

NOTES TO PROGRAMS
Summer 2016
SELF-STUDY REPORT EDITION II

This edition of Notes to Programs, Self-Study Report (SSR) Edition provides additional information about data in the SSR. The first edition of the SSR Notes to Programs, Spring 2015, can be found at:

<http://www.arc-pa.org/accreditation/resources/>

WHY THE SSR (SELF-STUDY REPORT)?

The cornerstone of continuing PA program accreditation by the ARC-PA rests on ongoing program self-assessment. Accredited programs must “have a robust and systematic process of ongoing self-assessment to review the quality and effectiveness of their educational practices, policies and outcomes.”

All accredited programs must submit an SSR as one component of an accreditation application. All programs scheduled for a comprehensive validation review for continuing accreditation must also submit an SSR two-three years in advance of the program validation review by the commission.

C2 SELF-STUDY REPORT

Standard C2.01 requires the program prepare a self-study report (SSR) as part of the application for continuing accreditation. The SSR must accurately and succinctly document the process and results of the program’s ongoing self-assessment. The SSR is used to **verify** that the program uses ongoing self-assessment to document program effectiveness and foster program improvement.

The report must follow the guidelines provided by the ARC-PA and, at a minimum, the SSR must document:

- the program process of ongoing self-assessment,
- results of critical analysis from the ongoing self-assessment,
- faculty evaluation of the curricular and administrative aspects of the program,
- modifications that occurred as a result of self-assessment,
- self-identified program strengths,
- areas in need of improvement,
- plans for addressing areas needing improvement.

THE SSR APPENDICES REQUIREMENTS

The ARC-PA expects results of ongoing self-assessment to include critical analysis of:

- student evaluations for each course and rotation,
- student evaluations of faculty,
- failure rates for each course and rotation,
- student remediation,
- student attrition,
- preceptor evaluation of students’ preparedness for rotations,
- student exit or graduate evaluations of the program,
- the most recent five-year first time and aggregate graduate performance on the PANCE,
- sufficiency and effectiveness of program faculty and administrative support staff, and,
- faculty and staff attrition.

The SSR report format for the *Standards*, 4th edition includes multiple appendices, some with data templates and space to provide narrative describing analysis, conclusions and actions related to the data. In addition to the tabular presentation of data, programs may be asked to provide other narrative based on the data requested in each template.

What follows highlights some of the expectations for **data reporting** by programs in each of the appendices. This Notes to Programs is not comprehensive and should be used in conjunction with the application materials and instructions provided for the self-study report.

STUDENT EVALUATIONS OF COURSES/ROTATIONS- APPENDIX B

In this appendix, the program is to provide its own tabular or graphic display of data collected by the program about student evaluations for each course and *rotation* for the most recent three cohorts of students. This data should indicate the students' opinions about the quality of the courses and *rotations* ONLY. While course evaluation surveys often include evaluation of the faculty teaching the course, the data and analysis reported on courses must be separately reported in this appendix. Students' evaluation of program faculty is reported and analyzed in the next appendix (Appendix C).

Data must be reported in aggregate and displayed in tables or graphs that directly support the discussion/analysis. Data should be presented in a way that allows comparison of course scores and appreciation of trends over time.

STUDENT EVALUATIONS OF FACULTY- APPENDIX C

In this appendix, the program is to provide its own tabular or graphic display of data collected by the program from student evaluations of program faculty for the three most recent cohorts of students. The ARC-PA defines *program faculty* as the *program director, medical director, principal faculty and instructional faculty* for both the didactic and clinical phases of the curriculum.

Faculty must not be identified by name (instead use initials, numbers or some other anonymous means of identification). Data must be reported in aggregate and displayed in tables or graphs that directly support the discussion/analysis. Data should be presented in a way that allows comparison across courses for faculty who may have taught multiple courses.

NUMBER OF FINAL COURSE GRADES OF “C OR BELOW” - APPENDIX D

In this appendix, programs will complete the template provided. All didactic and clinical courses must be listed by course number AND name. Data for the most recent three years of graduating classes as well as the classes currently enrolled is to be provided. Carefully follow the instructions which ask for the number of students receiving grades of C, the number receiving Ds, and the number receiving Fs in each course by cohort. Do not list + or – grades, e.g., C+ or C- should be listed as a C grade. Typically courses are listed in the order taken to facilitate discussion in the analysis.

Programs getting applications after May 2016 (for SSRs only or as part of a validation review) will report student *remediation* data in this template. *Remediation* is defined as *the program defined and applied process for addressing deficiencies in a student's knowledge and skills, such that the correction of these deficiencies is measurable and can be documented*.

Programs are asked to report the number of students who have repeated courses or rotations over the past three years. Programs are also asked to report the number of students identified with deficiencies in knowledge and skills, such that the correction of those deficiencies (*remediation*) was necessary for the

student to continue in the program (not including those who repeated a course or *rotation*). The program is then asked to provide a narrative summarizing the aspects of the program remediated or repeated and report, in aggregate, student outcomes (e.g. progress in the program, graduation rates, *PANCE* pass rates).

The program is also asked to provide narrative describing how the program tracks failure rates in individual course and clinical rotations, and how it uses that data as part of its ongoing analysis and self-assessment process.

STUDENT ATTRITION- APPENDIX E

In this appendix, programs will complete the template provided with data from the three most recent graduating classes and the current classes. Students who do not graduate with their starting cohort are included in the attrition template.

Programs should check the math on this table to see that the number of graduates or anticipated graduates reported equal the total of the entering class size minus attrition plus the number joining from another cohort. The entering class size is the number of students newly enrolled for each admission cycle. (It does not include students joining the class from a different cohort).

PRECEPTOR EVALUATIONS OF STUDENTS' PREPAREDNESS FOR ROTATIONS- APPENDIX F

In this appendix, programs will complete the template provided with data from the three most recent graduating classes as well as classes that may be enrolled in required *rotations/clinical courses*.

The data requested is composite data from preceptors **about students'** (collective) **preparedness to enter required rotations / supervised clinical practice experiences (SCPEs)**. This is not an evaluation of the student's performance at the completion of a *rotation/SCPE*. It is about cohort preparedness to undertake *rotations/SCPEs*. This data is one measure of the effectiveness of the didactic curriculum.

STUDENT EXIT OR GRADUATE EVALUATION OF THE PROGRAM – APPENDIX G

In this appendix, programs will complete the template provided with data from the three most recent graduating classes.

Programs will provide composite data from exiting students **OR** recent graduates (choose one if both are collected) about their perception of how well the program prepared them for entry into the profession and suggestions they may have for program improvement.

PANCE PERFORMANCE – APPENDIX H

In this appendix, programs must provide a copy of the official *NCCPA* pdf document of the most recent five-year first time and aggregate graduate performance on the *PANCE*. Programs may also provide aggregate data from *PANCE* organ system and task areas that directly support the discussion/analysis.

SUFFICIENCY AND EFFECTIVENESS OF PROGRAM FACULTY AND ADMINISTRATIVE SUPPORT STAFF- APPENDIX I

In this appendix, the program will provide its own tabular or graphic display of data collected by the program about *principal* and *instructional faculty* and *administrative support* staff sufficiency and effectiveness over the past three years.

Data provided must support the required narrative describing factors used to determine the number of *principal* and *instructional faculty* and *administrative support* personnel needed to support the program.

Programs will describe how data used to determine sufficiency of *principal* and *instructional faculty* and *administrative support* staff is collected.

Programs are cautioned to validate use of a national student/faculty ratio as a benchmark for its own needs, if such comparisons are to be made.

Programs are also asked to describe how data is collected regarding the effectiveness of *principal* and *instructional faculty* and *administrative support* staff in meeting the program's expectations.

FACULTY AND STAFF CHANGES- APPENDIX J

In this appendix, programs will complete a template and provide data on *principal faculty* and *administrative support* staff for which there have been any changes (such as departures, new hires or change in role) over the past four academic years (current and previous three years).

Not every position is listed, only positions that have changed are recorded.

TIMELINE FOR DATA GATHERING AND ANALYSIS- APPENDIX K

In this appendix, programs will summarize data gathering and analysis detailed in the templates required for C2.01. This template also supports the narrative for C1.01, describing the program's established, formal, continuous self-assessment process utilized throughout the academic year and in all phases of the program.

FACULTY EVALUATION OF THE CURRICULAR AND ADMINISTRATIVE ASPECTS OF THE PROGRAM- APPENDIX L

In this appendix, programs will provide specific examples of data collected over the past two years, about faculty evaluation of the curricular **AND administrative aspects** of the program. Programs may choose to present aggregate data graphically on a separate document within the appendix.

MODIFICATIONS THAT OCCURRED AS A RESULT OF SELF-ASSESSMENT- APPENDIX M

In this appendix, programs will list modifications that have occurred over the past three years. Areas currently in need of improvement will be listed in Appendix N.

Modifications listed are to be **a result of the program's ongoing self-assessment process** described in the application and the self-study report. Omit modifications that are routine updates and not part of the self-assessment process or the SSR, such as regular recruitment of clinical sites or regular updating of exams.

PROGRAM STRENGTHS, AREAS IN NEED OF IMPROVEMENT AND PLANS- APPENDIX N

In this appendix, programs will list the strengths of the program related to the *Standards as identified* by the process of ongoing self-assessment and described **in the self-study report**. In other words, outcomes of analysis described in the SSR that indicate the program is meeting or exceeding its benchmarks or goals are considered strengths. Omit listing strengths of the program that do not relate to analysis of program data as discussed within components of the SSR. Do demonstrate alignment between the strengths presented in Appendix N and the Appendices B-L of the SSR.

Programs will also list the areas currently in need of improvement and plans for addressing these areas. These are to be as identified by the program's process of ongoing self-assessment described in the self-

study report. The list must come from outcomes of analysis presented in Appendices B-L of the SSR. The table includes plans for improvement which directly result from analysis of data presented in the SSR.

If the improvement has already been implemented, list it in Appendix M: Modifications that occurred as a result of self-assessment.

GENERAL COMMENTS ABOUT DATA AND THE SSR

In addition to the data required in the SSR, programs should provide only enough additional data to support pertinent conclusions in the analysis. However, all source data should be available to the site visitors. When incorporating relevant data from other areas (focus groups, *PANCE* scores, faculty evaluation of their courses, etc.) provide summaries of the data being referred to.

When qualitative data is cited (e.g. comments from a survey), provide a summary of the data and explain the method for analyzing it, e.g. number or percent of comments and/or trends over time.

Where data collection tools employ scales, state the scale used and provide definitions for each of the available scores.

SSR RELATED RESOURCES

In addition to these *Notes*, several resources related directly or indirectly to the SSR are available on the ARC-PA web site Accreditation Resources page.

<http://www.arc-pa.org/accreditation/resources/>

- The Power Point handout from the ARC-PA presentation at the PAEA Memphis meeting in October 2013 about Program-Defined Expectations as they relate to the *Standards*.
- The Data Analysis Resource (May 2015) document addressing the components of data analysis as they relate to the *Standards*, 4th edition and, Self-Study Report.
- A listing of parameters to be considered and correlated in relation to PANCE outcomes for the SSR or for required PANCE reports to the ARC-PA.