

4	Students will be able to demonstrate core medical knowledge in the provision of patient care.	<p>-1- PAED 5250 Renal & PAED 5240 Endocrine Combined OSCE Assessment and Plan</p> <p>-2- PAED 6000 Summative OSCE Assessment and Plan</p>	<p>D</p> <p>D</p>	<p>-1- An average of 85% of students will attain “comprehension” on the corresponding rubric</p> <p>-2- An average of 85% of students will attain “application” on the corresponding rubric</p>	<p>-1-Course directors for PAED 5250 & 5240 gather the data; Program Director analyzes the data.</p> <p>-2- Course director for PAED 6000 gathers the data; Program Director analyzes the data.</p> <p><i>See rubric below.</i></p>	<p>Data will be reviewed and discussed among PA Program faculty during one of multiple “curriculum retreats” to inform whether changes are needed.</p> <p>Program faculty will review and discuss the results of any changes made during curriculum retreats the following year after the change.</p>	<p>Jan-Dec odd years for data collection; following even year for report</p>
5	Students will understand how to apply the Jesuit value of ‘Cura Personalis’ when treating patients.	<p>-1- PAED 5070 OSCE, aspect of Cura Personalis</p> <p>-2- Jesuit value component of preceptor-completed clinical evaluation</p>	<p>D</p> <p>D</p>	<p>-1- An average of 85% of students will demonstrate “comprehension” on the corresponding rubric.</p> <p>-2- An average of 85% of students will receive a score of 3.0 or higher on a 5.0 Likert scale on the preceptor completed student evaluation during the last 3 months of Phase II clinical rotations, indicating “mastery” on the corresponding rubric.</p>	<p>-1-Course director for PAED 5070 collects the data; Program Director analyzes data.</p> <p>-2- Clinical Director gathers the data; Program Director analyzed the data.</p> <p><i>See rubric below.</i></p>	<p>Data will be reviewed and discussed among PA Program faculty during one of multiple “curriculum retreats” to inform whether changes are needed.</p> <p>Program faculty will review and discuss the results of any changes made during curriculum retreats the following year after the change.</p>	<p>Jan-Dec even years for data collection; following odd year for report</p>

****D= Direct Assessment Measure | I=Indirect Assessment Measure ¹Program Faculty will further analyze & discuss assessment data & determine action plan(s) at designated program meetings.**

Note: Each cell in the table below will expand as needed to accommodate your responses.

Use of Assessment Data

1. How and when will analyzed data be used by program faculty to make changes in pedagogy, curriculum design, and/or assessment practices? Analyzed data will be reviewed and discussed among program faculty during one of the 2-3 curriculum retreats held annually by the PA Program. Data will be discussed in terms of whether the PLO/SLO benchmark was met, if so, how well the benchmark was met, and if not, how far from the benchmark was the outcome data. Data informed changes will then be made, dependent on this information.
2. How and when will the program faculty evaluate the impact of assessment-informed changes made in previous years? Any changes made will be assessed via review of the analyzed data and subsequent discussion during one of the Program curriculum retreats.

Additional Questions

1. On what schedule/cycle will program faculty assess each of the program’s student learning outcomes? (Please note: It is not recommended to try to assess every outcome every year.)

Every other year, alternating outcomes measures. Learning outcomes 1, 3, and 5 will be assessed during even calendar years. Learning outcomes 2 and 4 will be assessed during odd calendar years.

2. Describe how, and the extent to which, program faculty contributed to the development of this plan.

The Program Director oversaw and guided the development of this plan. The Director of Clinical Education and the Director of Didactic Education helped with curriculum mapping, which measurement tools and courses to use for the evaluation, and the overall PLO rubric. The course directors for the individual courses that contain the artifacts used in assessment helped develop the artifact-specific rubric.

Rubrics for Program Learning Outcomes

Program Learning Outcome	Comprehension – Students will ...	Application – Students will ...	Mastery – Students will ...
PLO #1 - Students will be able to communicate with patients for effective clinical encounters.	Outline a basic patient history.	Obtain a focused patient history.	Counsel a patient on his/her management plan for a given diagnosis.
PLO #2 - Students will be able to	Generate a valid differential	Construct a focused patient	Incorporate changes in clinical

use the critical thinking skills necessary to evaluate patient medical problems.	diagnosis based on patient information obtained.	management plan based on an accurate differential diagnosis.	practice based upon current evidence-based medicine.
PLO #3 - Students will be able to demonstrate respect for patients and other medical professionals as a component of professionalism in medical practice.	Demonstrate a basic understanding of respect for patients in medical practice.	Apply concepts respect for patients and other medical professionals in medical practice.	Routinely exemplify respect for patients and other medical professionals in medical practice.
PLO #4 - Students will be able to demonstrate core medical knowledge in the provision of patient care.	Describe an assessment and plan that includes the basic components.	Employ an assessment and plan that includes an accurate differential diagnosis.	Construct an assessment and plan that includes an accurate management plan.
PLO #5 - Students will understand how to apply the Jesuit value of 'Cura Personalis' when treating patients.	Demonstrate knowledge of the Jesuit value 'Cura Personalis' when treating patients.	Apply the Jesuit value 'Cura Personalis' while treating patients.	Exemplify the Jesuit value 'Cura Personalis' while treating patients.