

## Program Assessment Plan

**Program:** Graduate Pediatric Dentistry  
**Department:** Pediatric Dentistry  
**College/School:** Center for Advanced Dental Education  
**Date:** January 2018  
**Primary Assessment Contact:** Dr. Dan Stoeckel

**Note:** Each cell in the table below will expand as needed to accommodate your responses.

#	Program Learning Outcomes	Assessment Mapping	Assessment Methods	Use of Assessment Data
	<p>What do the program faculty expect all students to know, or be able to do, as a result of completing this program?</p> <ul style="list-style-type: none"> <li><i>Note: These should be measurable, and manageable in number (typically 4-6 are sufficient).</i></li> </ul>	<p>From what specific courses (or other educational/professional experiences) will artifacts of student learning be analyzed to demonstrate achievement of the outcome? Include courses taught at the Madrid campus and/or online as applicable.</p>	<p>What specific artifacts of student learning will be analyzed? How, and by whom, will they be analyzed?</p> <ul style="list-style-type: none"> <li><i>Note: the majority should provide direct, rather than indirect, evidence of achievement.</i></li> </ul> <p>Please note if a rubric is used and, if so, include it as an appendix to this plan.</p>	<p>How and when will analyzed data be used by faculty to make changes in pedagogy, curriculum design, and/or assessment work?</p> <p>How and when will the program evaluate the impact of assessment-informed changes <i>made in previous years</i>?</p>
1	<p>Using the knowledge and concepts of pediatric dentistry, apply major practices, theories, or evidence-based literature in clinical pediatric dentistry.</p>	<p>Residents daily provide comprehensive clinical pediatric dental care under the direct supervision of the pediatric dental faculty.</p> <p>Foundational knowledge is obtained from all core and pediatric dental specific didactic course work. Knowledge and clinical skills are developed and refined during clinical care.</p>	<p>An informal formative assessment occurs with daily verbal feedback from the attending pediatric dentists. A formalized summative assessment occurs quarterly. Each faculty member completes a resident evaluation quarterly and the resident meets with his or her faculty mentor to review their clinical progress. Each resident meets with the program director semi-annually for their evaluation. At this time their progress towards clinical competence, performance in didactic course and progress in their research project are discussed.</p> <p>Exit interviews and alumni surveys are</p>	<p>The Program Director reviews quarterly evaluations looking for negative trends in performance that require intervention or remediation. Treatment seminars and/or individual coursework are modified as needed. In the case of underperforming residents, a plan is formulated to address any deficiencies.</p> <p>If evidence suggests that all residents are not achieving the program learning level, department faculty are convened to recommend programmatic changes to improve the outcome.</p> <p>Programmatic changes are summarized and reported to the Executive Director.</p>

			also used to assess whether the program is meeting its outcome.	
2	Assess relevant literature or scholarly contributions in endodontics	<p>Residents prepare and present complete and accurate critical evaluations of assigned research literature for weekly Classic and Current Literature Seminars.</p> <p>Residents are also challenged during patient care to support their treatment decision using evidenced-based literature.</p>	<p>Literature evaluations are discussed in the seminar and become part of the courses' final grade.</p> <p>In a one on one setting, residents are required to support their patient care using appropriate literature.</p> <p>The performance in the literature review courses a discussed in the semi-annual evaluation with the program director.</p> <p>Further understanding of the literature is assessed in the development of an original research project and presentation in an oral defense and thesis using a rubric.</p> <p>Exit interviews and alumni surveys are also used to assess whether the program is meeting its outcome.</p>	<p>The Program Director and Associate program director monitor the resident's participation and progress in the literature review courses. The resident's performance is reflected in their course grade and the semi-annual evaluation with the program director.</p> <p>In the case or underperforming residents, a plan is formulated to address any deficiencies.</p> <p>If evidence suggests that all residents are not achieving the program learning level, department faculty are convened to recommend programmatic changes to improve the outcome.</p> <p>Programmatic changes are summarized and reported to the Executive Director.</p>
3	Articulate arguments or explanations to both a disciplinary or professional audience and to a general audience, in both oral and written forms.	Each resident designs original research project, carries it out, analyzes data, and reports results during oral defense of the thesis.	<p>A thesis is written and orally defended utilizing standard criteria by a thesis committee and graduate education criteria. A department rubric is used to define criteria for the quality of the thesis.</p> <p>Where appropriate, a manuscript is prepared for submission to a refereed journal.</p>	<p>Theses, data and publications are maintained by the department. Outcomes are annually reviewed, summarized and reported to the Executive Director.</p> <p>Using the rubric, if class trends are reporting below quality work, department faculty are convened by the program director to recommend changes in the process to strengthen the end-product.</p> <p>Programmatic changes are summarized and reported to the Executive Director.</p>
4	Evidence scholarly and professional integrity in pediatric dentistry.	Content from all department didactic and clinical course work.	<p>First analysis will consist of an understanding of the literature in the development of an original research project and presentation in an oral defense and thesis using a rubric.</p> <p>Additional analysis will consist of each</p>	<p>The data for this outcome is reviewed annually and the results are shared with the Executive Director. If necessary, a plan is implemented to address any shortcomings.</p> <p>The impact of the assessment -informed</p>

			<p>resident's performance on the in-service exam given at the beginning and end of the program and the American Board of Pediatric Dentistry written examination. The in-service exam provides a score on 25 basic and clinical science topic areas. The American Board exam is criterion-based exam and the program does not receive any formal feedback as to performance on topical areas. However, upon completion of the exam, residents are interviewed by the program director to ascertain potential areas of weakness. If the residents perform poorly on the in-service exam or report any difficulty in a section of the ABPD exam, program changes are implemented to improve performance. (Results are also reviewed during the program's professional accreditation process.)</p> <p>Further assessment consists of tracking alumni as to their progress of during the board certification process.</p> <p>In addition, exit interviews and alumni surveys are also used to assess whether the program is meeting its outcome.</p>	changes is also assessed annually.
5				

### Additional Questions

1. On what schedule/cycle will faculty assess each of the above-noted program learning outcomes? (*It is not recommended to try to assess every outcome every year.*)

We are presently implementing all four of these learning outcomes. The program director is responsible for all efforts in this program. Current data will be provided. Ultimately the program will be reviewed annually at the end of the academic year in June/July.

2. Describe how, and the extent to which, program faculty contributed to the development of this plan.

The program director is responsible for development of this plan. Other pediatric dental faculty are consulted, as needed, to obtain additional input for modification of the plan.

3. On what schedule/cycle will faculty review and, if needed, modify this assessment plan?

a. Timeline regarding when or how often this plan will be reviewed and revised. (This could be aligned with program review.)

- Current data will be provided. Ultimately the program will be reviewed annually at the end of the academic year in June/July.

***IMPORTANT: Please remember to submit any assessment rubrics (as noted above) along with this report.***

**ADVANCED EDUCATION PROGRAM IN PEDIATRIC DENTISTRY  
SAINT LOUIS UNIVERSITY  
THESIS EVALUATION**

Resident:

Year of Graduation:

Thesis Title:

	Complexity	Clarity	Composition	Assessment of Relevant Literature	Contribution to Existing Literature	Significance	Overall
EE							
ME							
BE							

EE = Exceeds Expectations; ME = Meets Expectations; BE = Below Expectations\*

\*All Below Expectation ratings must be justified with written comments.

Comments:

Committee Member Signature:

Date:

**SAINT LOUIS UNIVERSITY  
CENTER FOR ADVANCED DENTAL EDUCATION  
GRADUATE PROGRAM IN PEDIATRIC DENTISTRY**

**RESIDENT CLINICAL EVALUATION FORM**

**Resident:** \_\_\_\_\_

**Period:** \_\_\_\_\_

**Scale: 1 poor, 2 below average, 3 average, 4 above average, 5 excellent**

**1 (Needs improvement), 2-3 (making progress), 4-5 (competence)**

**Clinical skill..... 1 2 3 4 5**

**Clinical knowledge.....1 2 3 4 5**

**Behavior management.....1 2 3 4 5**

**Asepsis.....1 2 3 4 5**

**Record keeping.....1 2 3 4 5**

**Effort/motivation.....1 2 3 4 5**

**Follows instructions.....1 2 3 4 5**

**Professional demeanor.....1 2 3 4 5**

**Overall score (average of above): \_\_\_\_\_ / 5.0**

**Comments:**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**SAINT LOUIS UNIVERSITY  
GRADUATE PEDIATRIC DENTISTRY PROGRAM  
RESIDENT CONFERENCE DOCUMENT**

Resident:

**Each of the following items are discussed and evaluated for each term:**

Diagnosis and Treatment Planning  
Clinical ability  
Patient Treatment Records  
Asepsis  
Didactic coursework  
Research  
In-Service Exams (when applicable)  
Communication  
Attitude  
Professional and Ethical Conduct  
Work Habits and Time Utilization

S = Satisfactory                      U = Unsatisfactory\*

\*Unsatisfactory ratings must be justified with written comments

Areas of evaluation where the resident is expected to achieve competence are graded as follows: C = Competent MP = Making progress NI = Needs improvement

<u>Year I</u>	Fall	S	U
	Spring	S	U
<u>Year II</u>	Fall	S	U
	Spring	S	U

Comments:

Cc: Resident  
Rating Criteria:

1. Diagnosis and Treatment Planning

Competence: Resident is consistently able to formulate an accurate diagnosis and treatment plan

Making Progress: Resident is usually able to formulate an accurate diagnosis and treatment plan

Unsatisfactory: Resident is unable to consistently formulate an accurate diagnosis and treatment plan and faculty assistance is required on an on-going basis.

2. Clinical ability

Competence: Procedures are consistently performed in a satisfactory manner

Making Progress: Procedures are performed most often in a satisfactory manner and according to the resident's level of experience. The resident requires faculty guidance or intervention at times.

Needs Improvement: Clinical procedures are frequently performed in an unacceptable manner resulting in major corrective action by the faculty or the need for additional clinical procedures for the patient.

3. Patient Treatment Records

Satisfactory: Resident is maintaining an accurate and complete record of periodontal patient treatment.

Unsatisfactory: The resident is not maintaining an accurate and complete record of periodontal patient treatment.

4. Asepsis

Satisfactory: Follows OSHA and university guidelines with regard to operator and instrument asepsis.

Unsatisfactory: Frequently has major deficiencies with regard to compliance with OSHA and university guidelines for operator and instrument asepsis.



5. Didactic coursework

Satisfactory: Resident performs an acceptable, passing level on all and exams and coursework.

Unsatisfactory: Student has received a failing grade in the didactic portion of the program.

6. Research

Satisfactory: The research project is progressing in a timely manner and will be completed by the end of the program.

Unsatisfactory: The research project is not progressing in a timely manner and it is unlikely that the project can be completed by the end of the program.

8. Communication

Satisfactory: Residents' oral and written communication skills are good

Unsatisfactory: Resident has difficulty with oral and/or written communication skills.

9. Attitude

Satisfactory: Resident has a positive attitude

Unsatisfactory: Resident's attitude is generally negative.

10. Professional and Ethical Conduct

Satisfactory: Resident exhibits acceptable professional and ethical conduct.

Unsatisfactory: Resident's professional or ethical behavior is frequently unacceptable and results in patient, faculty, resident/student or staff complaints.

11. Work Habits and Time Utilization

Satisfactory: Resident makes good use of clinic time and is always prepared for didactic classes. Resident is organized.

Unsatisfactory: Resident frequently does not make good utilization of clinic time and is frequently not prepared for didactic coursework.