

## Action vs Inaction

*Why are most people slow to action? Even if they have a good idea for improving a situation, many still might lack other requisites to initiate action- things like the desire and the inspiration to make a change.*

*Remember that our philosophy of assessment in the CPHS is 'Measurement with the intent to improve'. Coupled with the intent is the 'desire' and 'inspiration' to improve our programs. We want to avoid the pitfall of others who*

*gather data, and more data, and then fail to take action.*

*You might also notice that it is sometimes hard to solve our own problems but much easier to tell someone else what actions to take to solve theirs.*

*Perhaps that's because we see more barriers in our ideas than an outsider does. Someone slightly removed from the situation can often cut through those barriers and focus on an action.*

*Luckily, our college creates spaces to have these discussions and keep moving forward. Curriculum meetings, retreats, Continuous Improvement Plan discussions, and other sessions can provide us the space to plan and execute improvements based on solid data.*

*In this edition, Chris has highlighted a few areas where we've taken initial actions for improving. Continuing to track results will show where we're successful.*

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## CPHS' Continuous Improvement Plan

The CPHS Continuous Improvement Plan currently has five initiatives. Each of these fall under one of four themes- Teaching and Learning, Reflection, Execution (efficiency and processes), and Stewardship. The initiative below is under “Reflection”.

Measure	15-16	16-17	17-18	Target	Initiative
Percent of evaluations meeting objectives on IDEA Center	92.0%	90.3%	76.6%	80%	Promote the IDEA Center Resources, particularly the choice of selected resources. Share dept. goals with chairs. Remind faculty on garnering responses.

As you can see from the chart, in 17-18, the college’s goal of *80% of courses being similar to or higher than the national benchmark for progress on relevant objectives* was not met. The drop from 90% to 76.6% could be attributed to several different factors including increase in the number of faculty using IDEA Course Surveys without experience setting learning objectives, faculty new to using these course surveys and choosing objectives that didn’t match what was in the course, and a lower response rate.

This shortfall has been addressed several ways. Faculty might recall emails suggesting that they complete course surveys in class, send reminders, and discuss the importance of completing course surveys and the impact course surveys potentially have on teaching and learning.

The overall response rate for fall 2018 was 80% (fall 2017 was 71%). Though this doesn’t necessarily speak directly to the drop, it does help ensure that a greater representation of student views is available. Low rates of response often show that the ‘middle’ of the class is not well represented in the surveys (high achievers and student’s struggling with the

course content or the faculty member become over represented).

Going forward, raising the response rate is one way that might impact the percent of objectives being met. This includes building the culture with students that their feedback is important. The CPHS Assessment Committee is currently looking at ways to improve the response rate, student survey fatigue, and different ways team-taught courses can be surveyed so that we continue to get student feedback and are able to take actions for continuing to improve student learning. Faculty focusing on their objectives is another action to improve our progress on course objectives.

### CIP Engagement

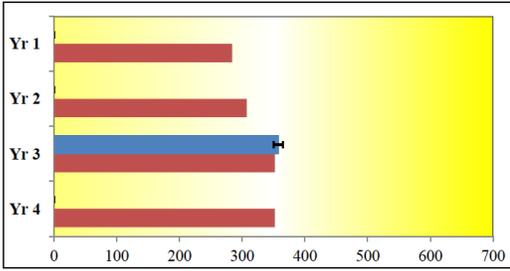
The CAC reviews and updates the CPHS Continuous Improvement Plan (CIP) monthly. To view the CIP, click [here](#). If you have comments or questions about the CIP, feel free to contact Chris Wing

# Spring 2018 PCOA SUMMARY

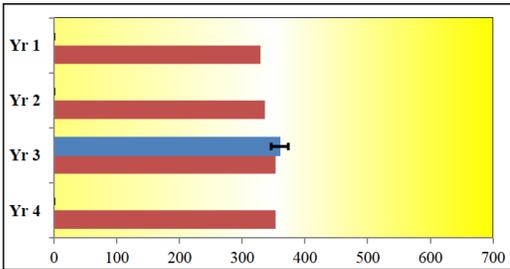
## School/College Score Means

■ Your School   
 ■ Reference Group   
 Confidence Interval

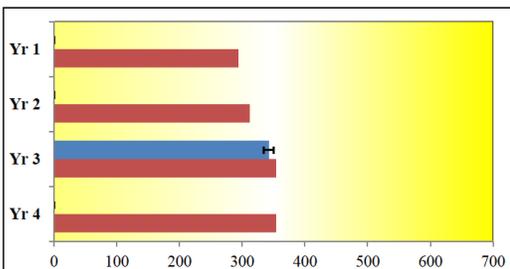
Year 1 N:	Year 2 N:	Year 3 N:	Year 4 N:
-	-	104	-



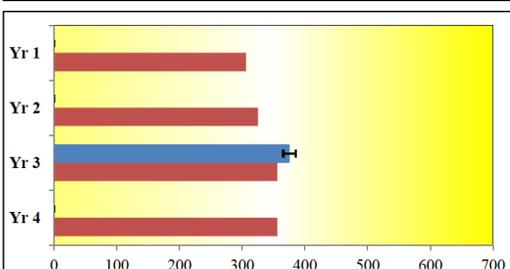
Total Score			
P Year	Your School	Reference Grp	Percentile Rank
Yr 1	-	284	-
Yr 2	-	307	-
Yr 3	358	352	54
Yr 4	-	352	-



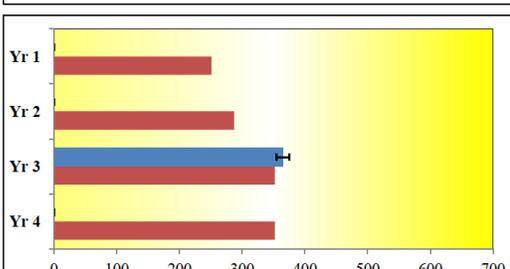
Area 1: Basic Biomedical Sciences			
P Year	Your School	Reference Grp	Percentile Rank
Yr 1	-	329	-
Yr 2	-	336	-
Yr 3	360	353	54
Yr 4	-	353	-



Area 2: Pharmaceutical Sciences			
P Year	Your School	Reference Grp	Percentile Rank
Yr 1	-	294	-
Yr 2	-	312	-
Yr 3	342	354	44
Yr 4	-	354	-



Area 3: Social/Behavioral/Administrative Sciences			
P Year	Your School	Reference Grp	Percentile Rank
Yr 1	-	306	-
Yr 2	-	325	-
Yr 3	375	356	60
Yr 4	-	356	-



Area 4: Clinical Sciences			
P Year	Your School	Reference Grp	Percentile Rank
Yr 1	-	251	-
Yr 2	-	287	-
Yr 3	365	352	60
Yr 4	-	352	-

## PCOA SUMMARY:

Drake P3 students completed the 2018 PCOA in April. There were 104 students who completed the exam. The exam is required of all students but **is not high-stakes** (scores do not affect progression through the Pharmacy program). Compared to other schools who used the PCOA during students third year, Drake ranks above the 50<sup>th</sup> percentile overall (54). This is lower than the 2017 class which scored in the 61<sup>st</sup> percentile.

Students scored lower in three of the four area domains. Area 1: Basic Biomedical Sciences increased from the 40<sup>th</sup> percentile in 2017 to the 54<sup>th</sup> percentile in 2018. Areas 2, 3, and 4 were all lower than the 2017. Curiously, despite the drops, Area 2: Pharmaceutical Sciences is the only domain where Drake students scored lower than the comparison group. Area 3: Social/Behavioral/Administrative Sciences and Area 4: Clinical Sciences scores were higher than the comparison group in 2018 despite a drop for Drake students from 2017 to 2018.

## Assessment in Action: Health Sciences

During the spring 2018 semester, the Health Sciences program assessed their educational outcome: *Graduates can work effectively in collaborative groups and resolve the interpersonal conflicts that may arise in such environments.* This outcome falls under Outcome D: Communication and Collaboration Skills. The objective was assessed as part of the Issues V course.

### The Assessment Tool

Students were asked to complete the 5 Voices Assessment. The assignment included a *How to Communicate Effectively with Everyone You Lead* activity which included participating in discussions and in-class activities, taking the 5 Voices Assessment, and completing the 5 Voices Reflection.

- 100% of the students in Issues V completed the 5 Voices Assessment.
- 95% of the students in Issues V completed the 5 Voices Reflection.
- 91% received full-credit (25/25 points) for appropriate reflection and feedback on the following questions:
  - Detail your 5 Voices.
  - Indicate how your voices emerge professionally.
  - Indicate how your voices emerge personally.
  - Compare your 5 voices with your strengths from strengths finder.
  - Indicate how you will utilize this information in your capstone and future as a health care provider

### Findings

Of the 43 respondents (out of 44 students in Issues V)

- 63% (27 students) made exceptional progress,
- 21% (9 students) made substantial progress,
- 14% (6 students) made moderate progress
- 2% (1 student) made slight progress on acquiring skills in working with others as a member of a team in Issues V.

### Moving Forward

The HS department is working on incorporating strategies related to working collaboratively in groups and solving interpersonal conflicts earlier in the curriculum. Specifically, the department is creating a new course entitled Professionalism in Health Sciences that students take during the second semester of their first year.

### Action Item:

Integrate related concepts into the new Professionalism in Health Sciences course.  
Students currently receive this content in the Issues V course during the Spring of their senior Year. The content will transition into the year-long, Guided Research in Health Sciences course next year.  
Action Item: Incorporate 5 Voices & related group dynamics content and activities into Guided Research course for FY19.

## Occupational Therapy- Assessment Update

The Occupational Therapy Program's accreditation process is COMPLETE, at least until 2025. Now that the push with the initial accreditation process is

complete, some focus can shift towards assessment of the academic outcomes and objectives. Currently, work is being done to build structure

around OT assessment goals to support systematic assessment. Some of the activities we'll be taking on this spring are:

- January 2019- finalizing curriculum changes to be proposed to AAC in February
- February 2019- update curriculum map to ensure that program outcomes and objectives are mapped to the right courses (post curriculum changes)
- January-March 2019- finalize schedule for outcomes assessment
- April-May 2019- survey graduating students (survey pilot)

## Announcements and Updates

January 2019	IDEA/Campus Labs Survey for faculty
January/February	IDEA/Campus Labs Spring 2019 Course surveys set up
March 30 <sup>th</sup>	Occupational Therapy Annual Report Due
April 11 <sup>th</sup>	PCOA Exam for P3 students
June 30 <sup>th</sup>	Health Sciences, Pharmacy, and Athletic Training Annual Reports Due

Visit the Assessment website at:

<http://www.drake.edu/cphs/about/databook/>

*Great Universities Measure What They Value*