

**WRIGHT COLLEGE
PROGRAM/DISCIPLINE ASSESSMENT FORM**

Program/Discipline: Occupational Therapy Assistant Program

Instructional Manager: Marilyn Young/Kevin Li

Semester/Year: Fall/2009 to
Spring 2010

Assessment Coordinator: Adrienne Leyva
Email: alynch@ccc.edu

Department Chair: Lisa Iffland

Plan Title: Evaluation of the OTA Student's Performance in the Senior Practicum as Preparation for Successful Completion of the Capstone Clinical Course – Fieldwork II – OTA-215/216.

Part A: Initial Plan: due first Friday of Fall semester classes

Part B: Midyear Update: due first Friday of Spring semester classes

Part C: Final Report: due first Friday of Summer semester classes

The current submission is which of the following:

Initial Plan date: _8/22/2009

Revision date: ___N/A_____

Mid-year update date: _1/20/2010

x Final Report date: 6/9/2010

College Mission: Wright College is a learning-centered, multi-campus institution of higher education offering students of diverse backgrounds, talents, and abilities a quality education leading to baccalaureate transfer, career advancement, and/or personal development.

Program/Discipline Mission: The Wright College Occupational Therapy Assistant Program seeks to prepare competent and effective occupational therapy practitioners who value occupation as both a means and an end to quality living for self and others.

A1. . Program/Discipline Assessment Plan - due first week Fall semester

Area of Focus:

Your department efforts are to improve learning in what topic/area?

How successfully do occupational therapy assistant students integrate the cumulative knowledge, skills and professional behaviors expected as student learning outcomes at the end of the didactic portion of the program?

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Evidence:

What past results have led your department to conclude that this is an area needing attention?

The program has utilized an exit competency practicum for the past four years. It has provided the faculty a means to identify students needing remediation prior to beginning the capstone clinical component of the program. In order to refine its application in determining comprehensive program learning outcomes and to optimally link it to actual OT practice demands, the department needs to assess its value and effectiveness through several measures.

Course(s) of Interest:

What courses will be involved in your plan?

The exit competency practicum is required of all OTA students completing the last semester of coursework (OTA-212, 213, & 214). While not part of a specific course, all students must achieve a minimum success measure of 80% in order to proceed to OTA 215 and OTA 216, the capstone clinical education courses.

Students, who do not pass the practicum at an 80% on their first attempt, receive remediation and then re-take the practicum successfully to advance to the capstone clinical education courses.

**Intended Program
Student Learning
Outcomes**

List and number each outcome to be measured during this cycle.

Upon successfully passing the program exit competency practicum, the student will:

1. Use oral, written and technology-based communication with consumers, consumer groups, peers and other professional and parties of interest.
2. Assume responsible, caring and proactive roles as an effective healthcare professional.
3. Engage in the safe and effective application of the occupational therapy process for occupational therapy consumers.
4. Possess the knowledge and skills needed to practice as an occupational therapy assistant in a variety of healthcare delivery models, systems and settings.

(Based on the OTA program's Student Learning Outcomes, 2005)

Involved Faculty:

List the instructor(s) leading the assessment process for each outcome listed above.

Adrienne Leyva, MS, OTR/L
OTA Program Instructor

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Assessment Process

Address the following questions:

What approach will be used?

Why was this process selected?

How will student learning be measured?

When will data collection be completed?

Who will analyze the results?

What: Data collection and analysis will be multi-dimensional as described below.

Why: Need to validate and refine the tool as a means of "guaranteeing" the program's clinical training partners specific competency levels for students entering capstone clinical education.

How:

- Analysis of grades from the exit (senior) practicum completers and clinical courses (OTA-215 & OTA-216)/
- Feedback from students following the completion of two capstone clinical courses (OTA-215 & OTA-216).
- Analysis of assessment selection/scoring for sections of the practicum utilizing data from practicum completers.
- Comparison of student performance on specific components of the exit practicum with student performance on selected practicum exams from year one and year two program courses.
- Analysis of remediation and participation in additional practice sessions and the senior practicum performance.

When: Project will span a three-year time frame.
This project is in its third year.
Year One:

Initial reliability scoring – Nov 2007 – completed
Initial student feedback survey – January 2008 – completed
Analysis of exit practicum scores and the fieldwork clinical course (OTA 215). – February 2009 - completed
Analysis of section score weighting and student performance on selected sections of the exit practicum – Initiated March 2008 – postponed until year 2 of the project.

Year Two:

Analysis of formative practicum score and the exit practicum score – October 2008 – completed
Analysis of participation in remediation for skill development and successful completion of the exit practicum – November 2008 – completed
Reliability scoring of the exit practicum – Initiated January 2009 – dropped from assessment initiative for this year.
Analysis of exit practicum scores and the physical disabilities clinical course (OTA-215 or OTA-216) – February 2009 – completed.
Analysis of section score weighting and student performance on selected sections – March 2009 – completed
Student feedback survey – April 2009 – completed

Year Three:

Analysis of formative practicum scores and the exit practicum score – October 2009
Analysis of participation in remediation and/or participation in additional practice sessions for skill building and scores on the exit practicum – November 2009
Analysis of scores from the exit practicum and the physical disabilities clinical course (OTA-215 or OTA-216) – January – 2010
Student feedback survey – March – 2010
Analysis of assessment selection/scoring for sections of the practicum with feedback from practicum completers regarding clinical setting practices – April – 2010
Reliability scoring of the exit practicum – May 2010

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Who: Adrienne Leyva – OTA Program Instructor –
Assessment Coordinator for the OTA Program

Will engage the assistance of other program faculty to assist with addressing the reliability objective.
Sharon Mathews – OTA Program Fieldwork Coordinator

Criteria for Success

For the outcomes listed above, identify the criteria used to determine success.

Direct Measures of Practicum Performance and Clinical Education:

1. All students who successfully complete the exit practicum on their first attempt will achieve an average of 75% or greater on their physical disabilities clinical education course (OTA-215 or OTA-216).
2. All students who successfully complete the exit practicum following remediation will achieve an average of 75% or greater on their physical disabilities clinical education course (OTA-215 or OTA-216).

Indirect Measures of Student Perception of the Practicum:

3. Seventy-five percent (75%) or more of students who have completed physical disabilities clinical course OTA-215 or OTA-216 will rate the exit competency process as a contributor to success for the clinical education experience (Survey measure to be refined and analyzed).

Analysis of Students' Formative Practicums and Participation in Remediation for Skill Development:

4. Students who successfully completed skills review practicums during year two of the program with an 80% or greater will pass the exit competency practicum with an 80% or greater.
5. Students who participate in remediation session and/or practice sessions for skill development will evidence a score of 80% or greater on the exit practicum and a score of 75% or greater on the physical disabilities clinical course OTA-215/216.

Analysis of Reliability and Validity of the Exit Practicum:

6. Inter-rater reliability measures for scoring of the exit practicum will yield an 80% consistency in scoring of the exit practicum.
7. 80% of the assessments selected for the exit practicum will be utilized in the clinical course OTA-215/216.

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B. Midyear Update – due first week Spring semester

Completely describe all actions that have occurred since this past August with respect to your department's Assessment Plan.

Attach any relative documents (rubrics, surveys, other assessment tools).

Work Performed Toward Assessment Project Completion:

Completed the viewing of all 20 exit practicum video/DVD's, scoring these sessions. Seven students required remediation to enhance skills needed for OTA 215 and 216. Each student received a minimum of 3 hours of remediation individually (3 hours to 15 hours) before completing another attempt at the exit practicum, where each of these seven students passed the practicum with an 80% or greater during their second attempt to progress onto Fieldwork OTA 215 and 216 courses.

Following these efforts with the students, a review of the past year's assessment project and this year's project were discussed with OTA program faculty during the department meeting. Identification of assistance in completing the reliability viewing of these video/DVD's was sought. Limitations were noted with time to view these videos secondary to competing demands or lack of interest.

Students completed OTA 215 and OTA 216 and attended the December fieldwork seminar, where they were asked to complete the exit practicum survey and this was accomplished. Grades for OTA 215 and 216 were completed.

Following this seminar, the sorting, collecting and preparing of data for analysis was initiated for all objectives listed during Fall 2009. Below is a summary of these efforts:

1. Analysis of first attempt exit competency practicum completers' grade for the exit practicum and the grade for these students' physical disabilities fieldwork grade (OTA-215 or OTA 216) – all grades have been collected, physical disabilities fieldwork grade identified from OTA 215 or OTA 216, recording/data measures prepared for analysis, analysis initiated – results are pending.
2. Analysis of student's exit practicum grade following remediation with the grade for their physical disabilities fieldwork (OTA-215 or OTA 216) – dates, times and students who participated in remediation were collected, all grades have been collected, physical disabilities fieldwork grade identified from OTA-215 or OTA 216, recording/data measures prepared for analysis, analysis initiated – results are pending.
3. Analysis of students' score on year one and two practicum exams with their grade for the exit practicum – material gathered for analysis, data measures prepared for analysis – analysis and results are pending.
4. Student feedback survey was reviewed and revised and then copied and distributed to the students during the last fieldwork seminar – students completed these surveys – these surveys were then compiled and prepared for data analysis – results are pending.

To be completed – by June 2010

1. Final Analysis of all data collected:
 - A. Practicum grades for first time completers of exit practicum with Fieldwork OTA 215 or 216
 - B. Practicum grades following remediation with Fieldwork OTA 215 or 216
 - C. Scores on former practicums with the exit practicum.
 - D. Student survey of exit practicum
2. Review of all exit practicums by OTA program faculty/OTA practitioner for reliability measures.

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3. Analysis of score weighting and student performance on selected sections.

Are there any obstacles to the implementation of the plan that the Assessment Committee should know about or can assist with?

There are no new obstacles to the implementation of the plan at this time. Reliability scoring of the practicums continues to be sought to complete measure 6 of this assessment process for the OTA program.

When preliminary analysis is complete, this department assessment coordinator will arrange a meeting with the Assessment Committee Members to review the analysis for any additional input or modifications.

Part C – due first week Summer semester

Summary of Results and Analysis of Data Collected

What were the results of the assessment process?

What was learned from the results?

Results of the Assessment Process – Direct Measures of Practicum Performance and Clinical Education:

Direct Measure -

1. All students who successfully complete the exit practicum on their first attempt with an average of 80% or greater will achieve an average of 75% or greater on their physical disabilities clinical education course (OTA-215-216).

Results -

1. This measure was achieved with 65% of all students passing the exit practicum on their first attempt with an average practicum score of 91% and an average Fieldwork score of 85%.

Direct Measure -

2. All students who successfully complete the exit practicum with an 80% or greater following remediation will achieve an average of 75% or greater on their physical disabilities clinical education course (OTA-215-216).

Results -

2. This measure was achieved with all students (35% of class) who did not pass the exit practicum with an 80% or greater, participated in remediation and proceeded to complete the exit practicum successfully with an average score on the exit practicum of 92%. For this group, all students successfully completed Fieldwork with an average

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Fieldwork score of 85%.

Results Summary for Direct Measures 1 and 2 – What Was Learned From the Results - These direct measures were achieved as all students, whether completing the exit practicum on the first attempt, or, following remediation, completed the exit practicum of the second attempt evidenced a score of 80% or greater for this practicum. All students, whether completing the practicum on their first or second attempt completed their physical disabilities clinical education course (OTA-215-216) successfully with a score of 75% or greater, highlighting the value for continued use of this practicum in promoting competence in physical disabilities clinical coursework.

**Results of the Assessment Process - Indirect Measure of Student Perception of the Practicum:
Indirect Measure –**

3. Seventy-five percent (75%) or more of students who have completed physical disabilities clinical course (OTA-215-216), will rate the exit competency process as a contributor to the success of the clinical education experience (based on the analysis of the Survey of the exit practicum process).

Results –

3. This measure was achieved with 96% of students rating the exit practicum as a highly valuable experience that contributed to the successful completion of physical disabilities clinical education (OTA-215-216).
- A. **Preparatory Phase of the Practicum** – 96% of the students rated the practicum as highly valuable in assisting with selecting appropriate methods of interaction, interviewing, assessing and identifying key information regarding culture and occupational profiles to develop individualized intervention.
 - B. **Assessment Phase of the Practicum** – 96% of the students rated the practicum as highly valuable in preparing for clinical practice expectations, performance and successful completion of the physical disabilities clinical education course (OTA-215-216).
 - C. **Intervention Phase of the Practicum** – 98% of the students rated the intervention portion of the practicum as highly valuable in preparing for clinical practice expectations, performance and successful completion of the physical disabilities clinical education course (OTA-215-216).
 - D. **Documentation of the Practicum** – 91% of the students rated the documentation portion of the practicum as highly valuable in preparing for clinical practice, expectations, performance and successful completion of the physical disabilities clinical education course (OTA-215-216).
 - E. **Participation in Practice Sessions for the Practicum** – 95% of the students participated in additional practice session for the senior practicum stating that it assisted with identifying problem areas that needed to be worked on and preparing students for Fieldwork expectations and performance. Additionally students identified that it was an excellent method to identify skill areas of competency and those that needed to be further developed prior to the physical disabilities clinical education course (OTA-215-216). The support from practicum group members during the practice phase assisted many students in developing strategies for improvement as well as boosting confidence in their skills.
 - "This practicum helped a lot in preparing me for Fieldwork. Great Experience!"
 - "Practicing helped me organize and become less nervous."
 - "The practicing helped me a lot to be prepared for fieldwork."

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- "Practicing before hand helped me to feel more relaxed and confident to complete the practicum."
- "I was lucky to have (support from) my group because it helped me with different questions and concerns..."
- "I used all from this practicum on fieldwork."

F. Additional Comments Regarding Evaluation and Intervention Methods for the Practicum – These comments were positive and yielded valuable insight into the validity of the practicum in the program's curriculum. Comments that were neutral or negative suggested discomfort with the video-taping process, challenges with explaining to the patient (pseudo-patient) the reasoning for the evaluation, accomplishing the evaluations in a timely manner and less thoroughness with evaluation in clinical settings.

- "I used everything (from this practicum) in the clinic."
- "Filming the practicum was stressful and not much value."
- "...Would have liked more emphasis of evaluation instead of explaining (the rationale) to the patient. ...would simplify and allow more time for evaluation."
- "In fieldwork, OT's were very casual about evaluation methods with lots of guessing and 'eye-balling' – not nearly as thorough as we were required to do."
- "I enjoyed every minute of my practicum and I did use all I learned in class in the practicum and I felt ready for fieldwork."
- "I didn't perform all these evaluations but incorporated them frequently in treatment."

G. Personal Reflections of the Practicum Experience – The comments that were offered by the students related to benefits and challenges with this process. Of the positive comments, students related that the experience was beneficial and preparatory to both Fieldwork and to clinical practice in their futures. Recognition of the importance of being competent in skills was offered and the practicum was appreciated for advancing students in this direction. Students also appreciated the hard work of team members in the practicum experience. It was also recognized that although the exit practicum was a stressful experience, it was also very helpful to their competence and confidence in clinical settings.

- "...was a very good experience to preparing you for fieldwork and the job."
- "I truly appreciate all the hard work of everyone and all team members as this practicum helped me a lot to become more comfortable in fieldwork."
- "The experience was helpful for my skill nursing fieldwork."
- "It was great (the practicum). I need to learn more and continue to understand OT clinical skills."
- "I would now work in a physical disabilities practice areas because of this practicum."
- "This practicum is the key to my future practice."
- "At the time it wasn't easy, but I really loved it all the way because it helped me a lot on my level II fieldwork."
- "This exit practicum is very beneficial to practice."

Of the challenges noted, students revealed that the exit practicum was a stressful experience as expected with the 80% passing score. Suggestions were also offered regarding alternates to the current video taped method of this practicum and these included having a 1:1 session to demonstrate proficiency in clinical skills and to change role playing patients as this was uncomfortable for a few students. One student related that all the evaluation were not used in his/her clinical setting and that because of clinical time constraints, OT practitioners in her/his setting did not have a full hour to perform the evaluation or intervention session. Although students noted challenges or alternative that would have been preferred, most of the challenging comments were followed by positive

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- acknowledgment of the experience.
- "Although I did not enjoy role playing, the practicing helped me not only with the practicum but for my fieldwork."
 - "It was scary at first, but practicing before hand helped me feel less nervous on the day of the practicum."
 - "At the time it was not easy but I really loved it (the practicum) all the way because it helped me a lot on my level II fieldwork."
 - "At the time it was very stressful, but during fieldwork I was so thankful for it."
 - "I was nervous at first because of the 80% score to pass but constant practice and believing that I could do it made me more comfortable with the practicum."
 - "It was very nerve racking to know we needed to pass in order to go to fieldwork."
 - "I did not use all the tools in clinical practice and we did not have one hour to perform the evaluation in the clinic."
 - "1:1 sessions to demonstrate skills would be a better idea for this."

Results Summary for Indirect Measure 3 – What Was Learned From the Results - A 96% majority of the students rated this experience as valuable and positive to their success in the physical disabilities clinical course (OTA-215-216). Reflections rendered the contention that although a stressful/challenging experience, the exit practicum served to prepare them well for the rigors of physical disabilities clinical practice. Two suggestions for change were offered in this qualitative analysis and these involve changing the method of video-taping and role playing to 1:1 live/real time - competency check outs of clinical skills. Although the stress of this practicum is appreciated, it is believed that the method of video recording offers student's the greatest advantage in succeeding with revision of the practicum session prior to submission should the viewed tape not meet acceptable standards. Role playing also appears to reinforce understanding the diagnosis and symptoms of the student's patients in the future. Although it would be helpful to have real patients for this practicum, licensure laws factor into its absence from consideration. Through this qualitative analysis of the students' perceptions of this practicum, it appears to be a challenging but valuable aspect of their OTA education that contributes to success with physical disabilities clinical coursework as well as preparation for their future as OT Practitioners.

Results of the Assessment Process – Analysis of Students' Formative Practicums and Participation in Remediation for Skill Development:

Analysis Measure –

4. Students who successfully completed skills review practicums during year two of the program with an 80% or greater will pass the exit competency practicum with an 80% or greater.

Results –

4. This measure was achieved. Results of the analysis of the Skills Review Practicum (SRP) reveal that 100% of the students who passed the SRP during year two of the program with an 80% or greater (85% of all second year OTA students) also passed the exit practicum with an 80% or greater. Analysis further revealed that 15% of all second year OTA students did not pass the SRP with an 80% or greater. Of these students, 100% continued on to pass the exit practicum with an 80% or better – (67% of these students passed the exit practicum on their first attempt with an 80% or better and 33% of these students passed the exit practicum on their second attempt with an 80% or greater following remediation).

Analysis Measure -

5. Students who participate in remediation sessions and/or practice sessions for skill development will evidence a score of 80% or greater on the exit practicum and a score of 75% or greater on the physical disabilities clinical course OTA-215-216.

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Results –

5. This measure was achieved. Results were analyzed with 65% of the students receiving remediation/practice sessions, the average score for the exit practice for these students was a 92% and the average physical disabilities clinical course score was an 86%. Sessions included 1:1 (instructor:student) review and practice of skills with between 1 and 7 practice sessions occurring either prior to or just following the exit practicum, yielding an average of 3.5 practice sessions for this group. 62% of the students who participated in early practice sessions (4.5 session average) yielded a 90% score average on the exit practicum and an 85% score on physical disabilities clinical course (OTA-215-216). For those students who received remediation/practice sessions (1 session) following the first unsuccessful attempt of the exit practicum (non-passing score average at 68%), the average score for the second attempt at the exit practicum was a 94% and the physical disabilities clinical course score average was an 87%.

Results Summary for Analysis Measures 4 & 5 – What Was Learned From the Results - Results of the analysis of formative practicums such as the skills review practicum demonstrate assistance with gaining the skills needed to successfully complete the exit practicum. Although students of this OTA program are given individual practicums for many of the evaluation/intervention skills needed for physical disabilities practice in the first year, the skills review practicum is a mini-version of the exit practicum, where many of the evaluation/intervention skills are grouped to perform in a recorded 30 minute session. This formative practicum has evidenced success in continuing to keep evaluation/intervention skill building current for both the exit practicum and the physical disabilities clinical course. With regard to additional practice/remediation sessions, review and practice in a 1:1 format has facilitating student success for both the exit practicum and the physical disabilities clinical course (OTA-215-216). Both the formative practicums and additional practice/remediation sessions are helpful in achieving success with clinical skill building and competency, needed in the exit practicum, physical disabilities clinical coursework (OTA-215-216) and in clinical practice.

Results of the Assessment Process – Analysis of Reliability and Validity of the Exit Practicum:

Analysis Measure –

6. Inter-rater reliability measures for scoring of the exit practicum will yield and 80% consistency in scoring of the exit practicum.

Results –

6. This measure was dropped from analysis due to limitations in accessing faculty/staff assistance for this project. Time demands were cited as the primary limitation in achieving this measure.

Analysis Measure –

7. Eighty percent (80%) of the assessments selected for the exit practicum will be utilized in the physical disabilities clinical course (OTA-215-216).

Results –

7. This measure was achieved. Results reveal that 100% of the assessments selected for the exit practicum were used in the physical disabilities clinical course (OTA-215-216) with varying averages. Twenty different evaluations/skills were selected as relevant to physical disabilities practice. These include Range of Motion, Manual Muscle Testing/Group Muscle Testing, Endurance, Sensation, Muscle Tone, Fine Motor Coordination, Gross Motor Coordination, Bed Mobility, Sitting Balance, Standing Balance, Pain Perception, Cognition, Edema, Upper Body Self-Care, Lower Body Self-Care, Grooming and Oral Facial Hygiene, Transfers, Grip and Pinch Strength, IADL's and

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Documentation. Survey results reveal the percentages of use among Wright College's OTA student's physical disabilities clinical course experience. Results reveal that cognition, bed mobility, transfers, endurance and documentation are the skill areas that are most used in these students' clinical course. Additionally, ADL, IADL, joint motion, sitting balance were also predominant. The following results of percentage of use within the clinical sites are offered.

- A. Range of Motion – 85%
- B. Manual Muscle Testing – 45%
- C. Endurance – 90%
- D. Sensation – 45%
- E. Muscle Tone – 55%
- F. Fine Motor Coordination – 80%
- G. Gross Motor Coordination – 80%
- H. Bed Mobility – 90%
- I. Sitting Balance – 85%
- J. Standing Balance – 80%
- K. Pain Perception – 60%
- L. Cognition – 95%
- M. Edema – 55%
- N. Upper Body Self-Care – 85%
- O. Lower Body Self-Care – 85%
- P. Grooming and Oral/Facial Hygiene – 85%
- Q. Transfers – 90%
- R. Grip and Pinch Strength – 45%
- S. IADL's – 85%
- T. Documentation – 90%

Results Summary for Reliability and Validity Measures 6 & 7 – What Was Learned From the Results - In the area of reliability and validity one measure was dropped from analysis secondary to time and personnel shortages. Reliability scoring of the exit practicum was achieved in year one of this assessment process and since that time it has been difficult to access the needed time and workforce to more thoroughly review this dimension of the exit practicum. The successful results of the initial reliability analysis do not pose contentions to the exit practicum scores that are currently rendered.

In terms of validity measures, the exit practicum targets the needed skills for physical disabilities clinical practice as evidenced by the results. Although the percentages of evaluation/intervention skill use vary with a range of as high as 95% to as low as 45% it is important to note the differences among clinical practice areas and roles and responsibilities for OT practitioners. Each clinical site that the students attended for their physical disabilities clinical course experience renders a different focus or emphasis of intervention to meet the client/patient's needs. (For example – out-patient practice areas typically see more hand injuries where measurement of sensation, pain, grip and pinch strength evaluation/intervention are needed. Whereas a rehab facility may focus more on the population of individuals who have neurological or orthopedic conditions that warrant basic skill development such as sitting and standing balance, ADL and IADL functions, requiring joint motion, muscle tone and coordination evaluation/intervention.) Occupational Therapist roles differ in some facilities from those of the occupational therapy assistant and in other practice areas/facilities these roles are less distinct. The level of skill need for evaluation will depend on the understanding, experience and training of the clinical site supervisor which yields much variation in how each

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evaluation/intervention skill area is pursued by the OTA student. While in consideration of these realities of clinical site practices, each of the evaluation/intervention skill measures were identified as useful for the exit practicum and toward the completion of the physical disabilities clinical course (OTA-215-216). The results of the analysis support the use of each of the evaluation/intervention skill areas that are selected for the exit practicum.

Action Plan Based on Results and Analysis

Based on what was learned, what steps will be taken to improve student learning?

Action Plan Based on Results and Analysis:

This Assessment Project for the OTA program at Wright College was a projected three year project. During the first year of this process, an analysis of the scores of the exit practicum and the clinical course (OTA-215-216) was evaluated, highlighting the benefits of the practicum in preparing the OTA students for successfully completion of the clinical portion of OTA education. Reliability measures were also analyzed emphasizing an accurate calculation of the exit practicum grades. In addition to these quantitative measures, the students were surveyed to access qualitative measures of the benefit and/or challenges of the exit practicum.

The OTA Assessment Project was reviewed and refined for the second year of assessment, adding more space for the exit practicum, meeting student's suggestions, refining analysis of physical disabilities specific clinical coursework, and refining the student survey to access additional qualitative information. Adding a documentation component to the exit practicum was evaluated for inclusion in this project.

As this OTA Assessment Project approached its third year several more additions/revisions were pursued. Accurately analyzing the scores of the exit practicum with the physical disabilities clinical course was accomplished. The student survey was revised yielding more data with regard to evaluation/intervention skills used at clinical sites and reflection of the exit practicum experience. Analysis additions for this third year included examining formative practicums and their impact on the exit practicum experience as well as evaluation of remediation/practice sessions prior to and just following the exit practicum for facilitating greater success on both the exit practicum as well as the physical disabilities clinical course (OTA-215-216).

There several outcomes from the analysis that bear reflection for future OTA Assessment projects. The exit practicum is valuable in promoting success in clinical coursework as evidenced within the past 3 years of results for this project. However, there are a few impediments with the exit practicum assignment that may be warrant an examination of alternatives. First, the stress levels that are developed within the students at the end of academic coursework could be addressed more proactively employing skills review practicums prior to the end of OTA academic coursework. To this end, examining data from the practice/remediation sessions could bolster skills performance throughout the academic preparation of the program to enable success towards completion of skills review practicums as well as physical disabilities clinical coursework. Second, the exit practicum from the instructor's perspective is labor intensive, with extensive hours/days invested in viewing and scoring of these 60 to 90 minute video reproductions with documentation. This fact is bolstered by the limitations in measure 6 of this Assessment Project in terms of Reliability Scoring where a lack of personnel and time constraints limited this empirical inquiry. Although this instructor's contention has been that the ends justify the means and there is no sacrifice to big to facilitate successful OTA practitioners and enhance student learning, other methods may produce equally successful outcomes for the

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OTA students. In light of these challenges, perhaps a different method of exacting the student's competency is worth examining – smaller more meaningful increments of evidencing student learning. It is thus proposed that the following be considered in evidencing improved student learning:

1. Track OTA student performance on formative practicums as a means of evaluating competency for clinical coursework. Analyze data of these formative practicums with the physical disabilities clinical course scores.
2. Offer exit practicum on a voluntary basis, reducing the perceived stress demand of this experience.
3. Engage and students and track participation in review and practice sessions throughout the semesters of the second year to enhance skill building as part of the professional development project assignment developed for the second year of academic coursework.
4. Continue to solicit OTA student reflections of the practicums and academic preparation needed for clinical coursework through a revised survey. Use of computer generated survey systems may be a compliment to data collection for this analysis.
5. Analyze data from clinical site supervisors (survey) regarding student preparation for clinical course competency.
6. Although practicums are an intensive process, the emphasis has been solely on physical disabilities practice. It would be of benefit to the OTA students to pursue this method of exacting competency within the pediatrics and mental health areas of OTA program instruction during the first year to evaluate competency along a developmental continuum.