

Program Report for the Preparation of Health Educators American Alliance for Health, Physical Education, Recreation, & Dance/American Association for Health Education (AAHPERD/AAHE) (2008 Standards)

This form includes the 2008 AAHE standards. Programs submitting reports Fall 2010 can choose to respond to either the 2001 standards or the 2008 standards. Beginning in Spring 2011 all programs will be required to use the 2008 standards. NATIONAL COUNCIL FOR ACCREDITATION OF TEACHER EDUCATION

COVER SHEET

1. Institution Name

Rhode Island College

2. State

Rhode Island

3. Date submitted

MM DD YYYY

09 / 15 / 2010

4. Report Preparer's Information:

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6. Name of institution's program

Health Education

7. NCATE Category

Health Education

8. Grade levels⁽¹⁾ for which candidates are being prepared

P-12

(1) e.g. K-6, K-12

9. Program Type

- Advanced Teaching
- First Teaching License
- Other School Personnel
- Unspecified

10. Degree or award level

- Baccalaureate
- Post Baccalaureate
- Master's
- Post Master's
- Specialist or C.A.S.
- Doctorate
- Endorsement only

11. Is this program offered at more than one site?

- Yes
- No

12. If your answer is "yes" to above question, list the sites at which the program is offered

13. Title of the state license for which candidates are prepared

Initial Certification P-12 in Special Subjects: Health

14. Program report status:

- Initial Review
- Response to One of the Following Decisions: Further Development Required or Recognition with Probation
- Response to National Recognition With Conditions

15. State Licensure requirement for national recognition:

NCATE requires 80% of the program completers who have taken the test to pass the applicable state licensure test for the content field, if the state has a testing requirement. Test information and data must be reported in Section III. Does your state require such a test?

- Yes
- No

SECTION I - CONTEXT

1. Description of any state or institutional policies that may influence the application of AAHPERD/AAHE standards. (Response limited to 4,000 characters)

The Feinstein School of Education and Human Development (FSEHD), within Rhode Island College (RIC), prepare education and human service professionals with the knowledge, skills, and dispositions to promote candidate learning and development. Building on extensive field experiences, the School develops reflective practitioners who model lifelong learning, technological competence, cultural competence, social advocacy and collaboration.

The Department of Health and Physical Education is committed to the same mission. Candidates must maintain a minimum grade of B- in all program and professional courses required in the major. A cumulative GPA of 2.5 is needed to be admitted to the FSEHD and must be maintained in order to student teach. Candidates are required to take 33 credit hours of program courses. Professional courses consist of another 34 credit hours including: Educational Psychology, Schooling in a Democratic Society and Adaption of Instruction for Inclusive Education. Early in the course work, candidates have the opportunity to get out into the classroom to observe and begin teaching lessons before reaching the final stage of student teaching. During a practicum course (pre-student teaching) each candidate teaches six lessons at the elementary level and six lessons at the secondary level. Faculty observes the candidates, once at each level, providing valuable one on one post teaching conferencing.

Prior to student teaching candidates are required to obtain 16 "Professional Development Points" in at least four out of six areas. The areas include: (1) membership in a state, district and/or national professional Health Education organization, (2) attend and / or participate in a state, district and/or national professional Health Education convention, (3) attend local professional workshops or presentations on a variety of topics, (4) work with health relating voluntary organizations, (5) assist a faculty member with research or teaching, and (6) other hands-on activities as per consent of the faculty advisor. Many of our candidates attend a national convention every year and become immersed in health issues specific to Rhode Island.

The FSEHD is accredited by both NCATE and the Rhode Island Department of Education. Each course syllabus outcomes and assessments are aligned with AAHE Standards, Rhode Island Professional Teaching Standards and the FSEHD Conceptual Framework (PAR – Plan, Act, and Reflect) which links knowledge, pedagogy, professionalism and diversity. A disposition reference review is completed by various faculty and cooperating teachers on each candidate prior of admission to the FSEHD, prior to

student teaching and during student teaching. The FSEHD has developed a “Cultural Competency Assessment,” as part of the Rhode Island Teacher Education Renewal (RITER) grants diversity initiative. The assessment is designed to assess whether a candidate is able to incorporate cultural competent teaching practices in his or her teaching experiences. The assessment will be used in practicum and student teaching, given the candidate opportunities to show development of cultural competence.

As part of the FSEHD admission portfolio, candidates are required to pass the Praxis I Pre-Professional Skills Tests (PPST©). The minimum scores for admission to the FSEHD were 170 for 2009-2010. The minimum scores will increase to 175 for math and reading and 173 for writing for 2010-2011; and reach the highest in the nation for 2011-2012 with scores of 179 for math and reading and 177 for writing. The Praxis II, Principles of Learning and Teaching (PLT) exam is required for Rhode Island State licensure. As our candidates will be certified K – 12, they are required to pass the PLT: Grades K – 6 or Grades 7 – 12 with a score of 167 or better before student teaching. The score of 167 is one of the highest scores in the country.

2. Description of the field and clinical experiences required for the program, including the number of hours for early field experiences and the number of hours/weeks for student teaching or internships. (Response limited to 8,000 characters)

The Health Education program at Rhode Island College provides a rich field based curriculum. The candidates in the Health Education program at complete several field experiences prior to their capstone student teaching experience. The expectations for candidates increase developmentally from early field experiences to the student teaching semester. Content courses support field experiences. The program reflects the Conceptual Framework centered on Planning, Action, and Reflection. The field experiences include self-reflection, review by clinical instructors, and by the professors of record.

Prior to advancing to the professional sequence of courses students must take FNED 346: “Schooling in a Democratic Society” and pass the course with a minimum grade of B- in order to be considered for entry into the Feinstein School. As part of this experience students have a pre-professional experience spending 25 to 30 hours working with children. The primary aim of the pre-professional experience is for teacher candidates to develop an understanding of working with adolescent learners, and the application of behavioral, developmental, and motivational strategies and theories addressed in the Foundations course. Candidates must receive a positive recommendation from the supervisor.

Admission into the Feinstein School of Education and Human Development most often occurs by the beginning of candidates’ junior year. By this time, candidates have a solid foundation of content knowledge and begin to explore the science of health teaching. Candidates take CEP 315: “Educational Psychology” in tandem with their first course in the sequence, HED 300: Concepts of Teaching in Health Education. During this semester, candidates spend more time in the field shadowing a professional health education teacher for up to 15 hours. In addition to the shadow experience, candidates complete at least three classroom observations. During both experiences, candidates complete written reflections on the experiences and make connections to classroom content and readings from the text.

Candidates begin their clinical experience in HED 418: Practicum in Health Education. During this experience, candidates participate in an elementary and a secondary field placement. They work closely with a cooperating teacher to plan, implement, and evaluate an instructional unit spanning at least six teaching experiences at each site. Prior to and throughout the practicum experience, candidates spend time observing health education teaching, student behaviors and interactions within the learning environment. In total, the candidates spend 3-4 weeks at each practicum field placement or approximately 60 -70 hours in an Elementary and Secondary School setting. Throughout the field placement, candidates are required to write reflections on the experiences and engage in thorough self-evaluation. During this course, cooperating teachers and the college professor evaluate the candidates. Many health education candidates also choose to major in physical education. Candidates who select the

double major program sequence participate in at least two additional practica in physical education. These practica, while devoted to development of physical education teaching, provide additional rich opportunities to interact with K-12 students and enhance skills related to general pedagogy ranging from classroom management, questioning skills, lesson planning, and assessment of student learning. To ensure that candidates are well prepared in the theoretical aspects of teaching they are required to pass the Praxis II Principles of Learning and Teaching with a score of 167 prior to entry into HED 428: Student Teaching in Health Education. Further, all candidates must maintain a minimum 2.5 cumulative GPA and engage in professional development offerings to remain in good standing in the program. The capstone experience for teacher candidates is HED 428: “Student Teaching in Health Education” where students spend 14 weeks (490 contact hours) teaching in a health education classroom. Candidates spend 7 weeks at 2 different placements, a middle school and a high school setting. Students who select the double major option complete 7 weeks of student teaching in health education and 7 weeks in physical education. During this experience, candidates prepare units and lessons aligned to the AAHE standards. All candidates enroll in HED 427 “Health Education Seminar.” During this semester the teacher candidates apply the knowledge, skills, and dispositions they have been developing through study in the Health Education Program. It is at this point that candidates are assessed on their ability to teach health over a sustained period of time. The candidates are evaluated on their ability to effectively plan, teach, and reflect on the experiences leading to becoming professional health educators. All cooperating teachers (clinical instructors) are certified and highly qualified. A college supervisor works with the candidates and cooperating teachers throughout the semester. Rhode Island College is located in Providence Rhode Island and all candidates are placed in public schools located in urban, urban ring, or suburban settings. These settings are diverse in regard to: socio economic status, special needs, racial, ethnic and religious backgrounds, and new immigrant cultures. Health education faculty work closely with the Feinstein School Office of Partnerships and Placements to arrange candidate field placements. All contacts with the schools, teachers, and supervisors are made through this office. The Health Education program works only with highly qualified certified cooperating teachers (clinical instructors) who have participated in departmental training. This training helps to clarify the responsibilities of the cooperating teacher and inform them of current advances in the profession. Additionally, to ensure high standards, cooperating teachers are now required to receive professional development training through the Office of Partnerships and Placements.

3. Please attach files to describe a program of study that outlines the courses and experiences required for candidates to complete the program. The program of study must include course titles. (This information may be provided as an attachment from the college catalog or as a student advisement sheet.)

Program of Study RIC HED	Status Report for Students Majoring in HED and PED
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See **Attachments** panel below.

4. This system will not permit you to include tables or graphics in text fields. Therefore any tables or charts must be attached as files here. The title of the file should clearly indicate the content of the file. Word documents, pdf files, and other commonly used file formats are acceptable.

5. Candidate Information

Directions: Provide three years of data on candidates enrolled in the program and completing the program, beginning with the most recent academic year for which numbers have been tabulated. Report the data separately for the levels/tracks (e.g., baccalaureate, post-baccalaureate, alternate routes, master's, doctorate) being addressed in this report. Data must also be reported separately for programs offered at multiple sites. Update academic years (column 1) as appropriate for your

data span. Create additional tables as necessary.

Program: Bachelor of Science Degree in Health Education		
Academic Year	# of Candidates Enrolled in the Program	# of Program Completers ⁽²⁾
2009-2010	15	12
2008-2009	16	13
2007-2008	19	17

(2) NCATE uses the Title II definition for program completers. Program completers are persons who have met all the requirements of a state-approved teacher preparation program. Program completers include all those who are documented as having met such requirements. Documentation may take the form of a degree, institutional certificate, program credential, transcript, or other written proof of having met the program's requirements.

6. Faculty Information

Directions: Complete the following information for each faculty member responsible for professional coursework, clinical supervision, or administration in this program.

Faculty Member Name	Ainley, Kenneth
Highest Degree, Field, & University ⁽³⁾	HSD, Health and Safety Sciences, Indiana University, 1971
Assignment: Indicate the role of the faculty member ⁽⁴⁾	Health Education Faculty Coordinator of Graduate Program in Health Education
Faculty Rank ⁽⁵⁾	Associate Professor
Tenure Track	<input checked="" type="checkbox"/> YES
Scholarship ⁽⁶⁾ , Leadership in Professional Associations, and Service ⁽⁷⁾ : List up to 3 major contributions in the past 3 years ⁽⁸⁾	Adams, A. and Ainley, K. (2010). The epidemiology of adolescent obesity. Yolen, M. J. and Ainley, K. (2010). The evaluation of a school based health education program. Principles of Health Assessment (2008). Course Text. Basic Principles of Epidemiology and Biostatistics (2009). Course Text.
Teaching or other professional experience in P-12 schools ⁽⁹⁾	Coordinate partnership between RIC teacher candidates and public school administration regarding the role evaluation plays for students and faculty.

Faculty Member Name	Berard-Reed, Karen
Highest Degree, Field, & University ⁽³⁾	Ph.D. in Education, RIC/URI Joint Program in Education, expected completion date 2011 M.Ed. in Elementary Education, Rhode Island College
Assignment: Indicate the role of the faculty member ⁽⁴⁾	Health Education Faculty Health Education Undergraduate Program Coordinator
Faculty Rank ⁽⁵⁾	Assistant Professor
Tenure Track	<input checked="" type="checkbox"/> YES
Scholarship ⁽⁶⁾ , Leadership in Professional Associations, and Service ⁽⁷⁾ : List up to 3 major contributions in the past 3 years ⁽⁸⁾	Presenter: Health Education in the Real World , Providence, RI, August 2009 Presenter: Using Music to Tap into the Affective Domain in Health Education Eastern District Association of the American Alliance for Health, Physical Education, Recreation, and Dance, Rye Brook, NY, February 2010 Presenter: Utilizing Literature in the Health Education Classroom, AAHPERD National Convention, Indianapolis, IN March 2010
Teaching or other	HED 418 Practicum in Health Education Instructor and Supervisor Massachusetts

professional experience in P-12 schools ⁽⁹⁾	K-12 Health Education License 1993-1998 Health Education Teacher K-12, North Attleboro, MA 1998-2002 Health Education Teacher 7-12, Westboro, MA
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Faculty Member Name	Clark, Susan
Highest Degree, Field, & University ⁽³⁾	EdD, Educational Leadership, Argosy University
Assignment: Indicate the role of the faculty member ⁽⁴⁾	Health Education Faculty
Faculty Rank ⁽⁵⁾	Assistant Professor
Tenure Track	<input checked="" type="checkbox"/> YES
Scholarship ⁽⁶⁾ , Leadership in Professional Associations, and Service ⁽⁷⁾ : List up to 3 major contributions in the past 3 years ⁽⁸⁾	Clark, S. (2010). Teaching About depression and suicide gracefully and meaningfully. Presentation at National AAHPERD Conference, Indianapolis, Indiana Clark, S. and Berard-Reed, K. (2010). Utilizing children's literature in the health education classroom. Presentation at the National AAHPERD Conference, Indianapolis, Indiana Clark, S. (2010). Stress management strategies your students will love and remember. Presentation at the EDA of AAHPERD Conference, Rye, NY
Teaching or other professional experience in P-12 schools ⁽⁹⁾	HED 427 - Student Teaching: Instructor and Supervisor K-12 HED 418 - Practicum: Instructor and Supervisor K-12 K-12 Health Education License - State of Massachusetts

Faculty Member Name	Rauhe, Betty
Highest Degree, Field, & University ⁽³⁾	H.S.D. Doctorate in Health and Safety, Indiana University, 1992
Assignment: Indicate the role of the faculty member ⁽⁴⁾	Chair - Department of Health and Physical Education Health Education Faculty - Undergraduate and Graduate
Faculty Rank ⁽⁵⁾	Associate Professor
Tenure Track	<input checked="" type="checkbox"/> YES
Scholarship ⁽⁶⁾ , Leadership in Professional Associations, and Service ⁽⁷⁾ : List up to 3 major contributions in the past 3 years ⁽⁸⁾	2007 to present. Reviewer for Preparing to Teach Portfolios and Exit Portfolios 2009 AAHPERD National Convention presentation "Where Do You Stand?" 2007-2008 Project RITER on Diversity participant: Assessing cultural competence in teacher candidates
Teaching or other professional experience in P-12 schools ⁽⁹⁾	K-12 Teaching Certification in Health Education Practicum supervision for HED 418: Practicum in Health Education

Faculty Member Name	Reilly-Chammat, Rosemary
Highest Degree, Field, & University ⁽³⁾	Ed.D in Education Leadership from Johnson and Wales University
Assignment: Indicate the role of the faculty member ⁽⁴⁾	Community Health Education Adjunct Faculty
Faculty Rank ⁽⁵⁾	Adjunct Professor
Tenure Track	<input type="checkbox"/> YES
Scholarship ⁽⁶⁾ , Leadership in	Health Practices and Self Efficacy of Principals: Implications for Policy and Practice, with Ralph Jasparro, Ph.D., paper accepted for presentation at the American Education Research Association Annual Meeting San Diego, CA, April

Professional Associations, and Service ⁽⁷⁾ :List up to 3 major contributions in the past 3 years ⁽⁸⁾	2009. Youth Development as a Framework for Health Promotion in Afterschool Programming, with Margaret Sabatini, Ed.D, abstract accepted for presentation at the 2008 Statewide Afterschool Conference: Investing in Children and Youth: Building Our Future, Providence, RI, October, 2008. Health Practices and Self-Efficacy of Rhode Island Secondary School Principals, with Ralph Jasparro, Ph.D., paper accepted for presentation at the Northeastern Educational Research Association Conference, Hartford, CT, October, 2008.
Teaching or other professional experience in P-12 schools ⁽⁹⁾	Lead RI Dept of Health efforts in adolescent health priority areas including strategic planning, medical home, mental and behavioral health resource center for schools in partnership with the RI Public Health Institute, full service community school endeavors, and coordinate an intradepartmental workgroup researching solutions to the increase in STD rates among adolescents and teenage pregnancy prevention. Lead RI Department of Health, department wide efforts to coordinate policies and programs to enhance the health of school aged children. Key liaison with RI Department of Education and Centers for Disease Control and Prevention (CDC) cooperative agreement to plan, implement, monitor, and evaluate the development of Comprehensive School Health Programs (CSHP) to address health risk of at risk youth and communities of color. Chair the thrive strategic planning process; provide technical assistance and direction for developing state and local infrastructure to support school he

Faculty Member Name	Vastis, Andrea
Highest Degree, Field, & University ⁽³⁾	Ph.D. in Education, RIC/URI Joint Program in Education, expected completion date 2012 Master of Public Health, 1999, Boston University
Assignment: Indicate the role of the faculty member ⁽⁴⁾	Health Education Faculty Undergraduate Program Coordinator Community Health
Faculty Rank ⁽⁵⁾	Assistant Professor
Tenure Track	<input checked="" type="checkbox"/> YES
Scholarship ⁽⁶⁾ , Leadership in Professional Associations, and Service ⁽⁷⁾ :List up to 3 major contributions in the past 3 years ⁽⁸⁾	Presenter: Health Education in the Real World , Providence, RI, August 2009 Past President, New England Chapter, Society for Public Health Education, collaborate with other local agencies to provide CHES (Certified Health Education Specialist) continuing education credits to area health educators Grant Reviewer for RI Department of Health HIV/AIDS program and for March of Dimes/RI Chapter.
Teaching or other professional experience in P-12 schools ⁽⁹⁾	HED 418 Practicum Supervision K-12 Public Health Promotion Specialist, 1996-2000,RI Department of Health, funded by Centers for Disease Control and Prevention to work on Coordinated School Health Programs (RI Health Education Framework and Outcomes; RI Physical Education Standards)

(3) e.g., PhD in Curriculum & Instruction, University of Nebraska.

(4) e.g., faculty, clinical supervisor, department chair, administrator

(5) e.g., professor, associate professor, assistant professor, adjunct professor, instructor

(6) Scholarship is defined by NCATE as systematic inquiry into the areas related to teaching, learning, and the education of teachers and other school personnel.

Scholarship includes traditional research and publication as well as the rigorous and systematic study of pedagogy, and the application of current research findings in new settings. Scholarship further presupposes submission of one's work for professional review and evaluation.

(7) Service includes faculty contributions to college or university activities, schools, communities, and professional associations in ways that are consistent with the institution and unit's mission.

(8) e.g., officer of a state or national association, article published in a specific journal, and an evaluation of a local school program.

(9) Briefly describe the nature of recent experience in P-12 schools (e.g. clinical supervision, inservice training, teaching in a PDS) indicating the discipline and grade level of the assignment(s). List current P-12 licensure or certification(s) held, if any.

SECTION II - LIST OF ASSESSMENTS

1. In this section, list the 6-8 assessments that are being submitted as evidence for meeting the AAHPERD/AAHE standards. All programs must provide a minimum of six assessments. If your state does not require a state licensure test in the content area, you must substitute an assessment that documents candidate attainment of content knowledge in #1 below. For each assessment, indicate the type or form of the assessment and when it is administered in the program. (Response limited to 250 characters each field)

Type and Number of Assessment	Name of Assessment (10)	Type or Form of Assessment (11)	When the Assessment Is Administered (12)
Assessment #1: Licensure assessment, or other content-based assessment (required) (13)	Praxis II	Standardized Test	Mid-program (prior to student teaching)
Assessment #2: Content knowledge in health education (required)	Grades from courses: Principles of Health Education (HED 202), Concepts of Teaching (HED 300), Community Health (HED 303), Assessment in Health and Physical Education (HED 325 or PED 410), O and A of School Health Education Pr	Course grades	Continuous from Principles of Health Education (HED 202), Concepts of Teaching (HED 300), Community Health (HED 303), Assessment in Health and Physical Education (HED 325), O and A of School Health Education Programs (HED 404)
Assessment #3: Candidate ability to plan instruction (required)	Unit Plan from HED 418 – Practicum in Health Education	Unit Plan	Mid program prior to student teaching
Assessment #4: Student teaching (required)	Teacher Candidate Observation and Progress Report Final Evaluation	Observation	End of program
Assessment #5: Candidate effect on student learning (required)	Pre-post test results from Exit Portfolio	Pre-post unit test	End of program during student teaching experience
Assessment #6: Additional assessment that addresses AAHPERD/AAHE standards (required)	Evaluation in Health Education (HED 325) to address Standard IV	Project	Mid-program
		Project	Continuous from HED 404

Assessment #7: Additional assessment that addresses AAHPERD/AAHE standards (optional)	Organization and Administration of School Health Education Programs (HED 404) project to address Standard V – Coordination		
Assessment #8: Additional assessment that addresses AAHPERD/AAHE standards (optional)	HED 303 Community Health data project to address Standards I - Assess and VII – Communicate	Project	Mid-Program

(10) Identify assessment by title used in the program; refer to Section IV for further information on appropriate assessment to include.

(11) Identify the type of assessment (e.g., essay, case study, project, comprehensive exam, reflection, state licensure test, portfolio).

(12) Indicate the point in the program when the assessment is administered (e.g., admission to the program, admission to student teaching/internship, required courses [specify course title and numbers], or completion of the program).

(13) Identify the type of assessment (e.g., essay, case study, project, comprehensive exam reflection, state licensure test, portfolio).

SECTION III - RELATIONSHIP OF ASSESSMENT TO STANDARDS

1. For each AAHPERD/AAHE standard on the chart below, identify the assessment(s) in Section II that address the standard. Any one assessment may apply to multiple AAHPERD/AAHE standards.

	#1	#2	#3	#4	#5	#6	#7	#8
1. Content Knowledge: Candidates demonstrate the knowledge and skills of a health literate educator.	b	b	e	e	e	e	e	e
2. Needs Assessment: Candidates assess needs to determine priorities for school health education.	b	b	b	b	b	e	b	b
3. Planning: Candidates plan effective comprehensive school health education curricula and programs.	b	b	b	b	e	e	b	e
4. Implementation: Candidates implement health education instruction.	e	b	b	b	e	e	b	e
5. Assessment: Candidates assess student learning.	b	b	b	b	b	b	b	e
6. Administration and Coordination. Candidates plan and coordinate a school health education program.	b	b	b	b	e	e	b	e
7. Being a Resource. Candidates serve as a resource person in health education	b	b	b	b	e	e	b	e
8. Communication and Advocacy. Candidates communicate and advocate for health and school health education.	b	b	b	b	e	e	b	b

SECTION IV - EVIDENCE FOR MEETING STANDARDS

DIRECTIONS: The 6-8 key assessments listed in Section II must be documented and discussed in

Section IV. Taken as a whole, the assessments must demonstrate candidate mastery of the SPA standards. The key assessments should be required of all candidates. Assessments and scoring guides and data charts should be aligned with the SPA standards. This means that the concepts in the SPA standards should be apparent in the assessments and in the scoring guides to the same depth, breadth, and specificity as in the SPA standards. Data tables should also be aligned with the SPA standards. The data should be presented, in general, at the same level it is collected. For example, if a rubric collects data on 10 elements [each relating to specific SPA standard(s)], then the data chart should report the data on each of the elements rather than reporting a cumulative score..

In the description of each assessment below, the SPA has identified potential assessments that would be appropriate. Assessments have been organized into the following three areas to be aligned with the elements in NCATE's unit standard 1:

- Content knowledge (Assessments 1 and 2)
- Pedagogical and professional knowledge, skills and dispositions (Assessments 3 and 4)
- Focus on student learning (Assessment 5)

Note that in some disciplines, content knowledge may include or be inextricable from professional knowledge. If this is the case, assessments that combine content and professional knowledge may be considered "content knowledge" assessments for the purpose of this report.

For each assessment, the compiler should prepare one document that includes the following items:

(1) A two-page narrative that includes the following:

- a. A brief description of the assessment and its use in the program (one sentence may be sufficient);
 - b. A description of how this assessment specifically aligns with the standards it is cited for in Section III. Cite SPA standards by number, title, and/or standard wording.
 - c. A brief analysis of the data findings;
 - d. An interpretation of how that data provides evidence for meeting standards, indicating the specific SPA standards by number, title, and/or standard wording;
- and

(2) Assessment Documentation

- e. The assessment tool itself or a rich description of the assessment (often the directions given to candidates);
- f. The scoring guide for the assessment; and
- g. Charts that provide candidate data derived from the assessment.

The responses for e, f, and g (above) should be limited to the equivalent of five text pages each, however in some cases assessment instruments or scoring guides may go beyond five pages.

Note: As much as possible, combine all of the files for one assessment into a single file. That is, create one file for Assessment #4 that includes the two-page narrative (items a – d above), the assessment itself (item e above), the scoring guide (item f above), and the data chart (item g above). Each attachment should be no larger than 2 mb. Do not include candidate work or syllabi. There is a limit of 20 attachments for the entire report so it is crucial that you combine files as much as possible.

1. CONTENT KNOWLEDGE. Data from licensure tests or professional examinations of content knowledge. AAHPERD/AAHE standards addressed in this assessment could include but are not limited to Standards 1 and 2. If your state does not require licensure tests or professional examinations in the

content area, another assessment must be presented to document candidate attainment of content knowledge.

Provide assessment information as outlined in the directions for Section IV.

RIC HED Assessment 1

See **Attachments** panel below.

2. CONTENT KNOWLEDGE Assessment of content knowledge in the language to be taught. AAHPERD/AAHE standards addressed in this assessment could include but are not limited to Standards 1 and 2. Examples of assessments include comprehensive examinations; written interpersonal/presentational tasks; capstone projects or research reports addressing cross-disciplinary content; philosophy of teaching statement that addresses the role of culture, literature, and cross-disciplinary content; and other portfolio tasks.

Provide assessment information as outlined in the directions for Section IV.

Status Report and Program Requirements.doc	RIC HED Assessment #2
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See **Attachments** panel below.

3. PEDAGOGICAL AND PROFESSIONAL KNOWLEDGE, SKILLS, AND DISPOSITIONS. Assessment that demonstrates candidates can effectively plan classroom-based instruction. AAHPERD/AAHE standards that could be addressed in this assessment include but are not limited to Standards 3, 4, and 5. Examples of assessments include the evaluation of candidates' abilities to develop lesson or unit plans, individualized educational plans, needs assessments, or intervention plans

RIC HED Assessment #3

See **Attachments** panel below.

4. PEDAGOGICAL AND PROFESSIONAL KNOWLEDGE, SKILLS, AND DISPOSITIONS. Assessment that demonstrates candidates' knowledge, skills, and dispositions are applied effectively in practice. AAHPERD/AAHE standards that could be addressed in this assessment include but are not limited to Standards 3, 4, 5, and 6. The appropriate assessment is the evaluation of student teaching, the internship other clinical experiences. The assessment instrument used in student teaching or the internship should be submitted.

Provide assessment information as outlined in the directions for Section IV.

Student Teacher Evaluation Rubric	Observation Report
Student Teacher Evaluation Tool	RIC HED Assessment #4

See **Attachments** panel below.

5. EFFECTS ON STUDENT LEARNING. Assessment that demonstrates candidate effects on student learning. AAHE standards that could be addressed in this assessment include but are not limited

to Standards 3,4 and 5. Examples of assessments include those based on student work samples, portfolio tasks, case studies, follow-up studies, and employer surveys.

Provide assessment information as outlined in the directions for Section IV.

RIC HED Assessment #5

See **Attachments** panel below.

6. Additional assessment that addresses AAHPERD/AAHE standards. Examples of assessments include evaluations of field experiences, case studies, portfolio tasks, licensure tests not reported in #1, and follow-up studies. (Answer Required)

Provide assessment information as outlined in the directions for Section IV

RIC HED Assessment 6.doc

See **Attachments** panel below.

7. Additional assessment that addresses AAHPERD/AAHE standards. Examples of assessments include evaluations of field experiences, case studies, portfolio tasks, licensure tests not reported in #1, and follow-up studies.

Provide assessment information as outlined in the directions for Section IV

RIC HED Assessment 7 to Address Standard V

See **Attachments** panel below.

8. Additional assessment that addresses AAHPERD/AAHE standards. Examples of assessments include evaluations of field experiences, case studies, portfolio tasks, licensure tests not reported in #1, and follow-up studies.

Provide assessment information as outlined in the directions for Section IV

RIC HED Assessment 8 to Address Standards I and VII

See **Attachments** panel below.

SECTION V - USE OF ASSESSMENT RESULTS TO IMPROVE PROGRAM

1. Evidence must be presented in this section that assessment results have been analyzed and have been or will be used to improve candidate performance and strengthen the program. This description should not link improvements to individual assessments but, rather, it should summarize principal findings from the evidence, the faculty's interpretation of those findings, and changes made in (or planned for) the program as a result. Describe the steps program faculty has taken to use information from assessments for improvement of both candidate performance and

the program. This information should be organized around (1) content knowledge, (2) professional and pedagogical knowledge, skill, and dispositions, and (3) student learning.

(Response limited to 12,000 characters)

Content Knowledge:

RIC HED looked at content as the discipline and professional preparation of the health educator – in alignment with the AAHE standards. When assessing the content of health education that meant to us, “do our candidates know how to assess, plan, implement, etc”? We felt courses that assist candidates in developing those skills were most valid in assessing them as future health educators. However, we understand “content” is a term also used to describe areas of health study, such as nutrition, human sexuality, etc. Our Cooperating Teachers speak of “content” in reference to the Content Areas of Health Education, such as drug and alcohol, nutrition, etc. Based on feedback from Cooperating Teachers, RIC candidates need to demonstrate greater competency in health content. Our candidates are required to earn at least a B- in all HED courses, and we believe this to be fair. Our students are required to take courses in content areas of drugs, human sexuality, stress management, nutrition, personal health, and CPR/First Aid. These content areas coincide with the curricular needs of school districts in Rhode Island and the health concerns of the Centers for Disease Control and Prevention. So in many ways our students are prepared, however a few improvements should be made. Although students must earn at least a B- in all program courses, and must maintain at least a 2.5 overall GPA, the content courses are often taken very early on in the program. For example, at least two courses are commonly taken in the first year, even before formal admittance into the program, and well before student teaching. When they arrive at student teaching, the content is not fresh in their minds. It would benefit the student to take the Praxis II Test in Health Education content prior to student teaching to ensure they are “content” ready, and to instill in them that they will be held accountable for course content they may have had their first semester or anytime in the program. We will pilot test this in the upcoming year and determine a passing score. Candidates often close the door on a course once they earn the grade. Candidates also show weakness in completing literature searches and interpreting data, skills necessary to gathering and teaching health information. Both are skills essential in learning recent content research. Faculty will emphasize the importance of both keeping current in health education content, and facilitate assessment of information search and interpretation throughout the program. Faculty will also provide feedback to candidates throughout courses to help improve learning of content knowledge. HED courses will be adjusted accordingly to ensure complete and timely preparation. On an additional note, the tool used by candidates to evaluate courses is currently being revised by the Feinstein School of Education and Human Development (FSEHD) Assessment Committee. This is long overdue. Hopefully the new tool will provide useful data to assist in course and program improvements.

Professional and Pedagogical Knowledge, Skill, and Dispositions:

In the last few years we have noticed students struggling in a couple areas. One area of particular challenge was writing meaningful unit and lesson plans that included accurate alignment of standards, objectives and assessment, as well as utilization of state and national outcomes. Candidates simply were not provided with enough opportunity in the program to develop the knowledge and skills in planning. This was evident in their practicum HED 418 as they were underprepared to teach effectively and confidently without the basis of good planning. HED 418 is a course that is fifty-percent classroom teaching for the first time, and fifty-percent pedagogy. It was impossible to fully prepare candidates in this manner. Faculty found themselves giving candidates multiple opportunities for revisions of work in HED 418 in order to earn the B-. This was not an effective method. We have now implemented HED 417: Advanced Issues in Health Education. Candidates in 2009-2010 took the course for the first time. This is now a required course. The course includes opportunities for candidates to practice planning to the degree we hope to see them more successful in HED 418 and also in student teaching. Students will now enroll in HED 300: Concepts of Teaching, HED 417 and HED 418. Included in these pedagogical courses are opportunities for candidates to better develop their planning, implementation and assessment

skills.

Candidates also are challenged as to how to make lesson plans age-appropriate and inclusive of all learners. Exploration of a possible additional required course in child development and learning (in addition to CEP 315) may be warranted. Candidates often struggle to know and understand their students as learners. Candidates need more training in how students learn, and the possibilities and parameters of teaching a particular grade level. Candidates seem underprepared in their knowledge of what their students know and how they learn therefore constructing appropriate lesson plans is difficult.

On a very positive note, the FSEHD continues to focus on valid and detailed assessment for all programs in the Unit. They have implemented several useful tools. All programs are required to use a newly constructed Student Teaching Observation Report. This is completed by the Cooperating Teacher and the College Supervisor several times for each candidate during student teaching. This document aligns well with AAHE standards and is attached in this report. Data will be helpful in program improvements and candidate preparation. Additionally, all Unit candidates are now required to complete a Teacher Candidate Work Sample during student teaching. This document will replace program unit plans in exit portfolios, and is a comprehensive and useful assessment tool. All programs will also implement usage of a Teacher Candidate "Mini" Work Sample. Candidates must demonstrate competency prior to student teaching. There will also be a new Professional Dispositions rubric, useful before and during student teaching. These tools allow for continuity in program preparation and assessment. With several new tools being adopted, HED faculty will look very closely at all program courses to create a smooth, consistent and complete flow through the program for our candidates. Our goal is to prepare candidates starting early in the program on the components of the Work Samples and the Observation Report. Throughout the course sequence, candidates will be provided many opportunities to develop the necessary skills which are included in the assessment. Data from these assessments will be compiled in a larger Unit-wide assessment database, useful for more accurate and accessible future Unit and program assessment.

Given all the changes in assessment it will be imperative to communicate with and train all existing and new faculty and cooperating teachers. The FSEHD has recently developed a training course that will be required of all cooperating teachers. It will emphasize how to utilize the new tools, as well as how to better mentor and guide teacher candidates in the standards, as well as other components of effective teaching.

Connected to content and pedagogical courses, it is an immediate goal of the HED faculty to better align course syllabi with professional standards. Training of adjunct instructors will be necessary.

From our data analysis we learned that our candidates need greater sociocultural competency as reported in cooperating teacher evaluations. The FSEHD will implement the Rhode Island Teacher Education Renewal: Cultural Competency Assessment during practicum and student teaching. There are five areas of competency to be evaluated: planning and instruction, assessment, professional behavior, collaboration and communication. The instrument is part of the RITER grant's diversity initiative. The instrument is designed as a means of assessing how well the teacher candidate incorporates culturally competent teaching practices into his or her teaching experience.

It is also the goal of the HED faculty to encourage candidates to become involved in the Health Education profession earlier in the program, as well as more often and to a greater degree. Candidates are required to earn "Professional Points" in Health Education in order to student teach. These points must come from a variety of sources. For example, a candidate earns points by becoming a member of a State and/or National Health Education Association, for active participation in the RIC Health Education Club, for attending, presenting and/or organizing Health Education events, and for volunteering. We would like to see more of our candidates involved in presenting at conferences with or without faculty. We would also like to see them more active in the Club, and taking more initiative to practice health education outside the classroom, for example, more community outreach, as well as creating a health education e-newsletter or keeping bulletin boards and websites up-to-date.

Candidates would also benefit from greater usage of video-tape analysis of their teaching. The hope is to improve teaching skills, as well as instill greater pride in their own work and presentation. Results showed candidates scored relatively low in work pride. Candidates also mention they would like to feel more confident in front of the classroom. HED faculty are already utilizing this tool to a greater degree, such as not only during HED 300 and 418, but also during student teaching. Teacher candidates will also be able to practice greater use of technology as all HED classrooms will be e-classrooms starting in the fall of 2010. Use of technology is indicated on the new Observation Report, and will also be required and assessed to a greater degree in HED 300, 417 and 418.

Effects on P-12 Student Learning:

Candidates need stronger skills in pre- and post-testing, and this will be accomplished through adjusting content in courses to provide additional developmental opportunities prior to student teaching.

Candidates need more practice in developing valid tools. Without that skill, data from pre-post tests is nearly unusable. It is imperative that candidates know what their students are learning, so giving them opportunities to develop their assessment skills is extremely important. In particular there will be more time on this task in HED 325, HED 417 and HED 418, and possibly in HED 431: Drug Education and HED 410: Stress Management. Students also need more time creating useful rubrics. These courses will offer opportunities for that. We would like to look at create continuity between HED 325: Evaluation in Health Education and HED 417 and 418.

In addition to the changes explained above, we plan to:

- Ensure all health education faculty know what each course is assessing and how it builds/fits with other courses. A review of syllabi outcomes will be necessary.
- Continue collecting and analyzing data, but for some standards, on a more detailed level. We have useful rubrics, but we should extract more standards-based information from them. We tended to analyze more overall scores or grades. We would like the data to support our candidates training in all key elements. These results will help further steer our program.
- Acquire additional tenure line faculty in order to give students more continuity and contact with faculty for support and advisement.
- Continue to enhance advisement to ensure that candidates are on-track for graduation, taking advantage of resources at the college, and connecting with HED faculty.

SECTION VI - FOR REVISED REPORTS OR RESPONSE TO CONDITIONS REPORTS ONLY

1. For Revised Reports: Describe what changes or additions have been made to address the standards that were not met in the original submission. Provide new responses to questions and/or new documents to verify the changes described in this section. Specific instructions for preparing a Revised Report are available on the NCATE web site at <http://www.ncate.org/institutions/resourcesNewPgm.asp?ch=90>

For Response to Conditions Reports: Describe what changes or additions have been made to address the conditions cited in the original recognition report. Provide new responses to questions and/or new documents to verify the changes described in this section. Specific instructions for preparing a Response to Conditions Report are available on the NCATE web site at <http://www.ncate.org/institutions/resourcesNewPgm.asp?ch=90>

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Please click "Next"

This is the end of the report. Please click "Next" to proceed.