

Program-Level Assessment: Annual Report

Program Name (no acronyms): Program in Physical Therapy Department: Department of Physical Therapy and Athletic Training

Degree or Certificate Level: Doctor of Physical Therapy College/School: Doisy College of Health Sciences

Date (Month/Year): September 2023 Assessment Contact: Elissa C Held Bradford

In what year was the data upon which this report is based collected? Academic Year 2022-2023

In what year was the program’s assessment plan most recently reviewed/updated? September 2023

Is this program accredited by an external program/disciplinary/specialized accrediting organization or subject to state/licensure requirements? Yes

If yes, please share how this affects the program’s assessment process (e.g., number of learning outcomes assessed, mandated exams or other assessment methods, schedule or timing of assessment, etc.): External accreditation for physical therapy programs require an annual report in December every year to the accrediting body, CAPTE (Commission on Accreditation in Physical Therapy Education). Additionally, CAPTE requires an in-depth self-study with on-site review every 10 years. The SLU Program in Physical Therapy’s next self-study is 2029.

1. Student Learning Outcomes

Which of the program’s student learning outcomes were assessed in this annual assessment cycle? (Please provide the complete list of the program’s learning outcome statements and **bold** the SLOs assessed in this cycle.)

For the Doctor of Physical Therapy (DPT) degree, the Program has 4 student learning outcomes (SLO).

- #1: Graduates will be able to serve others by advocating for the health of society.**
- #2: Graduates will be able to communicate in a way that optimizes patient-centered care.**
- #3: Graduates will be able to apply principles of evidence-based practice in patient care.
- #4: Graduates will be able to evaluate typical versus atypical physical movement.

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, identify the course(s) in which they were collected, and if they are from program majors/graduates and/or other students. Clarify if any such courses were offered a) online, b) at the Madrid campus, or c) at any other off-campus location.

SLO #1- Graduates will be able to serve others by advocating for the health of society.

Assessment: SLO #1- - Rating on Clinical Performance Instrument – Item # 3 – Assesses accountability

SLO #2- Graduates will be able to communicate in a way that optimizes patient-centered care.

Assessment: SLO#2- Rating on Clinical Performance Instrument – Item # 4 – Assesses communication

Description of Assessment Method and Artifact SLO #1 and SLO #2 were assessed using selected items from the Physical Therapist Clinical Performance Instrument Version 2006 (CPI) 2.0. The CPI serves as the artifact for SLO #1 and SLO #2. Due to copyright restrictions, we cannot provide a copy of the CPI. **Note, the CPI was revised in 2023, now CPI 3.0. Moving forward with the Program-Level Assessment Plan for AY 2023-2024, the new version of the CPI will be used. The new CPI was not available and not used in data collection and assessment in this AY 2022-2023 report.*

The CPI is a valid tool for assessing physical therapy student clinical performance.¹ Prior to using the CPI, clinical instructors and students must complete standardized training. While clinical instructors complete the CPI for students they supervise, the academic program has the responsibility to assign grades based on the completed CPI.¹ The

Director of Clinical Education at Saint Louis University, Program in Physical Therapy, with input from faculty, developed a process to convert clinical instructors' student CPI results to a numeric score. These numeric CPI scores serve as the outcomes of SLO #1 and SLO #2.

The Director of Clinical Education at Saint Louis University, Program in Physical Therapy assisted in identifying relevant CPI items for assessment of SLO #1 and SLO #2. Items from the CPI were chosen due to their close match of the intended learning outcome and assessment method. For example, CPI item #4 is designed to assess if student physical therapist's communication meets the needs of the situation.¹

The 3 courses chosen for assessment of SLO#1 and SLO # 2 (DPT 5291 Clinical Experience IA; DPT 6192 Clinical Experience IIB; DPT 6294 Clinical Experience IV) represent a sequence of clinical education courses wherein students are expected to incrementally develop from beginner to entry level physical therapist while carrying a full caseload.¹

The assessment rubric was developed with assistance from the Director of Clinical Education, taking into account the developmental nature of the clinical experience courses.

¹ Roach KE, Frost JS, Francis NJ, Giles S, Nordrum JT, Delitto A. Validation of the revised Physical Therapist Clinical Performance Instrument (PT CPI): Version 2006. *Phys Ther.* 2012;92:416-428.PubMed ID 22135710

Courses, timing of assessment within clinical experience and ranking per CPI by the Clinical Instructor of graduate level DPT students

- 1- DPT 5291 Clinical Experience IA (midterm) – 85% of rankings at 2 or above
- 2- DPT 6192 Clinical Experience IIB (final)– 85% of rankings at 4 or above
- 3- DPT 6294 Clinical Experience IV (final) – 85% of rankings at 8 or above

No Madrid artifacts were included.

None of these clinical education courses were offered online. Clinical education sites are throughout the United States.

3. Assessment Methods: Evaluation Process

What process was used to evaluate the artifacts of student learning, and by whom? Please identify the tool(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).

SLO #1 & 2: Department Administrative prepared a spreadsheet of the Clinical Performance Instrument numeric scores. Numeric score data was analyzed by the faculty member responsible for collecting and analyzing student outcome data, Program in Physical Therapy. The data was used to assess student achievement as per the assessment rubric.

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)?

Courses, timing of assessment within clinical experience and ranking per CPI by student & Clinical Instructor of graduate level DPT students

- 1- DPT 5291 Clinical Experience IA (midterm) – 85% of rankings at 2 or above
- SLO #1: MET, 96.3% of Clinical Instructor (n=82) ranked students at a 2 or above
SLO #2: MET, 96.3% of Clinical Instructor (n=82) ranked students at a 2 or above

2- DPT 6192 Clinical Experience IIB (final)– 85% of rankings at 4 or above
 SLO #1: MET, 100% of Clinical Instructor (n=82) ranked students at a 4 or above
 SLO #2: MET, 100% of Clinical Instructor ((n=82) ranked students at a 4 or above

3- DPT 6294 Clinical Experience IV (final) – 85% of rankings at 8 or above
 SLO #1: MET, 98.7% of Clinical Instructor (n=78) ranked students at an 8 or above
 SLO #2: MET, 98.7% % of Clinical Instructor (n=78) ranked students at an 8 or above

5. Findings: Interpretations & Conclusions

What have you learned from these results? What does the data tell you? Address both a) learning gaps and possible curricular or pedagogical remedies, and b) strengths of curriculum and pedagogy.

Students perform well on their clinical experiences in relationship to the learning outcomes. They are meeting all developmental levels with progression to Master as defined on the Program Assessment Rubric as 8 or above on the CPI v2.0 at the final clinical experience DPT 6294. These results speak to the strength of the Program in PT didactic preparation and the clinical education experiences with clinical partners.

Program Assessment Rubric

Doctor of Physical Therapy (DPT)			
Program Learning Outcome (PLO #1): Graduate will be able to serve others by advocating for the health of society.			
Below "Introduce" Level	Introduce	Reinforce	Master
DPT 5291 Clinical Experience IA •Rating on Clinical Performance Instrument – Item #3 – Accountability below 2	DPT 5291 Clinical Experience IA •Rating on Clinical Performance Instrument – Item #3 – Accountability at or above 2	DPT 6192 Clinical Experience IIB •Rating on Clinical Performance Instrument – Item #3 – Accountability at or above 4	DPT 6294 Clinical Experience IV •Rating on Clinical Performance Instrument – Item #3 – Accountability at or above 8

Doctor of Physical Therapy (DPT)			
Program Learning Outcome (PLO # 2): Graduate will be able to communicate in a way that optimizes patient-centered care			
Below "Introduce" Level	Introduce	Reinforce	Master
DPT 5291 Clinical Experience IA •Rating on Clinical Performance Instrument – Item #4 – Communication below 2	DPT 5291 Clinical Experience IA •Rating on Clinical Performance Instrument – Item #4 – Communication at or above 2	DPT 6192 Clinical Experience IIB •Rating on Clinical Performance Instrument – Item #4 – Communication at or above 4	DPT 6294 Clinical Experience IV •Rating on Clinical Performance Instrument – Item #4 – Communication at or above 8

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

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

This report was shared with Program in Physical Therapy faculty in September 2023 and discussed at the following program meeting.

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.

The CPI v2.0 has been updated and the new version 3.0 has been re-mapped to the DPT SLO. This change is reflected in the new Assessment Plan. Additionally, faculty have recently revised the Assessment Plan for the Bachelor of Science in Exercise Science (BSES) SLO. This revision has led to further discussion on scaffolding of learning development of students the across the 3 + 3 program (3 years pre-professional phase plus 3 years professional phase; the professional phase has an overlap year where year four is both the final year for the BSES degree and first year for the DPT degree).

If no changes are being made, please explain why.

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 previous assessment data**?

The September 2022 DPT SLO Assessment report reviewed SLO #3 and #4.

Specifically, for SLO #4: Graduates will be able to evaluate typical versus atypical physical movement, program faculty discussions related to movement analysis of typical and atypical movement led to two decisions.

One, to introduce task-oriented movement analysis earlier in the curriculum in DPT professional year one/ BSES senior/year four (course: EXSC 5121 Clinical Biomechanics (formally DPT 5121 Kinesiology I)). No specific artifacts were deemed necessary for this modification.

Two, as the current artifact for SLO#4 is collected in DPT professional year two, faculty discussed utilization of a new additional artifact in DPT professional year three in DPT 6173 Patient Management III. The complex patient task analysis assignment was identified as a potential artifact for consideration.

B. How has the change/have these changes identified in 7A been assessed?

Data was collected from the complex patient task analysis assignment in Fall 2022. The assignment had been modified slightly to be based on patient information collected from the summer clinical experiences as part of the DPT 6072 Patient Management II grand round assignment. Continued utilization of a structure task analysis worksheet format remained the same.

C. What were the findings of the assessment?

Overall student performance on the complex patient task analysis assignment was high. However, the inability to compare students' written movement analysis to actual movement is a perceived limitation of the assignment as an artifact for DPT SLO#4.

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

This assignment is under review and editing again this Fall 2023 and will be reassessed for potential utilization as an artifact. Use of a different artifact, involving a video-based written examination or a standardized patient examination lab practical experience with role play of atypical movement is being explored.

As this assignment is under review, in the revised Assessment Plan, it was determined utilization of the new CPI 3.0 item: Examination, Evaluation, and Diagnosis would serve as an artifact in DPT professional year three for SLO#4. Utilization of the CPI v3.0 for SLO #4 would provide consistency of measurement across all DPT SLOs.

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