Karen Ewing

From:	Erin Jones [ejones@aavsb.org]
Sent:	Monday, November 06, 2006 9:45 AM
To:	Karen Ewing
Subject:	PAVE Q&A
Attachments:	Questions_forIDBoard11-06.doc

November 5, 2006

Dear Ms. Ewing,

I want to thank you for taking the time to thoroughly research the PAVE Program before you propose rule changes. Attached is a Q&A document which thoroughly explains the details of the PAVE Program and the philosophy behind why the program exisits. If we can provide any additional information, please let us know.

PAVE was started in 2000 by the regulatory boards in response to deficiencies in the ECFVG program. PAVE is run only by the regulatory boards of veterinary medicine, represented by the members of the PAVE Committee. All AAVSB Member Boards have access to the PAVE Committee as well as the AAVSB Board of Directors and, through the resolution process and their delegate's vote, can affect change during the AAVSB Annual Conference.

The PAVE program relies on the accreditation process for those candidates who choose the evaluated clinical experience at an AVMA-accredited school to meet PAVE's clinical requirements. The accredited veterinary schools accept PAVE candidates for the evaluated clinical training; the clinical faculty members evaluate candidates on exactly the same standards used for regularly enrolled students. PAVE relies on the quality of that training.

Please review the attached responses to frequently-asked questions. I trust that the Idaho Veterinary Licensing Board will see the wisdom of not relying exclusively on the professional association on such an important public protection issue.

Sincerely,
Charlotte P Ronan
Executive Director

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APPLICATION:

1.   What is the application fee and what does it cover? **$1050 online, $1100 paper ($250/$300 application fee, $800 QE fee)**

2.   In the past two years, how many individuals applied to your program? **since August 2004, about 600 applicants (number is approximate because of retakers)**

3.   How many certificates were granted in each of the two years? **to date in 2006 -- 93; 2005 -- 42; 2004 -- 15   TOTAL -- 150**

SCHOOLS:

4.   Are graduates from ALL non-accredited schools able to enter **PAVE**/ECFVG If not, what criteria must the non-accredited school meet? **PAVE defines an "international veterinary graduate" as a veterinarian whose degree was conferred by a recognized school of veterinary medicine <u>outside</u> of the United States and Canada. A "recognized" school is one that is recognized by the government of its country and renders its graduates eligible to practice in that country, OR, one that is recognized by the World Health Organization (WHO). US citizens who have completed their veterinary education outside the US in non AVMA-accredited schools are considered to be "international veterinary graduates," while foreign nationals who have graduated from schools in the US or Canada are not.** If an AVMA accredited school were to lose their accreditation or if a new school in the U.S. or elsewhere applied for but was rejected for AVMA accreditation, could graduates use your program as a way to become licensed in the U.S.? **The school must be outside the US and Canada for the applicant to be considered for PAVE.**

5.   Explain briefly how someone who is still enrolled in a non-accredited (not yet graduated) school enters the **PAVE**/ECFVG program? **The application process is the same for every PAVE candidate. Where they are in their curriculum determines the pathway they can take.**

6.   If someone enters the program this way, is the total time spent in school equal to staying in the non-accredited school until graduation and then entering the ECFVG/**PAVE** program? **The total time spent in school would be the same. The time it takes a candidate to complete the PAVE Program depends on how long it takes them to pass the required examinations and submit required documents. It also depends on when they enter the program and the timing of the administrations of the QE and VCSA.**

ENGLISH SPEAKING REQUIREMENTS:

7.   Are candidates required to take an English exam? **YES**

8.   If so, what English exam is approved? **IELTS, TSE and CBT TOEFL, IBT TOEFL**

9.   What is the cost of the exam? **varies, but approximately $100-$150**

10.   What is the format of the exam? **The exams are similar with most of them delivered via the computer. Paper-based TOEFL exams are still available, but seldom used. The specific formats are described at www.ets.org and www.ielts.org**

11.   Who created/standardized/validated this exam? **ETS developed the TSE and TOEFL, The University of Cambridge developed the IELTS examination.**

12.   How often is the exam evaluated/changed? **I do not have that information.**

13.   What happens if the candidate fails the English exam? **They are not eligible to sit for the QE and must defer to the next administration or until they pass it. They have up to one year to pass Step 2 before they must re-apply to the program.**

TESTING:

14.   Describe the Qualifying Examination. **Test questions for the QE are written by faculty members at American Veterinary Medical Association (AVMA) accredited veterinary schools in North America, and by other content experts. With the assistance of staff from the National Board of Medical Examiners (NBME®), each newly written test question is reviewed by a test development committee.**
The primary objective of the Qualifying Examination is to provide a comprehensive objective examination in basic veterinary medical sciences for use by the Program for the Assessment of Veterinary Education Equivalence (PAVE) of the American Association of Veterinary State Boards in evaluating the education equivalence of veterinarians who are graduates of veterinary schools not accredited by the Council on Education of the American Veterinary Medical Association. In addressing this objective, the QE also protects the public by ensuring that veterinarians demonstrate a specified level of knowledge and skills before entering veterinary practice, and provides a common standard in the evaluation of candidates that will be comparable from jurisdiction to jurisdiction.

15.   What is the QE designed to measure? **The QE test blueprint consists of five broad content categories: anatomy, physiology, pharmacology, microbiology, and pathology. Additional information on the QE, including the candidate information bulletin, 33 sample questions, a 20-question computer-based practice version of the examination, and detailed annual technical reports, can be found on the NBVME's website, www.nbvme.org.**

16.   At what point in the program is the QE administered? **after the candidate successfully demonstrates English Proficiency**

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17. How is the QE scored? **In the scoring of the QE, one point is awarded for each correct answer. Test questions are not weighted, and additional points are not subtracted for incorrect responses. After all responses are recorded, an analysis is conducted for each examination question that produces statistics descriptive of difficulty and discrimination. When such analysis and/or candidate comments indicate the need, specific questions are reviewed again by one or more test committee members to ensure that the answer key is correct. Any question that fails to perform acceptably may be dropped from both the current score and from the test question pool. Examinations are then scored for all candidates.**
The minimum passing score for the QE is established by criterion-referenced (also known as content based) methods. Using content-based standard setting means that an established level of proficiency in the content is required in order to pass. If all candidates meet this criterion (passing standard), then all candidates will pass; if only 50% meet the passing standard, then only 50% will pass.
Whether a candidate passes or fails is not influenced by the relative performance of others taking the examination. Equating methods are used to maintain the same passing standard from administration to administration, despite potential differences in ability levels of candidate groups and/or question difficulty across administrations. Calculating the scores in this manner facilitates both comparisons of individual performance and comparisons of examinations from year to year.

18. Who created/standardized/validated the QE? **The QE test blueprint was developed by a panel of faculty members who teach basic science subjects at accredited veterinary schools, and was approved by the NBVME. The QE item bank consists of several thousand items, including questions written over the past six years specifically for the QE, and questions moved from the NAVLE item bank to the QE item bank by content experts participating in NAVLE item bank review meetings, because the items were judged better suited for use on the basic science QE than on the clinically-oriented NAVLE. In developing the QE, the NBVME administered portions of it to about 300 students at five accredited veterinary schools in the US. All second year students at the Western University College of Veterinary Medicine took the QE in May 2005 and 2006, and Western intends to continue using the examination in future years. Iowa State University has contracted to offer the QE to its students each year, beginning in January 2007. In June, the NBVME voted to offer the QE to up to five additional accredited schools.**

19. How often is the QE evaluated/changed? **The NBVME develops three new forms of the QE each year, one form for each of the three annual test dates. Most of the items on each form are newly written; some items are repeated from previous forms for content coverage and equating purposes. Each new form is reviewed by a panel of content experts before it is released for use.**

20. How often is the QE administered? **3 times per year (Sept., Jan., and May)**

21. Who administers the QE and what are the credentials of those who administer it? **The QE is administered via the Internet. Prior to each administration, NBVME staff make arrangements for the examination to be given at locations convenient to candidates. These locations include veterinary schools, community colleges, and other sites that have experience delivering web-based examinations. At each site, the NBVME enlists the services of one or more proctors whose responsibilities include**

ensuring that the computers are properly prepared, admitting candidates, starting and ending the examination, and ensuring test security during the examination.

22. What is the QE format? (practical, multiple choice, simulation, etc?)
300 multiple choice items

23. What is the passing score and how is it set? **see question #17**

24. What is the cost to take the QE? **$800**

25. If a person fails, how soon can the QE be retaken? **the next administration**

26. What is the cost to retake the QE? **Same as the initial cost ($800)**

27. Must the QE be taken before a person can move to the next step in the

PAVE program? **Yes**

28. After completing the QE, is there a waiting period before taking the VCSA? **Yes, and the length depends on a) when the candidate graduates or b) when the next VCSA is being administered.**

29. What security steps are taken to prevent the exam/questions from being circulated/compromised? **All candidates taking the QE on the same date see the same form of the examination. As noted above, all QE forms consist mainly of newly written items. As is the case with the NAVLE, the large QE item bank and the continuous generation of new items greatly reduces the need to re-use test questions. One of the primary duties of the proctors is to ensure that candidates do not engage in irregular behavior during the examination. The QE is administered in two parts, and candidates can take a scheduled break only between the two parts. Candidates cannot go back to the first part of the examination after the break. The web-based testing software used by the National Board of Medical Examiners ensures the security of the examination while it is being administered. It is not possible to download, copy, print, or otherwise compromise the security of items on the web-based QE, nor is it possible for candidates to access other information or web sites on the computer while the exam is running.**

FINAL STEPS:

30. Does everyone need to take the VCSA? **No. Only those taking the VCSA pathway have a final examination. Those not taking the VCSA are evaluated by the clinical faculty at accredited colleges of veterinary medicine.**

31. At what point in the process is the VCSA given?
after they pass the QE

32. If an individual opts to complete an evaluated clinical experience, must they take the VCSA? **If the candidate passes the QE prior to the start of their evaluated clinical experience (4th year), they do not have to take the VCSA. If they are a graduate and choose to do an evaluated clinical**

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experience at an AVMA-accredited veterinary school, they do not have to take the VCSA.

33. If not, explain the rationale of how completing an ECE in lieu of a clinical exam adequately evaluates the candidate's training. **The period of time required to complete the clinical rotations at an accredited college of veterinary medicine allows the candidate to acclimate to a new culture. The clinical training evaluated by the clinical faculty using the same standards as they use for regularly enrolled students probably is a far better tool than a several-day practical examination; however, practically, it has proven to be difficult to ensure "slots" for all the foreign graduates in the accredited colleges of veterinary medicine.**

34. What is the average cost of the evaluated clinical experience? **The cost of the evaluated clinical experience is determined by the university the candidate chooses to attend.**

35. What is the cost of the VCSA? **The VCSA is $5000.**

36. What is the VCSA format? i.e.-practical, multiple choice, simulation, etc? **The VCSA is a practical performance-based exam. The clinical encounters require candidates to communicate with persons trained to portray clients. The candidate begins by reading a brief opening statement describing the case, and then interacts with the standardized client to obtain information about the animal, and explain treatment and management options. Trained examiners use checklists to evaluate how well the candidate communicates with the standardized client. The clinical encounters are similar to standardized patient examinations now widely used in human medicine (where candidates interact with individuals trained to portray patients), and they allow a realistic assessment of the candidate's communication skills.**
There are 3 other sections of the VCSA: Anesthesia & Surgery, Physical examination and Laboratory Procedures. Various stations assess the candidate's proficiency in these areas.

37. What is the VCSA designed to measure? **entry-level clinical skills**

38. Who created/standardized/validated the VCSA? **The overall coordinator for the VCSA is Dr. Michael Paul, a former small animal practitioner and a past president of AAHA. The various stations of the examination were developed by clinical faculty members and private practitioners, most of whom are board certified in their area of expertise. VCSA examiners include both faculty members and private practitioners. Members of the NBVME Executive Committee are responsible for overseeing the development and administration of the examination, and most have also served as examiners. The list of skills to be assessed on the VCSA was developed by a task force assembled in 2001 by the NBVME, consisting of clinical faculty members and private practitioners, including members of licensing boards. Two outside consultants, including one clinical faculty member and one psychometrician, also provided input into the development of the VCSA. Faculty from the Office of Medical Education Research and Development (OMERAD) at the Michigan State University**

College of Human Medicine provide ongoing consultation in the design, scoring, and administration of the VCSA. The NBVME conducted a pilot test of the VCSA in October 2005. Participants in the pilot test included ten reference candidates (five recent graduates and five senior students from two accredited schools), and six PAVE candidates. The first VCSA administration included two PAVE candidates and two reference candidates (recent graduates from another accredited school). The use of reference candidates, whose identity is unknown to the examiners, helps ensure that the skills being assessed are appropriate. Reference candidates also provide useful feedback on the examination content and administration.

39. How often is the VCSA evaluated/changed? **The VCSA stations and checklists are revised prior to each administration. The examination has now been given three times (the October 2005 pilot test and actual administrations in January and April 2006). The next administration is scheduled for January 5-6, 2007.**

40. What security steps are taken to prevent test questions from being circulated/compromised? **Since the VCSA is a hands-on skills examination, not a written examination, there is less concern about specific "questions" being circulated or compromised. For example, even if a candidate knows that the examination might include making and interpreting a blood smear, they still have to make and interpret a blood smear to complete that portion of the examination in a satisfactory manner. In fact, the NBVME publishes the list of possible skills to be assessed in its VCSA candidate bulletin. The examination is administered such that candidates cannot discuss details of individual stations with one another while the stations are being given. Finally, all VCSA candidates, examiners, and support staff must sign statements of confidentiality.**

41. How often is the VCSA administered?
as needed, up to 4 times per year.

42. Who administers the VCSA? **The NBVME administers the VCSA using the facilities of the AVMA-accredited veterinary technology program at Cedar Valley College in Dallas, Texas. CVC faculty and staff assist with the examination.**

43. What is considered passing? **Examiners at each station rate each candidate as satisfactory, borderline satisfactory, borderline unsatisfactory, or unsatisfactory. In addition, detailed checklists and written notes are also used by examiners in rating candidate performance on the specific tasks associated with the station. The OMERAD consultants assist in compiling the scores. The passing standard is reviewed and approved by the NBVME Executive Committee following each administration. The performance of reference group candidates is used to help ensure that the passing standard is appropriate for entry-level practicing veterinarians.**

44. If the candidate fails, how soon can the exam be retaken?
the next administration of the examination

45. What is the cost to re-take the VCSA? **$5000 – same as initial fee**

46. Could a state board member view parts of your exams/questions? (as they are allowed to do with the NAVLE) **Licensing board members are welcome to review the VCSA. Licensing board members have observed**

previous VCSA administrations, and some have also served as VCSA examiners. As far as the QE is concerned, as noted above, the NBVME's web site includes sample QE questions and a practice version of the QE. If licensing board members would like to review an actual QE test form, those arrangements can be made. It is important to note that the NBVME includes licensing board members in all aspects of test development for all of its examinations.

47. How many states approve the PAVE program? **20 jurisdictions accept PAVE applicants as meeting the education requirement for licensure.**

48. What is the average time to complete the PAVE program? **The time it takes a candidate to complete the PAVE Program depends on how long it takes them to pass the required examinations and submit required documents. It also depends on when they enter the program and the timing of the administrations of the QE and VCSA. The average time is approximately 2 years.**

49. What is the average cost to complete the PAVE program? **Assuming the candidate passes the QE and the VCSA the first time, the program would cost approximately $6,150. If the candidate does not take the VCSA and passes the QE the first time, the cost would be approximately $1200, plus the cost of the evaluated clinical experience.**

50. What do you see as the biggest advantage of the PAVE program? **The program was developed by the group comprised solely of veterinary regulatory boards. The member boards determine the content of the program and the direction of the association. Your board has input into all AAVSB programs. The PAVE program was designed by and for the regulatory boards of veterinary medicine to provide an appropriate assessment of the education equivalence of graduates of non-AVMA accredited veterinary schools.**

51. Are applicants/graduates allowed or solicited to give feedback on the program after completion? **They are allowed but they are not solicited in any formal way.**

52. What follow-up research have you conducted to evaluate the competency/employer satisfaction /performance of program graduates? **It is anecdotal. We have testimonials from employers and clinical faculty members as to the quality of PAVE certificate holders.**

53. Is there a private or government agency that oversees your activities? If so, what is the extent of the monitoring? **The Member Boards of AAVSB – all governmental agencies – determine the direction of the association and the programs provided. They have access to any and all information pertaining to the PAVE program. When you have any questions, please ask.**

54. Is there a need for foreign graduate veterinarians in the U.S.? If so, is the PAVE program fair in testing their academic preparedness, practical knowledge and the cost of getting into your programs? **PAVE provides a rigorous mechanism for graduates of non-AVMA accredited programs to**

establish the equivalence of their education – in both the clinical/practical and basic sciences.

55.   Final closing comments **AAVSB urges the ID Board to include PAVE as one method for international graduates from non-AVMA accredited programs to meet the education requirements for licensure in this state.**