## UNIVERSITY ASSESSMENT COMMITTEE

Feedback to Academic Departments on Assessment Activities Reported in 2014-15

# **GRADUATE PROGRAMS**

DEPARTMENT _	Physical Therapy					DAT	E _	1/15/16		
PROGRAM(S) CO	VERED IN REVIEW	Doctor of Physical	Therapy (.	DPT)						
COMMITTEE ME	MBER(S) CONDUCTI	TING REVIEW Mary Askim-Lovseth,				, Jim Casler, Joseph Appianing				
1. STUDENT LEA	ARNING GOALS									
Were any go	oals referenced?		X	Yes		No		Qualified Y/N		
• If so, were g	oals well-articulated?		X	Yes		No		Qualified Y/N		
Do goals add	dress student learning?		X	Yes		No		Qualified Y/N		
comprehensive appro students, clinical inst Two goals were addr	has been recently update cach to stakeholder inclu ructors, graduates, emp essed in the annual repo will demonstrate the skill	usion was evident. Sta loyers, patients, and a ort.	keholders lumni.	s inclua	led we	re—pi	re-P'.	T students, enrolled PT		
SLG 5: The student is include "demonstrate	s to be an advocate for he respect for self and oth assessment in the 2014-1	nealth and wellness at ners, and a commitmen	the indivi	dual ar	id soci	etal le	vels.	. (The goal does		
2. ASSESSMENT	METHODS									
Were any specific ass	sessment methods refere	enced?	X	Yes		No		Qualified Y/N		
	pecifically chosen asses y aligned with individua			Yes		No	X	Qualified Y/N		
	irect and indirect assess of a "multiple measures			Yes -	<u>X</u>	No		Qualified Y/N		
2 3 mp o m o m o m		rr								

### Comments:

The National Physical Therapy Examination (NPTE) scores, this would be a direct measure, and course grades were noted as the measures to assess the student learning goals. Since grades are inclusive of several factors for a course, their use for assessment can be less useful as they do not provide direct alignment with the competencies. Because of course failure for a student and another leaving the program, reviews of admissions criteria, course content, and practice locations were done.

No assessment measures were noted for SLG 5 related to health and wellness advocacy though the faculty did look at external data regarding the shortage of physical therapists in North Dakota rural communities.

The assessment plan (strategies and timeline) does identify multiple assessment methods, direct and indirect, though there was no alignment with the specific goals and objectives. The notation was either "Program" or "Program & St. Learning", and indicating direct or indirect.

### 3. ASSESSMENT RESULTS

Were any assessment results reported?	X	Yes	N	О		Qualified Y/N
<ul> <li>If so, were the results clear in terms of how they specifically affirm achievement of goals?</li> </ul>		Yes	N	О	X	Qualified Y/N
• If so, were the results clear in terms of how they indicate need for improvement?		Yes Z	<u> N</u>	o <u>.</u>		Qualified Y/N
• Were the results tied to goals of student learning?		Yes	N	0	X	Qualified Y/N

#### Comments:

Data from the NPTE were reported for SLG 1. The students that did the early testing all passed, receiving "scores well above a scale score of 600" which represents passing and licensure eligibility. When all students had completed the NPTE, the first attempt pass rate was 87.2 percent (41 of 47); this was below the national pass rate of 92.88 percent. The UND mean scale score was 672.8 compared to the national mean of 680.6. It is unclear if the NPTE score is delineated by competency area in order to determine specific areas for improvement.

No data were provided for SLG 5 which related to being a health and wellness advocate for individuals and society; rather it was noted that faculty reviewed the UND SMHS Workforce Study and information from the ND Board of Physical Therapy to determine a workforce shortage of physical therapists in small, rural ND communities.

#### 4. CLOSING THE LOOP

Were any actions taken?	X	Yes	No	Qualified Y/N
• If so, were they based on assessment results?	X	Yes	No	Qualified Y/N
<ul> <li>If so, do curricular or other improvements/changes arising from assessment results directly address goals for student learning?</li> </ul>	X	Yes	No _	Qualified Y/N

#### Comments:

It was noted in the annual report that "the 2014-2015 focus within the department had not been on 'closing the loop' activities" though there were comments that would be indicative of work in this area. Because of the drop from the prior year in the pass rate, there has been a review of the application standards and the students' academic profiles, and the curriculum (i.e., objectives, content, course sequencing, and pedagogy). With new curriculum Standards and Required Elements from the accrediting body (Commission on Accreditation in Physical Therapy Education, CAPTE), faculty have been reviewing their courses for alignment. Reaccreditation site visit is slated for 2017. It would be expected that curricular changes may result from these review activities. The remediation policy was addressed after two student instances where that was specifically needed. The policy is now formalized as part of the program's Scholastic Standards. Two courses were validated for fulfilling the Essential Studies requirement in Communication; this would relate directly to SLG 1.5, "The student will demonstrate effective written and oral communication skills."

Faculty believe the impending move to the new SMHS building will have a direct impact on pedagogy and student learning by providing opportunities to emphasize interdisciplinary learning, learning communities, and experiential learning through clinical simulations and experiences. These enhancements will be monitored for their impact on student success.

# **SUMMARY**

Strengths						Areas for Improvement					
X X	Assess Assess Direct Result Result	eific plan for asse at learning goals as ment methods ar ment methods ar and indirect met are reported. It is are tied to closi ion-making is tie	are well-artion re clearly desire appropriation well-impleshods are implesting the loop.	culated. scribed. ely selecemented emented lemente		Asses Asses Asses Asses Asin No re Resul	nt learning goals sment methods a sment methods a sment methods a gle type of assess sults are reported ts are not clearly	are not well-articulated. are not clearly described. are not appropriately selected. are not well-implemented. ament methods predominates. a. tied to closing the loop. and directly tied to evidence.)			
The a asses emple asses desig	ssessme sment m oyers, al sment m nation.	nethods are noted lumni). Though the ethods be aligne	OPT program l, both direct he tables are d with the st	has we and ind quite e. udent le	ll articulated direct, with th xtensive layin arning goals	e inclusio g out the and objec	n of various stak assessment matri tives rather than	d to student learning. A variety of eholders (i.e, patients, ix, it is recommended that the the noted "St. Learning" assessing SLG 1 each year.			
Thou anyth Depa addre	gh the a sing othe rtment a ess each	ssessment plan in er than SLG 1, it able to "tease ou goal/objective?	ndicated man is unclear if t" the data c	iy asses the Dep ollected	sments are or partment has d I from the diff	agoing, wa assessed e erent surv	ithout alignment each goal and obj eys, examination	to goals and no reporting of jective on a cyclical basis. Is the is, and interviews to specifically the Committee is looking			
forwa	TERIAL Annua Assess Previo	LS REVIEWED  assessment reports assessment reports assessment re (please describe)	r impact on so ort (AYs 2016 osted) view	student i	learning in fu	ture annu		,			
David	*********	Nome	Mam. Aak	I	4	lim (	la al an	Isaanh Anniquius			
Reviewers: Name Department		Marketing	Mary Askim-Lovseth			Casler Studies					
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	*****	******	*****	*****	*****	******	******	******			
Section	on 1: _	Y Section	on 2:	<u>Q</u>	Section 3:	Q	Section 4:	Y			
Codi	ng Key: Y =	reviewed and a kinds of data t	recognizing to be collected	hat asse ed in oth	essment is a cy her years)	clical pro	I the kind of process, i.e., with ad	ditional			
	Q =	this is complet				nowever,	evidence is lack	ing mat			
	N=					not done	in relationship to	student			