

Central Connecticut State University

# Submission Guidelines for **FULL** Assessment Reports (assessment results from AY 2017-2018)

Guidelines:

- 1) Submission deadline: October 15, 2018; early submissions are encouraged
- 2) Submit electronically to Yvonne Kirby (Director of OIRA) as an email attachment to <u>ykirby@ccsu.edu</u>.
- 3) The separate Full Report includes a Summary chart followed by detailed report that describes the information presented in the Summary chart for <u>each</u> academic program. The report should be between five and ten pages in length, excluding appendices. Provide a SEPARATE REPORT comprised of information specific to each academic program, detailing the assessment of Learning Outcomes for each respective academic degree or program. All certificate and degree programs are required to be assessed per NEASC. Check the reporting calendar at <a href="http://docs.ccsu.edu/oira/assessment/Assessment\_Submission\_Program\_Review\_Calendar.pdf">http://docs.ccsu.edu/oira/assessment/Assessment\_Submission\_Program\_Review\_Calendar.pdf</a> to see which certificate programs are considered embedded in a degree program as these programs do not need to be reported on separately.
- 4) The Full Report should also provide information regarding the department's contribution to the assessment of CCSU's General Education <u>Learning Objectives/Outcomes.</u>
  - a. Report information regarding your department's participation in the General Education Assessment initiative (MSC-model). Please indicate the participating faculty and Learning Objective/Outcome(s) for which your faculty have provided student artifacts. If desired, the department's participation in the MSC-model may be in lieu of department-level GenEd Assessment reporting., and/or
  - b. Report information from any departmental-level General Education Learning Outcomes assessments conducted during 2017-2018.

<u>Reminder</u>: Assessment reporting is on a five-year cycle, consisting of a full report in year one followed by interim reports for three years and then a summary report is due in the fifth year. The assessment cycle is aligned with the Program Review Cycle such that the full assessment report is due the year prior to the year that the department will submit their program review report. In lieu of a Full Assessment report during their Program Review year, departments should submit a 1-page summary report. This ensures that we are in compliance with NEASC and BOR requirements. Departments that are accredited by an outside agency, and thus exempt from the Program Review Policy, should follow the guidelines for assessment reporting as described in this document and follow the Assessment Calendar. Where possible, the assessment cycle will be aligned with the accreditation cycle and a Summary report will be due in the year the self-study is due to the accrediting body.

**Full reports**: Complete <u>BOTH</u> the Summary for the academic program, complete with department's contribution to the assessment of CCSU'S General Education Learning Objectives/Outcomes, <u>and</u> the detailed Full Report that provides the supporting evidence referenced in the Summary. URL to Assessment website resources: <u>http://www.ccsu.edu/oira/assessment/AAP.html</u>

<u>Summary:</u> The following questions are required by the Connecticut State Colleges and University Board of Regents, NEASC and the CCSU Academic Assessment Committee. These questions must be completed annually for all academic programs (all degree and certificate programs). Submit a separate table for each degree or program and for each General Education Learning Objective/Outcome the department assesses.

- You are encouraged to address the Summary questions using bullet statements rather than paragraph form —full details should be in narrative form and included within the text of the report, not in the Summary.
- Full reports: the Summary should reference clearly labeled, appropriate data tables presented in the Detailed Report.

Degree or Program Summary

## Department: Physical Education & Human Performance

Report Preparer: <u>Peter Morano</u>

Program Name and Level: <u>Athletic Training - BS</u>

Program Assessment Question	Response
URL: Provide the URL where the Learning	http://www.ccsu.edu/athletictraining/education/
Outcomes (LO) can be viewed.	
Assessment Instruments: Please list the source(s) of the data/evidence, other than GPA, that is/are used to assess the stated outcomes? (e.g., capstone course, portfolio review and scoring rubric, licensure examination, etc.)	Board of Certification Pass Rates Student evaluations by Preceptors – these are done 5 times per semester during their clinical rotations. Written & Practical examinations associated with their Practicum enrollment.
3) Interpretation: Who interprets the evidence? (e.g., faculty, Admn. assistant, etc.).	Faculty
<ul> <li>4) <u>Results</u>: Using this year's Findings, list:</li> <li>a. The conclusion(s) drawn</li> <li>b. The changes that were or will be made as a result of those conclusion(s)</li> </ul>	<ol> <li>The Athletic Training Education Program continues to excel with certification exam preparation.</li> <li>We are transitioning to a 3+2 Master's degree program and will be completing an accreditation self-study in the near future which may result in new/additional evaluation tools/procedures.</li> </ol>
5) <u>Strengths</u> : List ways in which your assessment process is working well.	We have detailed evaluation tools that are done regularly.
6) <u>Improvements</u> : List ways in which your assessment process needs to improve based on student data (A brief summary of changes to assessment plan can be reported here).	When we enter evaluation data on students, we need to calculate group averages at the same time.

#### Preamble

The Athletic Training Education Program (ATEP) is designed to prepare the student to assume the role of an entry-level athletic trainer upon graduation and successful completion of the Board of Certification (BOC) Examination. The ATEP is accredited by the Commission on Accreditation of Athletic Training Education (CAATE). Athletic Training is a medical profession which falls under the umbrella of Allied Health. Students participate in cognitive and practical experiences which give them the necessary knowledge and skills to work in a variety of settings, which include but are not limited to: high school, collegiate and professional sports teams, sports medicine clinics, law enforcement and military training centers, corporate/industrial health & wellness centers.

No significant changes have been made since the last assessment report. We are in the process of transitioning to a Master's degree program and phasing out the Bachelor's degree program. This change is degree is a requirement in education standards set forth by the Athletic Training Strategic Alliance which is made up of the NATA, NATA Research & Education Foundation, CAATE and the BOC.

## Learning Outcomes

# Practicum Written Cognitive Knowledge Exams

# EXS 315, EXS 316, and EXS 319

# Learning Objective #1

## Knowledge (Cognitive)

• Demonstrate the acquisition of knowledge and understanding necessary for the safe practice as a health care professional in the areas of prevention, clinical evaluation, diagnosis, immediate care, treatment and rehabilitation.

• Demonstrate the ability to document findings of initial evaluations, management plans, and referrals.

### Learning Objective #2

## Knowledge (Skills and Application)

- Demonstrate the acquisition of the established necessary skills that are the basis for clinical proficiency.
- Demonstrate the ability to investigate, integrate concepts and problem solve in order to communicate the assessment findings to the patient and other health care team members.
- Demonstrate the ability to use comprehensive therapeutic judgment and the ability to identify modifying influences or deviations from the norm.

## **Assessment Data Analysis**

Written cognitive knowledge exams are evaluated by the individual course instructors. Students must pass with an 80% or better. Those students who do not achieve a passing score are permitted to retake the exam an additional time. Students who do not pass on the second time meet with the instructor and are required to repeat the course.

Following the conclusion of each semester ATEP Faculty have a Program Meeting to discuss at concerns and evaluate the data from both the written and practical exams in EXS 315, EXS 316, and EXS 319.

Additionally, student outcome data is examined when preparing to write the Annual University Academic Assessment Reports, which are necessary for NEASC accreditation. Completing the CAATE Annual Reports also provides another point in which student outcome data are evaluated by ATEP faculty.

# Summary Data for Learning Outcomes #1 & 2

Eight students participated in on-campus clinical rotations (EXS 315, 316, 319) in the fall of 2017 and 1 students participated in their internship (EXS 445). During the spring of 2018, thirteen total registrants comprising ten total students participated in on-campus clinical rotations and 1 student participated in an internship.

For on-campus clinical rotations, students were evaluated through preceptor evaluations and through course-based written and practical exams (EXS 315, 316, 319). Students who were in EXS 315 Practicum I scored lower on preceptor evaluations than those in EXS 316 Practicum II and EXS 319 Practicum III and also had less opportunity to demonstrate certain skills (e.g. emergency care of head trauma/concussion, spine trauma). It is expected that the students in their first semester of clinical rotations perform lower and have fewer opportunities than those in their second and third semesters of clinical rotations. The younger students are demonstrating skills for the first time and in some cases have yet to learn the material in clinical coursework. See summary in Table 1 below. It is evident that students do improve their clinical skills and professional attributes over time. Students who were in EXS 319 were generally able to perform clinical skills independently (no supporting cues) or with minimal supporting cues from their preceptor. The faculty examine these evaluations at the end of each AY and look for trends in any areas where students are not meeting expectations and place emphasis on those areas in future semesters. The one area where students in EXS 319 did not meet expectations was with providing emergency care to a victim with a spine injury – this will be addressed in during the fall clinical rotations.

With regards to the clinical coursework attached to the clinical rotations (written and practical exams), 3 students did not meet the minimum requirements for passing in the fall of 2017 (these students repeated EXS 315 in conjunction with EXS 316 during the spring 2018 semester).

For off-campus internships, there were 1 in the fall of 2017 and 1 in the spring of 2018. Each student is evaluated with a mid-tem and final eval by their respective preceptors. Both students passed their mid-terms and final evaluations and both students passed the BOC exam on their first attempt.

# Practice Ethically, Professionally and Compassionately

EXS 315, EXS 316, EXS 319, and EXS 445

#### Learning Outcome # 3

## Practice Ethically, Professionally and Compassionately

- Demonstrate the ability to provide health care services of an athletic trainer to a variety of patient populations without prejudice to age, activities, gender, and social or cultural difference.
- Demonstrate the ability to function as a health care provider during challenging situations by remaining composed and professional, while affording quality compassionate care to the patient.
- Practice confidentiality and abide by professional ethical standards of the profession.

# **Assessment Data Analysis**

Assessment surveys are completed by the students themselves and also by the preceptors on record. Students participate in five 3-week rotations throughout each semester and are evaluated after each rotations. An average of all 5 preceptor evaluations are compiled on a master evaluation file. Preceptors and students meet at the end of the semester to go over their self-evaluation and preceptor evaluations. One section of the preceptor evaluations is titled "professional attributes" (See table 1 green section) and directly relates to Learning Outcome #3.

Additionally, student outcome data is examined when preparing to write the Annual University Academic Assessment Reports, which are necessary for NEASC accreditation. Completing the CAATE Annual Reports also provides another point in which student outcome data are evaluated by ATEP faculty. **Assessment Conclusions** 

Unlike Learning Outcomes 1 & 2, we do not see a big disparity between students in their first semester of clinical rotations and those who are more advanced (see summary in GREEN below for students in EXS 315, 316, 319). This suggests that students who are in the pre-professional program are well prepared to practice ethically, professionally and compassionately prior to formal admittance to the professional program. This data shows that Learning Outcome #3 has been met by both groups of students.

# Table 1

	EXS 315	EXS 316	EXS 319
	Avg	Avg	Avg
Ability To Perform Injury/Illness Prevention And Wellness Protection			
Taping, Wrapping, Padding, Splinting	3.557576	3.938095	4.516667
Equipment Selection and Fitting	2.787879	3.666667	3.833333
Physical Screening	2.636364	4	4.666667
Environmental Measures	1.818182	3.5	4.333333
Ability to Perform Clinical Evaluations and Diagnosis			
Orthopedic Evaluations Upper	2.577273	3.369048	4.177778
Orthopedic Evaluations Lower Extremity	2.772727	3.433333	4.188889
Orthopedic Evaluations Spine	1.545455	2.988095	4.111111
General Medical Evaluations	1.704545	2.678571	3.877778
Ability To Perform Treatment And Rehabilitation			
Upper	2.890909	3.4	4.244444
Lower Extremity	2.854545	3.571429	4.255556
<mark>Spine</mark>	2.977273	3.464286	4.211111
Modality Application	3.186364	3.892857	4.266667
Ability to Perform Immediate Emergency Care			
Wound Care	3.672727	4.707143	4.733333
Splinting Upper Extremity	1.636364	2.714286	2.833333
Splinting Lower Extremity	1.454545	3	3.833333
Medical Conditions	1.909091	2.857143	4.111111
Head Trauma/Concussion	1.454545	2.857143	3.944444
Spine	1.090909	2.142857	2.5
Cardiac	1.863636	3.285714	2.555556
Respiratory	1.681818	2.785714	2.555556
Transportation- Crutches, Boarding	2.681818	2.5	4
Ability to perform Organization and Professional Health and Wellness			
Long Sheet Documentation	3.090909	3.77619	4.327778

Initial Evaluation Note	2.986364	3.585714	4.244444
SOAP Note	3.236364	3.942857	4.283333
Concussion Notes	1.272727	2.535714	4
MD Clinic Notes	1.318182	2.614286	4
Professional Attributes			
Key: 3 = Excellent, 2 = Good, 1 = Fair, 0 = Poor			
The student is punctual to scheduled times.	2.709091	2.895238	2.933333
	2.678788	2.904762	2.933333
The student takes initiative to perform routines and necessary tasks without being told.	2.533333	2.804762	2.866667
	2.690909	3	3
The student accepts constructive criticism and is reactive with change.	2.490909	2.904762	2.933333
	2.60303	2.857143	2.8
The student effectively communicates with the athletic training staff (certified).	2.636364	2.828571	2.8
	2.633333	2.928571	2.866667
The student effectively communicates with injured/ill athletes.	2.59697	2.880952	3
The student effectively communicates with coaches and administrators.	2.416667	2.792857	2.583333
The student follows instructions given by authority.	2.648485	2.928571	3
The student demonstrates eagerness in becoming an athletic trainer.	2.509091	2.87619	2.933333
The student takes personal responsibility for learning.	2.512121	2.8	2.8
The student demonstrates medical care without personal bias.	2.663636	2.97619	3
The student demonstrates sound judgment and decision making.	2.387879	2.866667	3
Total	38.71061	43.24524	43.45

# Skill Scale

Score	Category	Score	Procedure Standard	Score	Performanc e Quality	Score	Level of Assistance Required
5	Independen t	5	Safe Accurate Achieved Intended Outcome Behavior is Appropriate to Context	5	Proficient Confident Expedient	5	No Supporting Cues Required
4	Supervised	4	Safe Accurate Achieved Intended Outcome Behavior is Appropriate to Context	4	Proficient Confident Reasonably Expedient	4	Requires Occasional Supportive Cues
3	Assisted	3	Safe Accurate Achieved Most Objectives For Intended Outcome Behavior Generally Appropriate to Context	3	Proficiency Throughout Most of the Performanc e When Assisted	3	Required Frequent Verbal and Occasional Physical Directives in Addition to Supportive Cues
2	Marginal	2	Safe only with Guidance Not Completely Accurate Incomplete Achievemen t of Intended Outcome Behavior Generally Appropriate to Context	2	Unskilled Inefficient	2	Required Continuous Verbal and Frequent Physical Directive Cues
1	Dependent	1	Unsafe Unable to Demonstrat e Behavior Lack of Insight into Behavior Appropriate to Context	1	Unskilled, Unable to Demonstrat e Behavior /Procedure	1	Required Continuous Verbal and Continuous Physical Directive Cues
0	No Opportunity to Demonstrat e Skill	0	No Opportunity to Evaluate Procedure	0	No Opportunity to Evaluate Performanc e	0	No Opportunity to Determine Assistance Level

## **Professional Attributes Scale**

45	Excellent
44	Excellent
43	Excellent
42	Excellent
41	Excellent
40	Good
39	Good
38	Good
37	Good
36	Good
35	Fair
34	Fair
33	Fair
32	Poor
31	Poor
30	Poor
29	Poor

# EXS 316, EXS 319, and EXS 445

#### Learning Outcome #4

#### **Professional Development and Collaboration**

• Practice with the intent to advance personal professional knowledge and clinical skills by remaining current in the profession through participation in seminars and research, in order to best serve the patient population through the practice of evidence-based medicine.

• Participate in advocating the athletic training profession through engagement with local community events by volunteering time and professional skills.

• Practice with a commitment to share the knowledge and skills of the athletic trainer in support of joint collaboration efforts that lead to improving the quality of patient care.

## **Assessment Data Analysis**

Research Poster Presentations and Oral Presentations are evaluated by the course instructors during in EXS 316, EXS 319, EXS 445 and EXS 411. Students have the opportunity to present their clinical case study posters at the Undergraduate Research and Creative Activity Day (URCAD). Instructors and students meet at the end of the semester to review the evaluations and get feedback regarding their experience at the URCAD. Students who are in EXS 445 do an oral presentation on a case study before at their internship site in front of their preceptor, other staff at the facility and CCSU ATEP faculty. Students in EXS 411 spend an entire semester preparing a research project that follows this sequence: 1. develop a research topic/question; 2. Review of literature; 3. Develop methodology; 4. Collect data; 5. Analyze data; 6. Report results. This project is developed into a poster presentation and the class has a poster presentation day typically held in the Student Center (sometimes in the PEHP office if a venue in the Student Center is not available). The students receive feedback during each phase of the research project and receive a final grade for the project after the poster presentation.

The staff at CCSU organizes a Sports Medicine Symposium every year. All of the ATS's who are formally admitted to the professional program are involved with the organization of the Symposium (assist with attendee check-in, assist vendors with set-up and break-down, collect questions from attendees for panel discussion by presenters, distribute and collect attendee feedback forms).

All ATS's in the professional program are given financial assistance to attend the EATA conference each January. We have about a 75% attendance rate each year at the EATA Conference and each of our students attends at least one EATA Conference before they graduate. AT's are encouraged to volunteer their services to the "Nutmeg Games" which are held each summer – we have had several students volunteer each of the past few years.

Each year the ATS's participate in an "Emergency Simulation Day" in collaboration with New Britain EMS and the EMS trainees. Emergency scenarios are created by the ATEP faculty and the students are to respond with no assistance from the faculty/preceptors. The ATS's are to call EMS for assistance and work with the EMS trainees in the proper care/treatment of the emergency victims. After the emergency scenarios are completed, a debriefing with the ATEP faculty and EMS instructors takes place where the pros/cons of the day are evaluated.

## **Assessment Conclusions**

Learning Objective #4 has been met. Our students participate in a variety of activities that involve professional development, community engagement, volunteering, and collaboration.

#### APPENDIX

Since Section 2 provides assessment results in summarized format, please include a full tabulation of results as an appendix, as you deem appropriate. If there are fewer than five students, please consult with Yvonne Kirby in OIRAI as to how to maintain student confidentiality and ensure compliance with FERPA.