

Basic Clinical Skills**10/05/2018****Clinical Reasoning Assessment #1****Multiple****For the learning activity, please rate how effective the primary instructor was in providing:****Clear goals & expectations.**

Total Responses: 17

Very Good (5)	8	47.1%
Good (4)	6	35.3%
Fair (3)	2	11.8%
Poor (2)	1	5.9%
Very Poor (1)	0	0.0%

Mean
Response: 4.24

Standard
Deviation 0.90

A well-orchestrated event (duration, setting, sequence of occurrence).

Total Responses: 17

Very Good (5)	10	58.8%
Good (4)	5	29.4%
Fair (3)	1	5.9%
Poor (2)	1	5.9%
Very Poor (1)	0	0.0%

Mean
Response: 4.41

Standard
Deviation 0.87

A high-quality activity (materials, handouts).

Total Responses: 17

Very Good (5)	10	58.8%
Good (4)	7	41.2%
Fair (3)	0	0.0%
Poor (2)	0	0.0%
Very Poor (1)	0	0.0%

Mean
Response: 4.59

Standard
Deviation 0.51

Please rate how effective the Small Group instructor(s) were in providing:**Instructive facilitation & guidance.**

Total Responses: 17

Very Good (5)	9	52.9%
Good (4)	7	41.2%
Fair (3)	0	0.0%
Poor (2)	0	0.0%
Very Poor (1)	1	5.9%

Mean
Response: 4.35

Standard
Deviation 1.00

Meaningful & constructive feedback (to questions or student performance).

Total Responses: 17

Very Good (5)	10	58.8%
Good (4)	7	41.2%
Fair (3)	0	0.0%
Poor (2)	0	0.0%
Very Poor (1)	0	0.0%

Mean
Response: 4.59

Standard
Deviation 0.51

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Clinical Reasoning Assessment #1**Multiple****Appropriate instructor to student ratio.**

Total Responses: 17

Very Good (5)	12	70.6%
Good (4)	5	29.4%
Fair (3)	0	0.0%
Poor (2)	0	0.0%
Very Poor (1)	0	0.0%

Mean
Response: 4.71

Standard
Deviation 0.47

If you indicated inadequate, please give ideal ratio (instructor:student) that you feel would best serve learning.

1:1

Please rate the overall effectiveness of the Small Group instructor(s) based on organization, delivery, guidance, and engagement of students.

Total Responses 17

Very Good (5)	9	52.9%
Good (4)	8	47.1%
Fair (3)	0	0.0%
Poor (2)	0	0.0%
Very Poor (1)	0	0.0%

Mean
Response: 4.53

Standard
Deviation 0.51

Please rate the following characteristics about the activity's content.**At the appropriate knowledge level.**

Total Responses: 17

Strongly Agree (5)	10	58.8%
Agree (4)	6	35.3%
Neutral (3)	1	5.9%
Disagree (2)	0	0.0%
Strongly Disagree (1)	0	0.0%

Mean
Response: 4.53

Standard
Deviation 0.62

Relevant for developing my knowledge, skills, or attitudes as a PA.

Total Responses: 17

Strongly Agree (5)	10	58.8%
Agree (4)	7	41.2%
Neutral (3)	0	0.0%
Disagree (2)	0	0.0%
Strongly Disagree (1)	0	0.0%

Mean
Response: 4.59

Standard
Deviation 0.51

Basic Clinical Skills**10/05/2018****Clinical Reasoning Assessment #1****Multiple****Fully met described goals & expectations.**

Total Responses: 17

Strongly Agree (5)	10	58.8%
Agree (4)	5	29.4%
Neutral (3)	2	11.8%
Disagree (2)	0	0.0%
Strongly Disagree (1)	0	0.0%

Mean
Response: 4.47

Standard
Deviation 0.72

Enhanced my clinical decision-making skills.

Total Responses: 17

Strongly Agree (5)	10	58.8%
Agree (4)	7	41.2%
Neutral (3)	0	0.0%
Disagree (2)	0	0.0%
Strongly Disagree (1)	0	0.0%

Mean
Response: 4.59

Standard
Deviation 0.51

Helped build my collaborative team-building skills.

Total Responses: 17

Strongly Agree (5)	7	41.2%
Agree (4)	7	41.2%
Neutral (3)	3	17.6%
Disagree (2)	0	0.0%
Strongly Disagree (1)	0	0.0%

Mean
Response: 4.24

Standard
Deviation 0.75

Please identify specific areas of improvement for this learning activity.

none

Nothing I can think of for improvement.

None.

I am glad this was a practice and not graded the first round because I felt very unprepared with what to expect. There seem to be many inconsistencies from what I thought we were told, to what actually happened. I wish there was a more clear example or flow to follow. We did the class example run through but since there were so many students it did not follow a flow and seemed to just be people throwing out random questions or thoughts. I was told to interact with my patient as though it was a real situation but then was later told after my exam that I could not assume things like general appearance and needed to ask the proctor. This is very conflicting information. My proctor was also looking down at the grading paper and not at what I was doing with the patient so I was concerned that things I was doing were missed. I was told I did not need to verbalize everything but at that point it seemed like I needed to. Again, just seem very inconsistent with what I was told.

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For me, there was a bit of confusion as to how these were going to go. At one point we heard something about having info taped to the door and having a moment to collect myself and review patient chart before entering the room. However, my time started while I was reviewing the chart (which i thought we had time before the clock started) awkwardly in front of the patient and proctor. It's not a huge deal, but as a very visual person in my prep I had not considered that scenario (mostly the awkwardness). This made it very hard for me to focus right out the gate and threw me off. I also understand that doing these in faculties office hinders the ability to start outside the room, but if given that information specifically (which mirrors how a clinic setting would be) then I think that's how it's going to go.

None

It would be nice to have more time for face to face instructor feedback afterwards. I felt rushed trying to write everything down after I was finished and really value that opportunity to get feedback right after something like this.

I have no suggestions for improvement for this exam. The difficulties I experienced with this learning activity were my own shortcomings, and now I have a better idea of what I need to practice moving forward.

Perhaps providing a sample to compare our SOAP note to would be beneficial. After grading of course.

I received different answers from different faculty on whether or not we were allowed to speak directly to the proctor during the CRA. Such as if I am wondering how the patient's general appearance is.

Please identify specific strengths for this learning activity.

It was a good way for me to know what I need to work on

This activity was helpful in putting our past learning into action with the POH and guided PE.

The first CRA being off the grade-book is a blessing for some of us, certainly, but that doesn't take away from its motivating factor. The is the embarrassment of underperforming in front of a stranger and proctor is enough to open the eyes, and it's comforting knowing a grade isn't adding salt to a wound. Reciting off a paper list or trying to practice with other students who, at the same time, are also trying to learn; is much different than being in front of a patient you've never met. Hugely valuable experience.

Very helpful guidance for future CRAs.

Very glad this was a practice and not a real test.

She was friendly and provided constructive feedback.

The first CRA was very helpful for getting a feel of what seeing and diagnosing a patient is actually like. The feedback I got was very helpful.

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I am really glad this one wasn't graded because it gave me an opportunity to just give it my best shot without being so afraid of failing. Definitely a learning experience.

Good practice, to have everything come together and practice what we've been learning in all areas of this fall. Having actors play patients too, really makes the activity real.

This was a challenging, yet somewhat encouraging activity. Hope to only improve as we move forward.

Great "low" stress environment to test the water. I got "deer in the headlights" and knowing that this was a practice was a great idea to stay positive and work harder in my case.

While nerve-racking, this was a great opportunity to try to synthesize the materials that we've learned so far to determine a proper patient diagnosis. Patty gave excellent feed-back and it was nice to get such direct one-on-one input.

I felt the feedback I received immediately after the CRA was very valuable and helpful to improve my technique.