified to provide the data elements necessary to answer the P-20 SLDS critical questions and serve as the required data elements. A trip funded by the U.S. Department of Education through a grant opportunity called the Personnel Exchange Network (PEN) has been requested for OSBE and SDE to meet with the OUS to discuss technical issues, resolve questions, and ensure understanding of their process.
- Schedule a meeting with the institutions to review the proposed ETL templates and review this plan.
- Establish the Data Management Council structure for P-20W SLDS.
- The transcript system being designed and developed by the P-12 SLDS is scheduled to be operational by September 30, 2011. A meeting of postsecondary admissions was held January 11, 2011, to discuss requirements. The original grant proposal was to develop an electronic transcript system. SDE has changed

direction and is planning on evaluating commercial hosted solutions. The cost for this effort is covered by the current Federal SLDS grant.

- Participate in the WICHE multi-state data exchange pilot to ensure that the SLDS can track students who cross state lines. The result of an exchange includes the ability to compare student performance among states and whether students that transfer out of state in special programs return to the state to join the workforce. Cost is covered by a grant from the Gates foundation and is administered by WICHE.
- There is a need to provide longitudinal data for the Complete College America partnership. Incorporating these requirements with the postsecondary SLDS, reduces the effort required by the institutions.
- Compliance with the reporting requirements of the ARRA America COMPETES Act is scheduled to be completed, or we will have the capacity to meet the requirements, by the September 30, 2011, deadline.

FY2011 Resources and Cost detail (major items)

- $ 50,000 covered by remaining FY2011 TIG funding and SBOE budget
  - Labor – Developer = 560 hours $37,500 (remainder of FY2011)
  - Labor – ETL from postsecondary systems
    - Eight institutions x 320 hours – absorbed by institutions, or covered by FY2011 and FY2012 TIG funds.
- OSBE labor 400 hours - absorbed.
- Meetings and review by institutions – 720 hours - absorbed
- Training - 2days @ each institution x 8 = 128 hours – provided by OSBE
- Project Management – (covered by current TIG)
- Hardware & Software – minimal cost anticipated, less than $5,000
  - SDE has offered to put up an instance in their environment – $3,00 or less anticipated
  - May require purchase of storage estimated not to exceed $1,200
- Travel (absorbed)
- Support – none
- Ongoing support costs:
  - Report Writing – covered by developer
  - Server support - .1 FTE – covered by SDE / OSBE / PTE
  - Data Quality manager – internal resources temporarily leveraged

Phase 2 – Maturing the SLDS environment

(unbudgeted cost $1M, timeframe complete by June 30, 2012)

Phase 1 delivers the P-20 SLDS base functionality, and Phase 2 matures the environment to provide information to stakeholders, delivery of additional reports, transition of most OSBE data needs to the P-20 SLDS, improvements to the ETL process, and development of additional data sources.

- Training and documentation plan developed (320 hours – internal staff)
- Develop automated import leveraging SDE's solutions and implement Memorandum of Understanding / Memorandum of Agreements as necessary to include additional data sources and users (400 hours)
- Determine and develop standard SLDS reports (1 FTE)
- Logical model developed (320 hours - consultant or Institution expertise)
- Database Analyst (1 FTE)
- Preliminary Design of the Postsecondary Data Warehouse (320 hours – consultant or institution expertise)
- Incorporate workforce data and evaluate other outcome data (480 hours)
- Determine hardware requirements
    - Expand SQL Server environment to support the data warehouse if necessary, or deploy a new solution
- Deliverables:
    - Web ETL file submission (based on SDE's source)
    - Reports:
        - Integrate federal reporting
        - Transition reports (K-12 to postsecondary)
        - Analyze existing OSBE data requests and move to SLDS
        - Develop ongoing Federal Reports including
            - Completion of 1st year credits within 2 years
            - Tracking Students who enroll in postsecondary within 16 months of graduation
            - Students who complete 24 credits within first 2 years
            - Update of other ARRA reports
        - Develop reports to answer critical questions from SBOE, institutions, SDE, and the legislature.
    - Design – Data Warehouse
        - Investigate solutions in place in other states
        - Elemental design decisions made – structure and dimensions
        - Determine hardware, software, and support model

FY2012 Resources and Cost (major items)
(pricing based on current state procurement rates for consulting, internal = direct labor + burden + indirect costs)

Recommendation - (assumes allowance for internal labor)

- Data Warehouse Systems Architect - consultant or internal from postsecondary institutions – 960 hours @ $115 = $ 110,400
- Training 640 hours using internal labor @ $50 = $32,000
- Travel $56,000 (3 group meetings and institution visits)
- Grants to public postsecondary institutions to cover ETL development, internal process and documentation changes, automated job scheduling, project management - TBD
- Support costs:
  - Web Developer / Report Writing – 1 FTE for 1 year $104,000
  - Data Quality manager – 1 FTE for 1 year $104,000
  - Project Manager – 1 FTE for 1 year $104,000
  - Database Analyst / SQL Specialist – 1 FTE for 1 year @74.80 $149,600

Phase 3 – Finalize Design and implement a postsecondary Data Warehouse

(unbudgeted cost approximately $1M, timeframe complete by June 30, 2013)

Data Warehouse - The main source of the data is cleaned, transformed, catalogued and made available for use by managers and other business professionals for data mining, online analytical processing, and decision support (Marakas & O'Brien 2009). In the case of education, the Data Warehouse transforms the repository into formats (data marts) that are readily understood by the Institutional Researchers and analysts so they can independently analyze information (within the bounds of the security structure built into the warehouse).

- Determination if P-12 data will be incorporated at this point
- Develop RFP for data warehouse implementation
- Engage institutional experts or consultant to finalize design of the Data Warehouse
- Form committee to determine dimensions and data marts
- Develop data feed (ETL) from data repository to data warehouse
- Hire consultant / leverage institution expertise
- Purchase or leverage Data Warehouse software
- Develop a Business Intelligence roadmap
- Implement solution

FY2013 Resources and Cost (major items)
(pricing based on current state procurement rates for consulting, internal = direct labor + burden + indirect costs)

- Recommendation (implement P-20 SLDS data warehouse) $1 million
  - (assumes allowance for internal labor)
- Data Warehouse Architect Consultant - 240 hours @ $100 = $24,000
- Consulting – data crosswalk analysis, determination of data elements, develop automated load and reports $100,000
- Develop ETL's to populate data warehouse 480 hours @ $75 = $36,000
- OSBE labor –
  - participate in design and verify information - 1,000 hours @ $50 = $50,000
- Additional software and licensing $100,000-$300,000 (plan $200,000)
  - (low end – leverage an existing solution, high – buy new)
- Additional hardware $100,000
  - Server and SAN storage
    - (by continuing to leverage SDE the cost may be reduced by as much as ½, would still have to expand SAN and add additional server blades)
- Support costs:
  - Data Warehouse Reports / queries – 1 FTE for 1 year $104,000
  - Data Quality manager – 1 FTE for 1 year $104,000
  - Project Manager – 1 FTE for 1 year $104,000
  - Database Analyst / SQL Specialist – 1 FTE for 1 year @74.80 $149,600
  - Server support - .25 FTE for 1 year $25,000
- Option – incorporate P-12 SLDS data
  - Add Developer/SQL for ETL development - $125,000

Phase 4 - Transform to P-20W SLDS & Business Intelligence solution

(cost approximately $1.2M, timeframe complete by June 30, 2014)

Business Intelligence (BI) tools allow self-service data query including drill down capability, ad-hoc analysis, and the ability to provide public access to aggregated data that is meaningful and productive. This expands the scope of the P-20W SLDS

to include predictive techniques that will guide educators in optimizing the students achievement.

- Expand storage if required
- Gather requirements and determine solutions
- Review solutions deployed by institutions and SDE
- Develop legislation if required
- Develop and implement additional MOUs necessary to include additional data sources and users
- Develop training and support model
- Research and procure business analytics software
- Deliver training on BI tools and additional predictive analytics
- Expand storage if required
- Develop analytics reports and security model

FY 2014 Resources and Cost (major items)
(pricing based on current state procurement rates for consulting, internal = direct labor + burden + indirect costs)

- Recommendation – add Business Intelligence tools to the data warehouse $1.2 million
- Leverage the Decision Support System from another state to base load the capabilities similar to what SDE did for K-12 SLDS. SDE's successful implementation of the K-12 DRS was based on using Nebraska's consultant to assist in installing the base solution. SDE had over an 80% match rate on fields, which made having the system operational in a very short time period reasonable.
- Evaluate other states decision reporting systems and determine a solution
- Decision Support System Consultant 500 hours @ $100 = $50,000
- Programmers – modify DRS to match fields 480 hours @ $75 = $36,000
- OSBE internal labor – 1,000 hours @ $50 = $50,000
- Business Intelligence software and licensing $100,000 to $500,000.
- Ongoing support costs:
    - Decision Support Expertise – 1 FTE for 1 year $104,000
    - Data Quality manager – 1 FTE for 1 year $104,000
    - Project Manager – 1 FTE for 1 year $104,000
    - DBA – 1 FTE for 1 year @74.80 $149,600
    - Server support - .25 FTE for 1 year $25,000

References

1. US Department of Education site visit draft report– August 2010
2. http://searchsecurity.techtarget.com/sDefinition/0,,sid14_gci1366036,00.html

SUBJECT

WWAMI Admissions Committee Appointments

REFERENCE

December 2-3, 2003	A schedule of rotating terms of membership was created to allow the medical community greater opportunities to be involved in this activity. The Board approved the three-year rotating terms for the WWAMI Admissions Committee.
June 13-14, 2007	Board approved increasing the committee to a four-member committee and appointed Dr. David Anderson, Dr. Peter Kozisek, Dr. Jennifer Garwick, and Dr. Mary Barinaga as Idaho members.

BACKGROUND/DISCUSSION

The Idaho WWAMI Admissions Committee consists of four physicians from Idaho who interview Idaho students interested in attending the University of Washington School of medicine. The members of the Idaho WWAMI Admissions Committee serve three-year terms which are renewable once for an additional three years. The terms of the members are staggered so there are always senior members on the Committee. Idaho physicians currently serving on the admissions committee are: Dr. David Anderson of Idaho Falls, Dr. Mary Barinaga of Boise (formerly of Plummer), Dr. Jennifer Garwick of Coeur d' Alene, and Dr. Pete Kozisek of Boise. See committee member terms and rotation schedule in Attachment 2.

Dr. Barinaga has accepted a new position as Assistant Dean for Regional Affairs & Idaho WWAMI Clinical Education Coordinator. As such, she will resign from her position on the committee after this year's admission interviews. Dr. Anderson's term ends June 2011. Due to Dr. Barinaga ending her term early, the staggering of committee members rotating off is impacted. As a result, in 2012 admission cycle, the last two 2nd term members will be fulfilling their third and final year as the two new committee members begin their 1st term/1st year. This means the Board will also need to appoint two new members to the admissions committee next year for the 2013 admissions cycle.

Announcements were made last fall for the two open positions with professional organizations (e.g. Idaho Medical Association, Idaho Academy of Family Physician, Idaho Hospital Association) and within medical staff newsletters among Idaho's hospitals. There were five physicians initially interested in these two positions. The Idaho Admissions Oversight Committee, which reviewed the applications and conducted interviews, consisted of the first-year Idaho WWAMI Director, the WWAMI Idaho Clinical Coordinator, Idaho State Board of Education's Chief Fiscal Officer, the Idaho Admissions Committee Chair, and a member of the Idaho Medical Association Committee on Medical Education

Affairs. The Idaho Admissions Oversight Committee took into consideration, among other things, the desire for a geographically diverse committee membership, and a goal of not having more than one subspecialist on the admissions committee.

The Committee has forwarded their recommendation to appoint Dr. Glenn E. Jefferson of Lewiston and Dr. Leanne M. Rousseau of Coeur d' Alene to the University of Washington School of Medicine Committee on Admissions.

IMPACT

A total of 80 Idaho students receive medical education through the WWAMI program each year.

ATTACHMENTS

STAFF COMMENTS AND RECOMMENDATIONS

Staff participated in the interviews of the admissions committee candidates and recommends their approval without reservation.

BOARD ACTION

I move to approve the appointment of Dr. Glenn Jefferson as an Idaho member of the WWAMI Admissions Committee for a term of three years effective July 1, 2011 – June 30, 2014.

Moved by _____ Seconded by _____ Carried Yes _____ No _____

I move to approve the appointment of Dr. Leanne Rousseau as an Idaho member of the WWAMI Admissions Committee for a term of two years effective July 1, 2011 – June 30, 2013.

Moved by _____ Seconded by _____ Carried Yes _____ No _____

December 20, 2010

Mike Rush, Ph.D.
Executive Director
Idaho State Board of Education
650 W. State Street
P.O. Box 83720
Boise, ID 83720-0037

Dear Dr. Rush,

The Idaho Admissions Nominating Committee, consisting of the first-year Idaho WWAMI Director, Idaho WWAMI Assistant Clinical Dean, Idaho Admissions Committee Chair, Idaho State Board of Education's Chief Fiscal Officer, and a member of the Idaho Medical Association Committee on Medical Education Affairs, have identified the following Idaho Physicians to serve on the Idaho Admissions Committee for the University of Washington School of Medicine for Entering Year 2012.

Dr. Leanne M. Rousseau is a family medicine physician from Post Falls who will be replacing me on the Idaho Admissions Committee. Her first term will begin July 2011 through June 2013.

Dr. Glenn E. Jefferson is a family medicine physician from Lewiston who will be replacing Dr. David Anderson on the Idaho Admissions Committee. His first term will begin July 2011 through June 2014.

Attached, for your review are the CV's for both candidates. Thank you for your serious consideration of these nominations and support of the Idaho Admissions Nominating Committee. Should you have any questions, please feel free to contact me.

Sincerely,

Mary E. Barinaga, M.D.

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Idaho WWAMI Admissions Committee
University of Washington School of Medicine

Overview

Idaho participates with the University of Washington School of Medicine WWAMI medical education program. WWAMI is a five state regional medical school which is made up Idaho of Washington, Wyoming, Alaska, Montana, and Idaho. Idaho has been a partner since 1971. Each state has an individual admissions committee which helps with the admissions process for the students from that state.

Students wishing to pursue an M.D. degree from Idaho apply for admission to the UWSOM. The admissions process involves submission of typical demographic and academic data and participation in an interview either in Seattle or Boise. An initial screen of applicants is designed to eliminate those most likely to have academic problems completing the required course work. This initial screen is done by faculty in Seattle. If an Idaho student is not offered an interview, the chair of the Idaho admissions committee will review the file and may decide to offer the student an interview.

The admissions process is designed to give significant weight to the interview in identifying which students will be admitted. The intent is that once a student has demonstrated that he/she is academically qualified for medical school, other factors beyond native intelligence are important in determining who will be the best doctor. Those personal traits include desire to serve others, ability to communicate, a sense of ethics, etc., and the interview is designed to evaluate these extra-academic personality factors. The University of Washington School of Medicine adopted a new mission statement that underscores the commitment to regional, rural, and underserved populations and their healthcare needs in the five-state WWAMI region. The Idaho WWAMI Admissions Committee has a major role in this mission.

Committee Structure and Responsibilities

The Idaho WWAMI Admissions Committee is composed of four physicians from Idaho. One member is the Chair of the committee and serves on the Executive Committee of the UWSOM Admissions Committee (EXCOM). Interviews occur one week in Boise and one week in Seattle. Committee members spend approximately twenty hours individually prior to each interview week reviewing the files of the applicants. The applications are filed electronically and are available for review at least 4-6 weeks prior to the scheduled interviews. The UWSOM provides lodging and round trip travel costs for all Idaho WWAMI Admission Committee members' home community to the interviewing site for all interview sessions. During interview sessions, days typically begin with a pre-interview discussion session beginning at 7:00 a.m. Individual interviews begin at 8:00 a.m. with three interviews in the morning and three interviews in the afternoon with the day finishing by 5 pm.

Principles

1. The interviewers must be practicing or retired physicians with experience in health care in Idaho.
2. Because the primary interaction is with the University of Idaho with the University of Washington School of Medicine to conduct the program, having some working knowledge of the University of Idaho WWAMI program, its faculty and organization, is helpful.
3. If interested and qualified applicants are available, it is suggested that no more than one of the members of the admissions committee be a non-primary care specialty physician.
4. If interested and qualified applicants are available, it is suggested that the members home towns be well distributed across Idaho.
5. The appointment/obligation is three years in length with the option to renew for a second three-year term.
6. Only in exceptional circumstances should the terms extend beyond those six years in order to provide opportunity for all physicians who are interested to participate as Admissions Committee members.
7. Terms will be staggered to maintain two of the four interviewers with experience.
8. Physicians chosen to become interviewers must be willing to accept the significant time commitment (5 days for each of two interview sessions during January-March) for everyone's attendance at the interview sessions is critical to the process.
9. Physicians chosen to become interviewers must be willing to accept the significant time commitment prior to interviewing to review the online applications.
10. The Idaho State Board of Education approves appointments and term limits.

Appointment Process

The actual process to replace retiring/resigning committee members is:

1. The Idaho WWAMI Admissions Committee is composed of four members. The most recent retiring member of the Idaho WWAMI Admissions Committee will serve as a substitute should one of the regular members be unable to attend a session.
2. Those four members are appointed to one staggered three-year term or possibly one two-year term in order to have a overlapping rotation. Although the term is three years, each retiring committee member has the option to serve a second three-year term.
3. The member of the committee with the most tenure will become the Idaho Chairperson who represents Idaho at the EXCOM committee and is responsible for much of the logistics of arranging interview sessions times and pre-interview review of academic records. This member may request fellow members to share this responsibility.

4. A committee made up of the first-year Idaho WWAMI Director, Assistant Clinical Dean, Idaho WWAMI, member of the Idaho Medical Association Committee on Medical Education Affairs, Chairman of the Idaho WWAMI Admissions Committee, and the State Board of Education Chief Academic Officer will be charged with reviewing all interested candidates. This committee will submit a rank list of candidates to the Chief Academic Officer of the State Board of Education for submission to the State Board of Education for approval. The list will indicate the remaining terms of the existing committee members.
5. The same process will be used to fill any vacancies that occur prior to the completion of a full term.

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Idaho WWAMI Admissions Committee
Membership Rotation Schedule

Interview E-2011			***Interview E-2012***			***Interview E-2013***		
Name	*Term*	*Year*	*Name*	*Term*	*Year*	*Name*	*Term*	*Year*
Anderson	**Final**	**Final**	Kozisek, ***Chair***	**Final**	**Final**	Rousseau	1st	3rd
Kozisek, **Chair**	2nd	2nd	Garwick	**Final**	**Final**	Jefferson	1st	2nd
Barinaga*	Final	1st	Rousseau	1st	2nd	New "A"	1st	1st
Garwick	2nd	2nd	Jefferson	1st	1st	New "B"	1st	1st

* Resigning effective June 30, 2011

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APPLICATION
~ Idaho Admissions Committee ~

University of Washington School of Medicine/WWAMI Program

Yes! I am interested in applying for an appointment to the Idaho WWAMI Admissions Committee for the University of Washington School of Medicine. I understand the position is for a 3-year term and that Committee duties will require a significant commitment of time, including one week in Boise and Seattle each during the January through March months to complete personal interviews with student applicants.

1. General Information

Name: Glenn E. Jefferson Specialty: Family Practice

Mailing Address: 2315 8th Str. Grade
Lewiston, Id 83501

Phone Number: 208 746-1383 Fax Number:

E-mail Address: gjefferson@valleymedicalcenter.com

2. Written Statement
Please provide a one-page written statement indicating why you are interested in serving on the Idaho Admissions Committee and how you believe you can contribute to the admissions process.

3. Return completed form and statement of interest by September 1, 2010
To: Idaho WWAMI Medical Education Program
322 E. Front Street, Suite 442B
Boise, ID 83702
Fax (208) 334-2344

Signature: Date: 8/18/10

First I would like to thank you for considering my application for this position on the nominating committee. Over the last five years I have seen the transition of the status of recruitment of Primary Care in the state go from a nonconcern to our CEO, to something that is almost unattainable. I have seen the future of primary care in our state go from the ideal end point of family practice training to something that may likely be done by Nurse Practitioners and Physician Assistants. I would like to be a part of altering this sea change in the practice of medicine in our state. The payment issues associated with some of these challenges is beyond this committee and me, but choosing candidates who have the dedication to the people of the state and the commitment to return is something that can be done here. I have been helping our community engage the mission of medical training presently by sponsoring residents and medical students to experience the Lewis-Clark valley medical community. We understand that exposure to the community is the best way to encourage young medical professionals to return to this community. Doing this on a state wide basis and succeeding would be gratifying.

As we see the growth of residencies in the state other than family practice , this should help increase the influx of medical professionals in these much needed specialties. We have all seen the statistics that the presence of residencies in a state is the best return on investment and the continuation of promoting them with the University of Washington will be crucial to the health of the medical community. Also continuing to work with the University of Washington to build our distributive model of medical training seems to be the most cost effective way to promote medicine in the state of Idaho, always a primary concern to the Legislature. I plan to continue to promote, through the Idaho Medical Association, the support for the WAMI program. I will also work for its expansion and for the expansion of present residency programs to make medical training in the state more self sustaining regardless of my selection or not to this committee

My involvement with the uninsured as well the Idaho Academy of Family Physicians and the Idaho Medical Association should give me a valuable perspective into the needs of our state in assisting this committee. .

CURRICULUM VITAE

Glenn E Jefferson MD

PERSONAL:

Date of Birth: 01/26/1953

Lynchburg, Virginia

Married: Ann Frost Jefferson

Children: twins, Sara Light and Laura Ann

Email: gjefferson@valleymedicalcenter.com

Home address: 1220 Alder Ave, Lewiston, Idaho 83501

Work Office:

Valley Medical Center, PLLC

2315 8th Str Grade

Lewiston, Idaho 83501

Telephone: 208 746-1383

Education:

M.D. Virginia Commonwealth University, Richmond, Virginia, 1979

B.S. Hampden-Sydney College 1975, Chemistry

POSTGRADUATE TRAINING

1979-1982 Malcolm Grow Medical Center, Residence Family Practice

EMPLOYMENT HISTORY

1982-1984 Staff Family Physician Mt. Home AFB

1984-1987 Staff Family Physician Ramstein AFB, West Germany

1987-2008 Family Physician Valley Medical Center

2008-Present Express Care Physician, Valley Medical Center

MEDICAL LICENSURES

Idaho M4593

BOARD CERTIFICATION

American Academy of Family Physicians, 1982-present

ELECTIONS-APPOINTMENTS

Chief of Staff, St Josephs Regional Medical Center 1999-2000

Board, Idaho Academy of Family Physicians, 1997-2001

President Idaho Academy of Family Physicians, 2001-2

District Two Trustee, Idaho Medical Association, 2001-2007

President, Idaho Medical Association, 2008-9

COMMUNITY SERVICE

Cofounder- Snake River Community Clinic, 2000

President- Snake River Community Clinic 2000-2009

APPLICATION
~ Idaho Admissions Committee ~

University of Washington School of Medicine/WWAMI Program

Yes! I am interested in applying for an appointment to the Idaho WWAMI Admissions Committee for the University of Washington School of Medicine. I understand the position is for a 3-year term and that Committee duties will require a significant commitment of time, including one week in Boise and Seattle each during the January through March months to complete personal interviews with student applicants.

1. General Information

Name: Leanne Marie Rousseau Specialty: Family Practice

Mailing Address: 12302 West Deer Ridge Rd
Post Falls, ID 83854

Phone Number: (208) 818-5166 Fax Number: (208) 777-9271

E-mail Address: rousseau.leanne@gmail.com

2. Written Statement

Please provide a one-page written statement indicating why you are interested in serving on the Idaho Admissions Committee and how you believe you can contribute to the admissions process.

3. Return completed form and statement of interest by September 1, 2010

To: Idaho WWAMI Medical Education Program
322 E. Front Street, Suite 442B
Boise, ID 83702
Fax (208) 334-2344

Signature: Leanne Rousseau Date: 9-1-2010

September 1, 2010

Dr. Suzanne Allen
Idaho WWAMI Clinical Medical Education Coordinator
322 E. Front Street, Suite 442B
Boise, ID 83702

Dear Dr. Allen and WWAMI committee,

I am interested in the opportunity available to serve on the Idaho WWAMI admissions committee. I have a long-standing interest in continuing to bring physicians back to our state to meet our health care needs and help alleviate our physician shortage.

While I realize there is some focused work involved in reviewing the applications and interviewing the students, I would find it interesting and exciting to work with the members of the committee and to meet the young people of our state who are interested in medicine.

My passion is primary care, and more particularly, meeting the needs of the under served. I also recognize the need for physicians across all specialties in our state to provide exceptional, state of the art health care. I helped to form our community health center in Kootenai County, the Dirne Community Health Center, but was a volunteer for the low income clinic prior to that for many years. I felt that when we became a CHC, that it was tremendously important maintain our network of volunteer specialists who would see our patients in their offices and provide discounted or free service. It is a very important adjunct to what we do as primary care physicians.

I believe I can dedicate the time and energy needed to be a contributing member of the committee, I enjoy meeting students and encouraging their interest in medicine, and I don't mind taking the time to travel to meetings. While I have not previously been involved with the WWAMI program, I am a graduate of the Wyoming-Utah contract program and aware of the important role these programs play in bringing physicians to our state. As medical director of the CHC, I worked to make educational opportunities available to WWAMI students and others interested in medical careers in the health center.

Thank you for your passion and service to medical education and for considering my application.

Sincerely,

Leanne Rousseau

Leanne Rousseau, MD

HEALTHWEAVE, PLLC
17302 West Deer Ridge Rd. Post Falls, ID 83854
Phone: 208-818-5166 fax:208-777-9271 email: arachnc.healthweave@gmail.com

Leanne Marie Rousseau, MD

17302 West Deer Ridge Rd. (208)773-0897
Post Falls, ID 83854 Email: rousseau.leanne@gmail.com

INTRODUCTION

Family Medicine, community health and preventive medicine are my life-long professional interests. I truly believe in the positive economic and social impact of promoting healthy lifestyles and caring for the acute, emergent and chronic health needs of all segments of the population.

EDUCATION

1972-1976	Riverton High School, Riverton, WY
1976-1978	B.S. Biology, Carroll College, Helena, MT
1978-1979	Washington University, St. Louis, MO
1979-1983	MD, University of Utah Medical School, Salt Lake City, UT
1983-1986	Family Practice Resident, University of Utah
1986-present	Ongoing continuing medical education, 50 credits per year minimum

EMPLOYMENT

2008-2010	New Hope Social services—contract physician for medication management and treatment plan oversight
2008-2010	After-hours clinic and Kootenai Urgent Care—urgent care physician
2002-2007	Medical Director and family medicine physician, Dirne Community Health Center 1106 Ironwood Dr. Coeur d'Alene, ID 83814
1991-2003	Volunteer family practice physician, Dirne Clinic
1992-2003	Family Practitioner, part-time acute care physician Group Health Cooperative: Riverfront Medical Center, Coeur d'Alene Health Care Center, and Veradale Health Care Center 322 West North River Drive. Spokane, WA 99201 (509) 324-6464
1987-1989	Family Practice Medical Consultant Southwest Wyoming Community Mental Health Center, Rock Springs, WY Cared for mental health patients, prescribing medications for mental health needs, referring for specialty care, and meeting acute care primary care needs
1987-1988	Part-time Family Practitioner, Private Practice Rock Springs; WY, Castle Rock Medical Center, Green River, WY; and Family Practice Center, Riverton, WY

MEDICAL LICENSES

1986 Wyoming, current 3891A
1990 Idaho, current M-6045
1995 Washington, current MD00031119
DEA, current

CERTIFICATION

1984 National Board of Medical Examiners
1987, 1994, 2001, 2008 American Board of Family Medicine

PROFESSIONAL SOCIETIES

American Academy of Family Practice
Idaho Academy of Family Practice
Delegate to Idaho Medical Association

OTHER

Member of Region I Mental Health Board of Directors 2006-present

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