SAINT LOUIS UNIVERSITY.

Doisy College of Health Sciences

2021-2022 Program-Level Assessment: Annual Report

Program Name (no acronyms): Master of Occupational Therapy	Department: Department of Occupational Science and Occupational Therapy
Degree or Certificate Level: Master	College/School: Doisy College of Health Sciences
Date (Month/Year): August 2022	Assessment Contact: Julia Henderson-Kalb

In what year was the data upon which this report is based collected? 2021-2022

In what year was the program's assessment plan most recently reviewed/updated?

Is this program accredited by an external program/disciplinary/specialized accrediting organization? Yes-ACOTE

Upload completed reports to the T-drive here: [each program has a separate folder]
Allied Health | Common | 1.2-2021-2022 DCHS ProgLvlAssessRpts

1. Student Learning Outcomes

Which of the program's student learning outcomes were assessed in this annual assessment cycle? (Please list the full, complete learning outcome statements and not just numbers, e.g., Outcomes 1 and 2.)

PLO 1: Apply theories that underlie the practice of occupational therapy.
PLO 2: Demonstrate skills in assessment and intervention practice in the implementation of occupational therapy with clients across the lifespan.

2. Assessment Methods: Artifacts of Student Learning

Which artifacts of student learning were used to determine if students achieved the outcome(s)? Please describe the artifacts in detail and identify the course(s) in which they were collected. Clarify if any such courses were offered a) online, b) at the Madrid campus, or c) at any other off-campus location.

PLO 1: Apply theories that underlie the practice of occupational therapy.

1. MOT 5260 Problem Based Learning
   - Independent Clinical Reasoning Exam question #2 of Part 2: "Based on the priority intervention areas, identify two (2) frames of reference that will be used in formulating the treatment plan. Explain why you prefer it for this client. (It is understood that more than 2 FoR may be used; you only need to explain your two most preferred)"
   - This question was based on a case study the students read and created a treatment plan with support/rationale, among other activities

2. MOT 5350 Theoretical Foundations of Occupational Therapy
   - Assignment- Wiki

3. MOT 5700/5750 Level II Fieldwork
    - Item #17 on AOTA Fieldwork Performance: Establishes an accurate and appropriate client-centered plan based on the evaluation results, context, theories, frames of reference, and/or practice models.

For MOT 5260 and MOT 5350, the courses were in person on campus. MOT 5700/5750 are full-time clinical experiences that occur in multiple OT settings across the country where students are supervised by clinical instructors. The academic fieldwork coordinator in our department oversees and organizes these experiences.

PLO 2: Demonstrate skills in assessment and intervention practice in the implementation of occupational therapy with clients across the lifespan.

1. MOT 5550 Occupational Therapy for Adults with Neurological Dysfunction
    - Evaluation assignment related to Level I Fieldwork (original assignment in program assessment). This was replaced due to challenges with patient access during fieldwork I. The artifact will be the Multiple Sclerosis Case Evaluation and Treatment Plan assignments

2. MOT 5600 Occupational Therapy with Infants and Children
    - Community Pediatric Fieldwork & Case Study

3. MOT 5700/50 Level II Fieldwork
    - Item #11 on AOTA Fieldwork Performance Evaluation: Evaluates and analyzes client factors and contexts that support or hinder occupational performance.

For MOT 5550 and MOT 5600, the courses were in person on campus. MOT 5700/5750 are full-time clinical experiences that occur in multiple OT settings across the country where students are supervised by clinical instructors. The academic fieldwork coordinator in our department oversees and organizes these experiences.

3. Assessment Methods: Evaluation Process

What process was used to evaluate the artifacts of student learning, and by whom? Please identify the tools(s) (e.g., a rubric) used in the process and **include them in/with this report document** (please do not just refer to the assessment plan).

The instructor of each course evaluated the learning activity in their course in the following ways:

PLO 1: Apply theories that underlie the practice of occupational therapy.

1. MOT 5260
    - Independent Clinical Reasoning Exam Rubric-please see attached (question related to this is highlighted)

2. MOT 5350
    - Rubric, please see attached

3. MOT 5700/5750
    - The program set a target goal of: “An average of 85% of students will score a “3” (Meets Standards) or higher on the AOTA Fieldwork Performance Evaluation”.
    - The Clinical Instructors (CIs), who supervise the students at their fieldwork site, collect the data using the AOTA Fieldwork Performance Evaluation at 6 weeks (midterm) and at 12 weeks (final). The AOTA Performance Evaluation uses a 4 point scale: 4_Exemplary Performance, 3_Proficient Performance, 2_Emerging Performance, 1_Unsatisfactory Performance.

PLO 2: Demonstrate skills in assessment and intervention practice in the implementation of occupational therapy with clients across the lifespan.

1. MOT 5550
   - Two rubrics were used, one for evaluation and one for treatment planning

2. MOT 5600
   - Student artifacts evaluated by instructor
   - Assignment description and grading rubric attached

3. MOT 5700/50
   - The program set a target goal of: "An average of 85% of students will score a "3" (Meets Standards) or higher on the AOTA Fieldwork Performance Evaluation".
   - The Clinical Instructors (CIs), who supervise the students at their fieldwork site, complete the AOTA Fieldwork Performance Evaluation at 6 weeks (midterm) and at 12 weeks (final). The AOTA Performance Evaluation uses a 4 point scale: 4_Exemplary Performance, 3_Proficient Performance, 2_Emerging Performance, 1_Unsatisfactory Performance.

4. Data/Results

What were the results of the assessment of the learning outcome(s)? Please be specific. Does achievement differ by teaching modality (e.g., online vs. face-to-face) or on-ground location (e.g., STL campus, Madrid campus, other off-campus site)?

PLO 1: Apply theories that underlie the practice of occupational therapy.

1. MOT 5260
   - The average score on the question stated above from the random sampling of 19 exams out of 55 was 91.67% overall, or mastery level of learning. Of the sample of 19, 8 students (40%) received 6/6 points or 100% accuracy, 4 students (20%) received 5.5/6 points or 92% accuracy, 6 students (25%) received 5/6 points or 83% accuracy, and one student received 4.5/6 points, or 75% accuracy.
   - Upon reviewing the student who received the grade of 4.5%, their rationale was lacking for both frames of reference, but the choices were sound.
2. MOT 5350
   - The model of learning this assignment follows is a distributed learning model, as proposed by Harvard's Richard Elmore. The learning goals learn what is interesting to them and to members of their selected learning network. By each member taking a learning and a teaching role, they create a community identity within the assignment.

3. MOT 5700/5750
   - Students scored an average of 2.5/4.0 on the midterm evaluation and 3.45/4.0 on the final evaluation, with 100% of students achieving a score of 3 or above at final evaluation.
   - Achievement may differ based on opportunities to observe and practice establishing an accurate and appropriate plan at the different sites the students are placed at. Achievement may also differ based on the teaching abilities and evaluation style of the student's Clinical Instructor on site. Average scores for the 2021-2022 cohort at final evaluation have increased from 3.31/4.0 the previous academic year.

PLO 2: Demonstrate skills in assessment and intervention practice in the implementation of occupational therapy with clients across the lifespan.

1. MOT 5550

- All enrolled students were educated face to face. Over 75% of students received a 90% or greater on the treatment plan, indicating that they were meeting standards for each portion of the assignment, demonstrating good clinical reasoning, using appropriate evidence, and writing clearly and concisely.
- On the evaluation assignment, more than 50% of students received a B or better, indicating they meet standards - Performance is consistent with level of OT education. Student demonstrates level of knowledge and skills to summarize results of an evaluation and establish a functional treatment plan supported by evidence. Student documents clearly, concisely, and uses APA appropriately when needed.

2. MOT 5600
    - Students scored an average grade of 66/70 on this assignment (94%).

3. MOT 5700/50
    - Students scored an average of 2.4/4.0 on the midterm evaluation and 3.2/4.0 on the final evaluation, with all but one of students achieving a score of 3 or above at final evaluation.

    - Achievement may differ based on opportunities to observe and practice establishing an accurate and appropriate plan at the different sites the students are placed at. Achievement may also differ based on the teaching abilities and evaluation style of the student's Clinical Instructor on site.

5. Findings: Interpretations & Conclusions

What have you learned from these results? What does the data tell you?

PLO 1: Apply theories that underlie the practice of occupational therapy.

1. MOT 5260 Problem Based Learning
    - The students taking this exam are in their final semester of didactic work in the MOT program. They will complete their level 2 fieldwork after this semester. Therefore, they should be meeting the Mastery level at this time. With the overall average of 91.67%, they did reach this threshold. Of the students who averaged below 90%, it seems like the main issue was a lack of rationale related to their choices, not the choices themselves.

2. MOT 5350 Theoretical Foundations of Occupational Therapy
    - The rubrics guide attainment of educational objectives, and class understanding of key theoretical constructs

3. MOT 5700/5750 Level II Fieldwork
    - While on Fieldwork, students are improving upon their skills to apply theories that underlie the practice of occupational therapy. By the end of their 12-week rotation, students are demonstrating an adequate or substantial understanding and application of evaluation results, contexts, theories, frames of references, and practice models to establish an accurate and appropriate plan with the patients under their care.

PLO 2: Demonstrate skills in assessment and intervention practice in the implementation of occupational therapy with clients across the lifespan.

1. MOT 5550 Occupational Therapy for Adults with Neurological Dysfunction
    - The data show that students in the last few weeks of the semester have the skills to complete an evaluation report and an evidence-based treatment plan for an adult neurological client.

2. MOT 5600 Occupational Therapy with Infants and Children
    - This assignment has two portions: the evaluation of a child and the intervention. Students who struggled with interpretation of assessment results had difficulty developing effective interventions.

3. MOT 5700/50 Level II Fieldwork
    - While on Fieldwork, students are improving upon their skills in assessment and intervention with clients across the lifespan. By the end of their 12-week rotation, students are demonstrating an adequate or substantial understanding and application of evaluation and analysis of client factors and contexts that support or hinder occupational performance.

6. Closing the Loop: Dissemination and Use of Current Assessment Findings

A. When and how did your program faculty share and discuss these results and findings from this cycle of assessment?

Dissemination and use of current assessment findings was reviewed in the first meeting of the Department in August 2022. Each Program Learning Outcome and associated course were discussed.

Results from the AOTA Fieldwork Performance Evaluation are reported in our annual Program Evaluation Report for ACOTE Accreditation and shared at the end of the year faculty meeting. An action plan is created to allow faculty to reflect upon how topics are introduced and applied in the classroom to prepare students for real-life application during fieldwork.

B. How specifically have you decided to use these findings to improve teaching and learning in your program? For example, perhaps you've initiated one or more of the following:

Changes to the Curriculum or Pedagogies	• Course content • Teaching techniques • Improvements in technology • Prerequisites	• Course sequence • New courses • Deletion of courses • Changes in frequency or scheduling of course offerings
Changes to the Assessment Plan	• Student learning outcomes • Artifacts of student learning • Evaluation process	• Evaluation tools (e.g., rubrics) • Data collection methods • Frequency of data collection

Please describe the actions you are taking as a result of these findings.

PLO 1: Apply theories that underlie the practice of occupational therapy.

1. MOT 5260 Problem Based Learning
    - Work with MOT 5350 to ensure threading of information from that class through this one.
    - Explicitly focusing on "why" certain frames of reference are chosen during case studies throughout the semester, rather than just choosing which to use.

2. MOT 5350 Theoretical Foundations of Occupational Therapy
    - We have used these results to change MOT 5350, and move Frames of Reference into case specific courses

3. MOT 5700/5750 Level II Fieldwork

- Continuing to increase opportunities for students to actively engage in evaluation, assessment, and intervention throughout the program.
- Increase the use of Simucase throughout the curriculum to assist with providing students with additional on-demand opportunities to engage with real patient cases. Evaluate the impact of Simucase on student performance.
- Being more explicit about the use of evaluation results, contexts, theories, frames of references, and practice models in intervention planning in course assignments, during lab experiences, and during the Problem-Based Learning course.

PLO 2: Demonstrate skills in assessment and intervention practice in the implementation of occupational therapy with clients across the lifespan.

1. MOT 5600 Occupational Therapy with Infants and Children

- This is a large assignment that is a bit overwhelming for students. Students who struggle with assessment and interpretation cannot plan effective interventions for the client. Currently, students are only provided feedback of the clinical reasoning process once the assignment is submitted. Going forward the following changes will be made:
    1. Students will complete evaluation of child while on FW and submit the write up the report
    2. Students will meet in a 1:1 session during lab time with a pediatric professor to review the assessment results, discuss the clinical reasoning, and discuss interventions strategies
    3. Students will submit the intervention plan
- This will provide students with more guidance of clinical reasoning and understanding of the assessment to intervention process, which has been an area of weakness for students on the NBCOT exam. Time will be carved out within the pediatric lab time for each student to meet one on one with a pediatric professor for a 15-minute debriefing.

3. MOT 5700/50 Level II Fieldwork

- Continuing to increase opportunities for students to actively engage in evaluation, assessment, and intervention throughout the program.
- Increase the use of Simucase throughout the curriculum to assist with providing students with additional on-demand opportunities to engage with real patient cases. Evaluate the impact of Simucase on student performance.
- Being more explicit about the use of evaluation results, contexts, theories, frames of references, and practice models in intervention planning in course assignments, during lab experiences, and during the Problem-Based Learning course.

If no changes are being made, please explain why.

PLO 2: Demonstrate skills in assessment and intervention practice in the implementation of occupational therapy with clients across the lifespan.

1. MOT 5550 Occupational Therapy for Adults with Neurological Dysfunction: No changes noted by instructor

7. Closing the Loop: Review of Previous Assessment Findings and Changes

A. What is at least one change your program has implemented in recent years as a result of assessment data?

The Department was in flux from 2018-2021:

- an Interim College Dean was appointed due to the resignation of Dean Wilson;

- our Department Chairperson resigned three years ago and was replaced with an interim chair;
- an existing faculty member was moved to the Program Director of Graduate Education;
- the Program Director of Undergraduate Education was given additional responsibilities;
- several faculties resigned at the beginning of each semester with minimal notice and adjunct instructors were hired to fill the gaps;
- one of two staff members left the University for new employment;
- and the pervasive effects of the pandemic on teaching and learning.

A Chair Search resulted in the hiring of a new Department Chairperson effective September 1, 2021. Due to her presence, and building on past various programmatic evaluation findings, effort and emphasis this academic year has focused on strategic curriculum planning and faculty workload management. Supporting materials included:

- Program Assessment, completion of the University Program Review, and the mid-term program review required by our accrediting organization.
- Regular curriculum discussions including course objectives, learning activities, practical experiences, and course schedules.
- Formative and summative student course evaluations.

In the next year, our goals are focused on the following:

- Developing a new MOT curriculum, and the department will consider the prior program assessments when doing so.
- Aligning Program Learning Outcomes, the Assessment Plan, and the Assessment Rubric more closely with the Program Vision, Mission, and Program Learning Outcomes.
- Developing a process to sustain Program Assessment in spite of leadership, teaching faculty, adjunct instructors, and staff changes and turnover.

B. How has this change/have these changes been assessed?

N/A

C. What were the findings of the assessment?

N/A

D. How do you plan to (continue to) use this information moving forward?

N/A

IMPORTANT: *
Please submit any assessment tools (e.g., artifact prompts, rubrics) with this report as separate attachments or copied and pasted into this Word document. *Please do not just refer to the assessment plan; the report should serve as a stand-alone document*.

For DCHS Programs:
If you choose to copy/paste items from the list above* and those below^, clearly label them within the Word document. Example: PLO1 Rubrics

Submit a description of each artifact and whenever possible, an example of a student-completed artifact with the student's name removed.

Submit the actual analyzed data (not the raw data) for each PLO being assessed.

If the items below are submitted as separate documents^, label them following these examples:

2021-2022,HSCI_ArtifactDesciption4PLO1

2021-2022,HSCI_CurrentAssessRubrics4PLO1

2021-2022,HSCI_AnalyzedData4PLO1

2021-2022, HSCI_Revised ProgLvlAssessPlan

Use the same labelling format for other separate documents germane to the PLO under assessment.

MOT 5260
Problem-Based Learning
Independent Clinical Reasoning Exam Rubric

#	Questions	Points
1	**List at least 10 P-E-O issues** • At least two issues for each PEO area are represented • Issues are labeled • Issues are placed in the correct category • Chosen issues are meaningful to the therapeutic process	4
2	**Provide practical, feasible and holistic evaluation plan that can be completed within 1 hour & explain rationale for each.** • Is feasible • Is clearly described • Rationale provided • Is holistic • Includes both standardized and non-standardized assessments Appropriate for: • Area of practice • Scope of practice • Client's current functional status • Client's diagnosis • Time frame (60 minute session)	10
3	**Identify 3 priority intervention areas, explain why these would be strategic to address** Per Priority Area: • Each intervention area is appropriate for this client (1 point each-3 total) • Appropriate rationale provided (1 point each-3 total)	6
4	**Based on the priority intervention areas, identify 2 frames of reference that will be used in formulating the following treatment plan. Explain why you prefer these.** Per FoR: • Frame of reference is appropriate for diagnosis (1 point each-2 total) • FoR is appropriate for priority intervention areas (1 point each-2 total) • Rationale is reasonable (1 point each-2 total)	6
5	**Choose one priority intervention area, provide rationale, including impact of problem on client's performance and significance.** • Priority area was one of three previously mentioned • Rationale provided and appropriate for Priority area • Priority intervention area is significant for client • Priority intervention area's impact is a significant performance issues	4
6	**Write one measurable LTG.** • relates to priority area in item 5 • Targets occupational performance • Who and what clearly identified • Measurable	5

	• By when	
7	**Write one measurable STG.** • relates to priority area in item 5 • Targets occupational performance • Who and what clearly identified • Measurable • By when	5
8	**Design an intervention strategy for a 45-60-minute treatment session that focuses on your client's STG, within a week of evaluation. Explain what approach you are taking and your rationale for that approach. Then describe the treatment in detail.** Approach: • Approach is appropriate for this client • Rationale is reasonable Intervention: • Relates to FoR • Relates to STG • Is client-centered Appropriate for: • Area of practice • Scope of practice • Client's current functional status • Time frame (45-60 minute session soon after eval) • Appears effective for dx • Is clearly described • Uses appropriate skilled terminology	12
9	**Briefly describe rationale for strategy/activity <u>as you would explain to the client.</u>** • Clearly & accurately stated • Is persuasive / motivating • Language style is appropriate for this client • Is written as it would be spoken to the client	4
10	**Describe an issue related to occupational (in)justice and explain how you can address this as an OT** • Occupational Injustice is appropriately categorized • Rationale for categorization is appropriate Approach to addressing issue is appropriate for • Area of practice • Scope of practice • Time frame	5
11	**Identify 3 potential personal or contextual barriers/limitations that may be expected at time of D/C and recommendations for their management. Include a rationale your recommendations** Per barrier: • Each barrier/limitation is appropriate for this client (1 point each-3 total) • Appropriate recommendation (1 point each-3 total) • Appropriate rationale provided (1 point each-3 total)	9

Biomechanical Frame of Reference

By: [redacted]

Theory and Proponent:
Proponents: Unknown. However, Baldwin and Licht were significant figures in the development of the theory.

Seminal Article: Unknown.

Retrieved from: http://opensourceecology.org/wiki/2D_Range_of_Motion

Function-Dysfunction Continua:
Based on the biomechanical approach, a person is in a state of function when he or she can maintain full range of motion, endurance, structural stability, muscle strength, and edema control. A person is in a state of dysfunction when he or she is unable to maintain any of these five domains. A person will automatically regain function after strength, ROM, and endurance are gained.

Theory Description and Assumptions:

- The theory's purpose is to understand the body's design and how it is used to accomplish movement to prevent deformity, remediate weak components, and compensate for lost components to enable occupational function.
- Function is maintained and improved through repeated graded movement, but it is important for the body to be rested, then stressed.
- Purposeful activity, exercise, and physical agent modality interventions can be used to remediate movement deficits.
- A person will automatically regain function after strength, range of motion, and endurance are gained.

Summary of Most Important Terminology:

1. **Range of motion (ROM):** The extent to which body parts are able to move through an arc. There is active and passive ROM, which are limited by damage, edema, pain, and tightness.
2. **Muscle strength:** The ability of muscle to produce tension. It depends on the number and size of muscle fibers. Increased activity will result in increased strength, also known as hypertrophy.
3. **Endurance:** The ability to sustain muscle activity over time. It involves the interaction of the neuromuscular and cardiopulmonary systems. It is reduced by limitation of activity and extended confinement.
4. **Structural stability:** When body structures work together and function properly to provide stability. It is a simultaneous action that is affected by disruption of any components, which contribute to joint stability.
5. **Edema control:** Swelling in tissues around the joint. It limits joint range of motion and movement.

Implications to OT Assessment and Intervention:

- The CNS must be intact for a person to achieve function through treating the domains of muscle strength, range of motion, endurance, structural stability, and edema control.
- Various assessments, such as observation, repetition, volumeter, and goniometer, can demonstrate deficits to create appropriate treatments for deficits in muscle strength, range of motion, endurance, structural stability, and edema control.
- Various treatments, such as physical agent modalities, exercise, and purposeful activities, can remediate movement deficits and enable function.

Theory Evidence	Study 1	Study 2
Article Citation, Title and Journal source	Debbi, E.M., Wolf, A., Goryachev, Y., Rozen, N. & Haim, A. (2015). Alterations in sagittal plane knee kinetics in knee osteoarthritis using a biomechanical therapy device. *Annals of Biomedical Engineering, 43*(5). 1089-1097.	Michener, L.A., Elmore, K.A., Darter, B.J., Timmons, (2015). Biomechanical measures in participants with shoulder pain: Intra-reliability. *Manual Therapy, 22,* 86-93.
Description of Study Participants and Clinical Application Write a 1-2 sentence summary description of the individuals, groups or populations where the theory/model was applied.	The study used a biomechanical intervention program to evaluate the change in the knee sagittal moment in 25 female patients who had symptomatic bilateral medial compartment knee OA. Participants were referred to the study by a senior orthopedic surgeon (Debbi et al. 2015). This study focused on evaluating the participants gait to determine if the biomechanical device can increase sagittal movements over time.	The study used the biomechanical frame of reference to analyze subacrominal pain syndrome in 12 individuals. The participants of the study were recruited from local clinics (Michener et al. 2015). This study focused on studying the effects of biomechanical mechanisms of manual therapy using kinematic analysis and surface electromyography (sEMG) to improve shoulder range of motion.
Research Methods Write a 1-2 sentence description of the research design and study methods.	The study performed a full barefoot gait analysis prior to the program. The participants were required to follow a treatment protocol where they had to wear the biomechanical device for up to 30 minutes a day. The follow up appointments were scheduled after 3 months and 9 months, where the participants completed another barefoot gait analysis and questionnaire to determine the results.	The study used test-retest reliability to determine the effectiveness of shoulder kinematics and muscle activity sEMG. Participants completed two test sessions, where they used the Pennsylvania Shoulder Scale to measure shoulder pain, satisfaction and function in daily activities.
Study Findings Write a 1-2 sentence description of the major findings of the study.	The study found that knee flexion moment and impulse of knee flexion decreased significantly and that there was an increase in walking velocity, a significant reduction of pain, and increased functional activity. The study found that knee sagittal moments could be improved in patients with knee OA with biomechanical treatment approaches.	The study found that most kinematic and muscle activity measures demonstrated well to very well inter-session reliability.
Implications for OT Practice	This study benefits the practice of occupational therapy because a large part of this practice is rehabilitation after orthopedic injuries. This study could benefit the practice of OT because it expands the evidence to support the use of the biomechanical frame of reference in orthopedic injuries.	This study benefits the practice of occupational therapy because it provides evidence for the effectiveness of two different treatment methods for shoulder pain that could be used in OT practice.

MOT 535: Theoretical Foundations of OT
Theory Wiki Guidelines
Spring 2022

Grade Weight: 25% of Final Grade

I. Introduction

The Theory Wiki is a summary of the most important concepts and points related to the different theories, conceptual models and frames of reference discussed in class. For each of the modules, you will be asked to submit a set of wikis that you will compile as a group. The purpose of these wikis is to have available "cheat sheets" or quick reference guides that you can use as you move forward with the rest of the MOT program, for use in your FW 1 and 2 assignments, and as a reviewer for your NBCOT exam.

II. Assignment Objectives and ACOTE Requirements met

1. Students will be able to articulate the historical foundations, concepts, assessments and treatment of each theory/FOR.	B 2.1 Articulate an understanding of the importance of the history and philosophical base of the profession of occupational therapy. B 2.5 Explain the role of occupation in the promotion of health and the prevention of disease and disability for the individual, family, and society. B 2.11 Analyze, synthesize, and apply models of occupational performance.
2. Students will be able to assess the value of each Theory/FOR through the use of evidence.	B 2.3. Articulate to consumers, potential employers, colleagues, third-party payers, regulatory boards, policymakers, other audiences, and the general public both the unique nature of occupation as viewed by the profession of occupational therapy and the value of occupation to support performance, participation, health, and well-being. B 2.11 Analyze, synthesize, and apply models of occupational performance.

III. Guidelines

You will form 5 groups of 10 members each. As a group, you will have to create a Wiki-sheet for 12 theories/FORs/Conceptual Models divided into 4 modules (See Course Syllabus).

Modules and Wiki Assignments:

Module	Theory/FOR	Date Due
Module 1: Grand Theories	1. MOHO 2. OA 3. PEOP 4. EHP	2/24
Module 2: Emerging Theories	6. Neuro-Occupation	3/3
Module 3: Neuromotor Theories	7. Biomechanical 8. NDT 9. PNF	4/12
Module 4: Cognitive Theories	10. Allen 11. Dynamic Interactional 12. Neurofunctional Approach	5/3

Contents of Wikis:

Each Wiki must contain the most important components of each theory/FOR and evidence of clinical utility of the theory. Remember that the purpose of these wiki sheets is to have a quick reference guide that you can use when you think of assessment and intervention plans and as a reviewer for the NBCOT.

Part 1: Theory/Model Information (Front Page)

1. **Theory and Proponent:** Write the name of the Theory/FOR and list of proponents and the citation of the seminal article (first article) published about this theory/FOR.

2. **Theory Description and Assumptions:** Write a 3-4 bullet points summarizing the theory/FOR and its intended clinical use.

3. **Summary of Most Important Terminology:** Identify the 5 most important terms and definitions that one needs to understand from the theory.

4. **Function-Dysfunction Continua:** Write a 3-4 sentence summary of what constitutes function and dysfunction based on the theory/FOR. This should not merely be a regurgitation of notes from class but a synthesis of what you understood from readings and lectures.

5. **Implications to OT Assessment and Intervention:** A critical part of the wiki that includes 3 bullet points each stating the Theory/FOR's assumptions and guidelines on Assessment and Treatment when using this theory/FOR. This should not contain specific eval or treatment plans, but rather a "manner of thinking" about assessment and intervention as guided by the theory.

Part 2: Theory/Model Evidence (Back page/Second page)

In this section you will search and analyze **2 peer-reviewed journal articles in the last 10 years** applying the theory or model either in developing assessments, testing effectiveness of intervention programs, or applying concepts to understand needs of individuals and populations. Create a Google Doc for your class so that you avoid, as much as possible, using the same literature for your groups. Present this section in **table format.**

Here is an example

Theory Evidence	**Study 1**
Article Citation, Title and Journal source	Grajo & Candler, 2016 The Occupation and Participation Approach to Reading Intervention: Pilot Case Application The Journal of Occupational Therapy Schools and Early Intervention
Description of Study Participants and Clinical Application Write a 1-2 sentence summary description of the individuals, groups or populations where the theory/model was applied.	Study applied the theory of Occupational Adaptation to 5 children with reading difficulties as case studies. The study is about a pilot intervention program for children with reading difficulties.
Research Methods Write a 1-2 sentence description of the research design and study methods.	The study used a combined case-study and group pre-test and post-test design. All 5 children participated in 8 weeks of intervention, twice a week.
Study Findings Write a 1-2 sentence description of the major findings of the study.	Study found increases in reading participation of all 5 children based on various assessments.
Implications for OT Practice	Study provided the first and preliminary evidence of application of OA for children with reading difficulties.

IV. Wiki Format:

1. Be creative. You can use texts with headings, tables, charts, illustrations, Word Newsletter layouts, etc. Avoid highly contrasting and bold colors. Keep the format clean and professional but creative.
2. No more than 2 pages, 1 to 1.5 spaced, Times New Roman/Arial Font 11 or 12.
3. Use APA format for in-text citations and references. As this is a wiki sheet, no need to cite references used to describe the theory/model. If you are using copyrighted pictures and illustrations, cite them appropriately.
4. Indicate your group name and members in the wiki.
5. Hand in hard copy on the due date

V. Grading

For each theory, the following points will be awarded for complete, accurate, and well-written wikis:

Part 1:

Theory and Proponent	2 points
Description, Assumption, Premises	5 points
Summary of Terminologies	5 points
Function-Dysfunction Continua	5 points
Implications to Assessment and Intervention	5 points
Format, Appearance, Style	3 points

Part 2:

Article Citation	2 points x 2
Description of Population	3 points x 2
Application:	
- Research Method	4 points x 2
- Findings	4 points x 2
- Implications	2 points x 2

Total: **55 points/Theory**

12 Theories/Models/FORs x 55 points each = **660 total points**

Group
OCTH5350 WIKI Gradesheet
Ahmad

		MOHO	OA	PEOP	EHP	Total
Theory and Proponent Description, Assumption, Premises Summary of Terminologies Function-Dysfunction Continua Implications to Assessment and Intervention Format, Appearance, Style	2 points 5 points 5 points 5 points 5 points 3 points					
Article Citation Description of Population Application: - Research Method - Findings - Implications	2 points x 2 3 points x 2 4 points x 2 4 points x 2 2 points x 2					
55 points/Theory						

Birch, Clemente, Coutts, Mobley, Moran, Muldoon, Tilson
Weible

Group
OCTH5350 WIKI Gradesheet
Ahmad

		Bio. ~~NeuroOccupation~~		NDT		PNF	
Theory and Proponent	2 points	✓		✓		✓	
Description, Assumption, Premises	5 points	✓		✓		✓	
Summary of Terminologies	5 points	✓		✓		✓	
Function-Dysfunction Continua	5 points	✓		✓		✓	
Implications to Assessment and Intervention	5 points	✓		✓		✓	
Format, Appearance, Style	3 points	✓ Some more attention to format would be welcome.		✓		✓	
Article Citation	2 points x 2	✓	✓	✓	✓	✓	✓
Description of Population	3 points x 2	✓	✓	✓	✓	✓	✓
Application: - Research Method	4 points x 2	✓	✓	✓	✓	✓	✓
- Findings	4 points x 2	✓	✓	✓	✓	✓	✓
- Implications	2 points x 2	✓	✓	✓	✓	✓	✓
55 points/Theory		55		55		55	

Multiple Sclerosis Case Study Assignment 2021

MS Evaluation Assignment Due: 11/18 Via Canvas at 2:30 p.m.

MS Treatment Assignment Due: 12/2 Via Canvas at 2:30 p.m.

12 pt single spaced, MS Word, normal margins

This is an INDIVIDUAL assignment.

Situation: Damon is a 46-year-old with multiple sclerosis who has been receiving occupational therapy services in his home for several months. You are the occupational therapist working for a mobile outpatient agency who is assigned to complete Damon's reevaluation today.

Evaluation Assignment(6 pg max)

Use the evaluation results from Simucase and include S statements.

Complete this on the OT Neuro Eval Form. Complete A and P narratives in the appropriate places. Make sure to write out the plan, not just check boxes.

To do this you will:

- For each assessment reported in **O**, do not abbreviate the name without first spelling it out. Describe the assessment in one sentence as non-OTs read your evaluations.
- Develop a FULL **problem list (4+)**
- Complete an **Assessment** This is the "so what, who cares" section; where you give MEANING to everything on the evaluation in a few brief sentences. You may say something like "paralysis of the dominant RUE will result in significant impairments in self-care abilities."
- "Client seen in outpatient clinic to evaluate occupational performance and independence after stroke. Client presents with X YZ deficits. These deficits result in decreased independence in XYZ. Patient shows x rehab potential as a result of x y z" You can also add details from the assessments
- Write a **Plan** section, including goals which are derived from what you observed and what the client stated
- Anything in your plan should be represented in O and A.
- All FOUR goals should be functional and relate to each other (2 STGs build on LTGs)
    - Consider level of care – home health (1-2x/week x1 or more months)
    - Goals do not need to include" be able" . Just Ct. Will ….
    - Occupation should be at the heart of EVERY goal.

Treatment Plan Assignment (3 page max)

- Write a functional, detailed treatment plan. A therapist should be able to read the plan above and complete it in the way you would like to see it completed without having to ask you any questions.
- Treatment approaches should include those taught in this course. Simply modify/adapt or remediate are not acceptable. FOR should be included as well.
- Please review the feedback for treatment plans and evals from earlier this semester and last spring. This is a great guide on what was good and what needed to be improved upon for the class's treatment planning in general.
- Copy and paste the below formatting and fill in your plan.

Treatment Plan (45 minutes long)
Date of session:
Session focus:

Treatment Approach(es), FOR & Rationale

Justify with citations from the literature. Describe how this study is relevant/which parts of it you will infuse in your plan.

Setup & Equipment needed: make sure to incorporate safety-related items

Activity: LIST THE ACTIVITY I.e. Hot meal preparation
Justify with citation from the literature and client factors including assessments

Name Activity (# minutes)

- Describe Activity in detail

- **Questions to ask**: make sure these fit the treatment approach you select and show knowledge of that approach
- **Things to look for**: Again, fit these to the tx approach and FOR.
- **Point to make**: Key take-home lessons/movement strategies/aspects you want the client to remember
- **Grading up and down:** Include at least 4 aspects of grading up and 4 for grading down.

References: Cite **throughout** treatment plan and **list** here in APA 7th edition.

MOT 5550 Multiple Sclerosis Case Study Evaluation Rubric

Rating System:
Meets Standards: Performance is consistent with level of OT education. Student demonstrates level of knowledge and skills to summarize results of an evaluation and establish a functional treatment plan supported by evidence. Student documents clearly, concisely, and uses APA appropriately when needed. Student will show need for improvement in **one** of the listed criteria.

Adequate: Student demonstrates emerging skills in this area but may make errors in logistical aspects or practical considerations, or demonstrates errors in APA style or writing. Student would benefit from continued improvement in **two** of the listed criteria **or have missed one** criterion completely.

Marginal: Performance is in need of significant improvement in **two or more** of the listed criteria, or is missing sections of the assignment.

Unsatisfactory: Performance is below standards and requires significant development. Performance does not meet expectations for the assignment, fails to acceptably complete this aspect of the assignment, or requires significant revision.

Total Points /30

	Meets Standards	**Adequate**	**Marginal**	**Unsatisfactory**
Basics and S Section • Fewer than 3 spelling or grammar errors throughout eval • Relevant S statements utilized and context given if needed • Current dx and PMH included	☐ 10 points	☐ 7 points	☐ 5 points	☐ 2 points
O Section • All assessments included • Results of each assessment interpreted in one sentence each showing familiarity of OT with measures	☐ 10 points	☐ 7 points	☐ 5 points	☐ 2 points
Assessment • Client current hx, past med hx, and OP summarized in 3-4 sentences. • Problem list (4 minimum) identifies all deficits revealed in eval and ties person factors to occupations • Demonstrates need for skilled OT services	☐ 10 points	☐ 7 points	☐ 5 points	☐ 2 points

Long term goals • COAST Method utilized • Measurable and appropriate time frame for setting • Reflects problem list/COPM/ACS • Functional/occupational goals	☐ 10 points	☐ 7 points	☐ 5 points	☐ 2 points
Short term goals • COAST Method utilized • 2 STGs lead to 2 LTGs • Measurable and appropriate time frame for setting • Reflects problem list/COPM/ACS Functional/occupational goals	☐ 10 points	☐ 7 points	☐ 5 points	☐ 2 points
Plan • Level of care and frequency appropriate • All treatment areas included • Plan stated in one-two sentences	☐ 10 points	☐ 7 points	☐ 5 points	☐ 2 points

Total: /60

MOT 5550 MS Case Study Treatment Plan Rubric

Rating System:
Meets Standards: Performance is consistent with level of OT education. Student demonstrates level of knowledge and skills to summarize results of an evaluation and establish a functional treatment plan supported by evidence. Student documents clearly, concisely, and uses APA appropriately.

Adequate: Student demonstrates emerging skills in this area but may make errors in logistical aspects or practical considerations, or demonstrates errors in APA style or writing. Student would benefit from continued improvement in **one or two** of the listed criteria **or have missed one** criterion completely.

Marginal: Performance is in need of significant improvement in **two or more** of the listed criteria.

Unsatisfactory: Performance is below standards and requires significant development. Performance does not meet expectations for the assignment, fails to acceptably complete this aspect of the assignment, or requires significant revision.

	Meets Standards	**Adequate**	**Marginal**	**Unsatisfactory**
Treatment Basics • Fewer than 3 grammar/spelling errors • Treatment could be completed in approx. 45 mins • Treatment is functional and client centered • Treatment is appropriate for Skilled OT practice and this client's abilities.	☐ 10 points	☐ 7points	☐ 5 points	☐ 2 points
Treatment Approach & Rationale • Clear, concise explanation of approaches with evidence explained, not just cited. • Intervention selected fits THIS client's factors, which are listed and connected to evidence • Written in a way that demonstrates need for skilled OT services • FOR/theory included and appropriate	☐ 10 points	☐ 7 points	☐ 5 points	☐ 2 points
Setup, Equipment & Patient Written Instructions • Setup clearly explained and can be pictured by instructor • All materials included • Patient instructions clearly outlined	☐ 5 points	☐ 3 points	☐ 1 point	☐ 0 points
Activity 1 • Activity matches level of care • Activity is justified with evidence -CITE	☐	☐	☐	☐

• Activity is explained in detail so another therapist could carry out • Precautions/safety considerations are listed • Components of specific treatment approach are incorporated in all sections	10 points	7 points	5 points	2 points
Evidence • 3+ APA 7th style references and citations • Articles are appropriate for specific treatments and population • At least 2 primary intervention research articles and connection to activity clear/described. • Textbook references are for Chapter, not whole text	☐ 5 points	☐ 3 points	☐ 1 point	☐ 0 points

Total Points /40

Saint Louis University

Department of Occupational Science & Occupational Therapy

MOT 5600 OT for Children: Pediatrics

Community Pediatric Fieldwork & Case Study

Fieldwork: Week of November 1-5 or November 8-12

Case due: Tuesday, November 23, 2021 at midnight

Objectives

1. Assess a child with a disability in a community/clinical setting.

2. Develop a case study that includes

    - History & diagnosis
    - Assessment: Occupational profile and analysis of occupational performance
    - Intervention plan: baseline function, long term goals (LTG), short term goals (STG), and intervention plan.
    - Rationale for Occupational frameworks/models of practice and intervention
    - Rationale for intervention including research to support evidence-based decision making
    - Additional recommendations (HEP, summer programs, additional activities)

Assignment

This fieldwork experience is designed to provide the opportunity to apply occupational therapy practice in a pediatric setting. Your clinical instructor (CI) will select a child and evaluation tool for you to complete. The evaluation or screening tool you use will depend on the context, diagnosis, activity demands, client factors and priorities of the child you are assigned. You will complete an occupational profile, administer the evaluation (with support from your CI), interpret the assessment results, and create an intervention plan (you will not need to carry out the intervention plan).

Assessment

Do not use abbreviations or language that people in attendance (parents, teachers, etc.) will not understand. Write your evaluation of this student as an initial evaluation note that would be shared with the parent, clinical and/or educational team with the following information:

- **Background information:** client initials, age, medical and educational diagnosis or condition and date; any precautions, contraindications and current school services (ie., Special Education, OT/PT/Speech/Counseling)
- **Occupational Profile**: identify information such as occupational, social, and educational history; supports and barriers; and how the medical and/or educational disability was identified. This should include why this assessment was selected for this child.
- **Evaluation procedures or tests used:** describe tests or parts of tests used and what the test assesses, date assessment was administered, clinical observations, and reports from the therapist, teacher or parent (DO NOT discuss your results here)

Analysis of Occupational Performance (OP)

- **Report results of assessments** (ie. scores) include chronological age at the time of testing. For most assessments this is most clearly presented in a chart form.
- **Write** a comprehensive evaluation including interpretation of standardized assessment results, non-standardized assessment and clinical observations. your analysis of performance skills, and areas of occupation concerns in relation to performing daily occupations in the role of a student, sibling son/daughter, etc. Identify areas that you may not have evaluated but gathered from the therapist, teacher or client record.
- **Create a list:** of targeted outcomes that include child's problems and strengths in the above categories

Intervention Plan: develop an intervention plan for December through May (the end of the school year) which will include the OT problem, baseline function, LTG, STG, and intervention with rationale:

- For each long-term goal (LTG), identify an occupational performance problem noted in the analysis of OP (this should be generated from the list above). Be certain your goals are occupation based. Identify the baseline function related to this goal.
- Write goals in the COAST format. Each case should address 3 LTGs. Establish LTG and short-term goals (STGs) for the remainder of the school year (about 6 months December thru May) in 2-month timeframes (i.e. each LTG should have at least 2 sequential STGs or BMs).
- Write at least one intervention activity per STG in the plan section. One activity can address more than one STG.
- **Evidence Support:** explain your rationale for why you expect your intervention to be successful in achieving your goal and include three articles, 2016 or later, to reflect evidence-based decision making (EBDM) that supports any aspect of your intervention used in your case. Incorporate the findings from your EBDM process into your treatment rationale. Cite your articles in your paper with page number that points to how this article supports that intervention. This should all be written in the same section of the report where you discuss the intervention. Include articles in a reference list using APA format (with link to article).
- **Theoretical Basis for Approach**: Identify the model of practice and/or frame of reference(s) used to justify your intervention.
- **OTPF Approaches:** Identify the OTPF intervention approaches used (i.e., create or promote, establish or restore, maintain, modify or prevent)
- Please format in the following manner:
    - LTG
    - STG #1
        - Description of intervention
        - Rationale of intervention
        - Theoretical basis (FOR)
        - OTPF approach

Summer Referral/Program or Discharge Planning: Depending on your child's needs, address at least one of the following: referral for summer therapy, other programming or discharge planning. Also, include information for family involvement and carry-over at home.

Saint Louis University

Program in Occupational Science & Occupational Therapy

MOT 5600 OT for Children

Level I Assessment & Intervention Assignment

Background information (client name, age, medical diagnosis, education diagnosis, any precautions or contraindications, current school services- OT/SLP/special education).	/5
Occupational profile including occupational, social, and education history; This area should describe areas of weakness that justify the need for OT services as well as the reason the assessment was selected.	/3
Assessment: • Standardized assessment administered, description of assessment	/2
Analysis of occupational performance (OP) • Reports results of assessment (via chart) (2pts) • Comprehensive interpretation of standardized assessment results. (2pts) • Identifies clinical observations and non-standardized assessment information (2 pts) • Identifies areas of concern not evaluated but were gathered from therapist, teacher or client record. (2pts)	/8
List • Strengths (3 points) • Weaknesses (3 points)	/6
Goals to address OT problem with baseline function (6 points per goal) • Includes LTG which is occupation-focused, written in measurable (COAST) format and is appropriate based on child's current baseline of function and OT problems. (2 points per goal) • Includes STGs which are written in COAST format and is appropriate based on child's current baseline of function and OT problems. STG should be steps towards achieving LTG (2pts per goal)	/18
Treatment plan and rationale for treatment activities • Treatment plan supports STG achievement, is appropriate for child's age and baseline level of skills, and in creative and diverse (2 pts per intervention)	/12
3 evidence references to support intervention plan (2pts per article) • Article is 2016 or newer and reference (include page number and/or quote) which clearly shows evidence to support treatment activity rationale	/6
Models of practice/ FOR used in intervention plan is identified and supports treatment intervention.	/3
OTPF approaches used in intervention plan are identified and support child's diagnosis and treatment intervention (create or promote, establish or restore, maintain, modify or prevent)	/3
• Summer programming or discharge planning is addressed and supports intervention plan. • Includes information regarding family involvement and home carry-over	/2
Grammar and appearance • Paper is free of grammatical errors. • Paper is written with language and tone appropriate for evaluation to be provided to the child's educational team	/2
Total Score	/70

Doisy College of Health Sciences Program-Level Assessment: Annual Report

Program: Occupational Therapy	Department: Occupational Science & Occupational Therapy
Degree or Certificate Level: MOT	College/School: Doisy College of Health Sciences
Date (Month/Year): August 2022	Course Instructor Contact: Sarah Adam
In what year/cycle was the data upon which this report is based collected?	Academic Year 2021 - 2022
In what year/cycle was the program's assessment plan most recently reviewed/updated?	August 2020

1. Student Learning Outcomes

Which of the program's student learning outcomes were assessed in this annual assessment cycle?

1 - Apply theories that underlie the practice of occupational therapy

2. Assessment Methods: Student Artifacts

Which student artifacts were used to determine if students achieved this outcome? Please identify the course(s) in which these artifacts were collected. Clarify if any such courses were offered a) online, b) at the Madrid campus, or c) at any other off-campus location.

MOT 5700 & 5750 Level II Fieldwork
Item #17 on AOTA Fieldwork Performance: Establishes an accurate and appropriate client-centered plan based on the evaluation results, context, theories, frames of reference, and/or practice models.

3. Assessment Methods: Evaluation Process

What process was used to evaluate the student artifacts, and by whom? Please identify the tools(s) (e.g., a rubric) used in the process and include them in/with this report.
Please attach the rubrics used to complete your report- doing so is very helpful to the members of the University Assessment Committee (UAC).

The program set a target goal of: "An average of 85% of students will score a "3" (Meets Standards) or higher on the AOTA Fieldwork Performance Evaluation".
The Clinical Instructors (CIs), who supervise the students at their fieldwork site, collect the data using the AOTA Fieldwork Performance Evaluation at 6 weeks (midterm) and at 12 weeks (final). The AOTA Performance Evaluation uses a 4 point scale: 4_Exemplary Performance, 3_Proficient Performance, 2_Emerging Performance, 1_Unsatisfactory Performance.

4. Data/Results

What were the results of the assessment of the learning outcomes? Please be specific. Does achievement differ by teaching modality (e.g., online vs. face-to-face) or on-ground location (e.g., STL campus, Madrid campus, other off-campus site)?

Students scored an average of 2.5/4.0 on the midterm evaluation and 3.45/4.0 on the final evaluation, with 100% of students achieving a score of 3 or above at final evaluation.

Achievement may differ based on opportunities to observe and practice establishing an accurate and appropriate plan at the different sites the students are placed at. Achievement may also differ based on the teaching abilities and evaluation style of the student's Clinical Instructor on site. Average scores for the 2021-2022 cohort at final evaluation have increased from 3.31/4.0 the previous academic year.

5. Findings: Interpretations & Conclusions

What have you learned from these results? What does the data tell you?

While on Fieldwork, students are improving upon their skills to apply theories that underlie the practice of occupational therapy. By the end of their 12-week rotation, students are demonstrating an adequate or substantial understanding and application of evaluation results, contexts, theories, frames of references, and practice models to establish an accurate and appropriate plan with the patients under their care.

6. Closing the Loop: Dissemination and Use of Current Assessment Findings

A. When and how did your program faculty share and discuss these results and findings from this cycle of assessment?

Results from the AOTA Fieldwork Performance Evaluation are reported in our annual Program Evaluation Report for ACOTE Accreditation and shared at the end of the year faculty meeting. An action plan is created to allow faculty to reflect upon how topics are introduced and applied in the classroom to prepare students for real-life application during fieldwork.

B. How specifically have you decided to use findings to improve teaching and learning in your program? For example, perhaps you've initiated one or more of the following:

Changes to the Curriculum or Pedagogies	• Course content • Teaching techniques • Improvements in technology • Prerequisites	• Course sequence • New courses • Deletion of courses • Changes in frequency or scheduling of course offerings
Changes to the Assessment Plan	• Student learning outcomes • Student artifacts collected • Evaluation process	• Evaluation tools (e.g., rubrics) • Data collection methods • Frequency of data collection

Please describe the actions you are taking as a result of the findings.

Continuing to increase opportunities for students to actively engage in evaluation, assessment, and intervention throughout the program.

Increase the use of Simucase throughout the curriculum to assist with providing students with additional on-demand opportunities to engage with real patient cases. Evaluate the impact of Simucase on student performance.

Being more explicit about the use of evaluation results, contexts, theories, frames of references, and practice models in intervention planning in course assignments, during lab experiences, and during the Problem-Based Learning course.

If no changes are being made, please explain why.

IMPORTANT: Please submit any assessment tools and/or revised/updated assessment plans along with this report.

Doisy College of Health Sciences Program-Level Assessment: Annual Report

Program: Occupational Therapy	Department: Occupational Science & Occupational Therapy
Degree or Certificate Level: MOT	College/School: Doisy College of Health Sciences
Date (Month/Year): August 2022	Course Instructor Contact: Sarah Adam
In what year/cycle was the data upon which this report is based collected?	Academic Year 2021 - 2022
In what year/cycle was the program's assessment plan most recently reviewed/updated?	August 2020

1. Student Learning Outcomes

Which of the program's student learning outcomes were assessed in this annual assessment cycle?

2 - Demonstrate skills in assessment and intervention practice in the implementation of occupational therapy with clients across the lifespan.

2. Assessment Methods: Student Artifacts

Which student artifacts were used to determine if students achieved this outcome? Please identify the course(s) in which these artifacts were collected. Clarify if any such courses were offered a) online, b) at the Madrid campus, or c) at any other off-campus location.

MOT 5700 & 5750 Level II Fieldwork
Item #11 on AOTA Fieldwork Performance Evaluation: Evaluates and analyzes client factors and contexts that support or hinder occupational performance.

3. Assessment Methods: Evaluation Process

What process was used to evaluate the student artifacts, and by whom? Please identify the tools(s) (e.g., a rubric) used in the process and include them in/with this report.
Please attach the rubrics used to complete your report- doing so is very helpful to the members of the University Assessment Committee (UAC).

The program set a target goal of: "An average of 85% of students will score a "3" (Meets Standards) or higher on the AOTA Fieldwork Performance Evaluation".
The Clinical Instructors (CIs), who supervise the students at their fieldwork site, complete the AOTA Fieldwork Performance Evaluation at 6 weeks (midterm) and at 12 weeks (final). The AOTA Performance Evaluation uses a 4 point scale: 4_Exemplary Performance, 3_Proficient Performance, 2_Emerging Performance, 1_Unsatisfactory Performance.

4. Data/Results

What were the results of the assessment of the learning outcomes? Please be specific. Does achievement differ by teaching modality (e.g., online vs. face-to-face) or on-ground location (e.g., STL campus, Madrid campus, other off-campus site)?

Students scored an average of 2.4/4.0 on the midterm evaluation and 3.2/4.0 on the final evaluation, with all but one of students achieving a score of 3 or above at final evaluation.

Achievement may differ based on opportunities to observe and practice establishing an accurate and appropriate plan at the different sites the students are placed at. Achievement may also differ based on the teaching abilities and evaluation style of the student's Clinical Instructor on site.

5. Findings: Interpretations & Conclusions

What have you learned from these results? What does the data tell you?

While on Fieldwork, students are improving upon their skills in assessment and intervention with clients across the lifespan. By the end of their 12-week rotation, students are demonstrating an adequate or substantial understanding and application of evaluation and analysis of client factors and contexts that support or hinder occupational performance.

6. Closing the Loop: Dissemination and Use of Current Assessment Findings

A. When and how did your program faculty share and discuss these results and findings from this cycle of assessment?

Results from the AOTA Fieldwork Performance Evaluation are reported in our annual Program Evaluation Report for ACOTE Accreditation and shared at the end of the year faculty meeting. An action plan is created to allow faculty to reflect upon how topics are introduced and applied in the classroom to prepare students for real-life application during fieldwork.

B. How specifically have you decided to use findings to improve teaching and learning in your program? For example, perhaps you've initiated one or more of the following:

Changes to the Curriculum or Pedagogies	• Course content • Teaching techniques • Improvements in technology • Prerequisites	• Course sequence • New courses • Deletion of courses • Changes in frequency or scheduling of course offerings
Changes to the Assessment Plan	• Student learning outcomes • Student artifacts collected • Evaluation process	• Evaluation tools (e.g., rubrics) • Data collection methods • Frequency of data collection

Please describe the actions you are taking as a result of the findings.

Continuing to increase opportunities for students to actively engage in evaluation, assessment, and intervention throughout the program.

Increase the use of Simucase throughout the curriculum to assist with providing students with additional on-demand opportunities to engage with real patient cases. Evaluate the impact of Simucase on student performance.

Being more explicit about the use of evaluation results, contexts, theories, frames of references, and practice models in intervention planning in course assignments, during lab experiences, and during the Problem-Based Learning course.

If no changes are being made, please explain why.

IMPORTANT: Please submit any assessment tools and/or revised/updated assessment plans along with this report.