📄 2014-2015 Assessment Report

👥 Public for this Department and lower

Title: 2014-2015 Assessment Report
Start: 7/1/2015
End: 6/30/2016
Progress: Completed
Providing Department: MA in Speech Language Pathology

1. What are your current degree-level learning outcomes? Have the learning outcomes been modified over the last year? :

Current degree-level learning outcomes for majors in the <u>MA Speech-Language Pathology</u> *program include their ability to demonstrate:*

<u>Foundational Knowledge</u>: *Describe foundational speech-language pathology content, theory, and evidence*

<u>Application & Use</u>: *Apply foundational knowledge to clinical situations*

<u>Analytical Processes</u>: *Track and interpret data to determine whether an approach is effective for a given client or clients*

<u>Communication</u>: *Effectively communicate disciplinary knowledge to a variety of groups (e.g., clients; other professionals inside and outside the discipline).*

These learning outcomes have not been modified over the last year.

2. What evidence of student learning was collected in the past year? Which learning outcomes does the evidence address? :

Evidence of student learning was collected during Fall 2014, Spring 2015, and Summer 2015 semesters. Measures of student performance on the learning outcomes were derived from artifacts that took the form of course assignments, course projects, exams, papers, presentations, journals, and rubrics. The student prepares an electronic portfolio over the course of their Master's program to reflect on their growth and learning in the 4 targeted learner outcomes. Artifacts selected by the student are described and reflected upon each semester as they are entered into the student's portfolio. The summative (final) exam includes a presentation by the student of selected artifacts and questions from faculty committee members.

Learning outcomes were evaluated using: (1) summative exam data (based on presentation of portfolio material), (2) a student exit survey, (3) national test results (i.e., praxis), and (4) employment upon graduation.

The evidence addresses all four learning outcomes: Foundational knowledge, Application and Use, Analytical Processes, and Communication.

📄 1. Data_Q1_2015
📄 1. Data_Q2_2015
📄 1. Data_Q3_2015
📄 2. Learner Outcome Data 2015

3. What have you learned from the evidence you collected? :

<u>Summative Examination Data</u>- *The four learner outcomes were evaluated as part of each student's summative examination. A total of 23 summative examinations were conducted with 22 of 23 (96%) passing the exam on the first attempt. The one student who did not pass on the first attempt, did pass on the second attempt. The final outcome data are summarized in the following table.*

Learner Outcome	Low/Unacceptable		Mid/Acceptable	Top/Outstanding
Foundational Knowledge	1/24 (4.2%)		14/24 (58.3%)	9/24 (37.5%)
Application & Use	0/24 (0%)		17/24 (70.8%)	7/24 (29.2%)
Analytical Processes	0/23 (0%)		15/23 (65.2%)	8/23 (34.8%)
Communication	0/23 (0%)		14/23 (60.9%)	9/23 (39.1%)
Final Summative Exam Grade	New Exam: 0/23	Revise 1/23 (4.3%)	Pass: 16/23 (69.6%)	High Pass: 6/23 (26.1%)

Approximately 26% of the students scored "Outstanding" in all four areas. Overall, the students most

(2) Student Exit Survey Results- Students were asked to evaluate their own learner outcome level and to comment on the strengths and areas for improvement for the program anonymously. In the Spring, 2015 semester, 14 graduating students provided responses. Students were asked:

How well did you achieve each of the following departmental learning goals?

5-Extremely Well   4-Very Well   3-Adequately   2-Not Very Well   1-Not At All

Graduates will be able to describe foundational speech-language pathology content, theory, and evidence.

Graduates will be able to apply foundational knowledge to clinical situations

Graduates will be able to track and interpret data to determine whether an approach is effective for a given client or clients

Graduates will be able to effectively communicate disciplinary knowledge to a variety of groups (e.g., clients; other professionals inside and outside the discipline)

Following are a summary of the students' responses:

Learner Outcome	Average Rating	Extremely Well	Very Well	Adequately	Not Very Well	Not at All
Foundational Knowledge	4.62	**62%**	38%	0%	0%	0%
Application & Use	4.69	**69%**	31%	0%	0%	0%
Analytical Processes	4.85	**85%**	15%	0%	0%	0%
Communication	4.69	**69%**	31%	0%	0%	0%

Scale for average is 1-5.

5-Extremely Well; 4-Very Well; 3-Adequately; 2-Not Very Well; 1-Not At All

The students' rated their achievement as primarily "extremely well" in all four learner outcomes. This is an increase over last year's survey results where most students rated their achievement as "very well." This year, students' rated themselves most highly in achieving application and use of the knowledge and skills attained during their MA program.

Students also were asked the following open-ended questions:

What aspects of your education in this program helped you with your learning, and why were they helpful?

What might the program do differently that would help you learn more effectively, and why would these actions help?

With respect to the first open-ended question, a common theme was the diversity of courses and clinical experiences which provided opportunities to learn in different formats and gain multiple, different experiences in the same broad topic area. These comments are similar to last year.

Regarding the second open-ended question, students commented on (1) the need for diagnostic experience early in their studies; (2) an interest in opportunities to observe experienced clinicians in a particular setting before students are expected to work in that setting; (3) the amount of documentation required in clinic; (4) challenges of the intercampus program (e.g., different course evaluation formats, double campus fees, different clinic models); (5) greater incorporation of clinical methods into didactic courses.

(3) National test results (i.e., praxis). 100% of the students taking the Praxis National Examination for Speech-Language Pathology in 2014-2015 received a passing score (18/18 of the scores reported to KU). The 3-year average is a 98% pass rate.

(4) Employment upon graduation. 96% of the graduates in 2014-2015 were employed upon graduation (n=24 reporting). The 3-year average is a 92% employment rate.

In summary, we learned that faculty rated students as acceptable most of the time in their attainment of the learner outcomes during their summative examinations. Approximately 26% demonstrated superior performance. The students evaluated their own achievement at high levels of competency across learner outcomes. Evidence from our National Praxis exam and employment indicate that our graduates are highly competent in their knowledge and skills and highly sought after in the job market. Based on student feedback, our Programs' strengths lie in the diverse opportunities that are provided to the students. Several suggestions were provided by the students to improve the program, with the general theme being better communication/alignment across campuses, more diagnostic experiences, and specific suggestions for additional ways to support learning (e.g., incorporate clinical methods in didactic courses, reduce documentation burden or make clear why documentation is needed in a particular format)

4. What recommendations have been generated from discussions of assessment results among the faculty? :

As a result of the discussion of the learner outcome data, it was decided to (1) continue our expanded orientation program; (2) examine diagnostic opportunities; (3) re-design courses to create additional learning opportunities.

📄 0. Updated_IPCD_MASLP_Assessment_Plan

5. What changes did you make as a result of these assessments in the past year? :

Expanded orientation program: In August 2014, we initiated a week-long orientation program (rather than a 1-day orientation program) to provide a more in-depth introduction to our program and requirements. In addition, the orientation takes place on both campuses so that students immediately become familiar with how things work on each campus. The week-long orientation also provided opportunities for students to better prepare for clinical experiences. We continued this orientation for August 2015 with minor adjustments in the format. This year we will be collecting data from the August 2014 orientation cohort. This will help us determine the effectiveness of our revised orientation.

Examine diagnostic opportunities: This year we will examine the data in our clinical contact hour database to determine how many diagnostic contact hours students are accruing while in our program, when these hours are accrued, and the hours accrued in different areas of clinical practice. We will examine these data as part of our next report to determine whether adjustments are needed.

Course re-design: From last year's report, we had determined that there may be practical benefits (e.g., decreasing drive time between campuses) to re-designing our graduate courses to incorporate online learning tools. Several of our faculty piloted online learning tools in Spring 2015 (e.g., teaching via Blackboard collaborate). This year's report further emphasizes that student's desire greater hands-on activities during class (e.g., introduction of clinical methods and cases). Although our faculty were interested in course re-design, most of us had limited experience with emerging formats and tools for courses. Therefore, we have focused on support for course re-design during the current calendar year. During Spring 2015, we created a planning committee consisting of 4 of our faculty, Doug Ward (Center for Teaching Excellence), Julie Loats (Center for Online and Distance Learning), and Ann Lindbloom (Educational Technology/Blackboard Support). With their input, we also surveyed the faculty to determine their interest in different topics. Through this process we developed the format for a full-day summer workshop which consisted of (1) Overview of the potential benefits of course redesign; (2) Examples of re-designed courses from related programs (e.g., social work, education); (3) Examples of re-designed courses within our own program; (4) Tour of media facilities; (5) Breakout sessions that included an individual meeting with an instructional designer as well as a variety of specific tools available at our institution. Immediate faculty feedback surveys showed that 100% of attendees found the information useful to their work and rated the workshop as excellent. A follow-up survey further showed that the majority of faculty attendees were making changes to their courses based on what they learned at the workshop. 77% of attendees were interested in attending additional monthly follow-up activities. 100% of attendees were interested in attending a follow-up workshop in January focused on sharing course changes. We are currently implementing the follow-up monthly workshops, which will be conducted in an interactive format where attendees can (1) bring examples of tools that they

are using for guidance on improving their implementation of the tool; (2) bring activities they would like to do for guidance on the best tool to use and how to implement that tool. In addition, we are making plans for our January 2016 workshop, where we will document the changes that faculty made during the Fall semester and reflect on successes and challenges. Overall, this has been a successful approach in facilitating re-examination of our teaching methods for our speech-language pathology program.

a. Please provide your candid feedback on the degree-level assessment process for the Provost's Office and The University Assessment Committee to help make the process more efficient and useful for academic units. (Optional):

b. Would you like to receive peer feedback on your report? (Optional): Feedback from University Assessment Committee

c. Reviewers' feedback on the report upon request (available for units to view in the following spring semester):

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Q1 How well did you achieve the following departmental learning goal?

Answered: 13   Skipped: 0
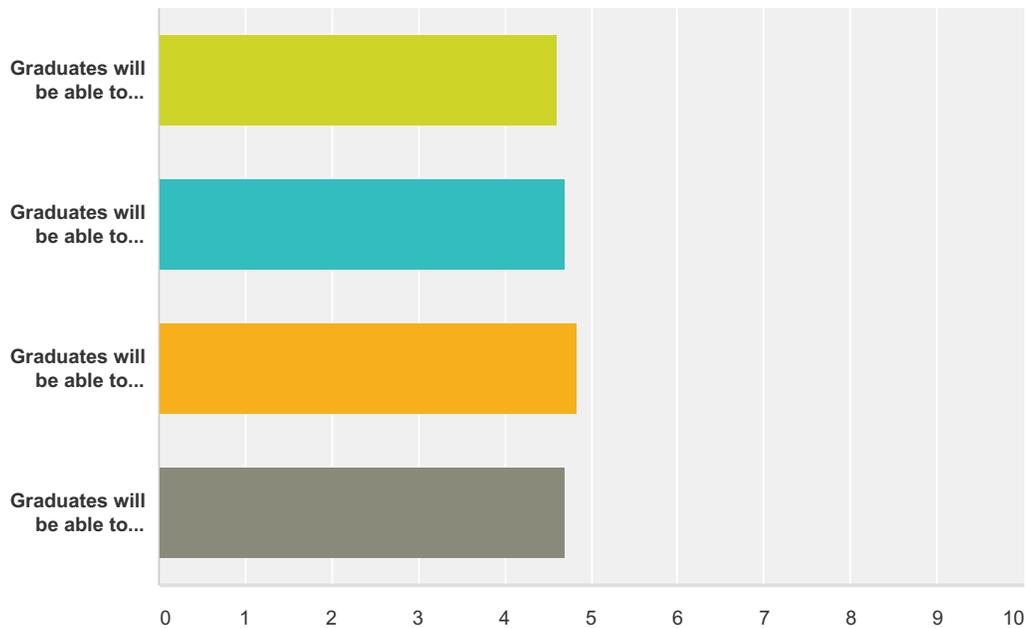
	Extremely Well	Very Well	Adequately	Not Very Well	Not At All	Total	Weighted Average
Graduates will be able to describe foundational speech-language pathology content, theory, and evidence.	**61.54%** 8	**38.46%** 5	**0.00%** 0	**0.00%** 0	**0.00%** 0	13	4.62
Graduates will be able to apply foundational knowledge to clinical situations.	**69.23%** 9	**30.77%** 4	**0.00%** 0	**0.00%** 0	**0.00%** 0	13	4.69
Graduates will be able to track and interpret data to determine whether an approach is effective for a given client or clients.	**84.62%** 11	**15.38%** 2	**0.00%** 0	**0.00%** 0	**0.00%** 0	13	4.85
Graduates will be able to effectively communicate disciplinary knowledge to a variety of groups (e.g., clients; other professionals inside and outside the discipline.	**69.23%** 9	**30.77%** 4	**0.00%** 0	**0.00%** 0	**0.00%** 0	13	4.69

#	Comments for "Graduates will be able to describe foundational speech-language pathology content, theory, and evidence."	Date
	There are no responses.	

#	Comments for "Graduates will be able to apply foundational knowledge to clinical situations."	Date
	There are no responses.	

#	Comments for "Graduates will be able to track and interpret data to determine whether an approach is effective for a given client or clients."	Date
	There are no responses.	

#	Comments for "Graduates will be able to effectively communicate disciplinary knowledge to a variety of groups (e.g., clients; other professionals inside and outside the discipline."	Date
	There are no responses.	

Q2 What aspects of your education in this program helped you with your learning, and why were they helpful?

Answered: 10   Skipped: 3

#	Responses	Date
1	real-world application of information provided in courses (i.e., developing an intervention for a mock client); working in a variety of clinical settings and different age groups	6/8/2015 10:41 AM
2	The main thing that helped me learn was having a client with a particular disorder at the same time as taking a class about the disorder (ex. ALS client during motor speech class). That really helped me to connect foundational knowledge with clinical practice.	5/25/2015 5:05 PM
3	I did best when teachers provided opportunities for collaboration with others on projects. Getting the chance to brainstorm ideas/solutions/etc., allowed us to practice thinking outside of the box by seeing how our fellow students may approach the same situation in a different way.	5/24/2015 3:16 PM
4	I felt that the professors and clinical instructors were the most helpful in my learning. They were helpful because each person made themselves available, responded to e-mail and you could see that the genuinely cared.	5/22/2015 11:51 AM
5	The courses and supervision gave me the background necessary to learn the necessary skills. I benefited from great professors and supervisors in a variety of clinical settings.	5/21/2015 8:21 PM
6	I learned a lot from the good mixture of clinical and classroom experiences.	5/21/2015 6:03 PM
7	Clinical practicum across a variety of settings and communities was helpful in that it demonstrated differences in providing services to different populations and working with different types of colleagues.	5/21/2015 1:38 PM
8	My clinical placements helped me with my learning because I learned treatment procedures in a variety of settings.	5/21/2015 12:26 PM
9	The clinical experiences were amazing at the KUMC campus, there was a wide breadth and depth of experiences offered. Debby Daniels and Peggy Waggoner were amazing coordinators who provided me with the guidance and means to procure enough clinical experience to feel comfortable in the area in which I want to work. The classes offered were extremely helpful in knowledge base and clinical application. So many amazing opportunities at the KUMC campus, from adult to child evaluation and treatment.	5/21/2015 12:09 PM
10	I think the variety of clinical experiences were most beneficial. I also think the diversity of specific areas of interest of faculty is important. It was valuable to be able to contact a faculty person who has expertise in an area of interest to the student.	5/21/2015 12:00 PM

2014-2015 Summative Exam Data

Learner Outcome	Low/Unacceptable		Mid/Acceptable	Top/Outstanding
Foundational Knowledge	1/24 (4.2%)		14/24 (58.3%)	9/24 (37.5%)
Application & Use	0/24 (0%)		17/24 (70.8%)	7/24 (29.2%)
Analytical Processes	0/23 (0%)		15/23 (65.2%)	8/23 (34.8%)
Communication	0/23 (0%)		14/23 (60.9%)	9/23 (39.1%)
Final Summative Exam Grade	New Exam: 0/23	Revise 1/23 (4.3%)	Pass: 16/23 (69.6%)	High Pass: 6/23 (26.1%)

Q3 What might the program do differently that would help you learn more effectively, and why would these actions help?

Answered: 9   Skipped: 4

#	Responses	Date
1	One way to improve learning would be to ensure that first semester students in Lawrence get diagnostic hours. I felt very behind my classmates that had evaluation experience during their first semester at KUMC. I also think Camtasia for all lectures would improve learning. For me, it was very valuable to go back and re-listen to lectures; however, not all professors utilized this.	5/25/2015 5:05 PM
2	At the Lawrence campus clinics it would have been helpful to have a week to shadow our supervisors with our clients before taking on the sessions ourselves, especially for students whose first clinical experience ever was in that setting. At several of the KUMC campus clinics I was in, we had the opportunity to observe our supervisors with clients before providing intervention, which was a great model to follow for the rest of the semester. Also, I think the Lawrence campus should give each student a client for Dx during the semester instead of having a small group take all of the Dx clients on SAT; this would provide more experience for everyone and distribute the workload more evenly.	5/24/2015 3:16 PM
3	I feel that the schiefelbusch clinic in Lawrence was a clinical site that I did not learn nearly as much compared to other clinical experiences. I feel that that their priorities did not align well with the content and experience that we should be getting. This clinic really focused on documentation such as creating lesson plans and reports, where I feel like the emphasis should really be on the foundational knowledge to be a better clinician.	5/22/2015 11:51 AM
4	The 2 campuses are not on the same page about a lot of things. This makes it frustrating for students and decreases efficiency. They can't even use the same means of course evals (Lawrence is paper, KUMC is electronic.) Paperwork and supervision are completely different on each campus. I think it would help to make the program more fluid by doing everything the same on both campuses. Students also shouldn't be punished for having a program on both campuses (ie. paying double campus fees.)	5/21/2015 8:21 PM
5	Offer more variety of practicum experiences for first year students. A big majority (besides 1) of my clients were children even though I knew that I wanted to work with adults once I was done with school, so I felt slightly unprepared when first starting my field study with adults. Although I had coursework knowledge of working with adults, I didn't really have any clinical experience.	5/21/2015 6:03 PM
6	Some additional portfolio orientation at the beginning would clarify what type of information to put on the information sheets and what types of artifacts to choose. Some more specific tips, like choosing artifacts with a relatively narrow focus in content, would be helpful.	5/21/2015 1:38 PM
7	I would have found it helpful to learn more treatment procedures in my classes so that I was more knowledgeable when I entered my Field Study placements. Specifically, it would have been helpful to learn treatment procedures in the Developmental Phonological Disorders class because I had no prior knowledge on the treatment of these disorders upon entry into my first Field Study placement and almost my entire caseload was Artic/Phonology clients.	5/21/2015 12:26 PM
8	Supervision at the KU Lawrence campus needs to be more supportive, less destructive. An entire semester of clinical experience with individuals with Autism and Down syndrome and I feel as if i have no idea how to approach treatment with them. All I learned in the clinical semester in Lawrence is how to handle high stress and difficult supervisors, important skills to learn however not my idea of the clinical experiences I hoped to gain with that population. The reports are 8-10 pages long, and that is not a realistic depiction of what we will be doing in the schools. We never learned how documentation occurs in the schools when writing 8 page long reports. The graduate clinicians were treated poorly at the Lawrence campus and were set up to fail from the start of the semester. The clinic has too many clients to take on, that the graduate clinicians are not in a learning environment when forced to take 5-6 clients and unable to devote enough time to each one to learn in depth about treatment approaches. Too many clients and not enough time to devote to learning. I feel unprepared should I be approached with a treatment for individuals with developmental impairments....after an entire semester working with them. That should be altered so that students learn treatment approaches and how to realistically document those sessions, so we feel prepared enough to do so in our career when we graduate.	5/21/2015 12:09 PM

| 9 | I discussed this with Peggy Waggoner. I think a 1 credit hour course on treatment techniques and tasks to elicit various phonemes would be beneficial. In phonology we did not learn this. I only learned a few due a client I had with Peggy, such as using us t + sh to get to t-esh and using a front t with prolongation to correct a lateral lisp. | 5/21/2015 12:00 PM |

Program Assessment Plan and Report Template

Department: Intercampus Program in Communicative Disorders **Program:** MA SLP **Degree Level:** ☐ Master's

Student Learning Outcomes for Majors (Student learning outcomes are what students are expected to know and be able to do when they graduate. Questions like "What should students know? What should they be able to do? How should students do so?" help define program learning outcomes.)
Majors in the MA Speech-Language Pathology program will be able to 1. Foundational Knowledge: Describe foundational speech-language pathology content, theory, and evidence 2. Application & Use: Apply foundational knowledge to clinical situations 3. Analytical Processes: Track and interpret data to determine whether an approach is effective for a given client or clients 4. Communication: Effectively communicate disciplinary knowledge to a variety of groups (e.g., clients; other professionals inside and outside the discipline)

Measures and Use of Evidence		
Assessment Methods ((i.e., Course Assignments, Projects, Exams, Papers, Presentations, Journals, Rubrics, Surveys, Interviews, Focus Groups, etc.)	**Evidence Collection** (Where to collect evidence, when, & by whom?)	**Discussion & (Planned) Use of Results** (How are the results reviewed, discussed and disseminated within and outside the program? How to link data to actions?)
1. Direct measure of all goals: Student summative exam consisting of presentation and defense of 3 items from an 11 item portfolio. Exam is conducted by a committee of 3 faculty and scored using a common rubric. 2. Indirect measure of all goals: Students will complete a survey upon completion of the summative exam 3. External general measures: Student national exam pass rate and employment rates. 4. Additional measures for 2015-2016: Examination of diagnostic hours from the clinical contact hour database.	**Schedule/Cycle:** All measures are collected annually during the last semester of enrollment (i.e., program graduation) **People Responsible:** 1. MA SLP Coordinator (Current: Pedersen/Storkel) 2. Administrative Professional on each campus (Current: Becky Harris, Lawrence; Angela Carrasco, KUMC)	Results will be aggregated across all students who completed the assessment (e.g., % of students scoring at a particular level on a rubric; mean score for a particular survey item). The summary results will be shared and discussed at an annual program assessment meeting that will occur in the following fall (e.g., 2013-2014 data will be examined and discussed in Fall 2014). All faculty (as available) will attend the meeting. Strengths and weaknesses will be discussed and an action plan will be generated to address weaknesses. Interesting results will be shared with the KU community through the Annual Teaching Summit and with the broader communicative disorders community through the annual meeting of the Council of Academic Programs in Communication Sciences and Disorders and/or the annual American Speech-Language-Hearing Association Convention and/or the American Speech-Language-Hearing Association Leader news magazine. In addition, the program submits an accreditation report every year and undergoes a re-accreditation site visit every 8 years.

Appendix: Approved New Survey Instrument for Program Graduates

(Will be fielded Spring 2014 forward)

How well did you achieve each of the following departmental learning goals?

1-Extremely Well   2-Very Well   3-Adequately   4-Not Very Well   5-Not At All

1. Graduates will be able to describe foundational speech-language pathology content, theory, and evidence.
2. Graduates will be able to apply foundational knowledge to clinical situations
3. Graduates will be able to track and interpret data to determine whether an approach is effective for a given client or clients
4. Graduates will be able to effectively communicate disciplinary knowledge to a variety of groups (e.g., clients; other professionals inside and outside the discipline)

Open-Ended Questions

5. What aspects of your education in this program helped you with your learning, and why were they helpful?
6. What might the program do differently that would help you learn more effectively, and why would these actions help?

Program Assessment Plan and Report Template

Department: Intercampus Program in Communicative Disorders **Program:** MA SLP   **Degree Level:** ☐ Master's

Student Name:_____	Exam Date: _____
Committee Members: _____

Area	Potential Questions	Low/Unacceptable	Mid/Acceptable	Top/Outstanding
Foundational Knowledge	What is the evidence to support or refute X? How would you find evidence related to X? How would you evaluate evidence on X? Why do you do X instead of Y? How do you weight the evidence related to X vs. Y? How do you resolve the conflict between X & Y? What are the pros/cons of X? Content specific factual questions	Limited/narrow/cursory knowledge in content area Absence of critical analysis Unaware of differences of opinion/conflicts in topic area Limited/no knowledge of appropriate avenues to acquire evidence	Basic knowledge in content area but lacking depth/detail Adequate critical analysis (sensitive to larger issues) Aware of differences of opinion/conflicts in topic area but difficulty resolving the conflict Adequate knowledge of several appropriate avenues to acquire evidence	In depth/detailed knowledge in content area Exemplary critical analysis (sensitive to large & small details) Detailed understanding of differences of opinion/conflicts in topic area and able to thoughtfully resolve the conflict Thorough knowledge of multiple appropriate avenues to acquire
Notes/Comments:				

Area	Potential Questions	Low/Unacceptable	Mid/Acceptable	Top/Outstanding
Application & Use	What situations/populations/etc is this relevant to? How would X guide your assessment/treatment practices? How do/did you decide what evidence is relevant to this situation/client? How would you adapt this for X? Would you need to change this for X? If X didnt' work, what would you do? How did/do you prioritize tx/dx goals, personal needs, evidence-based approaches?	Unable to adequately apply and synthesize evidence relevant to a situation/scenario Unable to adequately adapt/modify methods to meet individual needs/ characteristics/requirements	Able to adequately apply and synthesize evidence relevant to a situation/scenario but may not be comprehensive Able to adequately adapt/modify methods to meet individual needs/characteristics/ requirements but may not be comprehensive (e.g., requires prompting/support)	Able to thoroughly apply and synthesize evidence relevant to a situation/scenario Able to effectively adapt/modify methods to meet individual needs/characteristics/ requirements
Notes/Comments:				

Program Assessment Plan and Report Template

Department: Intercampus Program in Communicative Disorders **Program:** MA SLP   **Degree Level:** ☐ Master's

Area	Potential Questions	Low/Unacceptable	Mid/Acceptable	Top/Outstanding
Analytical Processes	What would you measure to examine/track X; document change in X? What makes a good outcome measure? What are the characteristics of a good measure of X? When would you take these measurements? Why that measurement interval? How would you summarize data on X? How would you make decisions based on data on X? How would you interpret data on X? What factors would guide your interpretation of data on X?	Inadequate knowledge of appropriate measures in general or for particular behaviors. Weak reasoning/justification for measurement plan with serious inaccuracies/missing details Weak knowledge of how to summarize and interpret data in general or for particular behaviors with serious inaccuracies/missing details.	Adequate knowledge of appropriate measures in general or for particular behaviors but minor inaccuracies/missing details. Good reasoning/justification for an appropriate measurement plan but minor inaccuracies/missing details Adquate knowledge of how to summarize and interpret date in general or for particular behaviors but minor inaccuracies/missing details.	Detailed knowledge of optimal measures in general or for particular behaviors. Strong reasoning/justification of an optimal measurement plan Thorough knowledge of how to summarize and interpret date in general or for particular behaviors.
	Notes/Comments:			

Area	Items to Consider in Evaluation	Low/Unacceptable	Mid/Acceptable	Top/Outstanding
Communication	Professionalism of PowerPoint slides Organization of information in both verbal presentation, slides, and answers to questions Clarity of verbal presentation, slides, and answers to questions	Presentation and responses to questions were difficult to follow due to issues with organization, clarity, professionalism. Overall, communication was difficult, limiting the material covered during the exam.	Presentation and responses to questions varied in terms of organization, clarity, and professionalism. Overall, communication abilities were adequate with only occassional misunderstandings.	Presentation and responses to questions were well organized, clear, professional. Overall, communication abilities were excellent.
	Notes/Comments:			

FINAL SUMMATIVE EXAM GRADE			
FAIL (Circle one below)		**PASS**	**HIGH PASS**
New Exam	**Revise this Exam**	Mid/Acceptable to top/Outstanding in all 4 Areas	Top/Oustanding in all 4 Areas
Unacceptable in 2-3 content areas (and Unacceptable in communication area)	Unacceptable in 1 content area and/or Unacceptable in communication area		
Complete Plan for Second Attempt Final Exam form		Complete Action Plan	