1. **Student Learning Outcomes**
   Which of the program’s student learning outcomes were assessed in this annual assessment cycle? (Please list the full, complete learning outcome statements and not just numbers, e.g., Outcomes 1 and 2.)

   **Student Learning Outcome (SLO) 3:** Graduates will be able to apply principles of evidence-based practice in patient care
   **Student Learning Outcome (SLO) 4:** Graduates will be able to evaluate typical versus atypical physical movement

2. **Assessment Methods: Artifacts of Student Learning**
   Which artifacts of student learning were used to determine if students achieved the outcome(s)? Please describe the artifacts in detail and identify the course(s) in which they were collected. Clarify if any such courses were offered a) online, b) at the Madrid campus, or c) at any other off-campus location.

   **Description of Assessment Method and Artifact SLO #3**

   **SLO #3:** Graduates will be able to apply principles of evidence-based practice in patient care

   SLO #3 was assessed using an item from the Physical Therapist Clinical Performance Instrument Version 2006 (CPI). The CPI serves as the artifact for SLO #3. Due to copyright restrictions, we cannot provide a copy of the CPI.

   The CPI is a valid tool for assessing physical therapy student clinical performance. Prior to using the CPI, clinical instructors and students must complete standardized training. While clinical instructors complete the CPI for students they supervise, the academic program has the responsibility to assign grades based on the completed CPI. The Director of Clinical Education at Saint Louis University, Program in Physical Therapy, with input from faculty, developed a process to convert clinical instructors’ student CPI results to a numeric score. These numeric CPI scores serve as the outcomes of SLO #3.

   The Director of Clinical Education at Saint Louis University, Program in Physical Therapy assisted in identifying relevant CPI items for assessment of the SLO #3. Items from the CPI were chosen due to their close match of the intended learning outcome and assessment method. For example, CPI item #12 corresponds to SLO #3 and is designed to assess if student can develop a plan of care which incorporates evidence for best practice.
The course chosen for assessment of SLO #3 (6294 Clinical Experience IV) represents the final course in a sequence of full-time clinical education courses wherein students are expected to incrementally develop from beginner to entry level physical therapist while carrying a full caseload.

The assessment rubric was developed with assistance from the Director of Clinical Education, taking into account the developmental nature of the clinical experience courses.

Clinical experience courses occur at clinical sites.

No Madrid artifacts were included for SLO #3.


Description of Assessment Method and Artifact SLO #4

SLO #4 was assessed using the video analysis assignment (DPT 5123 Clinical Gait) of gait (walking). The video analysis assignment serves as the artifact for SLO #4. Video analysis assignment is repeated throughout the semester. Students progress from analyzing the movement of single joint during typical gait to a comprehensive analysis of atypical gait. The comprehensive analysis is used to assess SLO #4. A copy of a blank assignment is at the end of this document.

The course coordinator for DPT 5123 Clinical Gait provided de-identified assignment data for the analysis of gait (walking). Data was analyzed by the faculty member responsible for collecting and analyzing student outcome data, Program in Physical Therapy. The data was used to assess student achievement as per the assessment rubric.

This course was offered on site and in-person.

No Madrid artifacts were included for SLO #4.
3. **Assessment Methods: Evaluation Process**

What process was used to evaluate the artifacts of student learning, and by whom? Please identify the tools(s) (e.g., a rubric) used in the process and include them in/with this report document (please do not just refer to the assessment plan).

SLO #3 Graduates will be able to apply principles of evidence-based practice in patient care

The numeric rating on the Physical Therapist Clinical Performance Instrument Version 2006 (CPI) was the artifact of student learning. The students’ clinical instructor provided assessment of a CPI item #12 which corresponds to SLO #3. The Director of Clinical Education at Saint Louis University, Program in Physical Therapy, with input from faculty, developed a process to convert clinical instructors’ student CPI results to a numeric score. These numeric CPI scores serve as the outcomes of SLO #3. The rubric for SLO #3 is below.

<table>
<thead>
<tr>
<th>Below “Introduce” Level</th>
<th>Introduce</th>
<th>Reinforce**</th>
<th>Master**</th>
</tr>
</thead>
<tbody>
<tr>
<td>DPT 5291 Clinical Experience IA</td>
<td>DPT 5291 Clinical Experience IA</td>
<td>DPT 6192 Clinical Experience IIB</td>
<td>DPT 6294 Clinical Experience IV</td>
</tr>
<tr>
<td>• Rating on Clinical Performance Instrument – Item #12 – Plan of care below 2</td>
<td>• Rating on Clinical Performance Instrument – Item #12 – Plan of care at or above 2</td>
<td>• Rating on Clinical Performance Instrument – Item #12 – Plan of care at or above 4</td>
<td>• Rating on Clinical Performance Instrument – Item #12 – Plan of care at or above 8</td>
</tr>
</tbody>
</table>

SLO #4 Graduates will be able to evaluate typical versus atypical physical movement

The course coordinator for DPT 5123 Clinical Gait provided de-identified assignment scores for the analysis of gait (walking). The scores were used to assess student achievement as per the assessment rubric below. The video analysis assignment serves as the artifact for SLO #4. A copy of a blank assignment is at the end of this document.

<table>
<thead>
<tr>
<th>Below “Introduce” Level</th>
<th>Introduce</th>
<th>Reinforce**</th>
<th>Master**</th>
</tr>
</thead>
<tbody>
<tr>
<td>DPT 5123 Clinical Gait</td>
<td>DPT 5123 Clinical Gait</td>
<td>DPT 5123 Clinical Gait</td>
<td>DPT 5123 Clinical Gait</td>
</tr>
<tr>
<td>• Video analysis single joint assignment unable to identify gait deviations</td>
<td>• Video analysis: Identifies major gait deviations</td>
<td>• Video analysis Identifies major gait deviations and priorities</td>
<td>• Video analysis Identifies major gait deviations which are compensatory in nature.</td>
</tr>
</tbody>
</table>
4. Data/Results
What were the results of the assessment of the learning outcome(s)? Please be specific. Does achievement differ by teaching modality (e.g., online vs. face-to-face) or on-ground location (e.g., STL campus, Madrid campus, other off-campus site)?

SLO #3 Graduates will be able to apply principles of evidence-based practice in patient care

Results of the assessment

Although the assessment plan called for random sample of ratings, it was more efficient to review 100% of the ratings in the course. 96% of students achieved a ranking of “master” using the corresponding assessment rubric (SLO #3 met).

SLO #4 Graduates will be able to evaluate typical versus atypical physical movement

Results of the assessment

As per the assessment plan, approximately 25% of ratings in the course were randomly selected and reviewed, with 90% of students achieved a ranking of “master” using the corresponding assessment rubric (SLO #4 met).

5. Findings: Interpretations & Conclusions
What have you learned from these results? What does the data tell you?

SLO #3 Graduates will be able to apply principles of evidence-based practice in patient care

Students can apply evidence when developing a plan of care.

SLO #4 Graduates will be able to evaluate typical versus atypical physical movement

Students can evaluate typical versus atypical movement in a critical and complex task of gait (walking).

6. Closing the Loop: Dissemination and Use of Current Assessment Findings
A. When and how did your program faculty share and discuss these results and findings from this cycle of assessment?

Data will be analyzed in the at a fall 2022 or spring 2023 faculty meeting. Possible changes and/or additions will be discussed at that time.

B. How specifically have you decided to use these findings to improve teaching and learning in your program? For example, perhaps you’ve initiated one or more of the following:

- Course content
- Teaching techniques
- Improvements in technology
- Prerequisites
- Course sequence
- New courses
- Deletion of courses
- Changes in frequency or scheduling of course offerings
Changes to the Assessment Plan
- Student learning outcomes
- Artifacts of student learning
- Evaluation process
- Evaluation tools (e.g., rubrics)
- Data collection methods
- Frequency of data collection

Please describe the actions you are taking as a result of these findings.

At this time, no further action is anticipated. Based on upcoming faculty discussion additional artifacts may be identified.

If no changes are being made, please explain why.

Students are achieving the desired outcomes.

7. Closing the Loop: Review of Previous Assessment Findings and Changes

A. What is at least one change your program has implemented in recent years as a result of assessment data?

Program faculty discussions related to movement analysis led to an earlier introduction of task oriented movement analysis (DPT 5121 Kinesiology I). Faculty in DPT 6173 Patient Management III are modifying the assessment of a complex movement analysis assignment. The revised assessment may serve as an artifact. These changes have been implemented for fall 2022.

B. How has this change/have these changes been assessed?

These changes are occurring fall of 2022. Assessment will be at a future date.

C. What were the findings of the assessment?

These changes are occurring fall of 2022. Assessment will be at a future date.

D. How do you plan to (continue to) use this information moving forward?

These changes are occurring fall of 2022. Assessment will be at a future date.
Artifact: SLO #4 Graduates will be able to evaluate typical versus atypical physical movement

This is the assignment students complete.

Saint Louis University

Program in Physical Therapy

DPT 5123 Clinical Gait, Fall 2021
Pathologic Gait: Activity 4 - Comprehensive

You may work individually or in small groups for this activity. Record your observations on this sheet.

1) Watch the videos from Assignment #3 again, recalling the Hip/Pelvis/Trunk deviations you observed (mark them on this sheet). Now record the knee and ankle deviations you observe. Assume the R limb is the reference limb (6 points)

<table>
<thead>
<tr>
<th>Major Dev</th>
<th>Weight Acceptance (WA)</th>
<th>Single Limb Support (SLS)</th>
<th>Swing Limb Advancement (SLA)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minor Dev</td>
<td>IC LR MSt TSt PSw ISw MSw TSw</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| TRUNK
Lean: B/F |
Lateral Lean: R/L |
Rotates: B/F |
PELVIS
Hikes |
Tilt: P/A |
Lacks Forwd Rot |
Lacks Backwd Rot |
Excess Forwd Rot |
Excess Backwd Rot |
 Ipsilateral Drop |
 Contralateral Drop |
HIP
Flexion: Limited |
Flexion: Excess |
Past Retract |
Rotation: IR/ER |
AD/Abduct: AD/AB |
KNEE
Flexion: Limited |
Flexion: Excess |
Wobbles |
Hyperextends |
Extension Thrust |
Varus/Valgus: Vr/VL |
Excess Contralat Flex |
ANKLE
Forefoot Contact |
Foot Flat Contact |
Foot Slap |
Excess PF |
Excess DF |
Invers/Evers: In/Ev |
Heel Off |
No Heel Off |
Drag |
Contralat Vaulting |

Due Wednesday 12/8/21 at 5:00 p.m.
Considering this comprehensive (full-body) gait analysis, prioritize the major deviations during
- Weight acceptance (list top 2)
- Single limb support (list top 2)
- Swing limb advancement (list top 2)

2) From the deviations identified in Question #1, list 2 that could be considered compensatory. Indicate the deviation for which they could be compensating AND what they are trying to achieve. (4 points)