NYIT Annual Program Assessment Report, June 2017

This report provides evidence that students are achieving end-of-program learning goals and that graduates are attaining achievement outcomes established by the program.

Name of the program: _____Physician Assistant Studies_____

Year (e.g., AY16-17) of assessment report: _____AY16-17_____

Date Submitted: _____May 1, 2017; July 11, 2017 (Updated version)_____

Contact: ____Dr. Zehra Ahmed (zahmed01@nyit.edu)_____

The Statement of Program Learning Goals and Curricular Matrix are available at:
http://www.nyit.edu/planning/academic_assessment_plans_reports.

I. Annual Program Learning Assessment:

1. GOALS: List program learning goals that have been assessed in AY16-17.
   The **PA program has four overarching goals**. **We addressed Goal 1 in AY16-17.**
1. Offer a robust curriculum that prepares PA graduates to enter the healthcare profession successfully.
   a. Our expected outcome for this goal is:
      i. Students are expected to pass NCCPA certifying examinations (PANCE) at above 95% overall.

   We are submitting here the report and data to the NYIT Assessment Committee that addresses the following NYIT MSPAS Program Learning Outcomes that play a key role in this overarching goal.
   i. Demonstrate core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care.
   ii. Demonstrate an investigative and analytic thinking approach to clinical situations.
   iii. Demonstrate medical knowledge through the synthesis of pathophysiology, patient presentation, differential diagnosis, patient management, surgical principles, health promotion, and disease prevention.
   Every PA student must pass The Physician Assistant National Certification Examination (PANCE) offered by the National Commission on Certification of Physician Assistants (NCCPA) to transition to a certified PA who can be employed clinically.

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The program receives PANCE performance scores from NCCPA each year. Scores include program and national first time pass rate, all examinations pass rate and comparisons of both, with the national mean. (See attachments and **these posted on the NYIT PA Website**). Detailed information on organ systems and task areas are provided as well. (See attachment Content Area in NYIT PANCE performance)

2. METHOD: Describe the method of assessment and attach measurement instruments (e.g., rubric, exam items, scoring guide for a particular task, supervisor evaluation form, and standardized assessment tool).

Graduate performance on the PANCE is evaluated yearly to assess program effectiveness. PANCE scores are discussed at department meetings and the information is used at department curriculum meetings to make changes as needed.

The program's First Time Taker average pass rate for the past five years is 94% and the five-year National First Time Taker average is 95%. While we are slightly below the National mean the five-year First Time Taker pass rate, the First Time Taker pass rate for the CO 2015 and 2016 was 96% and 100% respectively. These are at and 4% above the national average respectively. These two cohorts exceed the programs expected outcome for the students' performance on the PANCE, which is above 95% overall. (See attachment)

3. ANALYSIS: Report assessment results per learning criteria (e.g., per row of rubric, subset of test items, components of a learning task).

Analysis of the organ and task content areas as categorized by the NCCPA indicates the program has progressively performed better than the national average in most areas. All task areas have improved significantly since 2012 and for the past two years have been at the national average or above. Dermatology was the only organ area below the national mean once in the past two years (77% vs 79%); otherwise all of the organ areas were at or above the national mean.

4. INTERPRETATION: Provide an interpretation of student strengths and weaknesses for a given program learning outcome.
5. IMPROVEMENTS - PLANNED: Identify planned actions for improving student achievement of assessed program learning goals.

History taking and performing physical exams is an area too that remained static in the Class of 2016. The faculty teaching the courses that cover

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these areas (Clinical skills I & II) have discussed the rubrics and restructuring the focus in the class. In addition these specific courses PHAS-622 and PHAS-623, retrospectively, are 1 credit each and feedback from student evaluation and group discussions, indicate that less importance is given to these classes. The curriculum committee and faculty are proposing increasing the credits in these classes (by shifting credits from another course).

Additionally, there have been extensive changes made to the Clinical Year in which students are required to do KAPLAN PANCE test prep questions on all organ systems and task areas on a monthly basis and end of rotation exams are now better aligned with the PANCE examination.

The PA department has taken great measures to improve our graduates' performance on PANCE, and there has been an overall steady improvement in scores from 2013 to 2016 (92%, 92%, 96%, 100%) respectively, which demonstrates the program's effectiveness in preparing graduates to enter the workforce. Though the analysis overall is very good the faculty will continue to monitor and strengthen all areas.

We will track the changes and outcomes that have already taken place and follow up on those that we have suggested above.

II. Summary of Improvements Made in Response to Assessment Results in the past few years:

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Year of Assessment Results	Brief Name of Program Learning Goal (e.g., Writing)	Improvements Implemented Based on Assessment Results	Impact of Improvements (report reassessment results if available)
AY13-14	Demonstration of core medical knowledge and investigative and analytic thinking and the level of accuracy of application to case based assessments.	The Physician Assistant Clinical Knowledge Rating and Assessment Tool (PACKRAT) was used to compare the improvement of these learning outcomes between early fall of the clinical year and late in the spring semester. Some of the improvements implemented were: a) to use the Kaplan PANCE/PANRE Qbank throughout the clinical year by students to assess their improvement b) High stakes summative evaluation administered c) High stakes OSCE's administered d) Students watched prerecorded board review modules one week prior to graduation.	The first time taker PANCE results for the Class of 2014 were 92%, the same as the previous cohort. Analysis of the content breakdown demonstrated improvements between the 2013 and 2014 cohorts; in particular areas such as Cardiovascular (73%-2013 to 77% in 2014); GU (71 % to 76%); Hematology (70% to 72%); Health maintenance (68%- 71%); clinical intervention (71%-74%) etc. This improvement cannot be solely linked to the interventions only, however, both faculty and students attribute some credit to them. Similar interventions made in subsequent years, does show a definite improvement in the first time taker PANCE scores.
AY14-15	The program attempted to assess and identify students at risk for academic failure and attrition based on the first semester's GPA.	Data was gathered from the Classes of 2012 to 2015 (graduation years). Data included first semester GPA and undergraduate institution. A. Students who are matriculated in the BS/MS program are younger than our students who have already received a Bachelor's degree from an outside institution. Their young age may place	The Class of 2018 are currently in their 3rd and final year of the PA program. To date the attrition rate of the CO 2018 is 6 [as compared to 8 (CO 2016) and 7 (CO 2017). This increase in the required standards to matriculate into the PA program may have been somewhat effective. However, the CO 2019 has an attrition rate of 10 students (of

| | | | them at a disadvantage in such a rigorous fast paced program. B. Students who are matriculated in the BS/MS program do not appear to be as well prepared academically as our students who have graduated from an outside institution despite all students completing the same mandatory prerequisite coursework.

Changes implemented:
1. All pre-requisite courses are required to have a B- grade (instead of a C+ as before).
2. Students must take Human Gross Anatomy & Human Physiology instead of Comparative Anatomy and Physiology, as this would better prepare them to tackle their advanced Human A&P coursework in the graduate program. Other advanced science courses such as microbiology, biochemistry, genetics and advanced statistics, were strongly recommended to all potential candidates. The proposal was accepted by the Academic Senate and the new requirements went into affect in May 2014 (NYIT Catalog AY15-AY16). The cohorts affected by these changes were those students in the CO 2018.
3, Students who are in the BS/MS program | 55) thus far and the program plans to evaluate other possible causes for this increase in attrition. |

		will meet on a more regular basis with the Chair of the PA Department to monitor their progress more closely in the pre-PA phase of their studies.	
AY15-16	• Apply compassionate and respectful behaviors when interacting with patients and their families. • Course specific outcome was addressed: Discuss and perform various components of the medical history and physical examination to include: Male and female genitalia examination rectal, anus and prostate exam and breast exam.	In the past students were taught to examine the female and male genitalia on rubber models as opposed to all other PEs that are done one each other (i.e. listening to heart and lung sounds etc.) Based on student feedback and faculty observation the program decided to offer a live model program through Rutgers Medical School.	A simple pre- and post- survey was carried out to determine the student's confidence level with the examination. 93.6% of the students did not feel at all confident prior to the learning event and 93.6% felt confident to do the examination, after the learning event. Focus group discussions between this cohort of students and the subsequent cohort and the chair, revealed that the students felt an extremely high level of confidence and competence with these examinations while on clinical rotations.

III. Brief Description of Faculty Engagement in the Current Annual Assessment Report:

• Graduate performance on the PANCE is evaluated yearly to assess program effectiveness. PANCE scores are discussed at department and curriculum committee meetings and the information is used to make changes as needed. Each faculty reviews their own syllabi, assessments and outcomes and further discusses these with the Academic Coordinator and/or at department meetings as needed.

IV. Annual Program Achievement Goals:

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Please provide examples of readily available *data* on program student achievement (e.g., first-year retention rates, six-year graduation rates, average time to degree completion, certification exam pass rate, student satisfaction survey results, employer satisfaction results, % pursuing an advanced degree, % of job placement, etc.)

The PA Studies Program is currently in an accreditation cycle. Our accreditation site visit is on April 11, 2019. Our accrediting body, The Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) requires a Self Study Report (SSR) to be submitted 2 years before and this was completed and submitted in April 2017.

The data we collected and analyzed came from three cohorts of PA students included # of students course grades less than C, students attrition, students graduation evaluation survey, students evaluation of faculty teaching, admission criteria etc. Please fine the whole data sets and data analysis in our SSR.

Note. Please contact Associate Director of Planning and Assessment, Shifang Li (sli09@nyit.edu) for assessment support.