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**Health eWorkforce Instructional Materials Standards**

*Required for Health IT programs and second round of content for infusion programs; desirable for first round of infusion programs*

Assumption: All materials will be designed for online delivery, as promised in the grant proposal

1. Observable learning objectives
2. Assessments/skill checks for each objective
* These can include a wide range of options such as quizzes, responses to discussion questions or scenarios, games, or projects
1. Feedback mechanisms for assessment questions, scenarios, simulations, games, and projects that go beyond right/wrong.
* They should contribute to student knowledge or direct them back to specific content. See examples.
1. If using multiple-choice and T/F assessment questions, to the extent possible, craft test items that are thought-provoking vs. those eliciting simple regurgitation. See examples.
2. If using short-answer questions, try to frame “why” and “how” questions vs. “what” questions. See examples.
3. If included, lectures that:
	1. include meaningful visual images (with alt tags for 508 compliance) vs. just text
	2. do not create cognitive overload for the learners (i.e., too much information on a single slide)
	3. are divided into 5- to 15-minute segments
	4. include some questions for the learner
4. Active learning activities (vs. only source content and assessments) wherever possible—must include a minimum of two per course credit.
* These are activities that enable to learner to engage with new material (beyond simply reading materials) and apply new learning in some way. These types of activities provide a bridge between content and assessment.
1. Use of the second person in instructions and activities
* “You’ll see on the next screen…” vs. “Students will see on the next screen…”
1. Materials (including images) that are open source or that we’re able to share legally with appropriate citations.
2. Materials that are accessible and 508 compliant.
3. PLA challenge exams for each new Health IT course (not required for infusion programs except where you are developing a new course)
4. Formal citations for all content (except ONC lectures)
5. Final copyedit of all materials
6. Mechanism for course materials evaluation, improvement, and revisions.

**Examples of Selected Standards Above**

Feedback examples:

1. Good try. Please review Component 14, unit 7, lecture a to see why this is not the best answer. OR
2. This statement is false because most errors are actually caused by flawed systems vs. human error. Please review Component 14, unit 7, lecture b.

Multiple choice assessment items:

* *Avoid regurgitative questions such as the following:*

Which organization began with a focus on management engineering?

a) AMIA

b) HIMSS

c) AHIMA

d) NAHIT

e) JHITA

* *Instead, include questions such as the following that require more thought:*

Studies have identified which of the following as a way to prevent medical error?

1. reduce reliance on memory
2. improve access to information so that decisions aren’t made based on incomplete data.
3. avoid hand-written orders
4. all of the above.\*

Short-answer questions:

* *Limit the number of* “what” *questions:*

- A law passed in 1996 was intended to address the problem of the growing number of uninsured persons in the U.S. What is the name of that law?

* *Instead, frame “why” and “how” questions:*

-How has the role of Hospitalist affected physician-patient interaction in hospitals?

**Best Practice Considerations:**

* Think of course design as what the learner needs/wants to know and not what do I need to teach
* Use multimedia and learning activities to engage and motivate the learner
* When using and/or creating multimedia, consider principles from Clark and Mayer
* Lead with learning activities and support with lectures
* Leverage existing open source materials
* Use pre-tests to help learner self-identify learning gaps and stimulate interest

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