



Institutional Effectiveness Resource Manual for Non-Academic and Academic and Student Support Services Units

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(The latest version of the manual can be found on the web and in the WEAVE Collegewide Document Repository)

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Introduction

What is Institutional Effectiveness?

Institutional Effectiveness is an ongoing, cyclical process by which the institution, its divisions, its degree and certificate programs, and its units gather, analyze, and use data to ascertain how well it is accomplishing its mission and goals, and to make continuous improvements based on assessment results. Each department, program and unit will identify its goals, objectives, or expected outcomes consistent with those of the College (See Appendix “A”). Then assessment tools to measure and analyze the degree of its performance and levels of success in achieving its proscribed goals, objectives, or expected outcomes are developed, administered and analyzed. Ultimately, the purpose of assessment is to make improvements based upon the assessment data.

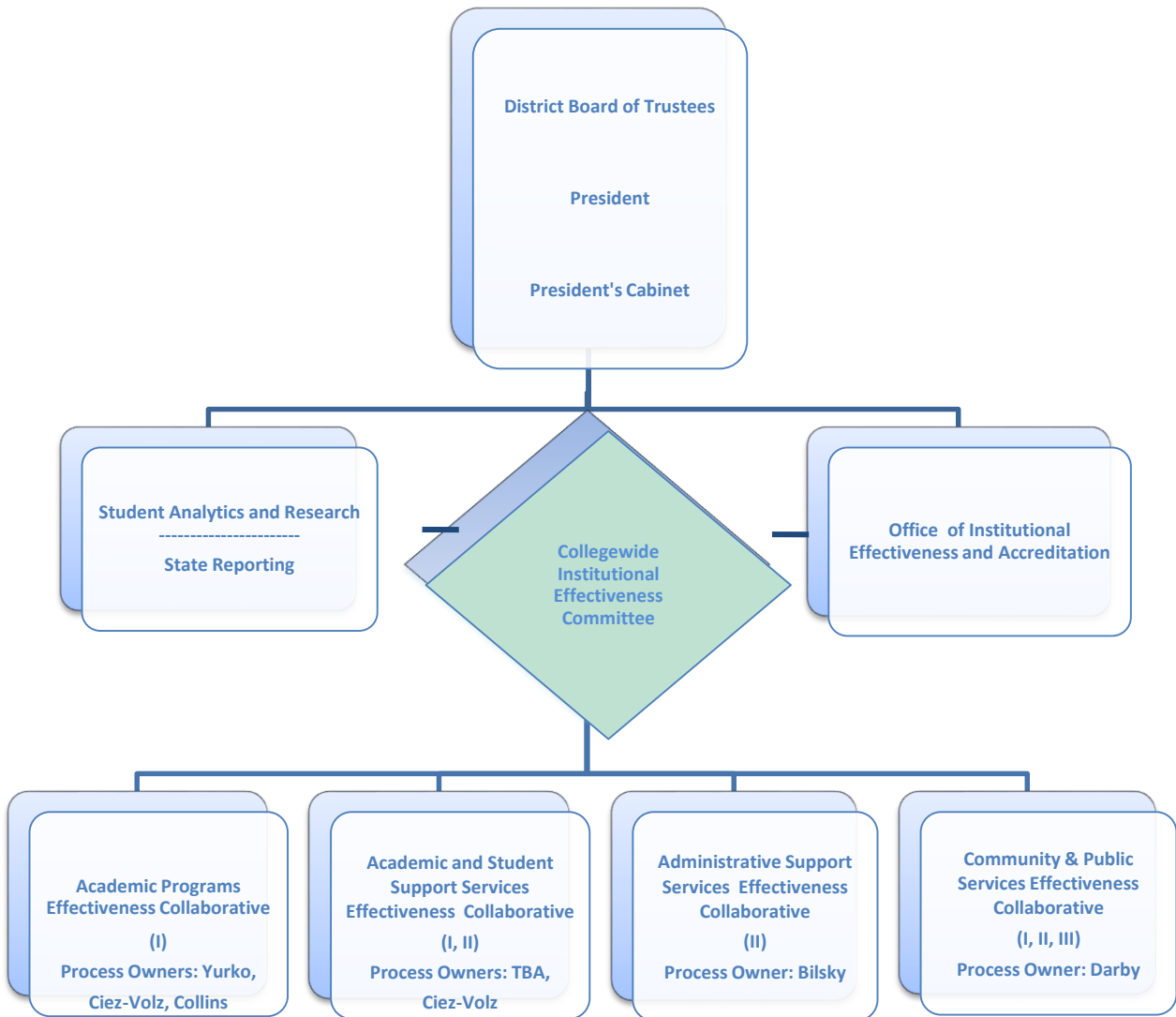
The purpose of the Florida State College at Jacksonville Institutional Effectiveness Manual is to provide procedures and guidelines for academic, administrative and departmental units in each of the aforementioned critical elements of effectiveness planning.

IE Comprehensive View

The College engages in planning processes; performance measures; annual outcomes assessment process in all programs and units, as a part of the comprehensive institutional effectiveness efforts. This manual is focused, however, on the annual IE outcomes assessment supported by the College Administrative Procedure Manual, APM 02-1601.

The Florida State College at Jacksonville Institutional Model

Institutional Effectiveness Structure to Support Assessment of Academic Programs, Academic and Student Support Services, and Non-Academic Units



The Collegewide Institutional Effectiveness Committee and its Effectiveness Collaboratives support ongoing, integrated, and institution-wide systemic processes of planning and assessment. These processes include a systematic review of mission and goals; assessment of student learning outcomes; continuous improvement of institutional quality; and support of the institution's accreditation activities that are specifically related to SACSCOC institutional effectiveness standards. The Collegewide Institutional Effectiveness Committee is specifically charged with supporting assessment of academic programs, academic and student support services, and non-academic units.

Legend: I = Student Learning Outcomes; II = Operational Outcomes; III = Employee Learning Outcomes

Collegewide Institutional Effectiveness Committee

The mission of the Collegewide Institutional Effectiveness committee is to help the College to achieve its mission by supporting program and unit-level mission development, goal setting, outcomes assessment, and reporting. The committee supports and monitors College activities pertaining to SACSCOC accreditation standards of institutional effectiveness.

To enhance existing assessment efforts, the institution supports a centralized approach to the development of assessment guidelines and resources while identification of appropriate goals, outcomes, and measures are determined at the program and/or unit level in order to be most relevant and meaningful. To that end, the membership of the committee reflects the diversity of units and programs and ensures broad-based involvement of employee groups. Committee members include faculty, career employees, administrative and professional employees, and senior management.

The Collegewide Institutional Effectiveness Committee has groups aligned functionally for institutional effectiveness and assessment purposes, referred to as Effectiveness Collaboratives to address specific areas of institutional effectiveness. The committee relies on the strength and expertise of Effectiveness Collaboratives to direct assessment in each institutional effectiveness area within the College. These collaboratives were designed to reflect the culture and mission of the College, while addressing the applicable areas of SACSCOC Comprehensive Standard 3.3.1.

The Institutional Effectiveness Committee is primarily supported by the Office of Institutional Effectiveness and Accreditation (OIEA). This office provides leadership, support and resources for institutional effectiveness and accreditation. These processes assist the institution in maintaining SACSCOC accreditation, promoting its achievement of mission and goals, and fostering continual enhancement of the institution's programs and services for the benefit of the College community. OIEA is responsible for SACSCOC accreditation correspondence and reports, Quality Enhancement Plan coordination, Substantive Changes, and other reaffirmation and compliance activities. OIEA supports annual institutional effectiveness activities of academic programs, academic and student support services, and non-academic units.

The Institutional Effectiveness Committee is also supported by the Office of Student Analytics and Research and the State Reporting department.

SACSCOC Definition of Institutional Effectiveness

The Commission on Colleges of the Southern Association of Colleges and Schools defines Institutional Effectiveness as

The systematic, explicit, and documented process of measuring performance against mission in all aspects of an institution . . . A commitment to continuous improvement is at the heart of an ongoing planning and evaluation process. It is a continuous, cyclical process that is participative, flexible, relevant and responsive. The approach to institutional effectiveness includes all programs, services, and constituencies and is strongly linked to the decision-making process at all levels, including the institution's budgeting process (SACS Commission on Colleges Resource Manual for the *Principles of Accreditation: Foundations for Quality Enhancement*, 2005).

SACSCOC has several types of requirements or standards. Core Requirements are “basic, broad-based, foundational requirements that an institution must meet to be accredited...An accredited institution is required to document compliance with all Core Requirements, ...before it can be reaffirmed” (*Principles*

of Accreditation: Foundations for Quality Enhancement, 2012, p. 17). Comprehensive Standards “are more specific to the operations of the institution, represent good practice in higher education, and establish a level of accomplishment expected of all member institutions” (*Principles of Accreditation: Foundations for Quality Enhancement*, 2012, p. 25). Federal Requirements are based on federal statutes related to higher education, and requires SACSCOC to review an institution for compliance with each of the requirements. Specific SACSCOC standards pertaining to Institutional Effectiveness are outlined in Core Requirements 2.5 and 2.12, and Comprehensive Standards 3.3.1, 3.3.2, and 3.5.1, and Federal Requirement 4.1 as follows:

Core Requirement 2.4: The institution has a clearly defined, comprehensive, and published mission statement that is specific to the institution and appropriate for higher education. The mission addresses teach and learning and, where applicable, research and public service.

Core Requirement 2.5: The institution engages in ongoing, integrated, and institution-wide research-based planning and evaluation processes that (1) incorporate a systematic review of institutional mission, goals, and outcomes; (2) result in continuing improvement in institutional quality; and (3) demonstrate the institution is effectively accomplishing its mission. (*The Institutional Effectiveness Committee contributes to Core Requirement 2.5*).

Core Requirement 2.12: The institution has developed an acceptable Quality Enhancement Plan (QEP) that includes an institutional process for identifying key issues emerging from institutional assessment and focuses on learning outcomes and/or the environment supporting student learning and accomplishing the mission of the institution. (*At Florida State College at Jacksonville, a separate Quality Enhancement Plan committee oversees Core Requirement 2.12*)

Comprehensive Standard 3.1.1: The mission statement is current and comprehensive, accurately guides the institution’s operations, is periodically reviewed and updated, is approved by the governing board, and is communicated to the institution’s constituencies.

Comprehensive Standard 3.3.1: The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results in each of the following areas:

- 3.3.1.1 educational programs, to include student learning outcomes
- 3.3.1.2 administrative support services¹
- 3.3.1.3 academic and student support services²
- 3.3.1.4 research within its mission, if appropriate³
- 3.3.1.5 community/public service within its mission, if appropriate⁴

(The Institutional Effectiveness Committee’s responsibility primarily focuses on Comprehensive Standard 3.3.1).

Comprehensive Standard 3.3.2: The institution has developed a Quality Enhancement Plan that (1) demonstrates institutional capability for the initiation, implementation, and completion of the QEP; (2) includes broad-based involvement of institutional constituencies in the development and proposed implementation of the QEP; and (3) identifies goals and a plan to assess their

¹ i.e. human resources, finance, facilities, etc.

² i.e. the student success units, library/learning commons, and other such units

³ This subsection is not applicable to Florida State College at Jacksonville

⁴ i.e. Florida State College at Jacksonville Community Services

achievement. *(At Florida State College at Jacksonville, a separate Quality Enhancement Plan committee oversees Comprehensive Standard 3.3.2)*

Comprehensive Standard 3.4.7: The institution ensures the quality of educational programs and courses offered through consortial relationships or contractual agreements, ensures ongoing compliance with the *Principles*, and periodically evaluates the consortial relationship and/or agreement against the mission of the institution. *(At Florida State College at Jacksonville, the Office of General Counsel supports the development and monitoring of these agreements.)*

Comprehensive Standard 3.5.1: The institution identifies college-level general education competencies and the extent to which students have attained them. *(At Florida State College at Jacksonville, the General Education Assessment Task Force is charged with facilitating Comprehensive Standard 3.5.1.)*

Federal Requirement 4.1: The institution evaluates success with respect to student achievement consistent with its mission. Criteria may include: enrollment data; retention, graduation, course completion, and job placement rates; state licensing examinations; student portfolios; or other means of demonstrating achievement of goals. *(At Florida State College at Jacksonville, Federal Requirement 4.1 data collection and reporting is managed by the Director of Student Analytics and Research, State Reporting department, and the Executive Dean of Career and Technical Education.)*

At Florida State College at Jacksonville, Institutional Effectiveness is an ongoing, cyclical process which focuses on planning, implementation, monitoring, and making improvements based upon assessment data. This process prompts the institution to ascertain how well it is succeeding in accomplishing its mission and goals. Each College department and unit identifies its goals, objectives, or expected outcomes consistent with the College mission and its department mission, and then implements action plans and assessment methods on an annual basis. Key to the process is the analysis of assessment data to make improvements to student learning and the effectiveness of institutional, departmental and program goals, objectives, or expected outcomes. Multi-layered monitoring and evaluation processes ensure integration of institutional mission and goals and evidence of outcomes achievement.

Thus, Institutional Effectiveness is a process of demonstrating how well Florida State College at Jacksonville performs in accomplishing and demonstrating the above-referenced SACSCOC requirements and standards as well as demonstrating its overall effectiveness through assessment of academic programs, student learning outcomes and administrative outcomes reflecting and supporting the institution's mission.

Institutional Effectiveness and Assessment

The Florida State College at Jacksonville Mission Statement is as follows:

Florida State College at Jacksonville provides high value, relevant life-long education that enhances the intellectual, social, cultural and economic development of our diverse community. (adopted August 12, 2014)

Florida State College at Jacksonville Distinctive Values and Attributes (adopted December 7, 2010):

Florida State College at Jacksonville is a values-driven institution of higher education committed to ensuring that every student has an extraordinarily positive overall experience by providing:

- *Excellence in teaching*
- *High quality courses, services and learning environments*
- *Innovation and flexibility in the delivery of courses and services*
- *Advanced academic technology*
- *Significant local scholarship resources*
- *Responsiveness to student, employer and community needs*
- *Emphasis on community quality of life and prosperity*
- *Encouragement and support of lifelong learning*

Florida State College at Jacksonville Collegewide Goals:

The mission of Florida State College at Jacksonville will be fulfilled, in significant measure, through the continuous, responsive pursuit of academic excellence through the following collegewide goals:

1. *Prepare students for distinctive success in their academic, career and personal goals through collaboration within the College community and individual initiative.*
2. *Inspire students to a lifetime commitment to continued learning, informed civic engagement, ethical leadership, cultural appreciation, social responsibility and multicultural awareness in an interconnected world.*
3. *Optimize access to College programs and services.*
4. *Provide to students an extraordinarily positive experience in every engagement with the College.*
5. *Contribute significantly to the ongoing economic development of the Northeast Florida region.*

The College will be innovative, resourceful, effective and accountable in the pursuit of these goals. Student completion of degrees and certificates is a priority. Standards of performance for employees and organizational units will be of the highest order with a clear expectation of continuous quality improvement. Ultimate accountability shall pertain to demonstrated outcomes and other definitive evidence of success pursuant to the College's comprehensive institutional effectiveness program.

Implementation of Florida State College at Jacksonville's Mission Statement must occur at every academic, administrative and service department level through the development of a program- or unit-specific mission statement which reflects the College Mission Statement, and the identification of outcomes. Once the program/unit mission statements and identification of outcomes have been

established and put into place, activities to accomplish and assess the effectiveness of these outcomes are implemented. These assessment activities should be: (1) established after unit or program mission and goals have been developed; (2) designed to determine the extent of success in attaining the outcomes; and (3) crafted as dynamic and ongoing in nature. Thus, assessment is an integral process in the body of an institution's effectiveness plan as it is the means of procuring and evaluating evidence relative to the institution's academic and administrative programs and services. The essential purpose of assessment is to improve student learning, the delivery of student services and the effectiveness of every unit within the institution in support of the goals inherent in the institution's mission statement. The function of assessment is two-fold in nature.

- (1) Assessment activity provides information designed to improve the quality of the education delivered to students and the community through various programs of study and to increase effectiveness of non-academic units. Results of the assessment activities provide feedback to faculty and administrators of those areas in which students are performing at the achievement target set by the faculty as well as areas where changes should be implemented to improve curricula, student learning outcomes and student services. Thus, in this regard, assessments provide the data used to assess and subsequently improve student learning and delivery of services.
- (2) The second function of assessment is for accountability, both internally and externally. Assessment measures designed to gauge internal accountability provide data on the degree of success academic, academic and student support services, and administrative units are achieving stated outcomes. The institution's Institutional Effectiveness activities also provide data to outside agencies and governmental units to demonstrate that the institution is meeting accreditation requirements and effectively achieving its mission.

Thus, although assessment activities are key to the Institutional Effectiveness Plan of Florida State College at Jacksonville, they represent the data collected but not the entire process. Each unit or program will participate in "closing the loop" by acting upon collected data and using data to improve programs, services, and/or student learning. In addition, "closing the loop" has other institutional benefits, such as pinpointing professional development needs for faculty and staff; aiding short- and long-term planning efforts; guiding resource allocations; and assisting the College in maximizing its most effective services.

Institutional Effectiveness Assessment Non-Academic Units

The institutional effectiveness process is cyclical in nature as it navigates the stages of planning, implementation, assessment, analysis, enhancement and action planning. This section is intended to give some guidance on how to craft an institutional effectiveness plan for non-academic units.

Institutional Effectiveness Assessment plans should consist of six steps:

1. Identification of alignment with College mission and goals, and development of a unit-specific mission statement
2. Identification of current services, processes or instruction
3. Identification, design and implementation of assessment tools that measure the unit services, processes or instruction
4. Establishment of an achievement target for each assessment measure
5. Collection and analysis of the data collected to determine major findings
6. Development and implementation of an action plan based on assessment results to improve services, processes or instruction.

The Six Steps of Institutional Effectiveness Outcomes Assessment



Graphic created by M. Harrington and M. Hobbs

1. Identification of alignment with the College mission and goals and development of a unit-specific mission (purpose) statement

Units are expected to support the College's mission and goals. Staff and administrators should examine the College mission and goals statements, and identify a link between the unit's services, processes or instruction and the mission and goals of the institution.

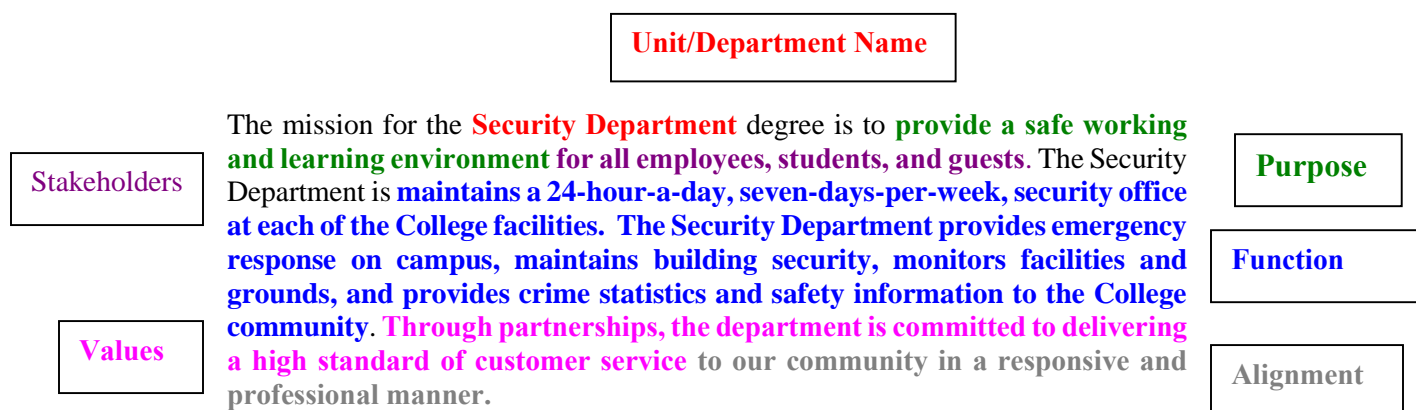
In its broadest form, a unit mission (purpose) statement should be a concise and focused statement of the general values and principles which guide the unit. It should, in a broad sense, define the purpose of the goals it desires to achieve, the population or stakeholders the program is designed to serve, and state the values which define its standards. A non-academic unit mission (purpose) statement should reflect the

College mission statement and demonstrate how it supports or complements the College goals as delineated in its mission statement.

Template for a unit or department mission (purpose) statement:

“The mission of **(name the unit/department)** is to **(state a definitive purpose)** by providing **(identify the primary functions and services)** to **(identify stakeholders and provide additional clarifying statements that include values and alignment with the College mission statement)**

Example of a unit or department mission (purpose) statement:



Checklist for a Mission (Purpose) Statement:

The Unit Mission (Purpose) Statement should:

1. Be clear and concise
2. Be distinctive and specific to the program
3. Clearly state the purpose of the program
4. Indicate the function of the program
5. Identify stakeholders (*customers of the unit, advisory committees, and others invested in success of the unit*)
6. Reflect the vision and values of the program
7. Align with college mission and goals (Created by M. Harrington and M. Hobbs, Adapted by Florida State College at Jacksonville)

Questions to Consider when Reviewing a Completed Mission (Purpose) Statement:

1. Does the unit's mission (purpose) statement clearly state the primary functions of the unit and population served?
2. Is the unit mission (purpose) statement clearly linked to the College goals?
3. Does the mission (purpose) statement support the College mission statement?
4. What end result does the unit expect to achieve?
5. How or through what means is the purpose accomplished?
6. What are the fundamental values based on an expressed understanding of population served or interests of other important stakeholders?

Please refer to Appendices “B” and “C” to review a unit-specific mission (purpose) statement.

2. Identification of unit outcomes

After the mission of the unit has been designed, specific outcomes should be the focus of attention. Often, and unfortunately incorrectly, unit goals and outcomes are seen as synonymous. This is not the case. Unit goals are broad and long-term objectives; on the other hand, unit outcomes are measurable expectations.

Unit goals are the long range general statements of what the unit intends to deliver, and they provide the basis for determining more specific outcomes and objectives of the unit. The chief function of unit goals is to provide a conduit between specific outcomes in any particular area and the general statements of the College mission statement. Thus, unit goals and outcomes should be crafted to reflect the goals of the College mission statement.

How to develop unit outcomes:

Outcomes should describe current services, processes, or instruction. One approach that works well is to ask each of the unit staff members to create a list of the most important things the unit does. Then create a master list of the key services, processes or instruction. From that list, a set of outcomes can be created. Staff members are the best equipped to identify the unit outcomes, as they are the experts in the day-to-day operations. Typically, the number of outcomes is unique to the specific unit; however, usually eight to twelve outcomes is generally the case for the total number of outcomes to be assessed in a three to four year period and the number is based upon the mission and purpose of the unit. For each institutional effectiveness assessment cycle, it is recommended that three outcomes are assessed, and over a three to four year period, all outcomes are assessed.

Characteristics of good outcomes:

A good outcome should:

1. focus on a current service, process, or instruction;
2. be under the control of or responsibility of the unit;
3. be meaningful and no trivial;
4. be measurable, ascertainable and specific;
5. lend itself to improvements;
6. be singular, not bundled
7. not lead to “yes/no” answers.

They should:

1. describe current services, processes or instruction;
2. use active verbs in the present tense (unless a learning outcome);
3. reflect measurable standards;
4. measure the effectiveness of the unit (using descriptive words);
5. be essential and meaningful to the unit.

Unit Outcomes Should:

- Be clearly and succinctly stated. Make the unit outcome clear and concise; extensive detail is not needed at this stage.
- Be under the control or responsibility of the unit.
- Be ascertainable/measurable. Sometimes an outcome is not measurable in a cut and dried objective fashion and thus might be considered somewhat subjective, such as client satisfaction. By using a survey and assessing each major component of the survey instrument, the outcome can thus be ascertainably measured.
- Lend itself to improvements. The process of assessment is to make improvements, not simply to look good. The assessment process is about learning how the unit can be better, so do not choose an outcome that will measure something the unit is already doing well.
- Focus on an outcome that is meaningful. Although it can be tempting to measure something because it is easy to measure, the objective to measure that which can make a difference in how the unit functions and performs.
- Focus on outcomes that measure effectiveness. If the answer to the outcome is a “yes/no” response, the outcome has not been written correctly and, when measured, may not yield actionable data. We recommend use of descriptive words regarding the service or function.
- Outcomes should be phrased with action verbs in the present tense that relate directly to objective measurement.

Examples of Some Problematic Unit Outcomes:

Example 1: The Office of Institutional Effectiveness and Accreditation will ensure that 90 percent of departments submit their annual Institutional Effectiveness plan on time.

Problems: a) The unit does not have control over this outcome. While we certainly hope this goal can be achieved, and it is important, the outcome itself is not appropriate for the assessment of this unit’s outcomes because there is no direct control. b) In addition, this outcome is stated in the future tense, implying that it may be a future goal or initiative, rather than a current service or process.

Example 2: The Artist Series will process ticket orders in a timely manner, provide quality refreshments, coordinate comprehensive VIP program, and follow sound accounting principles.

Problems: a) This outcome is what is often referred to as “bundled;” there are several different components all tied into one outcome. This would be an extremely challenging outcome to assess; thus, it would be more effective by simplifying and focusing the outcome. With a bundled outcome, the assessment measure would have to specifically address each and every one of the elements, and that is an incredibly large amount of data to design, collect and report. So, although each of the elements is important, it would be better (and easier) to separate these into multiple outcomes. b) In addition, this outcome is stated in the future tense, implying that it may be a future goal or initiative, rather than a current service or process.

Major Types of Administrative Outcomes to Measure		
Administrative		Example
	Efficiency	The Foundation processes donation receipts in a timely manner.
	Accuracy	Purchasing accurately processes purchase orders.
	Effectiveness	The Human Resources Office provides effective new employee orientation services.
	Client Satisfaction	The cafeteria provides food and facilities that are satisfactory to its customers.
	Quality	The Artist Series provides high quality cultural events to the community
	Comprehensiveness	The Campus Bookstore provides comprehensive customer service.
	Compliance with Standards	The College Finance Department consistently complies with standard accounting practices.
Employee Learning Outcomes*		Employees will understand how to accurately enter a department requisition in Orion.

*Only use employee learning outcomes if the unit is responsible for leading professional development/training workshops for employees.

Checklist for a Unit Outcome

An Outcome should:

- Describe unit's services, processes or instruction
- Identify a current function
- Be under the control of or responsibility of the unit
- Be measurable/ascertainable and specific
- Lend itself to improvement
- Be singular, not "bundled"
- Be meaningful and not trivial
- Not lead to a "yes/no" answer
- Link to college goals (*Created by M. Harrington and M. Hobbs, Adapted by Florida State College at Jacksonville*)

Questions to Consider when Reviewing the Design of Outcomes:

- Is the outcome stated in terms of current services, processes, or instruction?
- Does the unit have significant responsibility for the outcome with little reliance on other programs?
- Will the outcome lead to meaningful improvement?
- Is the outcome distinct, specific and focused?

Any answer other than "yes" to the above questions is an indication that the outcome should be re-examined and redesigned.

See Appendices “B” and “C” for examples of unit-specific outcomes.

3. Identification, design and implementation of assessment tools that measure the unit administrative outcomes

What should an assessment measure do? An assessment measure should provide meaningful, actionable data that leads to improvements. Therefore, one should not choose to assess something with which one is satisfied. The purpose of assessment is to look candidly and even critically at one’s unit or department to measure and collect data that will lead to improvements. The purpose of assessment measures is to gather data to determine achievement of the unit outcomes selected during the specific assessment cycle.

An Assessment Measure should:

Answer the questions:

- What data will be collected?
- When will the data be collected?
- What assessment tool will be used?
- How will the data be analyzed?
- Who will be involved?

It is vitally important that the assessment be directly related to the outcome. For example, if an outcome is designed to measure community satisfaction with community continuing education, and then the assessment measure counts the number of continuing education courses, there is a misalignment between the outcome and the measure. In this case, the measure should be an evaluation survey.

An Assessment Measure should include:

- A clear and specific description of **what** data will be collected.
- A definitive and specific timeframe for **when** and **by whom** the data will be collected. Will it be measured and collected during one specific month? A full year? By whom?
- A clear and specific description of the **assessment tool** which will be used. Will it be a systems log? Or will it be a survey? Other?
- A clear and specific description of **how** the data will be analyzed.

Examples of Types of Assessment Measures:

- Quantitative Data – response time, accuracy, cost savings, efficiency
- Client Satisfaction Level – surveys, focus groups, observation of client behavior
- External or peer comparisons – auditors, fire marshal, other outside agencies

Once the measures for assessing unit outcomes have been determined, an assessment measure should be developed which states what outcomes have been chosen to be assessed, how they will be assessed, and how the assessments will be administered and the data collected. Multiple (at least two) direct assessment measures should be used because if one of the assessment measures does not work out, there is at least another set of data upon which to rely. Two sets of data can also help to increase confidence in your assessment results.

A Note about Using Surveys: If you plan on using a survey as an assessment measure, do not average scores. Often, data collectors will average each respondent's score; however, doing so only gives an overall score for each respondent but does not give any information as to how the respondent felt about individual items. Your assessment measure for surveys should be phrased in terms of analyzing each question or subset of questions across all respondents.

A Note about Sampling: The Office of Institutional Effectiveness and Accreditation in cooperation with the Office of Student Analytics and Research have prepared sampling guidelines for your unit's assessment measures. Please see Appendix "D" for more information.

Example of an Outcome and Appropriate Assessment Measure:

Outcome: The Child Care Center communicates effectively with parents regarding center policies, procedures, and activities.

Assessment Measure: In March, a survey will be emailed to parents of all enrolled children, evaluating the effectiveness of communicating with parents via the monthly newsletter. The survey will include questions about delivery method, content, calendar, and length. The survey scale ranges from "Strongly Disagree" to "Strongly Agree." The percent of "Agree" or "Strongly Agree" responses for each question will be tallied. In addition, suggestions for improvements will be compiled.

Checklist for an Assessment Measure

An Assessment Measure should:

- Be directly related to the outcome
- Consider all aspects of the outcome
- Be designed to measure/ascertain effectiveness
- Multiple assessment measures should be identified, if possible; Be complemented by a second assessment measure, if possible
- Provide adequate data for analysis
- Provide actionable results
- Outline in detail a systematic way to assess the outcome (who, what, when, and how)
- Be manageable and practical (*Created by M. Harrington and M. Hobbs, Adapted by Florida State College at Jacksonville*)

Note: Multiple assessment measures should be identified if possible.

Questions to Consider when Reviewing the Design of Assessment Measures:

- Are assessment measures for each outcome clearly appropriate and do they measure all aspects of the outcome?
- Have multiple – at least two – direct assessment measures been identified?
- Are the assessment measures clear and detailed descriptions of the assessment activity (who, when, what and how)?
- Do the assessment measures clearly indicate a specific time frame for conducting assessment and collecting data?

- Does the measure reflect different campuses and locations, if appropriate?

Any answer other than “yes” to the above questions is an indication that the assessment measure should be re-examined and redesigned.

See Appendices “B” and “C” for an example of unit-specific assessment measures.

4. Establishment of an achievement target

An achievement target is the benchmark for determining the level of success for the unit outcome. Thus, it provides the standard for determining success. Additionally, an achievement target assists the unit staff and reviewers place the data derived into perspective. Finally, setting achievement targets allows the unit to discuss and determine exactly what the expectations should be and thus determine what constitutes effectiveness.

How achievement targets should be expressed.

Achievement targets should be specific. The achievement target should be clearly stated with actual numbers.

Achievement targets should avoid words such as “most,” “all,” or “the majority.” Specific and actual numbers should be utilized.

Achievement targets should not utilize target goals of 100 percent. If a target of 100 percent is set, the standard set is either unrealistically high or there is an implication that staff has selected a target they already know can be universally achieved. If unit is expected to consistently attain 100 percent due to legal or financial regulations or guidelines, it is recommended that the unit state that in the target.

Example of a Unit Outcome, Appropriate Assessment Measure and Achievement Target:

Outcome: The Child Care Center communicates effectively with parents regarding center policies, procedures, and activities.

Assessment Measure: In March, a survey will be emailed to parents of all enrolled children, evaluating the effectiveness of communicating with parents via the monthly newsletter. The survey will include questions about delivery method, content, calendar, and length. The survey scale ranges from “Strongly Disagree” to “Strongly Agree.” The percent of “Agree” or “Strongly Agree” responses for each question will be tallied. In addition, suggestions for improvements will be compiled.

Achievement Target: At least 90% of responses to each survey question will be “Agree” or “Strongly Agree.”

Checklist for an Achievement Target

An Achievement Target should:

- Be specific
- Avoid vague words such as “most” or “majority”
- Generally not be stated in terms of “all” or “100%”

- Directly relate to the outcome and assessment measure
- Use item analysis where appropriate, not averages (*Created by M. Harrington and M. Hobbs, Adapted by Florida State College at Jacksonville*)

Questions to Consider when Reviewing the Design of Achievement Targets:

- Have appropriate achievement targets been clearly stated for each measure?
- Do achievement targets address different campuses and locations?
- Has a brief rationale been offered for the selection of the achievement target?
- Is the achievement target specific and devoid of vague words?
- Is the achievement target directly related to the outcome and assessment method?

Any answer other than “yes” to the above questions is an indication that the achievement target should be re-examined and redesigned.

See Appendices “B” and “C” for examples of unit-specific achievement targets.

Review of Assessment Plans for Non-Academic Units

Steps 1 through 4, as outlined and explained above constitute the Assessment Plan. Members of the Institutional Effectiveness Committee will review and assess all Assessment Plans for all Non-Academic units using the rubric noted as Appendix “E”.

5. Collection and analysis of the data collected to determine major findings

As mentioned earlier, Steps 1 through 4 are components of the Assessment Plan. Now, in Steps 5 and 6, elements of the Assessment Report will be compiled and examined.

After the outcome, assessment measures and achievement targets have been identified and implemented, data of that implementation must be collected and the findings analyzed. In this regard, the shift is from planning the assessment to conducting it.

Detailed documentation of the assessment data must be retained. All data should be saved and archived in the WEAVE document repository for this unit. However, please avoid posting any personally identifiable information in WEAVE, such as social security numbers or birth dates.

What data collection and findings should include.

A summary of the findings should be reported in specific detail using actual numbers, not vague words such as “most” or “a majority.” It is necessary to report findings in terms of percentages and actual numbers. Additionally, a spreadsheet should be stored in WEAVE which will provide extensive detail to those who will review the plan and report. Because these reviewers will not be experts in your field,

avoid the use of technical or field-specific language, and be certain that the findings are reported clearly and succinctly. Most importantly, be certain that the findings are reported in a manner that indicates if the achievement target was met and aligns with the actions the unit personnel will decide to implement in order to make improvements.

Improvements Achieved

The findings also should be analyzed to see if improvements from prior action plans were made. The improvements should be detailed to show any changes from year-to-year, based on actions taken to improve the outcome. All improvements achieved in the unit should be reported. These improvements should be highlighted and documented in WEAVE, in the Improvements Achieved field. Please see Appendix “F” for a sample Improvements Achieved Report.

Example of a Unit Outcome, Appropriate Assessment Measure, Achievement Target and Findings:

Outcome: The Child Care Center communicates effectively with parents regarding center policies, procedures, and activities.

Assessment Measure: In March, a survey will be emailed to parents of all enrolled children, evaluating the effectiveness of communicating with parents via the monthly newsletter. The survey will include questions about delivery method, content, calendar, and length. The survey scale ranges from “Strongly Disagree” to “Strongly Agree.” The percent of “Agree” or “Strongly Agree” responses for each question will be tallied. In addition, suggestions for improvements will be compiled.

Achievement Target: At least 90% of responses to each survey question will be “Agree” or “Strongly Agree.”

Findings: Of the 274 surveys emailed, 259 were completed. The percentage and number of “Agree” and “Strongly Agree” responses were as follows:

- 98% (254) Prefer newsletter be emailed
- 87% (225) Newsletter is frequent enough
- 96% (249) Content is satisfactory
- 91% (236) Calendar is useful
- 93% (241) Newsletter is sufficient length

Suggestions for improvement included featuring teacher profiles and including tips for teaching children at home.

Target MET for delivery method of newsletter, content, calendar, and length. Target NOT met for frequency of newsletter.

Detailed findings are outlined on the accompanying chart. (You should submit a chart or spreadsheet with your Report which reflects the data collected.)

Improvements Achieved:

In 2011-2012, 80% of responses for Prefer newsletter be emailed were “Agree” or “Strongly Agree”. In 2012-2013, responses increased by 18% to 98%. In 2011-2012, 85% of responses for Newsletter is frequent enough were “Agree” or “Strongly Agree”. In 2012-2013, responses increased 2% to 87%. In 2011-2012, 89% of responses for Content is

satisfactory were “Agree” or “Strongly Agree”. In 2012-2013, responses increased by 7% to 96%. In 2011-2012, 85% of responses for Calendar is useful were “Agree” or “Strongly Agree”. In 2012-2013, responses increased by 6% to 91%. In 2011-2012, 82% of responses for Newsletter is sufficient length were “Agree” or “Strongly Agree”. In 2012-2013, responses increased by 11% to 93%.

Even though Responses to “Newsletter is frequent enough” did not meet the achievement target, “Agree” or “Strongly Agree” responses increased by 2%.

Reporting Findings for Multiple Locations

Some units such as campus security and facilities have a presence on multiple campuses or locations or via distance learning. Collegewide data for the outcome should be described, and also be separated or disaggregated per location or delivery method. Although each location will probably use the same outcomes, measures, and targets, it is critical that the data be reported separately to provide a valid assessment of the services.

Checklist for Data Collection/Findings

Data Collection/Findings should:

- Provide detailed data (avoid “a majority” or “most”)
- Include sample size in the description
- Design sample to include all locations and delivery methods (*if applicable-generally for academic and student support services*)
- Use specific numbers (no rounding)
- Avoid technical language
- Align with outcome and target
- Be clearly and succinctly presented
- Support actions taken later to improve (*Created by M. Harrington and M. Hobbs, Adapted by Florida State College at Jacksonville*)

Questions to Consider when Reviewing the Findings:

- Does the data analysis yield information that can be used to determine to what extent the outcome is being achieved?
- Is the data reported in sufficient detail to effectively describe and document the outcome assessment results?
- Is the analysis linked to the specified Achievement Target?
- Does the analysis take into consideration different campuses and locations, if applicable?

Any answer other than “yes” to the above questions is an indication that the data collection/findings should be re-examined and redesigned.

See Appendices “B” and “C” for examples of unit-specific achievement targets.

6. Development and implementation of an action plan based on assessment results to improve attainment of unit outcomes

This last step in the assessment process is often referred to as “closing the loop.” The chief aim of assessment is improvement. Thus, the previous assessment activities are of little importance unless the results are utilized to improve services, processes or instruction.

In WEAVE, units will be asked to be very specific in the action plan, and identify who is responsible for implementing the action plan, the timeline, any resources needed to implement the plan, etc. (Cautionary note about resources needed for plans! Design plans that are reasonable and feasible for the unit, even if the requested resources are not obtained.)

It is critical to put into place some mechanism which will indicate if the implemented changes have the desired effect. If a unit implements changes in response to the assessment results, it is vital to have a mechanism for assessing the results of the changes. The timeline for determining whether any implemented changes had the desired effect will vary depending upon the changes put into place. The method for determining whether the change has had the desired effect may be as simple as repeating the previous assessment measures. Thus, the assessment process is cyclical and ongoing in nature as it moves through the process of assessment, review, identification of changes needed, implementation of those changes and subsequent phase of assessment.

What Action Plans and Closing the Loop should accomplish:

1. Address gaps or weaknesses identified by the assessment results
2. Demonstrate a relationship between the outcome and the results from the data collected
3. Set forth a plan that is described in detail and not in general terms
4. Set forth a substantive, specific and non-trivial plan of action
5. Set forth a plan that does not include words such as “continue” or “maintain.” The goal of assessment is to effect improvement, and words such as continue and maintain indicate that no improvement will be effected
6. Set forth a plan that is manageable and practical

Example of a Unit Outcome, Appropriate Assessment Measure, Achievement Target, Findings and Action Plan:

Outcome: The Child Care Center communicates effectively with parents regarding center policies, procedures, and activities.

Assessment Measure: In March, a survey will be emailed to parents of all enrolled children, evaluating the effectiveness of communicating with parents via the monthly newsletter. The survey will include questions about delivery method, content, calendar, and length. The survey scale ranges from “Strongly Disagree” to “Strongly Agree.” The percent of “Agree” or “Strongly Agree” responses for each question will be tallied. In addition, suggestions for improvements will be compiled.

Achievement Target: At least 90% of responses to each survey question will be “Agree” or “Strongly Agree.”

Findings: Of the 274 surveys emailed, 259 were completed. The percentage and number of “Agree” and “Strongly Agree” responses were as follows:

98% (254) Prefer newsletter be emailed
87% (225) Newsletter is frequent enough
96% (249) Content is satisfactory
91% (236) Calendar is useful
93% (241) Newsletter is sufficient length

Suggestions for improvement included featuring teacher profiles and including tips for teaching children at home.

Target Met for delivery method of newsletter, content, calendar, and length. Target NOT met for frequency of newsletter.

Detailed findings are outlined on the accompanying chart. (You should submit a chart or spreadsheet with your Report which reflects the data collected.)

Action Plan: Because the target was not met for the frequency of the newsletter, the schedule has been changed from monthly to bimonthly. In response to suggestions from the survey, each newsletter will feature a teacher profile, and will also include a section on learning activities parents can do with their children.

Checklist for an Action Plan

Action Plans should:

- Be included, even if target met
- Address gaps identified by assessment results
- Provide details of improvement made
- Indicate how likely the action taken will improve achievement of outcome
- Relate outcome and the findings
- Be substantive, not trivial
- Avoid words like “continue” or “maintain
- Be manageable and practical (*Created by M. Harrington and M. Hobbs, Adapted by Florida State College at Jacksonville*)

Questions to Consider when Reviewing the Action Plan (Closing the Loop):

- Are the decisions set forth in the action plan based on assessment results and analysis?
- Are the action steps clearly stated and easily understood by someone outside of the program?
- Does the action plan directly relate to accomplishing the intended outcomes?
- Does the plan reflect improvements at the different campuses and locations, if appropriate?

Any answer other than “yes” to the above questions is an indication that the data collection/ findings should be re-examined and redesigned.

See Appendices “B” and “C” for examples of unit-specific action plans.

Review of Assessment Reports for Non-Academic Units

Along with some overall analysis, questions about the annual process, Steps 5 and 6, as outlined and explained above, constitute the Assessment Report. Members of the Institutional Effectiveness Committee will review and assess Assessment Reports for Non-Academic units using the rubric included in this Manual designated as Appendix “G”.

Institutional Effectiveness Subsection for Academic and Student Support Services Units Regarding Unit Mission Statement, Outcomes, Assessment Measures, And Achievement Targets

Non-Academic and Academic and Student Support Services units provide essential services to the institution and to students. While Non-Academic units generally do not impact instructional programs directly and include units such as Finance/Resource Development/Purchasing or Facilities, Academic and Student Support Services units directly contribute to student learning and include units such as the Library/Learning Commons, Financial Aid and Career Development Center. At Florida State College at Jacksonville, many of the Academic and Student Support Services Units are referred to as Student Success Units. These services are student-centered and are essential to the overall learning environment at Florida State College at Jacksonville. Because Academic and Student Support Services units have both administrative and academic or student learning components, this section is intended to provide some guidance on how to construct assessment plans that will incorporate both academic and non-academic components.

Because Academic and Student Support Services units will have both non-academic unit and academic area components to their plans, their Assessment plans will consist of the following six steps:

1. Identification of alignment with College mission and goals, and development of a unit-specific mission statement
2. Identification of student learning outcomes and identification of current services or processes
3. Identification, design and implementation of assessment tools that measure the student learning outcomes and the unit services or processes
4. Establishment of an achievement target for each assessment measure
5. Collection and analysis of the data collected to determine major findings
6. Development and implementation of an action plan based on assessment results to improve attainment of student learning outcomes, services or processes.

Thus, Academic and Student Support Services unit plans will include outcomes, assessment measures and achievement targets that describe and assess current services, processes, instruction and student learning outcomes. Some units, such as the Library/Learning Commons and Academic Success Center provide direct student instruction and should follow the procedures and guidelines for developing an assessment plan found in the Institutional Effectiveness Manual for Academic Programs in developing student learning outcomes. Academic Support programs and Academic and Student Support Services units should choose a mix of student learning and administrative unit quality outcomes appropriate to the mission of the unit.

As with Academic and Non-Academic areas, the Academic and Student Support Services unit plans should include:

1. A unit-specific mission statement which aligns with the College Mission and goals;
2. Three to five outcomes which describe current services, processes and instruction. The outcomes to be assessed should address both administrative outcomes and student learning outcomes; (the total number of outcomes to be assessed in a three to four year period may be greater than five outcomes and is based upon the mission and purpose of the unit)
3. Assessment measures that are directly related to the outcome and which provide measurable/ascertainable results that will provide adequate data for analysis
4. Specific achievement targets that determine the level of success for the unit outcome.

1. The Mission Statement for an Academic and Student Support Services Unit

Units are expected to support the College's mission and goals. Staff and administrators should examine the College mission and goals statements, and identify a link between the unit's services, processes or instruction and the mission and goals of the institution.

In its broadest form, an Academic and Student Support Services unit mission statement should be a concise and focused statement of the general values and principles which guide the unit. It should, in a broad sense, define the purpose of the goals it desires to achieve, the population or stakeholders the program is designed to serve, and state the values which define its standards. An Academic and Student Support Services unit mission statement should reflect the College mission statement and demonstrate how it supports or complements the College goals as delineated in its mission statement.

Example of an Academic and Student Support Services Unit Mission Statement

The mission of the Library/Learning Commons is to acquire, organize and preserve collections in all viable formats, provide access to information sources, and instruct library users in their library research methods.

The Academic and Student Support Services Unit Mission Statement should:

- Be clear and concise
- Be distinctive and specific to the unit
- Clearly state the purpose of the unit
- Indicate the function of the unit
- Identify stakeholders (*customers of the unit, advisory committees, and others invested in success of the unit*)
- Reflect the vision and values of the unit
- Align with college mission and goals (*Created by M. Harrington and M. Hobbs, Adapted by Florida State College at Jacksonville*)

2. Outcomes for an Academic and Student Support Services Unit

Academic and Student Support Services units should establish outcomes which describe current services, processes, or instruction as well as student learning outcomes which utilize specific, observable and measurable modes of student performance. Thus, the assessment plan for Academic and Student Support Services units should include administrative outcomes, student learning outcomes and possibly employee learning outcomes.

Outcome 1: Example of an Academic and Student Support Services Unit Administrative Outcome:

The Library/Learning Commons provides useful and convenient facilities.

Outcome 2: Example of an Academic and Student Support Services Unit Student Learning Outcome:

Students will demonstrate Information Literacy as a result of instruction provided by Library/Learning Commons staff

Outcome 3: Example of an Academic and Student Support Services Unit Employee Learning Outcome:

Faculty will know how to infuse Information Literacy into the discipline as a result of instruction provided by Library/Learning Commons staff.

Please note that administrative outcomes are stated in present tense; however student learning outcomes and employee learning outcomes can be stated in future tense.

Please note that Employee Learning Outcomes should only be used if the unit is responsible for regular training of employees of other College departments and units, such as Purchasing Department conducts “purchase card” training for staff in every College department and unit.

The Academic and Student Support Services Unit Outcomes should:

- Describe unit’s services, processes or instruction
- Identify a current function
- Be under the control of or responsibility of the unit
- Be measurable/ascertainable and specific
- Lend itself to improvement
- Be singular, not “bundled”
- Be meaningful and not trivial
- Not lead to a “yes/no” answer
- Link to college goals (*Created by M. Harrington and M. Hobbs, Adapted by Florida State College at Jacksonville*)

3. Assessment Measures for an Educational Services Support Unit

An assessment measure should provide meaningful, actionable data that leads to improvements. Therefore, one should not choose to assess something with which one is satisfied. The purpose of assessment is to look candidly and even critically at one’s program or unit to measure and collect data that will lead to program or unit improvements. The purpose of assessment measures is to gather data to determine students’ achievement of the student learning outcomes of the unit’s achievement of the administrative outcomes selected during the specific assessment cycle.

Examples of Outcomes and Appropriate Assessment Measures for an Academic and Student Support Services Unit:

Outcome 1: The Library/Learning Commons provides useful and convenient facilities.

Assessment Measure 1: During the spring semester, the library staff will conduct a series of three focus groups (two with students and one with faculty) that will include a discussion of their use of the library facilities, convenience of the facilities, and their expectations of the library facilities.

Measure 2: When students graduate from the College, they are asked to complete the Graduating Student Survey, which contains three satisfaction questions concerning the Library facilities: Convenient hours, Conducive studying, Adequate seating. Responses to each of these questions will be compiled for the year and analyzed by the Associate Dean of Library/Learning Commons for all of the College's libraries, as well as by location.

Outcome 2: Students will demonstrate Information Literacy as a result of instruction provided by Library/Learning Commons staff

Measure 3: During the fall semester, members of the Information Literacy Committee of the Library will teach LIS1000: Information Literacy. Students will be assigned a research paper which will be evaluated using the 4-point Information Literacy rubric attached. The number of 3 and 4 scores will be tallied.

Measure 4: A series of multiple choice questions (see attached) were added to the final exam of the LIS1000 Information Literacy class, designed to measure students' understanding of plagiarism. Each LIS1000 instructor will score each question as correct or incorrect. The Director of Library Services will compile all of the results and analyze the responses across all students for each item on the exam.

Outcome 3: Example of an Academic and Student Support Services Unit Employee Learning Outcome:

Faculty will know how to infuse Information Literacy into the discipline as a result of instruction provided by Library/Learning Commons staff.

Measure 5: Within 3 business days of the workshop, a quiz will be given to all participating faculty members to assess their knowledge of Information Literacy and strategies for infusing information literacy into the discipline. The number of correct answers to each quiz question will be compiled and analyzed across all participating faculty members.

Measure 6: A half-day session on creating and using information literacy skills and techniques in the discipline will be held during the spring semester. At the end of the session, the faculty will be asked to submit an activity or assignment that emphasizes information literacy skills. The workshop facilitators will apply a rubric to the proposed assignments, evaluate its effectiveness, and make suggestions for improving it. The rubric scores for each component of the rubric will be analyzed across all participating faculty members. The rubric components include components of information literacy, application of concepts to development of student assignment, and relevance of assignment for emphasizing students' information literacy. The proposed assignments will be evaluated using the 4-point rubric attached. The number of 3 and 4 scores will be tallied.

The Academic and Student Support Services Unit Assessment Measures should:

- Be directly related to the outcome
- Consider all aspects of the outcome

- Be designed to measure/ascertain effectiveness
- Be complemented by a second assessment measure, if possible
- Provide adequate data for analysis
- Provide actionable results
- Outline in detail a systematic way to assess the outcome (who, what, when, and how)
- Be manageable and practical (*Created by M. Harrington and M. Hobbs, Adapted by Florida State College at Jacksonville*)

Note: Multiple assessment measures should be identified if possible.

4. Achievement Targets for an Academic and Student Support Services Unit

An achievement target is the benchmark for determining the level of success for the unit outcome. Thus, it provides the standard for determining success. Additionally, an achievement target assists the unit staff and reviewers place the data derived into perspective. Finally, setting achievement targets allows the unit to discuss and determine exactly what the expectations should be and thus determine what constitutes effectiveness.

Examples of Outcomes, Appropriate Assessment Measures and Achievement Targets for an Academic and Student Support Services Unit:

Outcome 1: The Library/Learning Commons provides useful and convenient facilities.

Assessment Measure 1: During the spring semester, the library staff will conduct a series of three focus groups (two with students and one with faculty) that will include a discussion of their use of the library facilities, convenience of the facilities, and their expectations of the library facilities.

Achievement Target 1: Because focus groups do not yield quantitative information, there is no specific target for this measure. However, the Library expects to receive at least three significant suggestions as a result of the focus groups.

Measure 2: When students graduate from the College, they are asked to complete the Graduating Student Survey, which contains three satisfaction questions concerning the Library facilities: Convenient hours, Conducive studying, Adequate seating. Responses to each of these questions will be compiled for the year and analyzed by the Associate Dean of Library/Learning Commons for all of the College's libraries, as well as by location.

Achievement Target 2: At least 85% of responses will be Satisfied or Very Satisfied for each of the three questions in a Collegewide analysis as well as per location.

Outcome 2: Students will demonstrate Information Literacy as a result of instruction provided by Library/Learning Commons staff

Measure 3: During the fall semester, members of the Information Literacy Committee of the Library will teach LIS1000: Information Literacy. Students will be assigned a research paper which will be evaluated using the 4-point Information Literacy rubric attached. The number of 3 and 4 scores will be tallied.

Achievement Target 3: 80% of scores for each item on the rubric will be a 3 or 4.

Measure 4: A series of multiple choice questions (see attached) were added to the final exam of the LIS1000 Information Literacy class, designed to measure students' understanding of plagiarism. Each LIS1000 instructor will score each question as correct or incorrect. The Director of Library Services will compile all of the results and analyze the responses across all students for each item on the exam.

Achievement Target 4: 80% of answers will be correct for each of the 10 questions on the final exam of LIS1000 related to plagiarism.

Outcome 3: Example of an Academic and Student Support Services Unit Employee Learning Outcome:

Faculty will know how to infuse Information Literacy into the discipline as a result of instruction provided by Library/Learning Commons staff.

Measure 5: Within 3 business days of the workshop, a quiz will be given to all participating faculty members to assess their knowledge of Information Literacy and strategies for infusing information literacy into the discipline. The number of correct answers to each quiz question will be compiled and analyzed across all participating faculty members.

Achievement Target 5: 80% of answers will be correct for each of the 10 questions.

Measure 6: A half-day session on creating and using information literacy skills and techniques in the discipline will be held during the spring semester. At the end of the session, the faculty will be asked to submit an activity or assignment that emphasizes information literacy skills. The workshop facilitators will apply a rubric to the proposed assignments, evaluate its effectiveness, and make suggestions for improving it. The rubric scores for each component of the rubric will be analyzed across all participating faculty members. The rubric components include components of information literacy, application of concepts to development of student assignment, and relevance of assignment for emphasizing students' information literacy. The proposed assignments will be evaluated using the 4-point rubric attached. The number of 3 and 4 scores will be tallied.

Achievement Target 6: 80% of scores for each component on the rubric will be a 3 or 4.

Achievement Targets for Academic and Student Support Services Units should:

- Be specific
- Use component (not student) as unit of analysis
- Avoid vague words such as “most” or “majority”
- Generally not be stated in terms of “all” or “100%”
- Directly relate to the outcome and assessment measure *(Created by M. Harrington and M. Hobbs, Adapted by Florida State College at Jacksonville)*

Please see pages 21-25 for characteristics of Steps 5 findings and Step 6 action plans.

Review of Assessment Plans and Reports for Academic and Student Support Services Units

Steps 1 through 4, as outlined and explained above constitute the Assessment Plan. Steps 5 and 6 constitute the Report phase of Assessment. Academic and Student Support Services Units should follow the guidelines and instructions found on pages 21 through 25 for completing the Report phase of their Assessment Plans.

Process Phases and Timeline

Institutional Effectiveness is an on-going, iterative process which involves planning, design, implementation, review and redesign of plans for continuous improvement in carrying out the College's Mission Statement. The following table outlines the timeline for the process of accomplishing the six steps of developing and implementing an assessment plan.

1. Development of a unit-specific mission statement and alignment with College mission and goals, and other relevant institutional outcomes
2. Development of outcomes, (and if appropriate, employee learning outcomes)
3. Design and implementation of assessment tools that measure outcomes
4. Identification of appropriate achievement targets
5. Analysis of assessment results and review of the outcomes based upon assessment analyses
6. Implementation of an action plan to improve attainment of outcomes.

The process phases of the College's Institutional Effectiveness process are displayed in Appendix "H".

Non-Academic Units

Academic and Student Support Services (Student Success Units, Library/Learning Commons);
Administrative Support Services; and Community/Public Services

When does my department or unit submit information?

Sept. 27, 2013	Submit 2012-2013 IE Assessment Report; and begin implementing action plan (Phase IV) Submit 2013-2014 IE Assessment Plan in WEAVE (Phase I)
Oct. 28-Nov. 22, 2013	Refrain from making edits to 2012-2013 IE Assessment Report and 2013-2014 IE Assessment Plan in WEAVE until unit receives feedback
December 2013	Receive feedback on your revised 2012-2013 IE Assessment Report and 2013-2014 IE Assessment Plan, if applicable
January 17, 2014	Submit revised 2012-2013 IE Assessment Report, if requested (Phase V) and 2013-2014 IE Assessment Plan in WEAVE, if requested (Phase II)
February, 2014	Receive second round feedback on your revised 2012-2013 IE Assessment Report and 2013-2014 IE Assessment Plan, if applicable
Fall 2013 to Summer, 2014	Implement 2013-2014 IE Assessment Plan and Collect Assessment Data (Phase III)
Summer 2014	Begin analyzing data, submit findings, and design action plan by this date

	(Phase III and IV)
Sept. 26, 2014	Submit 2013-2014 IE Assessment Report; and begin implementing action plan (Phase IV) Submit 2014-2015 IE Assessment Plan in WEAVE (Phase I)
Oct. 10-Nov. 25, 2014	Refrain from making edits to 2013-2014 IE Assessment Report and 2011-2015 IE Assessment Plan in WEAVE until unit receives feedback
November 2014	Receive IE Committee's first round of feedback on 2013-2014 IE Assessment Report (Phase V) and 2014-2015 IE Assessment Plan (Phase II)
December 19, 2014	Submit revised 2013-2014 IE Assessment Report, if requested (Phase V) and 2014-2015 IE Assessment Plan in WEAVE, if requested (Phase II)
January 16, 2015	Receive second round feedback on your revised 2013-2014 IE Assessment Report and 2014-2015 IE Assessment Plan, if applicable

*This is a typical annual schedule. Please refer to the OIEA website for the current schedule.

IE Assessment Plan = unit mission statement; outcomes, with links to College Goals; assessment measures for each outcome; achievement targets for each assessment measure.

IE Assessment Report = findings, action plan, responses to analysis questions and annual report.

Assessment Resources

- Astin, A.W. (1993). *Assessment for excellence: The philosophy and practice of assessment and evaluation in higher education*. Phoenix: Oryx Press.
- Banta, T.W. (Ed.). (1990). *Making a difference: Outcomes of a decade of assessment in higher education*. San Francisco: Jossey-Bass.
- Banta, T.W., Lund, J. P., Black, K.E. & Oblander, F.W. (1996). *Assessment in practice: Putting principles to work on college campuses*. San Francisco: Jossey-Bass.
- Council for the Advancement of Standards in Higher Education. CAS Self-Assessment Guides. CAS.
- Diamond, R.M. (1998). *Designing and assessing courses and curricula: a practical guide*. San Francisco: Jossey-Bass.
- Nichols, J. O. (1995). *A practitioner's handbook for institutional effectiveness and student outcomes assessment implementation* (3rd ed.). New York: Agathon Press.
- Nichols, J. O. (1995). *Assessment case studies: Common issues in implementation with various campus approaches to resolution*. New York: Agathon Press.
- Upcraft, M.L. & Schuh, J.H. (1996). *Assessment in student affairs: A guide for practitioners*. San Francisco: Jossey-Bass.

Glossary

Assessment

The systematic collection, review, and use of information about educational programs undertaken for the purpose of improving student learning and development. (Palomba & Banta, 1999)

An ongoing process aimed at understanding and improving student learning. It involves making our expectations explicit and public; setting appropriate criteria and standards for learning quality; systematically gathering, analyzing, and interpreting evidence to determine how well performance matches those expectations and standards; and using the resulting information to document, explain, and improve performance. (Angelo, 1995)

Benchmarking

An actual measurement of group performance against an established standard at defined points along the path toward the standard. Subsequent measurements of group performance use the benchmarks to measure progress toward achievement. (New Horizons for Learning)

Bloom's Taxonomy of Cognitive Objectives

Six levels arranged in order of increasing complexity (1=low, 6=high):

1. Knowledge: Recalling or remembering information without necessarily understanding it. Includes behaviors such as describing, listing, identifying, and labeling.
2. Comprehension: Understanding learned material and includes behaviors such as explaining, discussing, and interpreting.
3. Application: The ability to put ideas and concepts to work in solving problems. It includes behaviors such as demonstrating, showing, and making use of information.
4. Analysis: Breaking down information into its component parts to see interrelationships and ideas. Related behaviors include differentiating, comparing, and categorizing.
5. Synthesis: The ability to put parts together to form something original. It involves using creativity to compose or design something new.
6. Evaluation: Judging the value of evidence based on definite criteria. Behaviors related to evaluation include: concluding, criticizing, prioritizing, and recommending. (Bloom, 1956)

Classroom Assessment

The systematic and on-going study of what and how students are learning in a particular classroom; often designed for individual faculty who wish to improve their teaching of a specific course. Classroom assessment differs from tests and other forms of student assessment in that it is aimed at course improvement, rather than at assigning grades. (National Teaching & Learning Forum)

Direct Assessment

Gathers evidence about student learning based on student performance that demonstrates the learning itself. Can be value added, related to standards, qualitative or quantitative, embedded or not, using local

or external criteria. Examples are written assignments, classroom assignments, presentations, test results, projects, logs, portfolios, and direct observations. (Leskes, 2002)

Disaggregation of Data

If 50% or more of the credit hours or clock hours for the program have been encoded as distance education classes and/or at one or more off-campus instructional locations during a timeframe of several semesters, then data should be disaggregated to reflect delivery methods and locations.

Embedded Assessment

A means of gathering information about student learning that is built into and a natural part of the teaching-learning process. Often uses for assessment purposes classroom assignments that are evaluated to assign students a grade. Can assess individual student performance or aggregate the information to provide information about the course or program; can be formative or summative, quantitative or qualitative. Example: as part of a course, expecting each senior to complete a research paper that is graded for content and style, but is also assessed for advanced ability to locate and evaluate Web-based information (as part of a Collegewide outcome to demonstrate information literacy). (Leskes, 2002)

Evaluation

The use of assessment findings (evidence/data) to judge program effectiveness; used as a basis for making decisions about program changes or improvement. (Allen, Noel, Rienzi & McMillin, 2002)

Formative Assessment

The gathering of information about student learning-during the progression of a course or program and usually repeatedly-to improve the learning of those students. Example: reading the first lab reports of a class to assess whether some or all students in the group need a lesson on how to make them succinct and informative. (Leskes, 2002)

Indirect Assessment (specific to Academic programs only)

Acquiring evidence about how students feel about learning and their learning environment rather than actual demonstrations of outcome achievement. Examples include surveys, questionnaires, interviews, focus groups, and reflective essays. (Eder, 137)

Learning Outcomes

Operational statements describing specific student behaviors that evidence the acquisition of desired knowledge, skills, abilities, capacities, attitudes or dispositions. Learning outcomes can be usefully thought of as behavioral criteria for determining whether students are achieving the educational objectives of a program, and, ultimately, whether overall program goals are being successfully met. Outcomes are sometimes treated as synonymous with objectives, though objectives are usually more general statements of what students are expected to achieve in an academic program. (Allen, Noel, Rienzi & McMillin, 2002)

Norm-Referenced Assessment

An assessment where student performance or performances are compared to a larger group. Usually the larger group or "norm group" is a national sample representing a wide and diverse cross-section of students. Students, schools, districts, and even states are compared or rank-ordered in relation to the norm group. The purpose of a norm-referenced assessment is usually to sort students and not to measure achievement towards some criterion of performance.

Performance Criteria

The standards by which student performance is evaluated. Performance criteria help assessors maintain objectivity and provide students with important information about expectations, giving them a target or goal to strive for. (New Horizons for Learning)

Portfolio

A systematic and organized collection of a student's work that exhibits to others the direct evidence of a student's efforts, achievements, and progress over a period of time. The collection should involve the student in selection of its contents, and should include information about the performance criteria, the rubric or criteria for judging merit, and evidence of student self-reflection or evaluation. It should include representative work, providing a documentation of the learner's performance and a basis for evaluation of the student's progress. Portfolios may include a variety of demonstrations of learning and have been gathered in the form of a physical collection of materials, videos, CD-ROMs, reflective journals, etc. (New Horizons for Learning)

Qualitative Assessment

Collects data that does not lend itself to quantitative methods but rather to interpretive criteria. (Leskes, 2002)

Rubric

Specific sets of criteria that clearly define for both student and teacher what a range of acceptable and unacceptable performance looks like. Criteria define descriptors of ability at each level of performance and assign values to each level. Levels referred to are proficiency levels which describe a continuum from excellent to unacceptable product. (System for Adult Basic Education Support)

Standards

Sets a level of accomplishment all students are expected to meet or exceed. Standards do not necessarily imply high quality learning; sometimes the level is a lowest common denominator. Nor do they imply complete standardization in a program; a common minimum level could be achieved by multiple pathways and demonstrated in various ways. (Leskes, 2002)

Summative Assessment

The gathering of information at the conclusion of a course, program, or undergraduate career to improve learning or to meet accountability demands. When used for improvement, impacts the next cohort of

students taking the course or program. Example: examining student final exams in a course to see if certain specific areas of the curriculum were understood less well than others. (Leskes, 2002)

Value Added


The increase in learning that occurs during a course, program, or undergraduate education. Can either focus on the individual student (how much better a student can write, for example, at the end than at the beginning) or on a cohort of students (whether senior papers demonstrate more sophisticated writing skills-in the aggregate-than freshmen papers). Requires a baseline measurement for comparison. (Leskes, 2002)

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Appendices

Appendix “A”

	ADMINISTRATIVE PROCEDURE MANUAL		
	SECTION TITLE	NUMBER	PAGE
	INSTITUTIONAL EFFECTIVENESS	02-1601	1 OF 2
	BASED ON BOARD OF TRUSTEES’ RULE AND TITLE	DATE ADOPTED	
	6Hx7-1.9 Standard of Excellence	September 20, 2011	

PURPOSE

The purpose of this procedure is to provide guidelines for the College’s institutional effectiveness process.

PROCEDURE

Institutional Effectiveness is an ongoing, cyclical process by which the institution, its divisions, its degree and certificate programs, its campuses and its administrative units gather, analyze, and use data to ascertain how well it is accomplishing its mission and goals, and to make continuous improvements based on assessment results. Annually,

The College will review its major priorities, initiatives and resource allocation to enhance the institution’s achievement of its mission and goals.

Each department, program and unit will identify its goals and expected outcomes consistent with those of the College.

Each department, unit or program will implement assessment activities to measure the degree of its performance and levels of success in achieving its prescribed goals.

Employees and other appropriate stakeholders will work collaboratively to collect and use data to determine the effectiveness of student learning, student services and department operations.

Units will analyze and report on the results of their assessment activities and, subsequently, unit employees will participate in reflection and dialogue about the collected data and other evidence to determine action plans for improvement.

Employees will participate in College provided professional development designed to support and guide meaningful and ongoing institutional effectiveness activities.

The College will share results and strategies with employees and other stakeholders for optimum improvement and will use data to inform resource allocation, planning, and decision-making.

Adopted Date: September 20, 2011

Appendix “B”
SAMPLE MODEL^

WEAVE Assessment Worksheet* Campus Security Department Non-Academic Unit (Administrative Support Services SEC) Florida State College at Jacksonville				
<i>Deadlines indicate date that specified information must be submitted in WEAVE</i>				
Unit: Campus Security	SEC Process Facilitator(s):	Assessment cycle/year: 2012-2013		
SEC Area: Administrative Support Services	Email address:			
Unit Mission <i>(due September 27, 2013(if applicable))</i>				
<p>The Security Department strives to provide a safe working and learning environment for all employees, students, and guests. The Security Department maintains a 24-hours-a-day, seven-days-per week, security office at each of the College facilities. The Security Department provides emergency response on campus, maintains building security, monitors facilities and grounds, regulates parking and issues parking permits, and provides crime statistics and safety information to the College community. Through partnerships, the department is committed to delivering a high standard of customer service to our community in a responsive and professional manner.</p>				
Assessment Summary				
Outcomes/Objectives <i>(due September 27, 2013)</i>	Measure(s) <i>(due September 27, 2013)</i>	Achievement Targets <i>(due September 27, 2013)</i>	Findings <i>(due September 27, 2013)</i>	Action Plans <i>(due September 27, 2013)</i>
Outcome 1: The Security Department provides effective and timely responses to calls for assistance at each campus and center.	Measure 1 (Outcome 1) In March and April, a random sample that consists of 100 employees and 200 students will be asked to complete an evaluation to assess the timeliness and effectiveness of the Security Department's response based on the following criteria: (1) timeliness of the response; (2) helpfulness of the assistance received; (3) professionalism of the responding officer.	Achievement Target 1 80% of scores for each component of the evaluation will be agree or strongly agree.	Findings 1 81% (189) agreed or strongly agreed that the response was timely 90% (210) agreed or strongly agreed with helpfulness of assistance received 93% (217) agreed or strongly agreed that responding officer was professional in his or her interactions Detailed findings are provided in an attached chart in WEAVE.	Action Plans 1 Although target was met, the security department would like to improve its results. Security Department has developed a triage protocol that allows the security officer to inform the customer of the level of the request and the anticipated 'wait time.' The evaluation forms will be administered again

	<p>Consumers will evaluate the service by responding in the following manner: "strongly agree," "agree," "disagree" or "strongly disagree."</p> <p>The Security Chief will analyze the evaluation scores across all students for each criterion, and across all employees for each criterion per campus/center location.</p>		Target MET for all criteria.	to determine if clients perceive a more timely response.
	<p>Measure 2 (Outcome 1)</p> <p>The Deputy Campus Security Chief will conduct an analysis of existing "Assistance Logs" from January 1 to May 31 to determine the length of time to respond to each request for assistance. The Deputy Campus Security Chief will analyze the length of time per call and examine responses per campus/center location.</p>	<p>Achievement Target 2</p> <p>80% of all requests for assistance will be responded to within 5 minutes.</p>	<p>Findings 2</p> <p>Of the 1,254 requests analyzed, 67% of requests for assistance were responded to within 5 minutes at the Smith Campus, and 85% at Markham Campus, 91% at Berton Center.</p> <p>Detailed findings are provided in an attached chart in WEAVE.</p> <p>Target NOT MET for Smith Campus.</p>	<p>Action Plans 2</p> <p>Additional analysis of the findings at Smith Campus indicated that this campus has more requests for assistance than the other two locations, and the same amount of staffing. The Security Department has requested and received approval to hire an additional security officer at Smith Campus.</p>
<p>Outcome 2:</p> <p>The Security Department provides a safe and secure environment at each campus and center.</p>	<p>Measure 1</p> <p>The safety and security of the campuses will be evaluated by three independent external security evaluators from other urban colleges.</p> <p>These peer evaluators will use The Campus Safety Health and Environmental Management Association (CSHEMA) Professional Standards</p>	<p>Achievement Target 1</p> <p>85% of the scores for each of the 6 areas evaluated by each evaluator will rate a score of 3, indicating that the area "fully meets standard."</p>	<p>Findings 1</p> <p>Two of the peer evaluators rated the Berton Center, as "not fully meeting standard" in several areas, therefore the achievement target was not met. The three areas that received less than a rating of "fully meets standard" were as follows: preventative measures</p>	<p>Action Plan 1</p> <p>The Security Department at Berton Center has adopted the handout for students and employees on the methods of and reasons for reporting suspicious behavior. This handout has been successfully used by Smith Campus and Markham</p>

	<p>"Evaluation Section VI: Campus Safety Environment" rating sheet to determine if the campus meets the professional standards recommended by CSHEMA in 7 areas (emergency management, budget and funding, physical infrastructure, communications infrastructure, preventative measures, emergency preparedness, and strategies for mental/behavioral health issues. The evaluation will be scored on a three-point scale, where 1= "Standard is not met at all or in any appreciable manner," 2="Partially meets standard," and 3="Fully meets standard." The Security Department will also review comments from areas that are rated as a 2 ("Partially meets standards") or 1 ("Standard is not met at all or in any appreciable manner") to determine areas for improvement.</p>		<p>(communication with college community to report suspicious behavior, safety and security education programs); strategies for behavioral/mental health issues (mental health counseling resources for students, awareness programs to encourage students to seek help for self or fellow student); and communications infrastructure (ability to text message and telephone students and employees during an emergency).</p> <p>Two of three evaluators also rated Markham Campus and Smith Campus as "not fully meeting standard" in two areas, therefore the achievement target was not met. The areas that received less than a rating of "fully meets standard" were as follows: strategies for behavioral/mental health issues (mental health counseling resources for students, awareness programs to encourage students to seek help for self or fellow student); and</p>	<p>Campus in the past. This information will also be published in the Student Handbook.</p> <p>The Security Department is developing a 30 minute presentation for New Learner Orientation classes, in collaboration with the VP Student Development. This presentation will provide information on safety and security tips, community mental health counseling resources, and reporting suspicious behavior. The security department has formally requested that the College invest in a Student Assistance Program for mental health issues (similar to the employee assistance program).</p> <p>The Security Department has worked with Purchasing Department to issue an RFP for an emergency notification system to alert students and employees using text and telephone communication.</p>
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			<p>communications infrastructure (ability to text message and telephone students and employees during an emergency).</p> <p>Target NOT MET for strategies for behavioral/mental health issues, or communications infrastructure for Smith Campus, Berton Center, and Markham Campus.</p> <p>Detailed findings are provided in an attached chart.</p> <p>Target also NOT MET for preventative measures for Berton Center.</p>	
	<p>Measure 2</p> <p>A random sample of students at each campus and center were asked to participate in focus groups about safety and security. The focus groups, led by employees who are not employed in the Security Department, were designed to gather information regarding student and employee perceptions of: 1) campus safety and security, 2) physical condition of buildings (locks, windows, doors, fire equipment, lighting), 3) visibility of emergency communication equipment (outdoor communication kiosks</p>	<p>Achievement Target 2</p> <p>Because focus groups yield qualitative data, no specific target is set. However, the Security Department does expect focus group participants will indicate that they are generally satisfied with each of the 6 topics discussed in the focus groups.</p>	<p>Findings 2</p> <p>Student focus group participants felt somewhat safe and secure on campus. About one-third of student focus group participants thought that the visibility of emergency communication equipment was not adequate. Approximately two-thirds of students wanted the College to hire more security officers and provide escorts to the parking lot in the evenings. Focus group participants agreed that security</p>	<p>Action Plan 2</p> <p>The Security Department did not meet the target for a safe and secure campus, an outcome of utmost concern to the department. The Security Department has received approval to reallocate existing resources (move some officers from current location to a busier location based on number of incidents per campus), increase bicycle and golf cart patrols in the evenings, hire part-time student security escorts in the evening, and</p>

	with direct link to security), 4) visibility of Security officers, 5) visibility of security information and tips, and 6) level of College's general emphasis on campus security.		<p>information and tips were generally visible About half of the student focus group participants thought that College emphasizes campus security.</p> <p>Detailed findings are provided in an attached chart.</p> <p>Target NOT MET for safe and secure campus and College emphasis on campus security.</p>	<p>work with Student Government Association and Faculty Senate to develop an awareness campaign about the student security escorts. This service will increase campus security, increase student perceptions of campus safety and security, and at a feasible cost, increase the College's emphasis on campus security. After implementation of these new services and reallocation of resources, the College will conduct more focus groups with students.</p> <p>In addition, the Security Department will conduct focus groups with employees to gather their perceptions and suggestions.</p>
<p>Outcome 3:</p> <p>The Security Department web site provides comprehensive, useful information in a user-friendly manner to the College community.</p>	<p>Measure 1 (Outcome 3)</p> <p>A random sample of 100 students and 30 employees will be asked to complete an online quiz of security information published on the website.</p>	<p>Achievement Target 1</p> <p>85% (85) of students and 85% (25) of employees will be accurately answer the 15 question quiz.</p>	<p>Findings 1</p> <p>74% (74) of students and 89% (27) of employees could find the crime statistic for the number of reports of stolen property at the College. 93% (93) of Students and 98% (29) of employees could find the telephone number</p>	<p>Action Plan 1</p> <p>The Security Department has posted an explanation of all of the key information provided on the site, and a primer for understanding crime statistics.</p> <p>The Security Department developed a web</p>

			<p>of the security department 37% (37) of students and 49% (15) of employees could find the information about parking permits.</p> <p>Detailed findings are provided in an attached chart. Target NOT MET for students' ability to answer questions about crime statistics, and parking information.</p> <p>Target also NOT MET for employee's ability to answer questions about parking information.</p>	<p>page for Parking Permits, Reserved Parking Permits, Temporary Special Access Parking Passes, and Parking Ticket appeal process and forms.</p>
	<p>Measure 2 (Outcome 3)</p> <p>The Security Department will conduct a web site analysis of the Security web sites of all 28 public colleges in Florida and develop a checklist of best practices regarding 1) types of information provided, 2) accessibility of information, and 3) comprehensive nature of website. This checklist of best practices will be developed into a rubric.</p>	<p>Achievement Target 2</p> <p>The Security Department's web site will meet or exceed the best practices of peer institutions. This assessment will be based upon the rubric developed for best practices.</p>	<p>Findings 2</p> <p>The College did met the best practices for peer institutions for types of information provided (parking permit information was not provided). The Security department website did not meet the best practices of peer institutions for accessibility of information.</p> <p>Detailed findings are provided in an attached chart.</p> <p>Target NOT MET for accessibility Target MET for types of information</p>	<p>Action Plan 2</p> <p>The Security Department met with the Marketing Department to determine how to make the web site more accessible and create a more user-friendly approach. A Frequently Asked Questions (FAQ) for each major type of service has been added. Clear Headers of different sections of information were posted. A glossary of terms is under development.</p>

Outcome 4 (not assessed this cycle) The Security Department accurately and professionally issues parking permits based on status of customer (employee, faculty, staff) at each campus and center.	Measure 1 (Outcome 4)	Achievement Target 1	Findings 1	Action Plan 1
	Measure 2 (Outcome 4)	Achievement Target 2	Findings 2	Action Plan 2
Outcome 5 (not assessed this cycle) The Security Department adjudicates parking ticket appeals in a timeline manner	Measure 1 (Outcome 5)	Achievement Target 1	Findings 1	Action Plan 1
	Measure 2 (Outcome 5)	Achievement Target 2	Findings 2	Action Plan 2
Outcome 6 (not assessed this cycle) The Security Department provides effective and thorough written and verbal reports to the Discipline Hearing Committee.	Measure 1 (Outcome 6)	Achievement Target 1	Findings 1	Action Plan 1
	Measure 2 (Outcome 6)	Achievement Target 2	Findings 2	Action Plan 2

Note: additional outcomes can be added in WEAVE

Analysis Questions (due September 27, 2013)

1. Describe up to three of the most significant/important improvements in your program or unit. What primary changes are you making to improve student learning as a result of the assessment findings?

Received approval to hire an additional security officer at Smith Campus and reallocate some existing officers to areas of higher need, hiring student security escorts for evenings. Developed safety and security presentation for New Learner Orientation.

2. How do your assessment findings differ by the program's instructional delivery method ("face-to-face," hybrid, distance education) or by location (if program is offered at more than one campus or center)?

3. How have assessment findings been disseminated and discussed with the Program Advisory Committee? Describe involvement of Advisory Committee in reviewing curriculum changes prior to submission to Curriculum Committee.

<p>4. <i>Who was involved in the development and implementation of the program assessment plan?</i></p> <p>Members of the Security Department at each campus and center and the supervising administrator of those units.</p>
<p>5. <i>In assessment plan development and implementation, what process did you use to ensure sampling of all campuses/centers, high school dual enrollment, distance education, and military education, if applicable to program?</i></p> <p>Included students and employees from all college-owned campuses/centers in our data collection. Analyzed data by campus/center locations.</p>
<p>Annual Report Items <i>(due September 27, 2013)</i></p>
<p>1. <i>Changes to the program's assessment process?</i></p>
<p>2. <i>Challenges in implementation of program assessment plan</i></p>

****Please note that this worksheet represents only the major sections within WEAVE. The program will complete additional information, such as timeline for implementation of action plan, persons responsible for implementation of action plan, etc. when using WEAVE.***

^The outcomes, measures, data and action plan in all this model is purely for demonstration purposes and should not be construed as an actual plan or result. The information contained herein is purely inventive, not factual, and should not be utilized in the formulation of program, department or unit plans and reports.

Appendix “C”

Florida State College at Jacksonville

Detailed Assessment Report

2012-2013 Sample Model - Registrar

(Includes those Action Plans with Budget Amounts marked One-Time, Recurring, No Request.)

Mission / Purpose

The Office of the Registrar is dedicated to providing the highest quality of service to students, faculty, administrators and staff. This office assists academic units in ensuring compliance with policies and procedures pertaining to the implementation of all academic programs. The Registrar's Office has the responsibility to maintain timely and accurate records of the academic progress and accomplishments of its students, while maintaining the privacy and security of those records. The Office of the Registrar seeks to be an exemplary model of service and execution of duty through emphasizing collaborative efforts, integrated services, efficient communication processes and student success.

Other Outcomes/Objectives, with Any Associations and Related Measures, Targets, Findings, and Action Plans

O/O 1:Processing Transcripts

The Registrar's Office processes transcripts in a timely manner.

Relevant Associations:

College Goals Associations:

1.2 College-wide Goal Two: Optimize access to and participation in College programs and services

Related Measures:

M 1:Log of Transcript Requests

During the months of August, January, and May, a log will be kept of all transcript requests received via mail, identifying the date received and the date mailed. Any requests not processed within two business days will be analyzed to see if response time could have been improved.

Source of Evidence: Efficiency

Target:

90% of requests for transcripts received via mail will be processed within two business days.

Findings (2011-2012) - Target: Partially Met

The log indicated the following number of transcripts were processed within two business days: 56 out of 58 (96%) - August; 71 out of 96 (74%) - January; 107 of 118 (91%) - May. The target was NOT MET for January. This was because many requests for transcripts were made over the holidays when the staff was not working. Also, registration occurs in early January which requires staff attention, taking time away from transcript processing. Details are provided in the attached chart.

Related Action Plans (by Established cycle, then alpha):

For full information, see the *Details of Action Plans* section of this report.

Assistance with transcripts

Established in Cycle: 2011-2012

The results were discussed during a staff meeting where it was decided that one staff member would go into the office during the...

M 2: Transcript Requests via Web

The Registrar's Office has implemented a new system whereby transcripts may be requested over the web. During the months of August, January, and May, a log will be kept of all transcript requests received via the web, identifying the date received and the date mailed. Any requests not processed within two business days will be analyzed to see if response time could have been improved.

Source of Evidence: Efficiency

Target:

90% of requests for transcripts received via the web will be processed within two business days.

Findings (2011-2012) - Target: Partially Met

The log indicated the following number of transcripts were processed within two business days: 23 out of 25 (64%) - August; 39 out of 51 (76%) - January; 68 of 75 (91%) - May. Details are provided in the attached chart. Target was NOT met for August and January.

Related Action Plans (by Established cycle, then alpha):

For full information, see the *Details of Action Plans* section of this report.

Enhancements to Transcripts Web From

Established in Cycle: 2011-2012

The web requests that were not processed within two days were examined. This analysis revealed that the web form did not require...

O/O 2: Compliance with FERPA Regulations

The Registrar's Office is consistently in compliance with FERPA regulations.

Relevant Associations:

College Goals Associations:

1.3 College-wide Goal Three: Ensure that every student has an extraordinarily positive experience in every engagement with the College

1.5 College-wide Goal Five: Enhance institutional performance and accountability and investment capital

Related Measures:

M 3: Knowledge of FERPA

In October, a quiz will be given to all 18 staff members in the Registrar's Office to assess their knowledge of FERPA (Family Educational Rights and Privacy Act) regulations. The number of correct answers to each quiz question will be compiled and analyzed across all participating staff members.

Source of Evidence: Academic direct measure of learning - other

Target:

At least 17 of 18 responses will be correct for each question.

Findings (2011-2012) - Target: Partially Met

The item analysis of the FERPA quiz results (see attached spreadsheet) indicated that at least 17 out of 18 responses were correct for all 15 questions except for question #14 which asked about the possibility of civil litigation against an individual for alleged FERPA violations. Target NOT MET. Details are provided in the attached chart.

Related Action Plans (by Established cycle, then alpha):

For full information, see the *Details of Action Plans* section of this report.

Follow up at staff meeting regarding FERPA awareness

Established in Cycle: 2011-2012

At the next staff meeting following the quiz, the Registrar reviewed the results. She discussed those questions where any incorr...

M 4: Secret Shopper FERPA scenarios

The Registrar will design a series of "secret shopper" FERPA scenarios, each of which will be enacted by a student, faculty or staff member, in which they make a specific FERPA-related request of the Registrar's Office staff to ascertain that they are following FERPA guidelines. The "secret shopper" will document the results and will

submit them to the Registrar.

Source of Evidence: Government standards

Target:

Out of ten scenarios, no more than one error will occur in the administration of FERPA regulations.

Findings (2011-2012) - Target: Met

The Registrar's staff handled all FERPA scenarios correctly except for one. The parent of a current student asked whether his daughter was enrolled part-time or full-time and what her declared major was. The staff member did not release that information, even though it is considered "directory information" by the College and thus public information. Target MET. Details are provided in the attached chart.

Related Action Plans (by Established cycle, then alpha):

For full information, see the *Details of Action Plans* section of this report.

Enhancing College's FERPA Awareness

Established in Cycle: 2011-2012

The Registrar documented each situational scenario and created another quiz to administer to the staff during a staff meeting. E...

O/O 3:Processing Grade Changes

The Registrar's Office effectively processes grade changes.

Relevant Associations:

College Goals Associations:

1.2 College-wide Goal Two: Optimize access to and participation in College programs and services

Related Measures:

M 5:Audit of Fall and Spring 2009-10 Grad Changes

During the summer, the Registrar's Office will conduct an audit of all Fall and Spring 2009-10 grade changes to determine whether the proper procedure was followed. The following items will be checked for each grade change: 1. Instructor electronic signature 2.Program manager or associate dean electronic signature 3.Dean's electronic signature 4.Student's electronic signature 5.Reason for change of grade 6.Supporting documentation if appropriate In addition, the audit will check to see that grade changes were made within 12 months of the end of the term in which the course was offered. A final check will be made to ensure that one staff member processed the grade change and another verified it.

Source of Evidence: Administrative measure - other

Target:

The audit will reveal no more than two errors of any kind in the grade change process.

Findings (2011-2012) - Target: Met

A total of 27 grade changes were examined. In all cases, the electronic files contained all the proper documentation and signatures. There was one instance of a Fall 2009 grade being changed in the spring of 2010. However, there were extenuating circumstances in that particular case that justified an exception which was approved in writing by the Provost. Finally, all 27 grade changes had been processed by one staff member and verified by another to ensure integrity of the process. Target MET. Details are provided in the attached chart.

Related Action Plans (by Established cycle, then alpha):

For full information, see the *Details of Action Plans* section of this report.

Targe Met for Audit of 2009-10 Fall and Spring Grade Changes

Established in Cycle: 2011-2012

Since the target was met and the Registrar's Office sees little opportunity for improvement to this process, another outcome wil...

M 6:Audit for "I" Grades

Incomplete ("I") grades must include an approved "I" Grade contract. An audit of "I" grades for the fall semester will be conducted during the following spring term. For any fall grades that remain an "I," an audit will be conducted to ensure the approved "I" Grade contract was submitted by the instructor.

Source of Evidence: Administrative measure - other

Target:

No more than 5 "I" grades from the fall semester will remain without an approved "I" Grade contract authorizing the "I" grade to remain on the transcript.

Findings (2011-2012) - Target: Met

The audit conducted during the spring term revealed that 17 "I" grades earned during the previous fall remained on the transcript. All but one of these had the approved "I" Grade Contract from the instructor. Details are provided in the attached chart.

Related Action Plans (by Established cycle, then alpha):

For full information, see the *Details of Action Plans* section of this report.

Target Met for Audit of "I" Grades

Established in Cycle: 2011-2012

Since the target was met and the Registrar's Office sees little opportunity for improvement to this process, another outcome wil...

O/O 4:Accurate Student Records

The Registrar's Office maintains accurate student records.

Relevant Associations:

College Goals Associations:

1.5 College-wide Goal Five: Enhance institutional performance and accountability and investment capital

Related Measures:

M 7:Will be Assessed in 2012

Not Being Assessed This Cycle

Source of Evidence: Administrative measure - other

Target:

Not Being Assessed this Cycle

Findings (2011-2012) - Target: Not Reported This Cycle

Not Being Assessed this Cycle

O/O 5:Student Appeals for Transfer of College Credit

The Registrar's Office efficiently processes student appeals for transfer of college credit (incoming transfer student's credit was not accepted at our College).

Relevant Associations:

College Goals Associations:

1.2 College-wide Goal Two: Optimize access to and participation in College programs and services

Related Measures:

M 8:Will be Assessed in 2012

Not Being Assessed This Cycle

Source of Evidence: Administrative measure - other

Target:

Not Being Assessed this Cycle

Findings (2011-2012) - Target: Not Reported This Cycle

Not Being Assessed this Cycle

O/O 6:Course Encoding Procedures

The Registrar's Office effectively educates college employees regarding course encoding procedures.

Relevant Associations:

College Goals Associations:

1.2 College-wide Goal Two: Optimize access to and participation in College programs and services

1.5 College-wide Goal Five: Enhance institutional performance and accountability and investment capital

Related Measures:

M 9:Will be Assessed in 2012

Not Being Assessed This Cycle

Source of Evidence: Administrative measure - other

Target:

Not Being Assessed this Cycle

Findings (2011-2012) - Target: Not Reported This Cycle

Not Being Assessed this Cycle

Details of Action Plans for This Cycle (by Established cycle, then alpha)

Assistance with transcripts

The results were discussed during a staff meeting where it was decided that one staff member would go into the office during the last week of December to process transcript requests that had arrived. Also, funds have been budgeted for a student worker to assist with transcripts during the first two weeks of January.

Established in Cycle: 2011-2012

Implementation Status: In-Progress

Priority: High

Relationships (Measure | Outcome/Objective):

Measure: Log of Transcript Requests | **Outcome/Objective:** Processing Transcripts

Implementation Description: Registrar's staff determined that the College should not close the Registrar's office completely during Winter Break. Processing transcripts in a timely manner for students is too important. One staff member volunteered to come in to work during the last week of December if he could have the third week of December off from work instead.

Projected Completion Date: 01/20/2011

Responsible Person/Group: Registrar and staff

Additional Resources Requested: hire a student worker

Budget Amount Requested: \$500.00 (recurring)

Enhancements to Transcripts Web From

The web requests that were not processed within two days were examined. This analysis revealed that the web form did not require certain fields to be completed, resulting in incomplete information which had to be requested via an email. Often it took several days for the requestor to respond with the additional information, thus delaying the transcript request. All key fields have now been designated as "required" on the web form and processing time has been improved. The issue with timeliness in January will be resolved by the actions described above in action plan 1.

Established in Cycle: 2011-2012

Implementation Status: In-Progress

Priority: High

Relationships (Measure | Outcome/Objective):

Measure: Transcript Requests via Web | **Outcome/Objective:** Processing Transcripts

Implementation Description: Met with IT. The IT programmer who created the web-based transcript request form has updated the form to 'require' responses.

Projected Completion Date: 01/20/2011

Responsible Person/Group: Registrar and team

Additional Resources Requested: IT assistance to modify the web-based transcript form; hire a part-time student worker to assist with transcript requests

Budget Amount Requested: \$500.00 (recurring)

Enhancing College's FERPA Awareness

The Registrar documented each situational scenario and created another quiz to administer to the staff during a staff meeting. Each staff member selected a response and then each situation was discussed and the correct response was identified. These scenarios have been incorporated into the College's FERPA guidelines to illustrate the correct practice of the law, and are distributed to all current and new staff members. As a result of the assessment results and action plan, the Registrar also decided to provide a workshop for deans, managers, and student services staff to educate other employees about FERPA guidelines.

Established in Cycle: 2011-2012
Implementation Status: Finished
Priority: High

Relationships (Measure | Outcome/Objective):

Measure: Secret Shopper FERPA scenarios | **Outcome/Objective:** Compliance with FERPA Regulations

Implementation Description: Registrar designed quiz. Registrar and team developed a presentation for other departments. This workshop was first pilot-tested with the deans before it was provided to the student services staff.

Projected Completion Date: 10/31/2010

Responsible Person/Group: Registrar

Follow up at staff meeting regarding FERPA awareness

At the next staff meeting following the quiz, the Registrar reviewed the results. She discussed those questions where any incorrect responses were submitted, and emphasized the possibility of civil litigation against a staff member for FERPA violations.

Established in Cycle: 2011-2012
Implementation Status: Finished
Priority: High

Relationships (Measure | Outcome/Objective):

Measure: Knowledge of FERPA | **Outcome/Objective:** Compliance with FERPA Regulations

Projected Completion Date: 11/10/2010

Responsible Person/Group: Registrar

Additional Resources Requested: none

Target Met for Audit of 2009-10 Fall and Spring Grade Changes

Since the target was met and the Registrar's Office sees little opportunity for improvement to this process, another outcome will be selected for the next assessment cycle.

Established in Cycle: 2011-2012
Implementation Status: Finished
Priority: High

Relationships (Measure | Outcome/Objective):

Measure: Audit of Fall and Spring 2009-10 Grad Changes | **Outcome/Objective:** Processing Grade Changes

Target Met for Audit of "I" Grades

Since the target was met and the Registrar's Office sees little opportunity for improvement to this process, another outcome will be selected for the next assessment cycle.

Established in Cycle: 2011-2012

Implementation Status: Finished

Priority: High

Relationships (Measure | Outcome/Objective):

Measure: Audit for "I" Grades | **Outcome/Objective:** Processing Grade Changes

Analysis Questions and Analysis Answers

1. (ALL) Describe up to three of the most significant/important improvements in your program or unit. What primary changes are you making to improve student learning (in academic programs and educational support units) or improve achievement of unit outcomes (for non-academic programs and educational support units) as a result of the findings?

Improvements resulting from assessment data include: ☐ New procedures to decrease transcript processing time ☐ Increased adherence to FERPA guidelines ☐ Assured compliance with grade change process

2. (ACAD and EDUC SUPPORT ONLY) How do your outcome assessment findings differ by modality ("face-to-face," hybrid, and distance education program delivery) and by location (if program is offered on more than one campus or center)? Please discuss the assessment data results and action plan college-wide and per campus, center, distance education, and military education, if applicable.

Not applicable for the Registrar's office.

3. (ACAD) How have results been disseminated and discussed with advisory committee? Were all curriculum changes discussed with the Program Advisory Committee before submission to the Curriculum Committee?

Not Applicable

4. (ALL) Who was involved in the development of the plan/report?

The entire staff of the Registrar's Office was involved in the design of the assessment plan, in the discussion of results, and in the identification of the resulting action plans.

5. (ACAD and EDUC SUPPORT) In assessment plan development and implementation, what process did you use to ensure sampling of all campuses, centers, high school dual enrollment, distance education, and military education, if applicable to your program?

Not applicable

Appendix “D”

Assessment Plan Sampling for Non-Academic Units and Academic and Student Support Services (student success units):

The designated Effectiveness Process Facilitators are responsible for selecting the appropriate sample for their program. The list of these facilitators can be found by clicking on links embedded in either of these web pages: <http://www.fscj.edu/district/institutional-effectiveness/effectiveness-collaboratives.php> or <http://www.fscj.edu/district/institutional-effectiveness/process-timeline.php>

We recommend the following guidelines to assist Effectiveness Process Facilitators in their Institutional Effectiveness assessment activities. When designing your assessment measures, please collect the data in a manageable and practical manner. The most important tip is to collect data that will provide evidence that is relevant to the specific outcome. Please also include a representative sample that includes all campus locations/centers, off-site locations, and distance learning, as appropriate.

If possible, collect the requested data from every student, employee, community member, or client for a specific time period (ie. If you are conducting a survey of student and employee satisfaction with the cafeteria, consider providing the survey to every student or employee who uses the cafeteria in a given period of time. If you are conducting a workshop, consider providing the workshop evaluation form to each person who participates in the workshop.)

If it is not practical to collect data from every individual who uses your department’s services, consider these questions:

- What is the population or group of individuals who can provide the information that you need to adequately assess the measure?
- What information do you expect these individuals to provide?
- Is there a minimum number of responses that you need to give you adequate evidence?
- What resources do you have to administer the survey, quiz, or other assessment measure? Consider the cost and time involved.
- Will you be printing and mailing forms or surveys? Will you be sending an email with a web link to a survey or other form at no cost?
- What time period would provide you the most useful information?
- Can you combine your survey or tool with another department who needs to survey or contact the same group of individuals?

If you determine that you need a more ‘statistically sound or correct’ sample size for your assessment measure, please contact the [Office of Student Analytics and Research.](#)

Appendix “E”

Rubric for Institutional Effectiveness Assessment PLANS For Non-Academic Units

Program/Unit: _____ Assessment Year: _____

Date reviewed by Institutional Effectiveness Committee _____

PLAN				
MISSION PURPOSE AND GOALS	Exemplary 3	Progressing 2	Developing 1	Not Provided 0
Program/Mission Statement				Program/Mission Statement is not provided
Functions	Unit Mission Statement clearly states primary functions of the program	Unit Mission Statement infers primary functions of the program	Unit Mission Statement does not state primary functions of the program	
Population Served	Unit Mission Statement clearly describes the population served.	Unit Mission Statement somewhat addresses population served	Unit Mission Statement does not acknowledge population served	
Link to College Goals	Unit Mission Statement is clearly linked to the College Goals, and supports the College Mission Statement	Unit Mission Statement is somewhat linked to the College Goals, and attempts to support the College Mission Statement	Unit Mission Statement is not linked to the College Goals, and does not support the College Mission Statement	

Reviewer Comments:

OUTCOMES/ OBJECTIVES	Exemplary 3	Progressing 2	Developing 1	Not Provided 0
Outcome #1				Outcome #1 is not provided
Measurability	Outcome is directly measurable (e.g., is operationally defined)		Outcome is not directly measurable (e.g., is not operationally defined)	
Actionable	Outcome is stated in terms of primary current service, process, or instruction	Outcome is vaguely stated and/or describes a minor current service, process or instruction	Outcome is not stated in terms of a current service, process or instruction	
Specificity	Outcome states a singular action or outcome and is detailed enough to describe intended result	Outcome is described in vague terms and insufficiently describes intended result	It is unclear what is being measured, or what the intended Outcome will be	
Relevance	Achievement of Outcome will lead to meaningful improvement in unit performance	Achievement of Outcome is unlikely to lead to meaningful improvement in unit performance	Achievement of Outcome will not lead to improved unit performance	
Link to College Goals	Outcome is directly associated with or linked to one of more of the College goals		Outcome is not directly associated with nor linked to one of more of the College goals	

Reviewer Comments for Outcome #1:

PLAN				
ASSESSMENT MEASURES / ACHIEVEMENT TARGETS	Exemplary 3	Progressing 2	Developing 1	Not Provided 0
Measures/Targets for Outcome #1				Assessment measure is not described or reported
Number/Quality of Direct Measures	Outcome is assessed by two or more direct measures (indirect measures may be used as a supplement) which measure the unit's services, processes or instruction	Outcome is assessed by only one direct measure (and may or may not include indirect measures) which measures the unit's services, processes or instruction	Assessment measure uses only inappropriate measures which do not measure the unit's services, processes or instruction	
Implementation	Statement of measure(s) directly describes who will implement measure, when data collection will occur, what data will be collected and how data will be collected	Statement of measure(s) directly describes some but not all of the <i>who</i> , <i>when</i> , <i>what</i> and <i>how</i> of the data collection	Statement of measure(s) describes none of the <i>who</i> , <i>when</i> , <i>what</i> and <i>how</i> of the data collection	
Relationship to Outcome	Measure(s) addresses all aspects of the associated Outcome	Measure(s) addresses some aspects of the associated Outcome	Measure(s) does not address any aspects of the associated Outcome	
Actionable	Measure(s) will clearly yield actionable data	It is unclear whether measure(s) will yield actionable data	Measure(s) will not yield actionable data	
Relevance of Target	Achievement target is directly related to specified measure	Achievement target is indirectly related to specified measure	Achievement target is not related to specified measure	Achievement target is not reported

Quality of Target	Achievement target is specific measurable (e.g., numeric)	Achievement target is vague and it is unclear how it would be measured	Achievement target is not specific nor measureable (e.g., not numeric)	
Representative targets	The program/discipline's achievement targets are designed to indicate the achievement level of student performance per location and delivery method, and the entire sample of students		The program/discipline's achievement targets are not designed to indicate the achievement level of student performance per location and delivery method, and the entire sample of students	

Reviewer Comments for Measures/Targets for Outcome #1:

OUTCOMES/ OBJECTIVES	Exemplary 3	Progressing 2	Developing 1	Not Provided 0
Outcome #2				Outcome #2 is not provided
Measurability	Outcome is directly measurable (e.g., is operationally defined)		Outcome is not directly measurable (e.g., is not operationally defined)	
Actionable	Outcome is stated in terms of a primary current service, process, or instruction	Outcome is vaguely stated and/or describes a minor current service, process or instruction	Outcome is not stated in terms of a primary current service, process, or instruction	
Specificity	Outcome states a singular action or outcome and is detailed enough to describe intended result	Outcome is described in vague terms and insufficiently describes intended result	It is unclear what is being measured, or what the intended Outcome will be	
Relevance	Achievement of Outcome will lead to meaningful improvement in unit performance	Achievement of Outcome is unlikely to lead to meaningful improvement in unit performance	Achievement of Outcome will not lead to improved unit performance	
Link to College Goals	Outcome is directly associated with or linked to one of more of the College goals		Outcome is not directly associated with nor linked to one of more of the College goals	

Reviewer Comments for Outcome #2:

PLAN				
ASSESSMENT MEASURES / ACHIEVEMENT TARGETS	Exemplary 3	Progressing 2	Developing 1	Not Provided 0
Measures/Targets for Outcome #2				Assessment measure is not described or reported
Number/Quality of Direct Measures	Outcome is assessed by two or more direct measures (indirect measures may be used as a supplement) which measure the unit's services, processes or instruction	Outcome is assessed by only one direct measure (and may or may not include indirect measures) which measure the unit's services, processes or instruction	Assessment measure uses only inappropriate measures which do not measure the unit's services, processes or instruction	
Implementation	Statement of measure(s) directly describes who will implement measure, when data collection will occur, what data will be collected and how data will be collected	Statement of measure(s) directly describes some but not all of the <i>who</i> , <i>when</i> , <i>what</i> and <i>how</i> of the data collection	Statement of measure(s) describes none of the <i>who</i> , <i>when</i> , <i>what</i> and <i>how</i> of the data collection	
Relationship to Outcome	Measure(s) addresses all aspects of the associated Outcome	Measure(s) addresses some aspects of the associated Outcome	Measure(s) does not address any aspects of the associated Outcome	
Actionable	Measure(s) will clearly yield actionable data	It is unclear whether measure(s) will yield actionable data	Measure(s) will not yield actionable data	
Relevance of Target	Achievement target is directly related to specified measure	Achievement target is indirectly related to specified measure	Achievement target is not related to specified measure	Achievement target is not reported
Quality of Target	Achievement target is specific measurable (e.g., numeric)	Achievement target is vague and it is unclear how it would be measured	Achievement target is not specific nor measurable (e.g., not numeric)	

Representative targets	The program/discipline's achievement targets are designed to indicate the achievement level of student performance per location and delivery method, and the entire sample of students		The program/discipline's achievement targets are not designed to indicate the achievement level of student performance per location and delivery method, and the entire sample of students	

Reviewer Comments for Measures/Targets for Outcome #2:

OUTCOMES/ OBJECTIVES	Exemplary 3	Progressing 2	Developing 1	Not Provided 0
Outcome #3				Outcome #3 is not provided
Measurability	Outcome is directly measurable (e.g., is operationally defined)		Outcome is not directly measurable (e.g., is not operationally defined)	
Actionable	Outcome is stated in terms of a primary current service, process, or instruction	Outcome is vaguely stated and/or describes a minor current service, process or instruction	Outcome is not stated in terms of a primary current service, process, or instruction	
Specificity	Outcome states a singular action or outcome and is detailed enough to describe intended result	Outcome is described in vague terms and insufficiently describes intended result	It is unclear what is being measured, or what the intended Outcome will be	
Relevance	Achievement of Outcome will lead to meaningful improvement in unit performance	Achievement of Outcome is unlikely to lead to meaningful improvement in unit performance	Achievement of Outcome will not lead to improved unit performance	
Link to College Goals	Outcome is directly associated with or linked to one of more of the College goals		Outcome is not directly associated with nor linked to one of more of the College goals	

Reviewer Comments for Outcome #3:

PLAN

ASSESSMENT MEASURES / ACHIEVEMENT TARGETS	Exemplary 3	Progressing 2	Developing 1	Not Provided 0
Measures/Targets for Outcome #3				Assessment measure is not described or reported
Number/Quality of Direct Measures	Outcome is assessed by two or more direct measures (indirect measures may be used as a supplement) which measure the unit's services, processes or instruction	Outcome is assessed by only one direct measure (and may or may not include indirect measures) which measure the unit's services, processes or instruction	Assessment measure uses only inappropriate measures which do not measure the unit's services, processes or instruction	
Implementation	Statement of measure(s) directly describes who will implement measure, when data collection will occur, what data will be collected and how data will be collected and analyzed to determine areas for improvement	Statement of measure(s) directly describes some but not all of the <i>who</i> , <i>when</i> , <i>what</i> and <i>how</i> of the data collection	Statement of measure(s) describes none of the <i>who</i> , <i>when</i> , <i>what</i> and <i>how</i> of the data collection	
Relationship to Outcome	Measure(s) addresses all aspects of the associated Outcome	Measure(s) addresses some aspects of the associated Outcome	Measure(s) does not address any aspects of the associated Outcome	
Actionable	Measure(s) will clearly yield actionable data that can be used to determine areas for improvement	It is unclear whether measure(s) will yield actionable data that can be used to determine areas for improvement	Measure(s) will not yield actionable data	
Relevance of Target	Achievement target is directly related to specified measure	Achievement target is indirectly related to specified measure	Achievement target is not related to specified measure	Achievement target is not reported

Quality of Target	Achievement target is specific measurable (e.g., numeric)	Achievement target is vague and it is unclear how it would be measured	Achievement target is not specific nor measureable (e.g., not numeric)	
Representative targets	The program/discipline's achievement targets are designed to indicate the achievement level of student performance per location and delivery method, and the entire sample of students		The program/discipline's achievement targets are not designed to indicate the achievement level of student performance per location and delivery method, and the entire sample of students	

Reviewer Comments for Measures/Targets for Outcome #3:

PLAN			
Overall	Exemplary 3	Progressing 2	Developing 1
Mission	The program/discipline faculty has demonstrated clearly that the mission statement states primary functions, population served, linkage to the College Goals and support of the College Mission Statement.	The program/discipline faculty vaguely presents the mission statement with only some primary functions and references to population served; attempts to link the mission statement to the College Goals and support of the College Mission Statement but does so unclearly	The program/discipline faculty has not developed an adequate mission statement.
Outcomes	The unit has demonstrated it has established Outcomes that are distinct, specific and focused, and will lead to improved unit performance.	The unit has demonstrated it has established Outcomes which are somewhat distinct and focused, and may lead to some improvement in unit performance	The unit has not formulated Outcomes which reflect primary current services, processes or instruction; achievement of the Outcomes will not lead to improved unit performance.
Quality of Assessment Measures	Assessment measures appropriately address all aspects of the associated Outcomes and describe the who, what, when and how of the data collection process	Assessment measures address only some of the aspects of associated Outcomes and describe only some, but not all, of the who, what, when and how of the data collection process	Assessment measures do not appropriately address all aspects of the associated Outcomes nor do they adequately describe the who, what, when and how of the data collection process
Number of Measures	At least three outcomes and at least two direct assessments per outcome are stated.	At least two outcomes and one direct assessment per outcome are stated.	Only one outcome and/or no direct assessments measures for outcomes are stated.

Reviewer Overall Comments regarding Plan, Suggestions for Improvement, and Next Steps for Program/Discipline

Appendix “F”

Florida State College at Jacksonville

As of: 7/10/2013 10:57 AM EST

2012-2013 Improvements Achieved Report (SAMPLE)

This report shows Improvements Achieved in Outcomes/Objectives, which repeat when an Outcome/Objective is paired with more than one Measure. The maximum character length is 480 characters per cell; therefore some fields have ellipses (...). The Detailed Assessment and Assessment Data by Section Reports show additional details.

<u>School of Education</u>			Achievement Status Details for Measure - Outcome/Objective Pairs:		
			Met (3)		
			Partially Met (1)		
Outcome/Objective	Measure	Target	Finding	Improvements Achieved	Action Plan
O 1: Graduates (or program completers) of the School of Education will be able to demonstrate the ability to master the required Florida teacher competencies.	M 1: Students in EPI program will take and pass the three Florida Teacher Certification Examinations (FTCEs). A random sampling of students will be selected. A panel of faculty will assess the certification examinations. Scores will be analyzed for each exam – Subject Area, Professional Education, and General Knowledge.	100% of students will have a passing score on each exam.	Status: Met 100% of the EPI students that submitted exam scores during this reporting cycle passed their teacher certification exams.	Students were provided with opportunities to attend test prep workshops hosted by FSCJ education staff 2 times during the 2012-2013 academic year.	----

<u>School of Education</u>			Achievement Status Details for Measure - Outcome/Objective Pairs:		
			Met (3) Partially Met (1)		
Outcome/Objective	Measure	Target	Finding	Improvements Achieved	Action Plan
O 1: Graduates (or program completers) of the School of Education will be able to demonstrate the ability to master the required Florida teacher competencies.	M 2: Students in the BS ECE program will take and pass the three Florida Teacher Certification Examinations (FTCEs). A random sampling of students will be selected. A panel of faculty will assess the certification examinations. Scores will be analyzed for each exam – Subject Area, Professional Education, and General Knowledge.	100% of students will have a passing score on each exam.	Status: Partially Met 90% of the students received a passing score on their teacher certification exams during this reporting cycle. Fall 2012: 80% and Spring 2013: 100%	Students were provided with opportunities to attend test prep workshops hosted by FSCJ education staff 2 times during the 2012-2013 academic year.	----
O 2: Students in the School of Education will receive responses within 24-48 business hours and have their advising concerns addressed or referred to the appropriate individuals.	M 3: Students will complete a satisfaction survey (Likert scale levels 1-5) upon completion of their advising session. A random sampling of students will be selected. A panel of faculty and administrators will assess the survey.	80% of students will indicate a score of 3 or higher in each of the components.	Status: Met 95% of students indicated positive ratings in each component of the survey.	Education staff utilized a log to ensure that all telephone calls were returned within a 24-48 hour time frame.	----

<u>School of Education</u>			Achievement Status Details for Measure - Outcome/Objective Pairs:		
			Met (3) Partially Met (1)		
Outcome/Objective	Measure	Target	Finding	Improvements Achieved	Action Plan
	Scores will be analyzed for each component – Overall rating, Response Time, and Ability to respond to needs/concerns.				
O 2: Students in the School of Education will receive responses within 24-48 business hours and have their advising concerns addressed or referred to the appropriate individuals.	M 4: School of Education staff will respond to students within 24-48 business hours. A random sampling of the voicemail logs will be selected. A panel of faculty and staff will assess the logs.	90% of voicemail messages will be returned within 48 hours.	Status: Met Administration (Interim IPM, & Dean): 100% of phone calls returned within 72 hours Career: 100% of phone calls returned within 72 hours	Education staff utilized a log to ensure that all telephone calls were returned within a 24-48 hour time frame.	----

Appendix “G”

Rubric for Institutional Effectiveness Assessment REPORTS For Non-Academic Units

Unit: _____ Assessment Year: _____

Date reviewed by Institutional Effectiveness Committee _____

REPORT				
FINDINGS	Exemplary 3	Progressing 2	Developing 1	Not Provided 0
1 st Outcome Findings				No findings are reported
Number of findings	Each measure has a related finding		Only some measures have related findings while others are unaddressed and/or unrelated	
Relationship to Measure(s)			The findings do not align with the aspects of the measures / targets	

	The findings align with all aspects of the measures/targets	The findings align with some but not all of the aspects of the measures / targets		
Detail of Findings	Findings are reported in sufficient detail to document results (e.g., sample size, precise percentages, item analysis, and/or other relevant numerical data)	Findings are reported, but more detail to describe and document the results is needed	Findings are reported without sufficient detail and are inadequate for the purposes of documenting results	
Detail of Improvements Achieved	Improvements achieved are reported in sufficient detail to document improvements made (e.g. changes in numerical findings data over time, increased scores, improved skills, and/or other relevant improvements)		Improvement achieved are reported without sufficient detail and are inadequate for describing the improvements made	
Consideration of location/delivery method	The unit's findings are discussed for each campus/location/delivery method in the assessment sample		The unit's findings are not discussed for each campus/location/delivery method in the assessment sample	Not applicable to unit

1st Outcome Findings Reviewer Comments:

REPORT				
ACTION PLAN	Exemplary 3	Progressing 2	Developing 1	Not Provided 0
1 st Outcome Action Plan				No Action Plan Reported
Number of action plans (closes the loop)	Provides an action plan statement for every finding (e.g., even when target is met)		Provides an action plan for some findings but not all	
Data-based	Action plan directly uses results from findings to improve program/unit performance	Action plan indirectly uses results from findings and/or may not improve program/unit performance	Action plan does not use results from findings and will not improve program/unit performance	
Implementation	Action steps are clearly stated in sufficient detail to allow for effective implementation	Action steps are described in insufficient detail and more detail is required for effective implementation	Action steps are described without meaningful detail, making effective implementation impossible	
Consideration of location/delivery method	The unit's action plan addresses any differences in IE assessment findings based on campus/location/delivery method		The unit's action plan does not addresses any differences in IE assessment findings based on campus/location/delivery method	Not applicable to unit

1st Outcome Reviewer Comments:

REPORT				
FINDINGS	Exemplary 3	Progressing 2	Developing 1	Not Provided 0
2nd Outcome Findings				No findings are reported
Number of findings	Each measure has a related finding		Only some measures have related findings while others are unaddressed and/or unrelated	
Relationship to Measure(s)	The findings align with all aspects of the measures/targets	The findings align with some but not all of the aspects of the measures / targets	The findings do not align with the aspects of the measures / targets	
Detail of Findings	Findings are reported in sufficient detail to document results (e.g., sample size, precise percentages, item analysis, and/or other relevant numerical data)	Findings are reported, but more detail to describe and document the results is needed	Findings are reported without sufficient detail and are inadequate for the purposes of documenting results	
Detail of Improvements Achieved	Improvements achieved are reported in sufficient detail to document improvements made (e.g. changes in numerical findings data over time, increased scores, improved skills, and/or other relevant improvements)		Improvement achieved are reported without sufficient detail and are inadequate for describing the improvements made	
Consideration of location/delivery method	The unit's findings are discussed for each campus/location/delivery method in the assessment sample		The unit's findings are not discussed for each campus/location/delivery method in the assessment sample	Not applicable to unit

2nd Outcome Reviewer Comments:

REPORT				
ACTION PLAN	Exemplary 3	Progressing 2	Developing 1	Not Provided 0
2 nd Outcome Action Plan				No Action Plan Reported
Number of action plans (closes the loop)	Provides an action plan statement for every finding (e.g., even when target is met)		Provides an action plan for some findings but not all	
Data-based	Action plan directly uses results from findings to improve program/unit performance	Action plan indirectly uses results from findings and/or may not improve program/unit performance	Action plan does not use results from findings and will not improve program/unit performance	
Implementation	Action steps are clearly stated in sufficient detail to allow for effective implementation	Action steps are described in insufficient detail and more detail is required for effective implementation	Action steps are described without meaningful detail, making effective implementation impossible	
Consideration of location/delivery method	The unit's action plan addresses any differences in IE assessment findings based on campus/location/delivery method		The unit's action plan does not addresses any differences in IE assessment findings based on campus/location/delivery method	Not applicable to unit

2nd Outcome Action Plan Reviewer Comments:

REPORT				
FINDINGS	Exemplary 3	Progressing 2	Developing 1	Not Provided 0
3 rd Outcome Findings				No findings are reported
Number of findings	Each measure has a related finding		Only some measures have related findings while others are unaddressed and/or unrelated	
Relationship to Measure(s)	The findings align with all aspects of the measures/targets	The findings align with some but not all of the aspects of the measures / targets	The findings do not align with the aspects of the measures / targets	
Detail of Findings	Findings are reported in sufficient detail to document results (e.g., sample size, precise percentages, item analysis, and/or other relevant numerical data)	Findings are reported, but more detail to describe and document the results is needed	Findings are reported without sufficient detail and are inadequate for the purposes of documenting results	
Detail of Improvements Achieved	Improvements achieved are reported in sufficient detail to document improvements made (e.g. changes in numerical findings data over time, increased scores, improved skills, and/or other relevant improvements)		Improvement achieved are reported without sufficient detail and are inadequate for describing the improvements made	
Consideration of location/delivery method	The unit's findings are discussed for each campus/location/delivery method in the assessment sample		The unit's findings are not discussed for each campus/location/delivery method in the assessment sample	Not applicable to unit

3rd Outcome Reviewer Comments:

REPORT				
ACTION PLAN	Exemplary 3	Progressing 2	Developing 1	Not Provided 0
3 rd Outcome Action Plan				No Action Plan Reported
Number of action plans (closes the loop)	Provides an action plan statement for every finding (e.g., even when target is met)		Provides an action plan for some findings but not all	
Data-based	Action plan directly uses results from findings to improve program/unit performance	Action plan indirectly uses results from findings and/or may not improve program/unit performance	Action plan does not use results from findings and will not improve program/unit performance	
Implementation	Action steps are clearly stated in sufficient detail to allow for effective implementation	Action steps are described in insufficient detail and more detail is required for effective implementation	Action steps are described without meaningful detail, making effective implementation impossible	
Consideration of location/delivery method	The unit's action plan addresses any differences in IE assessment findings based on campus/location/delivery method		The unit's action plan does not addresses any differences in IE assessment findings based on campus/location/delivery method	Not applicable to unit

3 rd Outcome Action Plan Reviewer Comments:			
REPORT			
ACHIEVEMENT SUMMARY/ ANALYSIS	Exemplary 3	Progressing 2	Developing 1
Number of Questions	All appropriate questions (as indicated in WEAVE) were answered		All appropriate questions (as indicated in WEAVE) were not answered
Quality of Responses	The unit provided detailed and meaningful responses to the appropriate Analysis Questions.	The unit provided responses to the appropriate Analysis Questions but did so with limited detail.	The unit did not provide detailed and meaningful responses to the appropriate Analysis Questions.

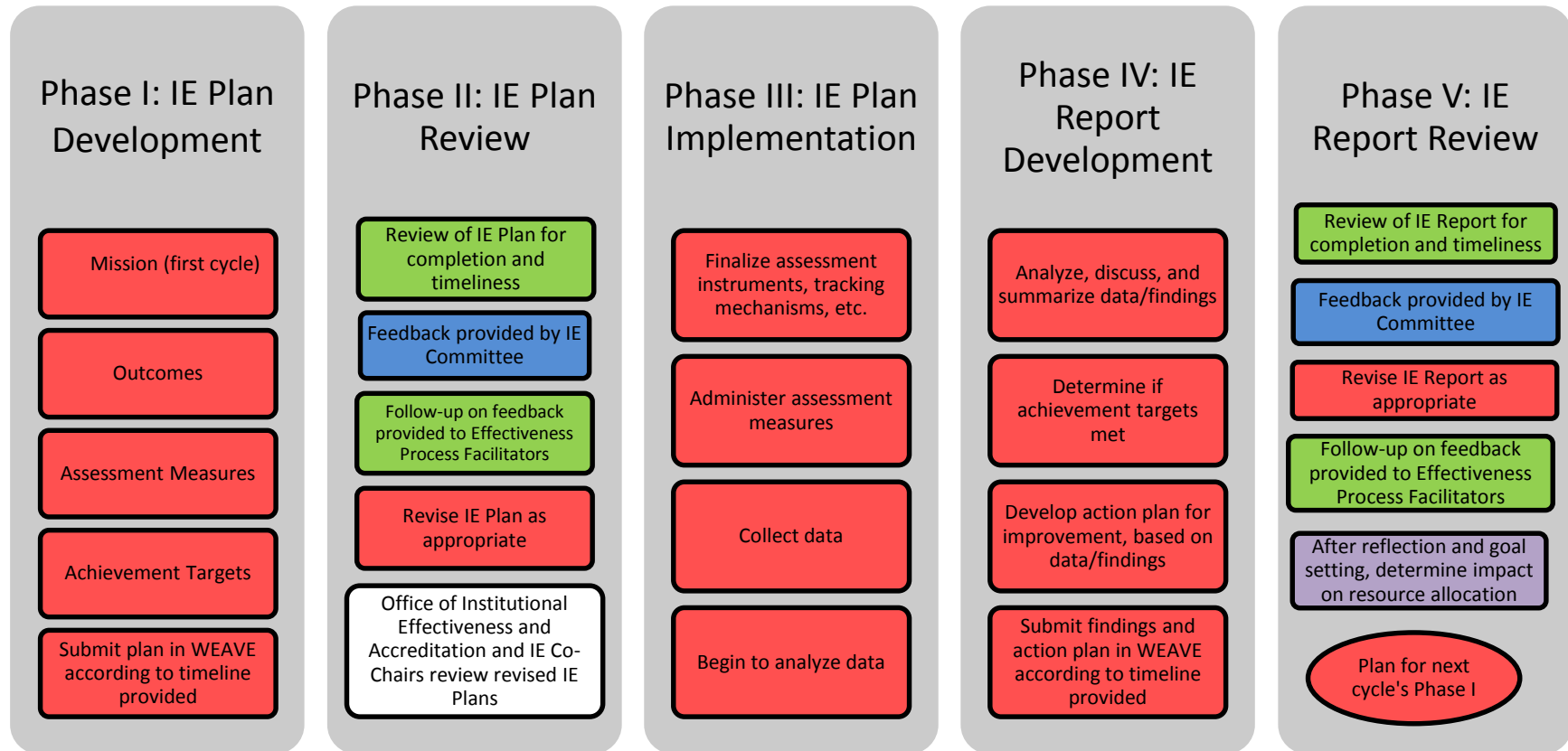
Reviewer Comments:

REPORT			
Overall Report	Exemplary	Progressing	Developing
	3	2	1
	The unit has demonstrated it is using assessment to improve processes, services, and/or educational programs	The unit has demonstrated limited use of assessment to improve processes, services, and/or educational programs	The unit has not demonstrated it is using assessment to improve processes, services, and/or educational programs
	The unit demonstrated involvement of staff, and other relevant stakeholders, such as students and advisory committee members, in the assessment process.	The unit demonstrated involvement of some staff, and other relevant stakeholders, such as students and advisory committee members, in the assessment process.	The unit has not demonstrated involvement of staff, and other relevant stakeholders, such as students and advisory committee members, in the assessment process.

Reviewer Overall Comments regarding Report, Suggestions for Improvement, and Next Steps for Program/Unit:

Appendix “H”

Institutional Effectiveness Process Phases



During Phase I and Phase IV, Effectiveness Collaborative Process Owners and Subprocess Owners may suggest direction, scope, and themes for the IE Plans

Legend: ■ Red - Role of Effectiveness Process Facilitators; ■ Green - Role of Process Owners; ■ Purple - Role of President's Cabinet Members; ■ Blue - Role of Institutional Effectiveness Committee in collaboration with Office of Institutional Effectiveness and Accreditation;

Please only duplicate this handout in color (not black & white) to understand the color coded roles within the process.

For more information contact the Office of Institutional Effectiveness and Accreditation: oiea@fscj.edu