M.A.Ed. Communication Disorders Summary Report of Key Assessments 2012-2013

Key Assessment 1: Content

Candidate pass rates will be 80% or higher on the ASHA examination (Praxis/state licensure). The test is composed of 120 multiple choice questions that address (a) Basic Human Communication Processes, (b) Phonological and Language Disorders, (c) Speech Disorders, (d) Neurogenic Disorders, (e) Audiology/Hearing, (f) Clinical Management, and (e) Professional Issues/Psychometrics/Research.

Criterion: 80% or higher overall student pass rate is expected for the Praxis as a whole. Institutional data for %correct in topic areas are expected to meet or exceed state and national averages.

Ten students have taken and passed the Praxis exam with range of 650-730. [600 is passing.] Three students had below average scores in three different areas: Student 1 in Basic Communication Processes; Student 2 in Speech Disorders; Student 3 in Phonological & Language Disorders. Means and ranges for each tested area are as follows: Basic Human Communication Process (19) - M=11.25, range 8-17 (national 9-13) Phonological & Language Disorders (22) - M=18.71,range 14-22 (national 19-21) Speech Disorders (16) - M=12.13, range 8-14 (national 11-14) Neurogenic Disorders (22) - M=17.5, range 14-20 (national 16-19) Audiology (7) - M=5.5, range 4-6 Clinical Management (21) - M=16.25, range 16-17 (national 13-17) Professional Issues & Research (11) - M=8.88, range 8-11 (national 8-10) Overall median for this cohort was 700 (M=698). The 2012-13 national median reported was 680, exceeded by our students. One area presented with below average performance, Basic Human Communication Processes (59%). Phonological & Language Disorders, Neurogenic Communication Disorders, and Professional Issues & Research revealed the strongest performance, 85%, 82%, 81% respectively. Speech Disorders, Audiology, and Clinical Management revealed average scores, 75%, 79%, 74% respectively.

Key Assessment 2: Content

Beginning 2012-13, Knowledge and Skills Acquisition (KASA) Form will be reviewed each semester for each student. Students will be expected to indicate completion of the course of studies listed on the KASA form. Performance ratings will be assigned on a 4-point scale [4-excellent (100-95); 3-good (94-90); 2-average (89-80); 1-emerging (<80)].

Criterion: (a) A 100% rate of completion will be expected each semester. (b) An expectation of 2 or higher average for performance ratings for each course will be applied.

100% of students completed the graduate courses from summer 2012 through spring 2013 (2 cohorts) with a scores of B (2) or A (3;4). Means for each graduate course met or exceeded the 2.0 criterion. Nine of 14 courses (64%) had mean scores over 3.0, six of those (67%) exceeded 3.5 with two being 4.0.

Key Assessment 3: Ability to Plan Instruction

Candidates will write daily treatment documentation (SOAP notes) for each service provision during clinical practicum experiences.

Criterion: Candidates will score average (3) to above average (4;5) on the scoring guide for clinical notes in the area of communication. Formative and summative evaluations will be maintained by practicum supervisors and/or Clinic Director.

Data were collected from midterm and final grade averages on weekly treatment documentation for graduate students in fall 2012 and spring 2013 for formative and summative assessment. Fall 2012 revealed midterm mean of 4.26 compared to a final semester mean of 4.68 (range midterm 3.68-4.71; range final 4.25-5.00). Spring 2013 revealed a midterm mean of 4.40 compared to a final semester mean of 4.75 (range midterm 3.46-5.00; range final 3.90-5.00).

Key Assessment 4: Clinical Practice

Externship Evaluation

Criterion: Candidates are required to score a 3 or better on 5-point scale to pass their externship field experience.

Students complete medical externship placements during either their fall or spring semester. Mean score for the 2012-13 cohort (n=21) was 4.66, range 3.60-5.00.

Key Assessment 5: Impact on Student Learning

Clinical treatment plans will be evaluated for each semester.

Criterion: Candidates will score average (3) to above average (4;5) on the

scoring guide for clinical treatment plans in the area of communication. Formative and summative evaluations will be

maintained by practicum supervisors and/or Clinic Director.

Data were collected for initial scores for the first two clinical semesters for graduate students. Fall 2012 scores ranged from 2.0-5.0 with a mean score of 3.93. Spring 2013 scores ranged from

3.0-5.0 with a mean score of 4.71. The overall mean score for both semesters was 4.07 (range 2.0-5.0).

Final Student Teaching Evaluation

Criterion: Candidates must achieve a score of 3 or better on the 5-point scale to pass their student teaching experience.

Data were collected from student teaching evaluations scored by supervising clinicians at the school. Mean score for the cohort (N=20) was 4.86, range 4.50 to 5.0. No ratings below a 4 were noted for any students. A "4" is defined as "demonstrates independence but needs general direction to perform competently and evaluate self/client accurately." The majority of students received ratings of 5 for each skill area. A rating of "5" is defined as "demonstrates independence by taking initiative; displays superior competencies and evaluates self/client accurately."

Key Assessment 6: Content

Critical and Creative Thinking

Written and oral comprehensive examinations or thesis as summative assessments.

Criterion: Candidates will receive a mean score of 3 or higher on written and oral comprehensive examination or thesis scoring guide in the area of communication skills (5-point scale).

WRITTEN COMPREHENSIVE EXAMINATIONS: 2012-13 mean for written comprehension examinations was 3.59, range 2.96-4.01 [scale 1-5]. One student failed (2.6; 2.71; 2.64) on their first attempt in three areas, but was successful on the second for each. Students are provided a

first attempt in three areas, but was successful on the second for each. Students are provided a choice of two questions for each major topic. Students can fail one topic area and still receive a "pass" for the comprehensive examination. More than one topic failure results in students having to rewrite in those topic areas following an improvement plan developed between the student and faculty. One of 20 students failed three topic areas; one of 20 failed one topic area. Overall means for each topic area were: Voice 3.5; Aphasia 3.58; Fluency 3.86; Motor Speech 3.29; Child Language 3.54; Diagnostics 3.64; Articulation/Phonology 3.63; Dysphagia 3.45. [These reflect failure scores for one student yet to rewrite for their needed areas.] In examining the specific topic area performance, no significant trends were noted. Voice had the highest number with two failures; Fluency had one failure. No other course topics had failures. Compared to previous failure rates being more distributed among topics, faculty interpreted the change in course order to be successful in improving pass rates. THESIS: One student successfully defended her thesis in July 2012, receiving a 4 on a 5-point scale.