



# 360-Degree Assessment Model for Fostering Reciprocal Development of Professional Behaviors and Communication Skills Across Academic and Cooperative Education Experiences

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# Overview

- Introduction
- Research project
- Definition of terms
- Purpose of reflection
- Introduction to the 360-Model
- Preliminary study results
- Discussion of results and potential application

SP assess

Debriefing

Video tape

Instructor assess



360° Assessment Process

Peer assess

Self assess

# Introduction

- Research<sup>1</sup> demonstrates that employer expectations for desired professional skills in new graduates are not met.
- Essential skills include:
  - Teamwork
  - Critical thinking
  - Communication
  - Personal accountability
  - Effective work habits.

# Introduction

- Educators need to understand what skills are required for successful entry into the workplace.
- Educators must design pedagogy that explicitly teaches and rewards identified skills.



# Introduction

- Project purpose: pilot test a curricular model that explicitly teaches and rewards the acquisition of:
  - professionalism and
  - communication skills.
- Two year study funded by CAFCE
- Currently finished year one.

# Study Setting



- NU: urban setting, private, 20,000 grad and undergrad students.
- NU has had a co-op program since 1909.
- Program:
  - 6 ½ year entry-level doctor of physical therapy (DPT).
  - Only PT program with co-op
  - Two 6 month co-operative education experiences
  - 100 students per class.

# Purpose of Model

- Evaluate student demonstration of:
  - professionalism, and
  - communication skills.
- Assess student learning from “360-degree” perspective.
- Model relies on standardized patients (SP) and online communities of practice (CoP).

# APTA Professional Values

- Core Values describe the 7 professional behaviors for the DPT.<sup>2</sup>
- Study focus:
  - Accountability
  - Compassion & Caring
  - Integrity
  - Professional duty
  - Social responsibility.

# Definition of Terms

## ● Standardized Patients:<sup>3</sup>

- Experiential pedagogy.
- Laypersons trained to mimic a "patient."
- Consistent and reliable.
- SPs act as teachers & evaluators of students.
- Provide written and verbal feedback to students.



# Definition of Terms

## ● Communities of Practice (COP)<sup>4</sup>:

- Learning is situated in a community of inquirers who share meaning, interpretations & ideas.
- Learning relates to lived experiences (connects academic & community work).
- Learning relates to cultural context of the present and collective history.
- Contextualized & meaningful.



# Definition of Terms- Reflection

- Reflection helps students learn during work experience.
- Reflection is a tool to promote self-directed professional growth development.
- Writing makes learning explicit.



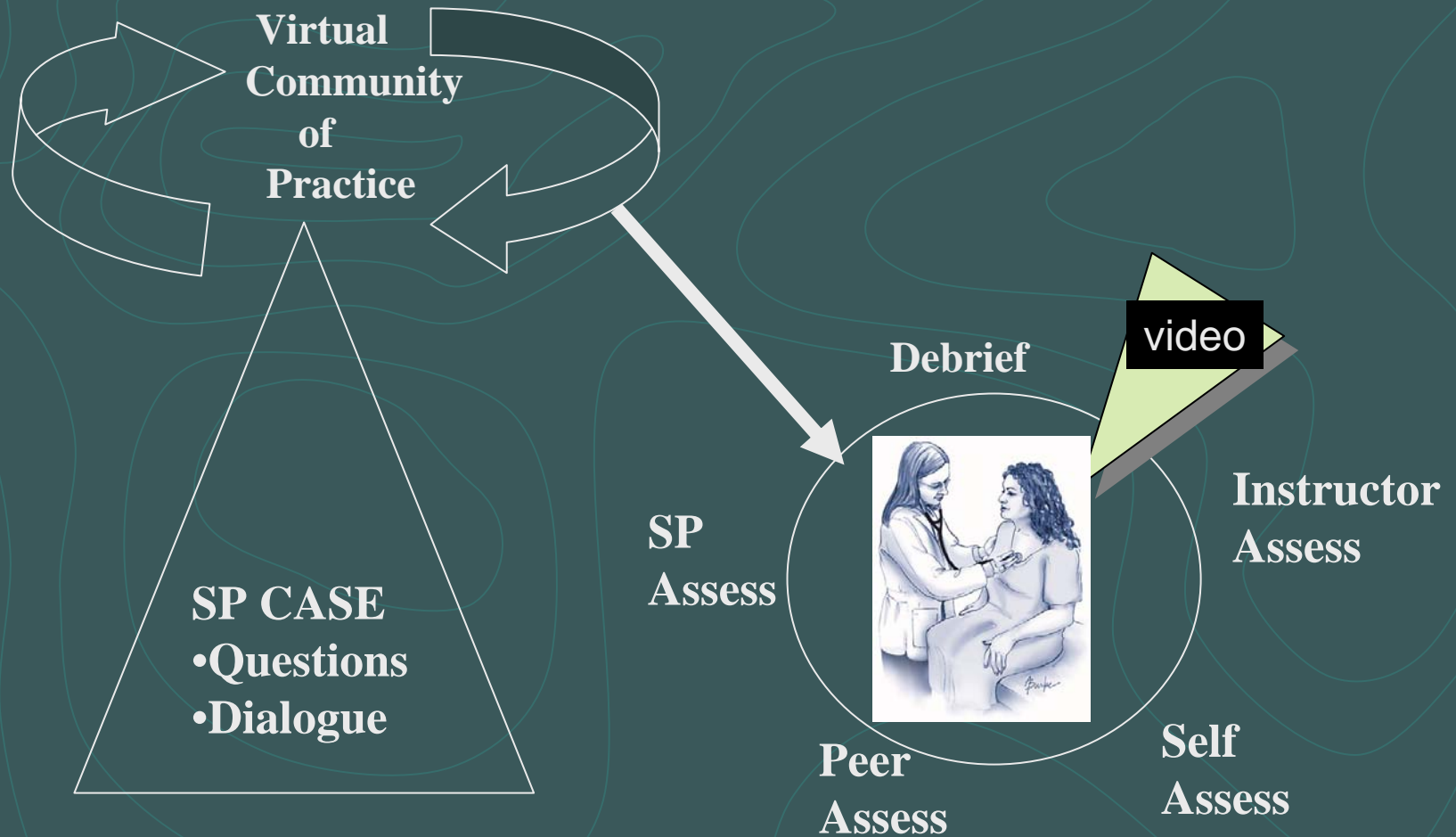
# 360 Degree Feedback Loop<sup>5</sup>

- 360 Feedback loop origins in business.
- Provides feedback on performance.
- Multiple perspectives: colleagues, managers & self.
- Explicitly documents strengths & areas for development.

# 360 Degree SP-CoP Model<sup>6</sup>

- Our model integrates the 360° feedback loop.
- Incorporates online CoP.
- Relies on SPs to simulate a patient interaction.
- Includes reflection on experience and self assessment.
- Feedback sources: instructor, peers, SP, self, and video tape.

# 360 Degree SP-CoP Model



# Study Design

## ● Research questions:

- Will the Model provide faculty with a method to realistically assess DPT student ability to communicate and demonstrate professional behaviors necessary for success on co-op?
- Will the Model have a long term impact on communication and professional behaviors?

# Study Design

- Quasi experimental mixed methods design

- Four phases:

1. Focus groups with 8 physical therapy (PT) co-op employers. Students self assess professional behaviors & communication skills.
2. Intervention: implemented SP-CoP Model in a course for 3<sup>rd</sup> year DPT students
3. Post test 1: students reassess professional behaviors & communication skills.
4. Post test 2: students reassess professional behaviors & communication skills 4 months into 2<sup>nd</sup> co-op (April 09)

# Subjects

- Eight PT co-operative education employers
- 104 NU 3<sup>rd</sup> year DPT students.
- Employers were purposively sampled.
- Students were a convenience sample.

# Demographics – Employers

- Four females, Four males
- Physical therapists
- All supervisors
- Caucasian
- Hospitals 2, Private clinics 6
- Average years of experience: 16 years
  - Range 7 to 35 years

# Demographics - Students

- 104 Students
- Females 83 Males 21
- DPT students
- 3<sup>rd</sup> year of 6
- All but 14 had completed a 6 month co-op term

# Phase 1: Employer Focus Group

- Completed a focus group with 8 PT co-op employers.
- Tape recorded and transcribed.
- Data were used by course faculty to shape 5 case studies used in the SP- CoP Model

# Phase 1: Focus Group Data Trends

## ● Desired behaviors

- Adapt to environment
- Team player
- Communicate needs & requests
- Look at job as an educational opportunity
- Knowing scope of the job
- Organized
- Time management
- Punctual
- Appropriate dress



# Phase 1: Focus Group Data Trends

## ● Desired Behaviors:

- Adapt communication to level of listener
- Respectful of different ages, cultures
- Effectively interaction with other people
- Take initiative-self directed
- Become fabric of the company



# Phase 1- Focus group trends

## ● Observed behaviors:

- Cyber multi-tasking
- Cell phone use
- Lack of initiative
- Poor attention regarding job rhythm
- Inappropriate communication
- Poor professional appearance
- Not turning mistakes into learning opportunities
- Bad behavior



# Phase 1: Self-Assessment

- All 104 students enrolled in “PTH U305 PT Professional Seminar” completed a survey to self assess their mastery of core values and communication skills.
- The self assessment instrument was the Professionalism in Physical Therapy: Core Values Self Assessment (PPTCV).

# Phase 1: Survey Data

- PPTVC is scored via 5 point Likert scale with: 1= being never; 2 =rarely, 3 =occasionally, 4 = frequently, and 5= always.
- PPTVC: seven sections with 68 questions.
- N= 62 of 104 students fully completed PPTVC surveys; 88% female.

# Phase 1 : PPTCV Survey Data

## ● Seven sections:

- 1) Accountability
- 2) Altruism
- 3) Compassion and Caring
- 4) Excellence
- 5) Integrity
- 6) Professional Duty
- 7) Social Responsibility

# Phase 1: PPTVC Scores

## ● PPTVC average scores per section:

- 1) Accountability = 3.5;
- 2) Altruism = 3.0;
- 3) Compassion/Caring = 3.9;
- 4) Excellence = 3.5;
- 5) Integrity = 3.7;
- 6) Professional duty = 3.7;
- 7) Social Responsibility = 2.8.

# Phase 1: Interpretation

● Students rate themselves highest in:

● Compassion & caring

● Integrity

● Professional duty

● Lowest in:

● Accountability

● Altruism

● Social responsibility

# Phase 2: Intervention

- Course PTH U305 PT Professional Seminar 1
  - 2 credit 16 week course for 3<sup>rd</sup> year DPT students.
  - Offered in the spring, mandatory for DPT students.
  - Students have spent the previous summer and fall semester on co-op.
  - Designed to assist students with the development of professional behaviors.
  - Designed to foster reciprocal integration of learning between co-op and the classroom.
  - SP-CoP Model is integral to the course.



## Phase 2: Educational Goals for SP-CoP

- Demonstrate professional behaviors.
- Demonstrate effective communication & interpersonal skills.
- Participate in self and peer assessment.

# Phase 2: SP-CoP Intervention

- Paper based cases posted on course website.
- Established online CoPs of 5 students & mentor.
- Faculty mentor posts questions and facilitates online dialogue.
- Student groups prepare for SP interaction.
- Selection of student PT.
- Videotape 20 minute student-SP interaction.
- Group answer guiding questions about the interaction.

## Phase 2: Intervention-360° Assessment

- Competency rubric (instructor, peer, self)
- SP rubric (patient)
- Reflective assessment (all students)
- Video tape
- Documentation.
- Debriefing with instructors.

# 360° Model

Debriefing

SP assess



video  
tape

Instructor assess

Peer assess

Self assess

# Phase 2: Intervention - Reflection

- What did you learn as a result of the SP interaction?
- How did the 360 Model impact the learning for you and your team?
- What was your impression of the online discussion?
- What did you learn about your development as a clinician?

# Phase 2: Data Trends

## ● What did you learn as a result of the SP interaction?

- Interpersonal skills to gain trust, build relationship
- Be confident
- Dress professionally, use appropriate language
- Have patience
- Importance of carefully choosing what we say to patients
- Treat patients as individuals
- Consider eye contact and listening to patient
- Consider what the patient could be feeling-what are their needs.
- Consider body language and tone of voice
- Know the facts-be prepared
- Begin thinking like a clinician-problem solving
- View a situation from multiple perspectives
- Think on the fly
- See application of classroom learning
- Avoid distracting mannerisms

# Phase 2: Data Trends

- How did the 360 Model impact the learning for you and your team?
  - Increased awareness of different perspectives
  - Allowed for self critique,
  - Feedback from multiple perspectives-whole experience
  - Pinpointed what went well & what did not
  - Feedback from patient
  - 360 provides a framework for thinking like a clinician
  - Learn from others, share thoughts, compare opinions
  - Identify areas for improvement (personal)
  - Ability to prepare, interact & reflect

# Phase 2: Data Trends

- What was your impression of the online discussion?
  - Convenient
  - Advance organizer
  - Preparation for interaction
  - Focused preparation
  - Provided direction
  - More time to think, think deeply
  - Safe environment
  - Required all group members to participate
  - Enjoyed instructor and peer feedback
  - Would rather meet in person



# Phase 2: Data Trends

- What did you learn about your development as a clinician?
  - Will remember and avoid mistakes viewed (self compare)
  - Important to incorporate many aspects of patient condition
  - Noted small changes in communication & treatment made a big difference for patient
  - Expect the unexpected.
  - Gained appreciation for the patient perspective.
  - Emphasized value of respect
  - Realized what they know and don't know
  - Appreciated the value of good communication (verbal & non verbal) to establish trust
  - Learned to work with others

# Phase 3 – Re-assess

- April 08 Retake of PPTCV
- Data entry and analysis of PPTCV forms for preliminary analysis.
- Phase 4 – April 2009 retake of PPTCV

# Discussion

Debriefing

SP assess



video  
tape

Instructor assess

Peer assess

Self assess

# Discussion

- Wider application?
- Usefulness of employer feedback?

# References

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