2012-2013 Master of Science in Medical Science Concentration in Clinical and Translational Science (MS-CTS) Academic Assessment Plan

College of Medicine
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Table of Contents

Academic Assessment Plan for the
Master of Master of Science
in Medical Science
Concentration in Clinical and Translational Science (MS-CTS)

College of Medicine

A. Mission

Mission of MS-CTS Program

Our mission is to train physicians and scholars to become clinical and translational researchers in the medical sciences. We seek to provide a structured, mentored program that establishes a sound foundation for individuals to conduct multidisciplinary clinical/translational research, and to facilitate the development of successful clinical/translational research careers.

B. Student Learning Outcomes and Assessment Measures

SLO Type	Learning Outcomes	Assessments	Delivery Mode
Overall	Graduate individuals who are well-positioned to begin independently-funded careers in clinical and translational research.	Internal: Completion of sound research project/thesis. External: Graduates report yearly on their current careers, grant funding and publications.	Campus
Content Knowledge: Competency: Knowledge of the process and considerations involved in the conduct of clinical/translational research	Identifies, describes and explains key concepts and considerations necessary to conduct clinical/translational research.	Written examinations, faculty observation, completion of research project/thesis.	Campus
Skills: Competency: Communication of research	Effectively communicates research ideas and outcomes to internal and external entities orally and in writing.	Internal: peer and faculty feedback during seminar sessions, oral presentations, successful completion of required writing courses, IRB approval for conducting research. External: publication of	Campus

		peer-reviewed journal articles, accepted abstracts, presentations at professional meetings, successful submission of grant applications	
Competency: Ethical conduct of research	Identifies and analyzes ethical issues related to research, and conducts research in an ethically sound manner.	Mentor and faculty observation, IRB approval of research project, successful completion of ethics coursework, completion of UF-required research training	Campus
Competency: Research design and analysis	Develops and conducts a scientifically sound clinical/translational research project, which includes testable hypotheses and specific aims, presenting scientific relevancy, stating appropriate statistical and ethical considerations, detailing subject enrollment, data collection and analysis, and reporting how the project will lead to improvement of human health	Mentor and faculty observation, successful completion of statistics course and research design/analysis courses, IRB approval for research project, successful defense of research project/thesis	Campus
Behavior: Competency: Professionalism	Engages in activities that promote self-improvement, scientific teamwork, and improvement in human health	Internal: Mentor and faculty observation, peer feedback, assessment of students' future research plans/goals, invitations to give professional talks, research/teaching awards received.	Campus

C. Research

Students pursuing this concentration do so for the purpose of learning to conduct clinical/translational research; therefore, those admitted to this degree program must already have a clinical/translational research project outlined and have obtained mentorship appropriate for the area of research. Students are expected to conduct and complete their projects using the competencies gained during their didactic coursework. The research mentors provide hands-on, individualized training during the students' program participation.

D. Assessment Timeline

Assessment SLOs	Assessment 1	Assessment 2	Assessment 3	Enter more as needed
Knowledge				
	Completion of sound research project/thesis at end of program	Annual report from graduates to track career progress.		
Skills				
	Achievement of compe-tencies as outlined in educational activities throughout program enrollment	Yearly completion of HIPAA certification; PHS training every 4 years;	IRB approval for project, successful completion of research project/thesis at end of program	Annual report from graduates to track career progress.
Professional Behavior				
Professionalism	Observed and evaluated through presentations and reports.			

E. Assessment Cycle

Use this Assessment Cycle template for your plan. Add or delete rows as needed to accommodate your SLOs.

Assessment Cycle for:
Program MS-CTS   College of Medicine

Analysis and Interpretation:	Program assessment is ongoing throughout the year through individual course evaluations and feedback and through annual review by the concentration graduate faculty using input from course directors, students and graduates
Program Modifications:	Completed by May 30 of each year
Dissemination:	Completed by May 30 of each year

F. Measurement Tools (See Appendices A-C)

- End-of-Semester progress reports submitted by MS-CTS scholars and their mentors

- Annual updates from graduates: graduates are contacted via e-mail and asked to report grants awarded, publications/presentations, promotions, awards, current positions as well as feedback on the effectiveness of the program.
- Written/oral examinations in each course
- Passing scores on annual HIPAA and PHS training modules
- Obtaining IRB approval for research projects
- DSR database queried yearly for grants awarded to students and graduates
- PubMed queried yearly for publications by students and graduates
- Peer feedback of presentation, grants proposals and writing skills
- Faculty and advisor assessment of presentations, grant proposals and writing skills
- Mentor/faculty observations and interactions

G. Assessment Oversight

Name	Department Affiliation	Email Address	Phone Number
Marian C. Limacher	Medicine	limacmc@medicine.ufl.edu	273-9307
Eve Johnson	Medicine	eve11@ufl.edu	273-9307

Appendix A

MS-CTS Scholar Progress Report

Graduate Academic Assessment Plan – MS, Medical Sciences, Concentration in Clinical and Translational Science

CTSI MS-CTS Scholar Progress Report
July - December 2012

All CTSI MS-CTS Scholars are required to report bi-annual progress to the MS-CTS Graduate Faculty. This report will be used to gauge your progress. Please fill out this form, and email a copy to Eve Johnson (eve11@ufl.edu) and to each member of your Mentoring team prior to your Mentoring Committee Meeting. You must then schedule a group meeting with all of your mentors to review the information in this report and obtain final signatures.

For July - December 2012, please complete all items and add additional lines as needed. Please do not reformat these pages.

In addition, please remind each of your mentors to submit their Mentoring Team Report to our office.

THE REVISED AND SIGNED FORM MUST BE RETURNED electronically (scanned) by Friday December 7, 2012.

MS-CTS Scholar Name:	
e-mail:	
Work Phone:	
Primary Mentor:	
Secondary Mentor:	
Secondary Mentor:	

Date of Group Mentoring meeting:

Please complete the following *before* your meeting with your Mentors:

1.) Title of MS-CTS Project:

2.) Brief description of your MS-CTS Project, including multidisciplinary aspects (150 word max):

3.) Agency(ies) and institute(s) targeted for grant submission:

4.) Grant submission steps completed on your MS-CTS project (please mark all that apply):
☐ IRB submission   ☐ Revised IRB submitted   ☐
IRB approval
☐ IACUC submission   ☐ Revised IACUC submission   ☐ IACUC approval
☐ Submitted for funding to _____ (agency)
☐ Priority score: _____ (please submit a copy of any comments received with your score)

5.) Please state below your project's Specific Aims and the innovative aspects of each Specific Aim (2 pages maximum):

    5a. Specific Aim 1:

        Innovative and interdisciplinary aspects of Specific Aim 1.

    5b. Specific Aim 2:

        Innovative and interdisciplinary aspects of Specific Aim 2:

    5c. Specific Aim 3:

        Innovative and interdisciplinary aspects of Specific Aim 3:

6.) Please provide below your intended goals for the next 6 month period and a timeline for accomplishing these goals. Elements should include research milestones, manuscript writing, grant writing/submission:

7.) Please explain any challenges/barriers that have affected or are affecting your research progress:

8.) What % of your total effort is devoted to:

    Research and/or MS-CTS Participation   _____

    Clinical service   _____

    Teaching   _____

    Administration   _____

    Other (specify) _____   _____

CTSI MS-CTS Scholar Progress Report
July - December 2012

MANUSCRIPTS:

For all manuscripts, abstracts and publications please indicate if the research was supported either directly or indirectly through CTSI funding. Please note that you should acknowledge CTSI support for _all material_ submitted for publication, as your salary has been supported through the MS-CTS program.

(1) Manuscripts that have been accepted/published in peer-reviewed journals since the last report (add lines as needed):

Complete Citation (including PubMed ID)	Multidisciplinary Collaborators	Manuscript is a direct result of MS-CTS project (Y/N)	CTSI Resources Utilized

(2) Manuscripts I have submitted or plan to submit to peer-reviewed journals since the last report are (add lines as needed):

Title	Authors	Journal(s)	Multidisciplinary Collaborators	Manuscript is a direct result of MS-CTS project (Y/N)	CTSI Resources Utilized	Status of submission (under review/ not yet submitted)

PRESENTATIONS/ABSTRACTS/TALKS:

Abstracts/research I have presented, submitted or am planning to submit to international, national or local meetings or conferences since the last report (add lines as needed):

Title	Authors	Meeting/Conf. Title and Date	Format (poster/oral)	Multidisciplinary Collaborators	Abstract is a direct result of MS-CTS project (Y/N)	CTSI Resources Utilized	Status of Abstract (accepted/ under review/ not yet submitted)

Graduate Academic Assessment Plan – MS, Medical Sciences, Concentration in Clinical and Translational Science

GRANTS/ PILOT STUDIES/ and OTHER FUNDING:

(1) Currently active (funded) grants or pilot studies in which you are now involved <u>using the</u> <u>following format</u>:
 (PI name)
Your role
Grant number
Funding agency (include section)
Dates of support
Total direct amount
Salary FTE:
Title of project
IRB tracking # / IACUC tracking #
Date most recent IRB approval
1-2 sentence description of study
Multidisciplinary collaborators
CTSI resources utilized

(2) Grants under review *(pilot studies, other funding applications, estimated review date)*
 (PI Name)
Your role
Type of Grant (e.g. R01, CDA, K23)
Proposed dates of award
Agency (include section)
Title of submission
IRB tracking # / IACUC tracking #
Date most recent IRB approval
1- sentence description
Multidisciplinary collaborators
CTSI resources utilized

(3) Grants, pilot studies, other funding applications I am planning to submit:
Type of Grant (e.g. R01, CDA, K23)
Proposed dates of award
Agency (include section)
Title of submission
IRB tracking # / IACUC tracking #
Date most recent IRB approval
1- sentence description
Your role:
Multidisciplinary collaborators
List CTSI resources utilized (e.g. REDCap, CRC, C/T Research Informatics, Research Design & Analysis Program)

List any other scholarly activities that you plan or are currently participating in that have not been listed:

Graduate Academic Assessment Plan – MS, Medical Sciences, Concentration in Clinical and Translational Science

CTSI MS-CTS Scholar Progress Report
July - December 2012

Your role as a mentor:
Are you a primary Advisor/Mentor for graduate students?

Name	**Degree**	**Date degree is expected**

Are you a Thesis/Dissertation Committee Member?

Name	**Degree**	**Date degree is expected**	**Committee Chair**

Do you have research assistants?

Name	**Date**	**Degree**	**Current status**

AWARDS AND RECOGNITIONS
(List any awards, research prizes, peer review activities, program participation, etc.)

I have met with my mentoring committee, reviewed and discussed and am in agreement with the information and goals as outlined in this report.

MS-CTS Scholar Name	**Scholar signature**	**Date**
Primary Mentor Name	**Mentor signature**	**Date**
Mentor Name	**Mentor signature**	**Date**
Mentor Name	**Mentor signature**	**Date**

Graduate Academic Assessment Plan – MS, Medical Sciences, Concentration in Clinical and Translational Science

Appendix B

MS-CTS Mentor Report

MS-CTS Mentoring Report
July-December 2012

Under the direction of your MS-CTS Scholar's Lead Mentor, please complete the following as a mentoring team (one report per team). This information will be used by the MS-CTS Graduate Faculty to determine your Scholar's progress in this MS-CTS program. Reports are due Friday, **December 7, 2012.**

Scholar Name: _____

Please indicate how often you communicate with your Scholar:

	Face-to-face:	**Phone:**	**Electronically (e-mail, text, etc.)**
Lead mentor:	____ x per ____	____ x per ____	____ x per ____
Co-mentors (average)**:**	____ x per ____	____ x per ____	____ x per ____
Mentoring team:	____ x per ____	____ x per ____	____ x per ____

Please rate your MS-CTS scholar on the following:
(5=excellent; 4=above average; 3=good; 2=below average; 1=poor)

	5	4	3	2	1
MS-CTS Program commitment: Shows commitment by efforts in the classroom and the research setting/laboratory	☐	☐	☐	☐	☐
Research professionalism:	☐	☐	☐	☐	☐
Research integrity	☐	☐	☐	☐	☐
Research motivation:	☐	☐	☐	☐	☐
Engagement in own research:	☐	☐	☐	☐	☐
Demonstrates Good lab/team citizenship: Maintains a safe and clean laboratory space, shares in laboratory duties, respectful, tolerant of and works collegially with all laboratory/team personnel	☐	☐	☐	☐	☐
Handling of research team disputes:	☐	☐	☐	☐	☐
Thirst for knowledge:	☐	☐	☐	☐	☐
Attendance: Attends research meetings, seminars and classes that are part of the designed educational program and pertinent to MS-CTS research	☐	☐	☐	☐	☐

Please provide details on any items above that rated a "3" or lower:

Please describe your efforts with this Scholar to develop his/her own fundable R01 (or equivalent) grant application:

Please describe any challenges/barriers that have affected your scholar's progress during the reporting period:

Please indicate your goals for your Scholar over the next 6-month period:

Please provide a concise statement summarizing your Scholar's progress and performance during the past year. *This statement should not exceed 250 words***:**

MS-CTS Scholar name typed	MS-CTS Scholar signature	Date
MS-CTS Lead mentor name typed	MS-CTS Lead Mentor signature	Date
MS-CTS Co-mentor name typed	MS-CTS Co-mentor signature	Date
MS-CTS Co-mentor name typed	MS-CTS Co-mentor signature	Date
MS-CTS Co-mentor name typed	MS-CTS Co-mentor signature	Date

Appendix C

MS-CTS Graduate Update

MS-CTS Graduate Update 2012

NAME:
Current Title:
Current affiliation:
Basis of Salary Support (e.g. K-award, T-award, dept):

For calendar Year 2012 please list with full citation:

Manuscripts submitted
1.
2.
3….
Manuscripts accepted and/or published
1.
2.
3….
Book chapters submitted
1.
2.
3….
Book chapters published
1.
2.
3….
Abstracts accepted and presented (list authors, title, citation if published, as well as meeting name, location and date)
1.
2.
3….
Invited scientific presentations: (list title, citation if published, as well as meeting name, location and date)
1.
2.
3….
Any peer review responsibilities: (journal reviewer, grant reviewer, NIH study section, abstract grading, etc. List source and number/frequency of reviews)
1.
2.
3….

For calendar Year 2012:
Please list all grants –

Active grants (give dates)
Title, Funding Agency, Total dollar amount (direct and indirect), Role (PI, Co-PI, or Investigator, Salary FTE from grant)
1.
2.

3….
Grants submitted but not awarded:
Title, Funding Agency, Total dollar amount (direct and indirect), Role (PI, Co-PI, or Investigator)
1.
2.
3….

Grants awarded:
Title, Funding Agency, Total dollar amount (direct and indirect), Role (PI, Co-PI, or Investigator, dates of active funding, Salary FTE from grant)
1.
2.
3….

Grants pending:
Title, Funding Agency, Total dollar amount (direct and indirect), Role (PI, Co-PI, or Investigator)
1.
2.
3….

Awards and recognitions:
1.
2.
3….

Positions of Responsibility/Promotions:
1.
2.
3....

Are you serving as a research mentor: __Y   ___N
     If yes, please provide details about mentee(s) and project(s):

What % of your total effort is devoted to
     research and/or APPCI participation   _____
     clinical service   _____
     teaching   _____
     administration   _____

Other information you would like to add:

Figure 1. University of Florida Graduate/Professional Program Assessment Plan Review Rubric

Related resources are found at http://www.aa.assessment.edu

Program: Year:

Component	Criterion	Rating			Comments
		Met	**Partially Met**	**Not Met**	
Mission Statement	Mission statement is articulated clearly.				
	The program mission clearly supports the College and University missions, and includes specific statements describing how it supports these missions.				
Student Learning Outcomes (SLOs) and Assessment Measures	SLOs are stated clearly.				
	SLOs focus on demonstration of student learning.				
	SLOs are measurable.				
	Measurements are appropriate for the SLO.				
Research	Research expectations for the program are clear, concise, and appropriate for the discipline.				
Assessment Map	The Assessment Map indicates the times in the program where the SLOs are assessed and measured.				
	The Assessment Map identifies the assessments used for each SLO.				
Assessment Cycle	The assessment cycle is clear.				
	All student learning outcomes are measured.				
	Data is collected at least once in the cycle.				
	The cycle includes a date or time period for data analysis and interpretation.				
	The cycle includes a date for planning improvement actions based on the data analysis.				
	The cycle includes a date for dissemination of results to the appropriate stakeholders.				

Graduate Academic Assessment Plan – MS, Medical Sciences, Concentration in Clinical and Translational Science

Component	Criterion	Rating			Comments
		Met	**Partially Met**	**Not Met**	
Measurement Tools	Measurement tools are described clearly and concisely.				
	Measurements are appropriate for the SLOs.				
	Methods and procedures reflect an appropriate balance of direct and indirect methods.				
	The report presents examples of at least one measurement tool.				
Assessment Oversight	Appropriate personnel (coordinator, committee, etc.) charged with assessment responsibilities are identified				