GENERIC OVERVIEW OF HOW PASS/FAIL CRITERIA ARE APPLIED TO THE ASSESSMENT OF CLINICAL PERFORMANCE (ACP) IN MPT CLINICAL PRACTICE COURSES

In general→

♦ Each clinical practice course has its own set of approved policy statements delineating PASS/FAIL criteria as applied to the ACP. These are under revision with the implementation of the new ACP in 2016. Each clinical practice course will have articulated a specific set of criteria consistent with scoring of the ACP.

♦ There are 21 individual questions and rating scales in the ACP. All questions are scored with the same rating scale which has a document of well-defined descriptors for the benchmarks on the rating scale. It is mandatory to score all elements/questions on the ACP, except for item 4.2 referring to supervising other personnel. All questions scored are involved in analysis of the ACP to determine PASS/FAIL. The analysis is objective.

♦ Students are expected to move along the rating scales, from left benchmark to right benchmark, with each subsequent clinical practice course. A description of the relationship of each clinical practice course to expected student performance at that level is found at the beginning of the ACP and in each course ‘expectations document’.

♦ Please become very familiar with the rating scale and accompanying descriptors before filling out the ACP for midterm or final evaluations. Further delineation of the application of criteria will be communicated as it receives approval.

Summary→

♦ The elements scored in the ACP are:
  * the 21 rating scales
  * significant concerns boxes
  * the comments are all read and used as formative feedback and to support the marking of the scales and significant concerns with examples.
  * there is a 4 item summative scale on the final page of the evaluation which must be marked by the supervising therapist (credit with exceptional performance, credit, credit with borderline performance, no credit).

♦ Only final ACP performance review scoring is graded for decision on PASS/Fail

♦ The Clinical Instructor never makes the final decision related to whether a student PASSES or FAILS a placement. The CI has a formative role in performance evaluation. The School has the summative role. The final summative scale is a ‘recommendation only’ from the Clinical Instructor. A pass/fail decision is made at the School with a well defined process of:
  * achievement of a rating scale level consistent with expectations for the specific clinical practice course
  * any significant concerns noted
  * summative scale and comments
*The student is notified of preliminary scoring result if the preliminary result indicates a possible fail
*Further information is gathered
*The Clinical Practice Courses Sub-Committee (student faculty advisor, ACCE, Assistant Academic Coordinator) meets to consider the outcome and make a recommendation to the Academic Affairs Committee
*The Academic Affairs Committee of the SPT makes the final decision on the recommendation

♦ Each clinical practice course’s specific expectations document guides clinical instructor and student as to expected performance on the ACP for that level of clinical competence and level of progress in the program.

HOW ELSE IS THE ACP USED?

♦ Awards
♦ Ongoing professional behavior review/development
♦ Overall progress in the MPT