"Wicked Problems"

Assessing Excellence in Physical Therapy Education

2020 Assessment Institute

Collaborators

- Amy E. Heath, Western Michigan University
- Peter Altenburger, Indiana University
- Jacklyn Brechter, Chapman University
- Kimberly Topp, University of California San Francisco
- Gary Chleboun, Ohio University
- Diane U. Jette, MGH Institute of Health Professions
- Denise Schilling , Western University of Health Sciences
- Barbara Tschoepe, Whitworth University

Objectives

- After this presentation, participants will be able to:
 - Understand the process of developing an assessment tool for professional education
 - Identify challenges for developing an assessment tool for a wide/ disparate audience
 - Discuss the importance/ significance of utilizing a framework when developing an assessment tool
 - Evaluate the barriers to creating a culture of shared programmatic assessment



"If you build it, they will come"

- Kevin Costner, "Field of Dreams"

Or will they?



Wicked Problems

- Ill-defined
- Changes frequently
- Multiple solutions depending on which stakeholder's perspective you consider.

Kerri-Lee Krause (2012) Addressing the wicked problem of quality in higher education: theoretical approaches and implications, Higher Education Research & Development, 31:3, 285-297, DOI: 10.1080/07294360.2011.634381



American Council on Academic Physical Therapy

Benchmarking for Excellence Task Force

Established in 2014

Theory

- Engagement Theory of Program Quality
 - Haworth JG, Conrad CF. Emblems of Quality in Higher Education. Developing and Sustaining High-Quality Programs. Allyn & Bacon, Longwood Division, 160 Gould Street, Needham Heights, MA 02194-2310; 1997.
 - Validated for graduate programs

Others

- Transformative Model of Quality (Harvey & Knight, 1996)
- University of Learning Model (Bowden & Marton, 1998)
- A Model for a Responsive University (Tierney, 1998)

Clusters, Attributes, and Elements...oh, my!

5 Clusters with *Attributes*

- 1. Diverse & Engaged Participants Faculty; Students; & Leaders
- 2. Participatory Cultures Shared Program Direction; Community of Learners; & Risk taking environments
- 3. Interactive Teaching and Learning
 Critical dialogue; Integrative Learning; Mentoring; Cooperative Peer
 Learning; & Out of Class activities
- 4. Connected Program Requirements

 Planned Breadth & Depth of Coursework; Professional Residency; &

 Tangible Product
- 5. Adequate Resources
 Support for Students, Faculty, and Basic Infrastructure

Physical Therapist Measure of Educational Program Quality (PT-MEPQ)

- Development
- Validation

Developing an Outcome Measurement Tool

Physical Therapy Measure of Educational Program Quality

- Combination of
 - Elements of Academic Physical Therapy Excellence
 - Engagement Framework

Physical Therapy Measure of Educational Program Quality

	Cluster 1	Cluster 2	Cluster 3		Cluster 4	Cluster 5	Overall
Engagement Theory	Diverse and Engaged Participants	Participatory Cultures	Interactive Teaching and Learning		Connected Program Requirements	Adequate Resources	
	Diverse Community	Institutional Support	Extramural Activities	1	Integration of Academic and Clinical Ed.	Integration of Research and teaching	Program Performance
	Advocacy	Financial Autonomy	Curricular Development		Professional Development	Faculty	
Elements of Academic PT	Leadership	Clear Vision	Student Engagement	ı	Effective learning environments	Clinical Internships	
Excellence	Governance	Collaborative Partnerships	Scholarly Activ	ity	Post Professional Ed	Infrastructure	
		IPE	Mentoring		Culminating Experiences		
		Scholarly Activity	Service Learnir	ng			

Benchmarking Taskforce Timeline

	2012 - 2013	2012 - 2013 Fall 2013 - Spring 2014		Spring 2015
Activity	 Adopt a Framework 	Instrument DevelopmentTesting	Survey ReviewPilot Test Phase2	Beta Test 2 ReviewSurvey Review
Outcome	 Engagement Theory of Program Quality Elements of Academic PT Excellence 	 Instrument completed Pilot Test Phase 1 completed 	Initiated Pilot Test Phase 2	 Scale Assessment Element and Cluster Review
Support	Website development	 Psychometric Analysis 	Psychometric AnalysisWebsite development	Reporting tools

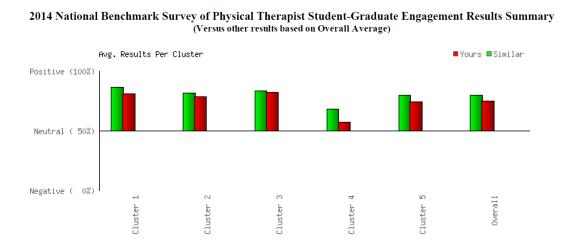
Development of the *PT Measure of Educational Program Quality*

- Survey Parts
 - Student
 - Faculty
 - Administrator
 - Demographic Survey

- Survey Implementation
 - 2016 2018
 - Full ACAPT Membership Implementation

Reports Output

- Interactive Online Portal
- Primary output
 - Institution's performance from
 - Student, faculty, Administrator data
 - Student/faculty comparisons
 - Comparison of institutional performance to all participants



SURVEY analysis

COMPARE RESULTS:

Internal Assessment

External Assessment

RESULT TYPES:

Clusters

Academic Attributes

Diverse and Engaged Participants

Engaged Leaders

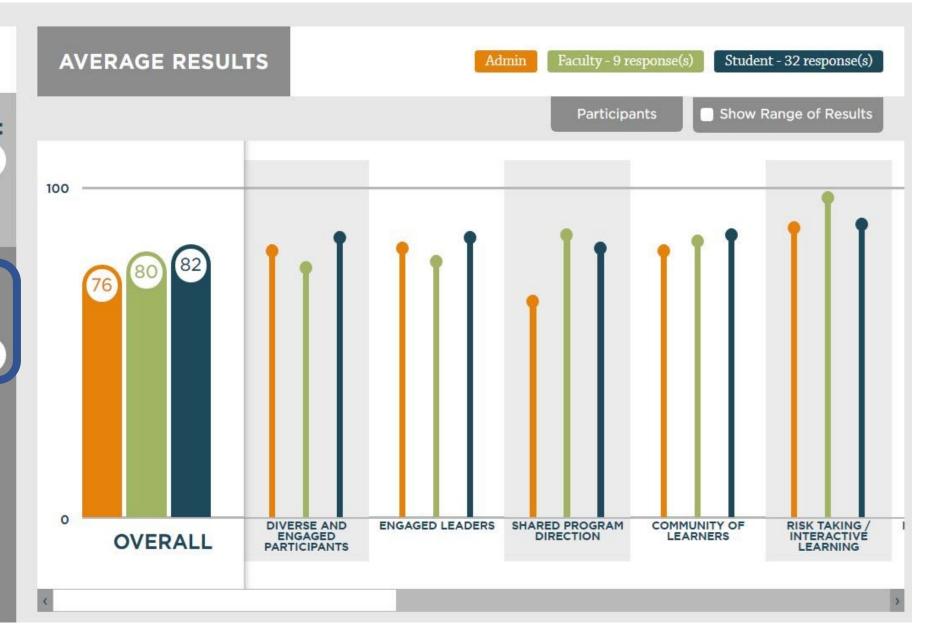
Shared Program Direction

Community of Learners

Risk Taking / Interactive Learning

Mentoring / Peer Learning

Experiential Learning



SURVEY analysis

COMPARE RESULTS:

Internal Assessment

External Assessment

COMPARE:

- Students
- Faculty

BASED ON:

- ✓ All Other Universities
- Similar Faculty Size 🕝
- ✓ Similar Class Size
- Carnegie Classification ?
- ✓ First Time Pass Rate
- Overall Pass Rate
- Regional ?
- ✔ Urban
- Rural
- ✔ Public
- Private







Why is assessment useful?

Programmatic Assessment Data

- Are we achieving the Graduate Outcomes we created?
 - Are students developing into competent healthcare professionals?
- Are we meeting Accreditation standards?
 - Does the evidence indicate graduates are meeting all expected standards?
 - Can we show that the program provides the necessary training to produce competent professionals?
- Are we Advancing Professional Practice "Striving for Academic Excellence"?
 - Ability to respond to changes in Health Care environment
 - What are the standards for professional assessment that promote excellence?
 - Why are such standards important?

Programmatic Assessment Data

Graduate Outcomes

- Graduate Survey
- Alumni Survey
- Signature Assignments
- National Board Exam

Accreditation

- Signature Assignments
- National Board Exam
- Clinical Competency

Advancing Excellence

- National Board Exam
- Does not describe learning

Assessment of Graduate Outcomes

DPT P	Program	Program Outcome Measures and Benchmarks							
Lea	adent arning comes	Post Clinical Survey (Scores are an average out of 5) Scores for Class of 2019	Focus Group Interviews conducted at the end of the three year program Digital Stories Class of 2019	Board Exam Taken after completion of the pr Class of 2017-18		Post-Graduation Survey performed 6 months following graduation, (Percentage scores reflect aggregate of Adequate, Well or Very Well responses) Class 2017 - 2018			
	Benchmark: 3.5 or above (Red indicates areas of needed improvement		Benchmark: Consistent student reporting that correlates with other objective data (Red indicates areas of needed improvement)	Average (Red indicates areas of needed improvement) Score is out of 800 Passing is 600 or >		Red indicates areas of needed improvement)			
decisio skills in clinical clinical	nstrate on-making ncluding Il reasoning, Il judgment, eflective ce.	Thinking Critically 4.71	Overall students felt prepared to handle most environments. Students also felt they are prepared to handle the unexpected. Students reported that reflective practice is critical for successful clinical practice.		18 – 722 2: 2: 2: 2: 8: 2: 2: 7: 0;	Chinking Critically 2016 – 100% 2017 - 100% 2018 – 95% Self-Reflective 2016 – 100% 2017 - 100% 2017 - 000% Color of this content by recent graduates and alumni			

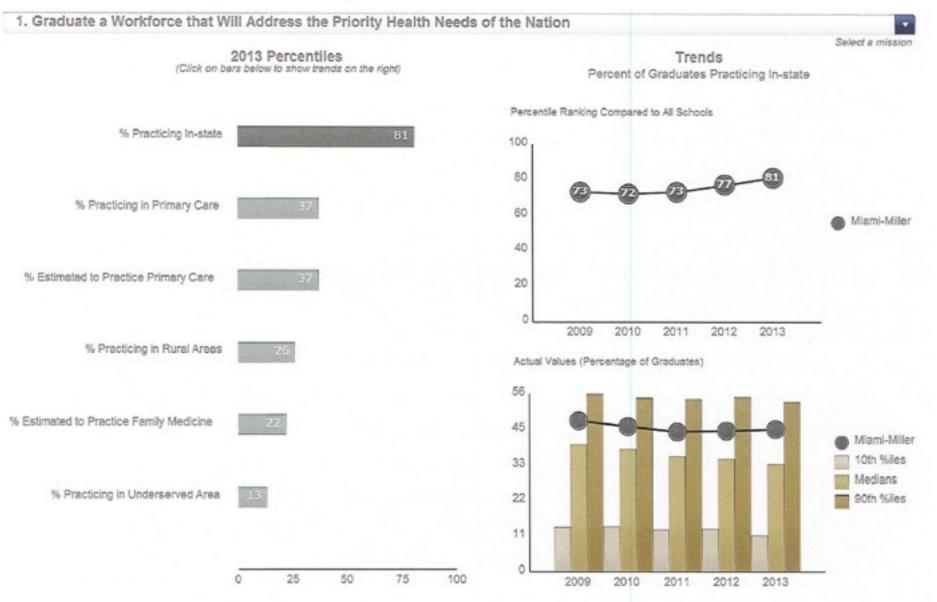
Assessment of Graduate Outcomes

Г	PT Program		Program Outcome Measures and Benchmarks						
Student Learning Outcomes		Post Clinical Survey (Scores are an average out 5) Scores for Class of 2019	at the end of the three year program Digital Stories	Board Exam Taken after completion of the program, Class of 2017-18		Post-Graduation Survey performed 6 months following graduation, (Percentage scores reflect aggregate of Adequate, Well or Very Well responses) Class 2017 - 2018	Physical Therapy Measure of Educational Program Quality (PT-MEPQ) Evaluation of Attribute Scores		
	Benchmark: 3.5 or above (Red indicates areas of needed improvement		Class of 2019 Benchmark: Consistent student reporting that correlates with other objective data (Red indicates areas of needed improvement)	Benchmark: Meet or exceed Na Average (Red indicates areas of neede improvement) Score is out of 800 Passing is 600 or >		Benchmark:75% or above (Red indicates areas of needed improvement)	Benchmark:80% or above (Red indicates areas of needed improvement)		
4	Demonstrate decision-making skills including clinical reasoning, clinical judgment, and reflective practice.	Thinking Critically 4.7	Overall students felt prepared to handle most environments. Students also felt they are prepared to handle the unexpected. Students reported that reflective practice is critical for successful clinical practice.			Thinking Critically 2016 – 100% 2017 - 100% 2018 – 95% Self-Reflective 2016 – 100% 2017 - 100% 2018 – 95% There were no significant areas of deficit noted for this content by recent graduates and alumni	Clinical Reasoning 2017 Students – 93% Faculty – 87% Community of Learners IU - 85% National - 85%		

Assessment of Graduate Outcomes

Ç	DPT Program Student Learning Outcomes	Program Outcome Measures and Benchmarks								
Su		Post Clinic (<i>Scores are an av</i> Scores Class of	verage out of 5) s for	Focus Group Interviews the end of the three year Digital Stories Class of 2019		Board Exam Taken after completion of the program, Class of 2017-18	Post-Graduation Survey performed 6 months following graduation, (Percentage scores reflect aggregate of Adequate, Well or Very Well responses) Class 2017 - 2018	Physical Therapy Measure of Educational Program Quality (PT-MEPQ) Evaluation of Attribute Scores		
		Benchmark: 3.5 or above (Red indicates areas of needed improvement		Benchmark: Consistent student reporting that correlates with other objective data (Red indicates areas of needed improvement)		Benchmark: Meet or exceed National Average (Red indicates areas of needed improvement) Score is out of 800 Passing is 600 or >	Benchmark:75% or above (Red indicates areas of needed improvement)	Benchmark:80% or above (Red indicates areas of needed improvement)		
17	Demonstrate social and professional responsibility through mentoring and participation in professional and community organizations and activities.	Professional advocacy	4.67	100% of students identified strongly with the programs civic engagement activities. Students felt "Fostered professional development and encompassing professional values" Students also valued "Opportunities for leadership" "Love the variety and exposure to patient care"	Digital Story/Portfolio 2019 -100% indicated at least one of the 7 core values as critical to their ongoing success.	Not Measured	2016 – 100% 2017 - 100% 2018 – 95%	Professional Development 2018 Student – 96 Faculty – 81 External Assessment Professional Integration IU – 67% National 73%		

Evaluating Strategic Plan



Association of American Medical Colleges, 2013

Participation – Composite Data

Benchmarking - Percentile Ranks

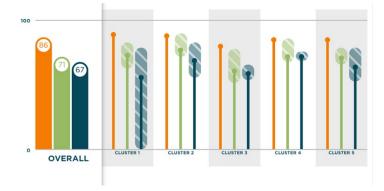
Percentile	Diverse and Engaged Participants	Engaged Leaders	FIOUIAIII		Risk Taking / Interactive Learning	Mentoring / Peer Learning	Learning	Planned Depth and Breadth of Coursework	Professional Integration	Tangible Product	Infrastructure
90	86	87	89	90	100	84	84	86	82	83	86
80	82	83	84	86	100	81	81	83	79	80	82
70	80	81	81	83	96	78	79	81	77	78	80
60	79	80	79	81	92	77	77	79	73	76	77
50	77	78	78	80	85	75	76	78	65	73	76
40	76	77	76	78	81	73	74	77	0	72	74
30	74	75	73	77	78	72	72	74	0	69	72
20	72	73	71	74	75	69	71	72	0	62	70
10	71	72	65	71	72	65	65	69	0	49	62
Mean	78	78	76	79	85	73	74	75	39	68	73

Attribute Percentile Range

Average Percentile
Distribution 20 pts.

High 100 pts.

Low 62 pts.



Benefits of Benchmarking

Value of Participation

- Allows a program to:
 - Define its exemplary qualities
 - Identify areas of improvement
 - Assess impact of new idea implementation
 - Generate like program comparisons
 - Align outcomes with programmatic and CAPTE requirements
 - Enables ACAPT to define and encourage our members to achieve benchmarks for excellence in DPT programs

Professional Assessment

- Striving for Academic Excellence
 - Advancing the profession put aside competition for the good of the profession
 - "Leadership involves thinking beyond the narrow confines of one's own institution and one's self interests and working toward improving the education enterprise for the benefit of us all. This requires courage, knowledge, and risk-taking. Leadership involves, but is not synonymous with, power. Real power is directed toward achieving a collective vision."
 - Jules Rothstein, PTJ Editorial 1998
- Educational quality improvement and sustained excellence
 - can only be achieved through collaboration,
 - collective data sharing,
 - and commitment to wide-spread assessment practices.

Sustained Professional Assessment

- A crucial factor to success
 - Development of a culture of assessment that is based
 - A sound theoretical framework
 - Integration of multiple sources of data

- Commitment from leadership within the profession
 - Orientation to assessment practice
 - Establishing an ongoing expectation

Culture of Shared Programmatic Assessment

- What is it?
- How does it compare to programmatic assessment
- What are the Barriers to shared programmatic assessment?
 - Cultural
 - Instrument

Levels of Assessment

- Programmatic Program Assessment (one program)
- Institutional All programs at one Institution
- Professional Single program (DPT in this case) using shared professional Accreditation Standards
- Shared Programmatic (Shared Professional) ALL education programs resulting in the same degree (professional degree) over defined area (i.e. National)

Professional Assessment vs shared Professional Assessment

- Professional assessment is...
- specialized assessment for a profession (DPT)
- unique to the programmatic and institutional culture
- Requires a collective (but independent) commitment to each other
- Ability to respond to changes in Health Care environment

- Shared Professional Assessment is...
 - specialized
 - part of a defined culture of the profession as a whole
 - requires the same assessment tools to be completed on a regular basis
 - May or may not collect the same data as used for accreditation purposes, but should be usable for accreditation
 - Collective and shared commitment, with a collective data set resulting

Current Assessment **Culture** in DPT programs: Professional Assessment

- Professional Accreditation
 - Commission on Accreditation in Physical Therapy Education (CAPTE)
- Accreditation Standards are **not** a pathway to excellence rather define minimum standards
- Education Programs have little say in the development of these standards
- While everyone answers and provides data for the same accreditation standards, each program uses individual interpretation
- ACAPT developed to drive effort towards the ACADEMY having the major say in educational Excellence

American Council of Academic Physical Therapy (ACAPT)

- a not-for-profit association dedicated to <u>excellence</u> in physical therapist education as a whole
- Developed in 2014 by the contemporary DPT Program Directors
- Still **no** significant sharing of assessment data to date
 - Even with the Benchmarks project
- Role of ACAPT as the body to oversee Academics remains shared;
 who decides?
 - American Physical Therapy Association (APTA); Academy of Education;
 Commission on Accreditation in Physical Therapist Education (CAPTE);
 Education Leadership Partners (ELP)

Aspiration: SHARED Culture of Assessment

Shared Programmatic Assessment across

- All DPT programs in the Nation
- Currently there are 256 accredited programs

capteonline.org (accessed 10/1/2020)

"The time is ripe for educators, especially assessment professionals, to step in and do what we do best: shift culture, bolster hope, and design experiences—both curricular and co-curricular—that turn humans toward one another." Frank Shushok, Jr., Virginia Tech (Keynote)

Barriers to Shared Assessment = Wicked Problems

• Establishing and sustaining a culture of assessment requires a change to the values and beliefs of the department and faculty.

Kenneth L. Rigler, Jr., Fort Hays State University (Stem track) Assessment Institute 2020

 Or.....Establishing and sustaining a shared culture of assessment requires a change to the values and beliefs of each of the departments/programs and all DPT faculty....AND the profession.

Culture Of Shared Assessment Examples

WHAT WE DO

f w in @ m ;

DPT is Not Alone!

- Association of American Medical Colleges (AAMC) founded in 1876
- American Association of Colleges of pharmacy (AACP) founded in ~ 1900
- ACAPT founded in 2014!



FACTS

applicants.

Data on U.S. medical school

enrollments, and graduates; as

well as data on MD-PhD students.

applicants, matriculants,

residency, and residency

Faculty Roster: U.S. Medical School Faculty

The annual report is a set of

tables and trend analyses that

time faculty.

answer common questions about the national distribution of full-

Report on Residents

Residents provides information on

The AAMC Report on

residents, as well as

activities.

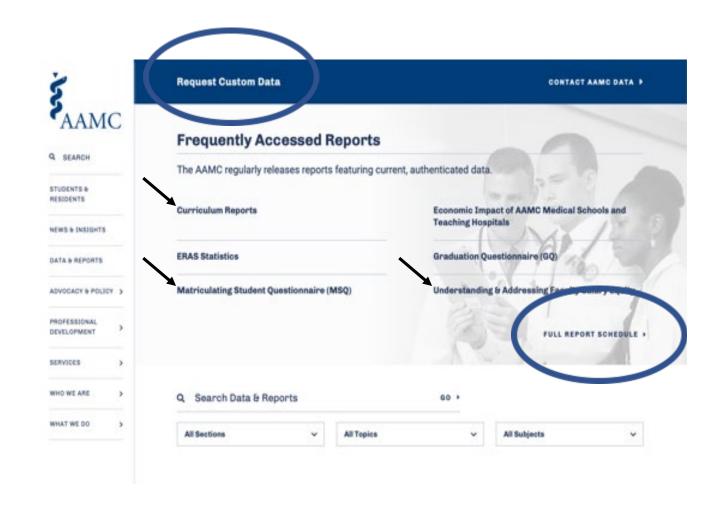
residency applicants and

postresidency professional

AAMC CULTURE OF ASSESSMENT

This is a part of AAMC's web presence - data and reports page

https://www.aamc.org/data-reports



AAMC Selected Projects Schedule Fiscal Year 2019-2020

- •"This is list of selected data projects at AAMC to help your institution understand when surveys and data reports are scheduled for release "
- •38 Different Data Collection Tools and timing for them comprise this list!

https://www.aamc.org/system/files?file=2020-09/AAMC Select Project Schedules-FY2020-2021-091620.pdf

AACP provides data with a portal for creating your accreditation self-study

AACP – Accreditation Requirements include that developing programs adopt the Pharmacy Education Culture of Assessment

https://www.aacp.org/research/a ssessment-accreditationmanagement-system-aams



The Assessment and Accreditation Ma. Rement System (AAMS) was developed by AACP with collaboration from the Accreditation Council for Pharmacy Education (ACPE). The purpose of this system is to assist member schools and colleges of pharmacy with their assessment and accreditation-related activities.

AAMS for Standards 2016

Standards 2016 Training Resources

- o Logging into AAMS for the First Time
- Overview for School Administrators
- School Administrator Users tab
- School Administrator Using the Faculty Profile Function
- How to Complete a Standard
- How to Run a Benchmarking Report
- How to Attach Documents Within a Standard
- How to Use Documents Tab
- Searching for Documents by Tags and by Standard

Questions? Check the FAQ or send an email to AAMS Support.

ACAPT is new

Will DPT education need to wait until we are more than 100 years old?

•What is possible for physical therapy given what other professions have accomplished?

Instrument Barriers?

- Benchmarking PT MEPQ
 - Theoretical Foundation
 - Quantitative Data
 - Qualitative Data
 - Triangulation Built in
- National Study on Excellence and Innovation in PT Education (NSEI)
 - Near simultaneous with PT MEPQ development
 - a Carnegie-type study investigating... excellence & innovation inacademic Physical Therapy
- Comparisons of PT MEPQ & NSEI found similarities (Jette et al. 2020)

Is This Duplication of Effort? Or Advancing the Culture?

National Study on Excellence and Innovation in PT Education (NSEI) Results

- Part 1: Excellence was defined and disseminated
- Part 2: a ...call for reform was made for 3 core categories:
 - (1) creating a culture of excellence, leadership, and partnership
 - (2) advancing the learning sciences and understanding and enacting the social contract
 - (3) implementing organizational imperatives.

New Task forces were developed to decide on how to proceed to fulfill this call for reform, including SHARED DATA COLLECTION

Where are we now?



Excellence is ...

"An aspiration rather than a destination and is characterized by continual improvement. An excellent academic program demonstrates a culture of excellence by continually and intentionally striving to transform learners, advance knowledge, and improve societal health."

"Excellence in transforming learners, advancing knowledge, and improving societal health is achieved when the academic culture supports the ongoing development and integration of three domains: Inquiry, inclusion, and innovation."

Excellence is also...

"A multi-faceted construct that respects and supports <u>differences</u> among academic programs while inspiring ongoing <u>self-assessment</u> and growth."









TASKFORCE TO EXPLORE DATA & TECHNOLOGY TO EVALUATE PROGRAM OUTCOMES

Explore what data are currently available versus that which need to be acquired, along with the technology, systems, and costs needed for ACAPT to assess program outcomes relative to the criteria for excellence.



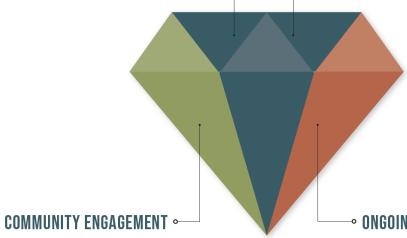
TASKFORCE TO EXPLORE DATA & TECHNOLOGY TO EVALUATE PROGRAM OUTCOMES

PROGRAM CHARACTERISTICS

- Strong and visionary leadership
- Access to appropriate resources and clinical practice
- Motivated, engaged learners
- Culture of continual assessment and improvement
- Continual faculty growth and development
- Faculty and administrators serve as role models

CURRICULUM ATTRIBUTES

- Signature pedagogy
- Strong pedagogical underpinnings
- Interprofessional education and practice
- Practice-based learning within and outside the classroom
- Creates adaptive, life-long learners
- Invests in professional formation
- Fosters leadership development

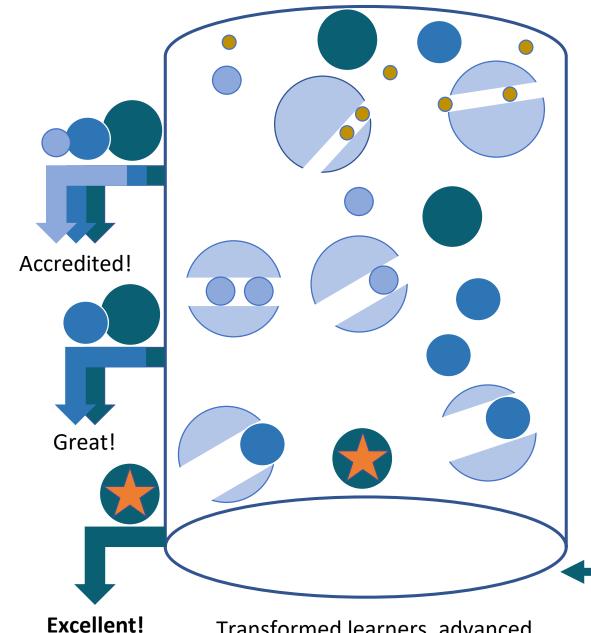


Authentic, collaborative, inclusive community partnerships

- Leadership and modeling skills to transform communities
- Responsive to contemporary societal needs
- Invested in local, regional, and global health
- Invested from pre-admission through professional and post-professional education
- Responsive to societal health needs

ONGOING ASSESSMENT OF OUTCOMES

- Includes relevant stakeholders
- Reflects the continuum of education through practice
- Reflects shared vision, transformation of learners, community collaboration, and institutional commitment



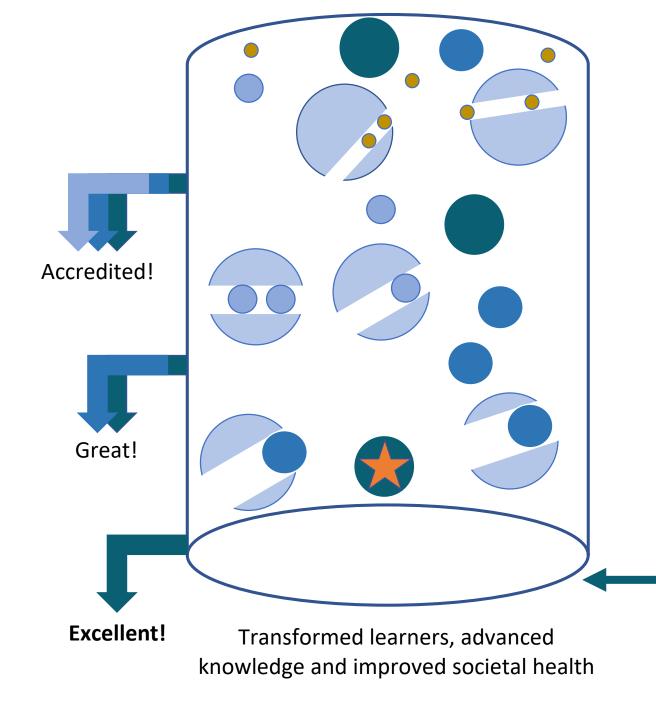
PROGRAM CHARACTERISTICS

CURRICULUM ATTRIBUTES

COMMUNITY ENGAGEMENT

ONGOING ASSESSMENT OF OUTCOMES

Transformed learners, advanced knowledge and improved societal health

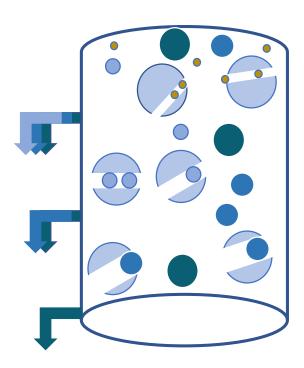


PROGRAM CHARACTERISTICS

- Strong and visionary leadership
- Access to appropriate resources and clinical practice
- Motivated, engaged learners
- Culture of continual assessment and improvement
- Continual faculty growth and development
- Faculty and administrators serve as role models

PROGRAM CHARACTERISTICS

Strong and visionary leadership



4H -- The program director provides effective leadership for the program including, but not limited to, responsibility for communication, program assessment and planning, fiscal management, and faculty evaluation.

- A vision for physical therapist professional education;
- Understanding of and experience with curriculum content, design, and evaluation;
- Employing strategies to promote and support professional development;
- Proven effective interpersonal and conflict management skills;
- Abilities to facilitate change;
- Negotiation skills (relative to planning, budgeting, funding, program faculty status, program status, employment and termination, space, and appropriate academic and professional benefits);
- Effective experience in strategic planning;
- Active service on behalf of physical therapist professional education, higher education, the larger community, and organizations related to their academic interest;
- Effective management of human and fiscal resources;
- Commitment to lifelong learning;
- Active role in institutional governance
- Program accomplishments.

Where does this leave us?

- Continue to work on the culture of excellence
- Data collection!
- Advocate for a user-friendly dashboard to display year-over-year national data and enable programs to compare with peer programs
- Advocate for connection of the data to annual reports and accreditation needs

