

Program-Level Assessment: Annual Report

Program(s): SLU PA Program

Department: Department of Physician Assistant Education

College/School: Doisy College of Health Sciences

Date: August 28, 2018

Primary Assessment Contact: Carol Danter, M.P.A.S., PA-C

1. Which program student learning outcomes were assessed in this annual assessment cycle?

Program Learning Outcomes **PLO #2** - Students will demonstrate the critical thinking skills necessary to evaluate patient medical problems.

PLO #4 - Students will demonstrate core medical knowledge in the provision of patient care.

2. What data/artifacts of student learning were collected for each assessed outcome? Were Madrid student artifacts included?

DATA COLLECTED

<u>PLO #2</u>

1. PAED 5300 Clinical Evidence Based Medicine (EBM); Clinical Question Poster Presentation (D)

- 2. PAED 5860 Oral Defense of EBM Clerkship Clinical Question Project (D)
- 3. End-of-Program Survey (I)

-Students were prepared to develop an appropriate patient plan and develop a patient assessment with an appropriate differential diagnosis.

PLO #4

1. PAED 5250 Renal & PAED 5240 Endocrine Combined OSCE Assessment and Plan (D)

- 2. PAED 6000 Summative OSCE Assessment and Plan (D)
- 3. Graduate survey (I)

-Graduates rated their level of preparedness in the core medical knowledge areas of developing a differential diagnosis, developing an appropriate assessment and plan, ordering an appropriate lab and diagnostic plan, interpreting laboratory test results, interpreting ECGs, interpreting radiographic images, and selecting and prescribing medications.

Key: (D) = Direct Measure | (I) = Indirect Measure

(No Madrid data included)

3. How did you analyze the assessment data? What was the process? Who was involved? *NOTE: If you used rubrics as part of your analysis, please include them in an appendix.*

For course-specific data, course directors rated the students using rubrics developed for this analysis. They presented data and analysis to the entire PA faculty and conclusions were drawn. For survey data, the Program Director collected data for the above survey question. This was presented at an assessment meeting, discussed and analyzed, and conclusions were drawn. Please see attached appendix marked "Rubrics" to see what the criteria were for the analysis.

4. What did you learn from the data? <u>Summarize</u> the major findings of your analysis for each assessed outcome.

NOTE: If necessary, include any tables, charts, or graphs in an appendix.

PLO #2

-PAED 5300 Clinical Evidence Based Medicine (EBM) clinical question poster presentation: 40 out of 40 students could draw patient-centered conclusions from the collected research related to their clinical question on the project. We met this learning objective.

-PAED 5860 Oral Defense of Clinical EBM question project: 33 of 33 students researched and summarized data related to a clinical question by means of a clinical question project therefore earning emerging status on the rubric. We met this learning objective.

-End-of-Program Survey Class of 2017: Students were able to develop an appropriate patient plan and develop a patient assessment with an appropriate differential diagnosis. These data reveal that for both questions on the End-of-Program Survey we were above the 3.5 benchmark set and we met this learning objective.

<u>Summary</u>: All mapping tools that were used to assess PLO #2 confirm that we are meeting this Program Learning Outcome. No curricular changes need to be undertaken at this time.

<u>PLO #4</u>

-PAED 5250 Renal & PAED 5240 Endocrine Combined Objective Structured Clinical Examination (OSCE) Assessment and Plan: 34 out of 34 students were able to document an assessment and plan that included the basic components. We met this learning objective.

-PAED 6000 Summative OSCE Assessment and Plan: We were unable to assess this learning objective because the plan was finalized in September which is the same time that we administer the summative OSCE. The summative OSCE has been modified and we will collect data this September (2018) to be analyzed in the next cycle.

-Graduate Survey results reveal that graduate ratings of how prepared they were in the core Medical Knowledge areas of developing a differential diagnosis, developing an appropriate assessment and plan, ordering appropriate labs and diagnostics, interpreting laboratory test results, interpreting ECGs, interpreting radiographic images and selecting and prescribing medications, are at or above benchmark. All average Likert scores for these questions on the graduate survey were above 3.5 and six out of seven scores were above 4.5 with the lowest score a 4.0. We met this learning objective.

<u>Summary</u>: All mapping tools that were used to assess PLO #4 confirm that we are meeting this Program Learning Objective. No curricular changes need to be undertaken at this time.

5. How did your analysis inform meaningful change? How did you use the analyzed data to make or implement recommendations for change in pedagogy, curriculum design, or your assessment plan?

Through our analysis we concluded that we do not need to make any curricular or pedagogical changes at this time. We also reviewed our PLOs and objectives for next year and after having gone through the process this year we made some minor modifications to the assessment mapping tools that we will use in the future.

We also made minor changes to the Rubric used to assess PLO #4.

6. Did you follow up ("close the loop") on past assessment work? If so, what did you learn? (For example, has that curriculum change you made two years ago manifested in improved student learning today, as evidenced in your recent assessment data and analysis?)

Our previous data analysis resulted in no change in curriculum with the exception of one area. We fell short of achieving our benchmark of only 1 failure per student on the clinical phase End-of-Rotation Exams (EOREs). We proposed monitoring student data in order to identify at risk students and help develop study plans for those students. There is consistent evidence that students with multiple remediations during the didactic year are at risk for EORE failures in the clinical year. We have become proactive with these students and assist them in developing structured study plans to help them achieve success with these exams. Based on EORE results over the years we also have decided that a benchmark of one EORE failure per student is not realistic. We are no longer using this as criteria for our PLO assessment plan.

IMPORTANT: Please submit any <u>revised/updated assessment plans</u> to the University Assessment Coordinator along with this report.

2017-18 Assessment Rubrics and Likert Scale Description(s) for Physician Assistant Program Learning Outcomes¹

IMPORTANT NOTE: The rankings, identified by the column headings below, are of increasing complexity moving across the table from left to right. A student ranked as being "competent" must be able to perform at the "emerging" level to be successful. Likewise, an "exemplary" student must be able to perform at both the "emerging" and "competent" levels to be successful.

Program Learning	Unsatisfactory- Students are unable	Emerging – Students will	Competent – Students will	Exemplary – Students will
Outcome	to	wiii	wiii	
PLO #1 - Students will evidence communication skills that result in effective clinical encounters.	Obtain a basic history using correct format.	Obtain a basic patient history using correct format.	Address all required categories for a focused patient history.	Organize with appropriate sequencing the H&P to respect patient time while ensuring efficiency and effectiveness.
PLO #2 - Student will demonstrate the critical thinking skills necessary to evaluate patient medical problems.	Research and summarize information related to a clinical question.	Research and summarize information related to a clinical question.	Draw conclusions from research related to a clinical question.	Incorporate changes in clinical practice based upon research related to a clinical question.
PLO #3 - Students will demonstrate professionalism in medical practice	Demonstrate a working knowledge of professional issues in medical practice.	Demonstrate a working knowledge of professional issues in medical practice.	Discuss the application of professionalism in a medical practice.	Internalize professionalism as an everyday core practice.
PLO #4 - Students will demonstrate core medical knowledge in the provision of patient	Document an assessment.	Document an assessment with an appropriate plan that includes the basic	Write and discuss an assessment with an appropriate plan that includes the proper	Write a complete assessment with an appropriate plan that that includes proper patient education.

Program Learning Outcome	Unsatisfactory- Students are unable to	Emerging – Students will	Competent – Students will	Exemplary – Students will
care.		components.	differential with pertinent labs and diagnostics included.	
PLO #5 - Students will conduct themselves in accordance with Jesuit values when treating patients.	Demonstrate knowledge of Jesuit principles.	Demonstrate knowledge of Jesuit principles.	Apply Jesuit principles while treating patients.	Reflect and discuss their application of Jesuit principles while treating patients.

¹The PLOs will be evaluated after each assessment cycle of data are collected and analyzed. Adjustments will be made as appropriate for clarification and to provide additional discipline context as appropriate. The rubrics for PLO #2 and #4 were used to complete this report.