

The Council has proposed the following revision for Standard 11, Outcomes Assessment (additions are underlined, deletions are ~~struck through~~):

### **Standard 11, Outcomes Assessment**

Outcomes of the veterinary medical degree program must be measured, analyzed, and considered to improve the program. New graduates must have the basic scientific knowledge, skills, and values to provide entry-level health care, independently, at the time of graduation. Student achievement must be included in outcome assessment. Processes must be in place to remediate students who do not demonstrate competence in one or more of the nine competencies.

The college should have in place a system to gather outcomes data on recent graduates to ensure that the competencies and learning objectives in the program result in relevant entry level competencies.

The college must have processes in place whereby students are observed and assessed, with timely documentation to assure accuracy of the assessment for having attained each of the following competencies:

1. comprehensive patient diagnosis (problem solving skills), appropriate use of diagnostic testing, and record management
2. comprehensive treatment planning including patient referral when indicated
3. anesthesia and pain management, patient welfare
4. basic surgery skills and case management
5. basic medicine skills and case management
6. emergency and intensive care case management
7. understanding of health promotion and biosecurity, prevention and control of disease including zoonoses, and principles of food safety
8. ~~client~~ communications ~~and~~ skills including those that demonstrate an understanding and sensitivity to how clients' diversity, health literacy, and socioeconomic status can impact health care delivery
9. ethical and professional conduct
10. critical analysis of new information and research findings relevant to veterinary medicine.

The Council on Education expects that 80% or more of each college's graduating senior students sitting for the NAVLE will have passed at the time of graduation.\*

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In addition, the Council proposes making the following changes to Section 12.11, Elements of the Self-Study, Outcomes Assessment, of the Accreditation Policies and Procedures of the AVMA Council on Education which states the information veterinary medical educational programs need to include in their self-study (additions are underlined, deletions are ~~struck through~~).

*\*Colleges that do not meet this criterion will be subjected to the following analysis. The Council will calculate a 95% exact binomial confidence interval for the NAVLE scores for colleges whose NAVLE pass rate falls below 80%. Colleges with an upper limit of an exact 95% binomial confidence interval less than 85% for two successive years in which scores are available will be placed on Probationary Accreditation. Colleges with an upper limit of an exact 95% binomial confidence level less than 85% for four successive years in which scores are available will, for cause, be placed on Terminal Accreditation. If no program graduates take the NAVLE, the Council will use other student educational outcomes in assessing compliance with the standard including those listed in 12.11.1.*

Data to demonstrate outcomes of the educational and institutional program(s) may be collected by a number of means that include, but are not limited to, subjective and objective measures such as surveys, interviews, focus groups, self-assessments, observation and evaluation of skills and competencies. Data reported to the COE must be summarized for brevity.

Except for the North American Veterinary Licensing Examination (NAVLE), the Council does not assign numerical values to document levels of achievement for students in any of the outcome delineators, but closely analyzes trends for the college. Decreasing trends in student achievement over a five-year period may imply deficiencies in the program. The trends are used by the Council in its analysis of the compliance of the college with the Standards. In the case of declining trends in the delineators, the college must provide an explanation for the decline(s), and must provide a plan to reverse the trend(s).

**12.11.1. Student educational outcomes must include, but are not limited to:**

- 12.11.1.a. Evidence of direct observations of students performing and/or having attained entry level competence in skills that demonstrate mastery of the ~~ten~~ ~~nine~~ clinical competencies. Processes must be in place to provide remediation for any of the nine competencies in which students do not demonstrate competence.
- 12.11.1.b. NAVLE school score report data and passage rates over the past five years (Table A) *Each college must submit a copy of the annual NAVLE School Score Report with the AVMA-COE Interim Report each year for those graduating students who sat for the examination.*
- 12.11.1.c. Assessments of graduating seniors; and assessments of alumni at some post-graduation point (for example, three and/or five years post-graduation) assessing educational preparedness and employment satisfaction.
- 12.11.1.d. Assessments by employers of graduates to determine satisfaction with the graduates.

**12.11.2. Program Outcomes**

- 12.11.2.a. Student attrition rates with reasons (Table B)  
*Each college must submit data on attrition every year. The Council on Education expects that an increasing (positive) trend in proportionate absolute attrition from the college will be explained, including the factors that are contributing to the trend, and that the college will implement steps and a timeline for arresting the trend. If proportionate absolute attrition over a five year average is greater than 20%, the Council may request a focused site visit.*
- 12.11.2.b. Employment rates of graduates (within one year of graduation) (Table C)  
*Annually each college must submit data on employment during the first year following graduation. The Council on Education expects that a declining (negative) trend in proportionate employment from the college will be explained. Colleges with an average employment rate over five years of less than 80% must provide an assessment of the factors that are impacting the trend.*
- 12.11.2.c. Assessments by faculty (and other instructors, for example interns and residents) related to such subjects as adequacy of clinical resources, facilities and equipment, information resources, etc.; and preparedness of students entering phases of education, and
- 12.11.2.d. Additional assessment [of factors including but not limited to the admissions process](#) that might assist the college in benchmarking its educational program.

**12.11.3. Institutional outcomes.**

- 12.11.3.a. Describe the adequacy of resources and organizational structure to meet the educational purposes (dean should provide).
- 12.11.3.b. Describe how the college evaluates progress in meeting its mission (for example, benchmarking with other institutions, scholarly activity of the faculty, faculty

awards, faculty and staff perception of teaching resources, student satisfaction with the educational program, teaching improvement benchmarks, and others, etc.).

12.11.3.c. If your program assesses other outcomes, briefly describe the results.

**12.11.4.** Describe how outcomes findings at the student, programmatic, and institutional level are used by the college to improve the educational program (give examples).