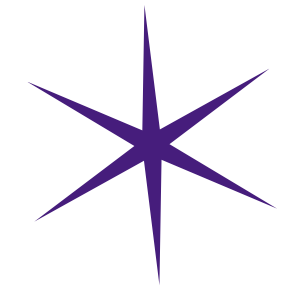


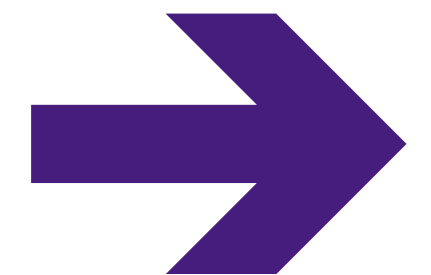



# Mastering SACSCOC Assessment Reporting



**Office of Institutional Effectiveness**

**Spring 2024  
Training**






# AGENDA

## Today's Discussion Points:


- Understanding Reporting Requirements: Navigating SACSCOC Standard 8.2.a
- Developing Effective Assessment Plans
- Mastering Data Analysis for Informed Decision-Making
- Formulating an Action Plan for Continuous Improvement
- Closing the Loop: Ensuring Ongoing Quality and Compliance

# **LSUHSC**

## **Office of Institutional Effectiveness**



**The continuous improvement cycle is at the forefront of everything the Office of Institutional Effectiveness does. We provide oversight, training, analysis, and guidance on all SACSCOC data submissions and the continuous improvement of all academic programs, educational support units, and administrative units at Louisiana State University Health and Science Center - New Orleans (LSUHSC-NO).**



# **SACSCOC**

## **Institutional Accreditor**

**Recognized by the U.S. Department of Education, the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) expects institutions to demonstrate that full cycles of assessment are taking place by establishing expected goals and outcomes, setting criteria to measure if they have been met or not, and then using this assessment information to promote continuous improvements in student learning, student successes, and in services provided by administrative and educational support units.**



**Understanding Reporting  
Requirements:  
Navigating SACSCOC Standard 8.2.a**

**Student Outcomes:  
*Educational Programs***

# Standard 8.2.a Student Outcomes: Educational Programs



The institution (1) identifies expected outcomes, (2) assesses the extent to which it achieves these outcomes, and (3) provides evidence of seeking improvement based on analysis of the results for (4) student learning outcomes for (5) each of its educational programs.

# Key Elements of 8.2.a



**IMPORTANT  
INFORMATION**

1. Focuses on learning outcomes for educational programs.
2. What is an educational program?
  - Defined by SACSCOC as a coherent course of study leading to a for-credit credential including a degree, diploma, certificate, or other generally recognized credential.
3. The standard has been tweaked slightly. Educational Units are now expected to ***“provide evidence of seeking improvement based on analysis of results.”*** ***Meaning, they need to do more than just identify actions.***
  - Evidence needs to be provided that those actions were actually implemented.
  - Your actions do not need to be successful, just that you can show you made a good-faith effort to try to implement improvements based on your collected assessment results.
  - Undergraduate programs are tasked with this same expectation for ***General Education requirements.***



# Standard 8.2.a

## The cornerstone of academic excellence and accountability!

**Important:** This standard is not just a guideline; it's a commitment to educational integrity, requiring substantive, evidence-based assessment of student learning.

**Purpose:** Why does this matter? Because SACSCOC is not just about ticking boxes; it's about ensuring our students are truly learning and growing!



## Most Frequently Cited Principles of Accreditation in Decennial Reaffirmation Reviews: Class of 2023

Review Stage I: OFF-Site Committee <small>[n=80 institutions]</small>			Review Stage II: ON-Site Committee <small>[n=78 institutions]</small>			Review Stage III: Board of Trustees <small>[n=78 institutions]</small>		
Rank	Core Requirement / Standard	% of Institutions in Non-Compliance	Rank	Core Requirement / Standard	% of Institutions in Non-Compliance	Rank	Core Requirement / Standard	% of Institutions in Non-Compliance
1.	<b>6.2.a</b> (Faculty Qualifications)	<b>91%</b>	1.	<b>7.2</b> (Quality Enhancement Plan)	<b>35%</b>	1.	<b>8.2.a</b> (Student Outcomes: Ed Programs)	<b>6%</b>
2.	<b>8.1</b> (Student Achievement)	<b>51%</b>	2.	<b>6.2.a</b> (Faculty Qualifications)	<b>15%</b>	2.	<b>13.3</b> (Financial Responsibility)	<b>4%</b>
3.	<b>8.2.a</b> (Student Outcomes: Ed Programs)	<b>48%</b>	3.	<b>8.2.a</b> (Student Outcomes: Ed Programs)	<b>12%</b>	3.	<b>6.2.a</b> (Faculty Qualifications)	<b>3%</b>
4.	<b>13.2</b> (Financial Documents)		4.	<b>6.3</b> (Faculty Appointment and Evaluation)	<b>5%</b>	4.	<b>6.3</b> (Faculty Appointment & Evaluation)	
5.	<b>6.2.c</b> (Program Coordination)	<b>41%</b>	5.	<b>7.3</b> (Administrative Effectiveness)		<b>4%</b>	<b>&lt;3%</b>	
6.	<b>6.2.b</b> (Program Faculty)	<b>40%</b>	6.	<b>6.2.c</b> (Program Coordination)				
7.	<b>5.4</b> (Qualified Officers)	<b>38%</b>	7.	<b>8.1</b> (Student Achievement)				
8.	<b>10.7</b> (Policies for Awarding Credit)	<b>35%</b>	8.	<b>8.2.b</b> (Student Outcomes: General Ed)				
9.	<b>4.2.g</b> (Board Self-Evaluation)	<b>34%</b>	9.	<b>8.2.c</b> (Student Outcomes: Student Services)				
10.	<b>13.6</b> (Federal and State Responsibilities)	<b>30%</b>	10.	<b>13.3</b> (Financial Responsibility)				
<b>Selected Descriptive Statistics</b> <small>(Number of Principles Cited Per Institution)</small>			<b>Selected Descriptive Statistics</b> <small>(Number of Principles Cited Per Institution)</small>			<b>Selected Descriptive Statistics</b> <small>(Number of Principles Cited Per Institution)</small>		
<i>Mean=12.4 (SD=7.5)   Median=11   Modes= 9\10\11 Min=2   Max=36</i>			<i>Mean=1.2 (SD=1.5)   Median=1   Mode=0 Min=0   Max=8</i>			<i>Mean=0.2 (SD=0.4)   Median=0   Mode=0 Min=0   Max=2</i>		
<b>Selected General Areas of Non-Compliance</b>		% of the Total Number of Findings of Non-Compliance	<b>Selected General Areas of Non-Compliance</b>		% of the Total Number of Findings of Non-Compliance	<b>Selected General Areas of Non-Compliance</b>		% of the Total Number of Findings of Non-Compliance
<i>Sections 1-5, 14 (26 standards-36% of all Principles): Integrity; Mission; Basic Eligibility; Governing Board; Admin. &amp; Org.; Transparency &amp; Inst. Representation</i>		26%	<i>Sections 7-8 (7 standards-10% of all Principles): Institutional Planning &amp; Effectiveness; Student Achievement</i>		53%	<i>Sections 7-8 (7 standards-10% of all Principles): Institutional Planning &amp; Effectiveness; Student Achievement</i>		40%
<i>Section 6 (7 standards-10% of all Principles): Faculty</i>		18%	<i>Section 6 (7 standards-10% of all Principles): Faculty</i>		23%	<i>Section 6 (7 standards-10% of all Principles): Faculty</i>		33%
<i>Sections 7-8 (6 standards-8% of all Principles): Institutional Planning &amp; Effectiveness; Student Achievement</i>		16%	<i>Section 13 (8 standards-11% of all Principles): Financial &amp; Physical Resources</i>		11%	<i>Section 13 (8 standards-11% of all Principles): Financial &amp; Physical Resources</i>		20%
<i>Sections 9-10 (16 standards-22% of all Principles): Ed Program Structure &amp; Content; Ed Policies, Procedures, &amp; Practices</i>		15%	<i>Sections 9-10 (16 standards-22% of all Principles): Ed Program Structure &amp; Content; Ed Policies, Procedures, &amp; Practices</i>		5%	<i>Sections 11-12 (9 standards-12% of all Principles): Library &amp; Learning/ Info Resources; Acad. &amp; Student Support Services</i>		7%
<i>Section 13 (8 standards-11% of all Principles): Financial &amp; Physical Resources</i>		15%	<i>Sections 11-12 (9 standards-12% of all Principles): Library &amp; Learning/ Info Resources; Acad. &amp; Student Support Services</i>		4%	<i>Sections 1-5, 14 (26 standards-36% of all Principles): Integrity; Mission; Basic Eligibility; Governing Board; Admin. &amp; Org.; Transparency &amp; Inst. Rep.</i>		0%
<i>Sections 11-12 (9 standards-12% of all Principles): Library &amp; Learning/ Info Resources; Acad. &amp; Student Support Services</i>		9%	<i>Sections 1-5, 14 (26 standards-36% of all Principles): Integrity; Mission; Basic Eligibility; Governing Board; Admin. &amp; Org.; Transparency &amp; Inst. Rep.</i>		3%	<i>Sections 9-10 (16 standards-22% of all Principles): Ed Program Structure &amp; Content; Ed Policies, Procedures, &amp; Practices</i>		0%

**INSTITUTIONAL FOCUSED REPORT**

**INSTITUTIONAL RESPONSE REPORT**



# Developing Effective Assessment Plans

# Why Should Programs and Units do Assessment?



Identify strengths and areas for improvement for programs or units.

Provide evidence of effectiveness, student learning, and/or improvement to stakeholders.

Highlight unit or program contributions.

Encourage collaboration among individuals within units and faculty in programs.

Create a vision or ideal for units or programs.

**PRIMARY REASON** - (SACSCOC) Focus on continuous improvement at the institution.

# Assessment Process

## Phase 1

(1, 2,3)

Due  
September 1st



### Close the Loop

Review results from  
previous action plans

## Phase 2

(4,5,6)

Due  
July 31st

# Step-by-Step Guide for Developing Your Assessment Plan

## 1. Developing Student Learning Outcomes

- **Understand the Goals:** Determine what competencies, skills, or knowledge students should acquire by the end of a program or course.
- **Write Clear Outcomes:** Formulate outcomes that are specific, measurable, attainable, relevant, and time-bound (SMART).
- **Align with Curriculum:** Ensure that the learning outcomes align with the overall educational goals and curriculum of the institution.

## 2. Assessment Methods

- **Select Appropriate Methods:** Choose assessment tools that effectively measure the learning outcomes. This could include tests, projects, portfolios, or practical evaluations.
- **Document the Process:** Clearly outline how each assessment method will be implemented, by whom, and at what intervals.

# Common Mistakes When Creating Student Learning Outcomes

## 1. Vagueness in Language

- **Example:** An SLO stating "Students will **understand** advanced healthcare concepts." This outcome is too vague because it does not specify what aspects of healthcare are considered or how understanding will be measured.
- **Improved:** "Students will be able to describe the key components of chronic disease management, including patient counseling and medication adherence strategies."

## 2. Lack of Measurability

- **Example:** Students will **appreciate** the importance of ethical behavior. Appreciation is subjective and difficult to measure quantitatively or qualitatively in a consistent manner.
- **Improved:** "Students will demonstrate ethical decision-making in clinical settings through role-play scenarios and reflective essays evaluated against a rubric."

# Best Practices: Assessment Methods

- Professional mandated standardized exams
- Rubric driven direct observation
- Student self-report progress instruments
- Rubric scored projects
- Rubric scored presentations
- End of Course Exams
- Comprehensive Exams
- Rubric driven Portfolios
- Preliminary Exams
- Clinical site Checklist or Achievement Record



- Assessment methods are our tools for carving out success. Let's discuss how to select the right tool for the right job!

# Student Learning Outcomes Assessed

## Methods/Measures Used to Assess Achievement of This Learning Outcome

- What types of student work were evaluated?
- What dimensions (research, coursework, teaching, professional development, thesis/dissertation writing, external collaborations, exams, presentation, clinical, etc.) of the work were measured to assess student achievement of this learning outcome?
- How was the work scored, graded, rated, or analyzed and by whom? What are the criteria for success? Attach rubrics or other rating instruments used.
- Performance Target for Assessment Results - What percentage of students assessed should achieve the outcome, or, what other benchmark(s) did the program use to define success/failure?





# Step-by-Step Guide for Developing Your Assessment Plan

## 3. Setting Targets

- **Establish Benchmarks:** Set clear benchmarks or performance targets that students must meet, which reflect a high standard of achievement. Must be expressed in numerical terms.
- **Ensure Relevance:** Targets should be challenging yet achievable and relevant to the learning outcomes and overall educational objectives.

## 4. Findings and Analysis

- **Collect Data:** Gather data from the implemented assessments.
- **Analyze Results:** Examine the data to evaluate the extent to which students are meeting the learning outcomes.
- **Report on Findings:** Document the results in a structured format, highlighting successes and areas needing improvement.

# Step-by-Step Guide for Developing Your Assessment Plan

## 5. Plan for Continuous Improvement

- **Identify Areas for Action:** Based on the analysis, pinpoint areas where changes or enhancements are needed.
- **Develop Action Plans:** Outline specific steps to improve student learning, which may involve revising curricula, enhancing instructional materials, or providing additional faculty training.

## 6. Closing the Loop

- **Implement Changes:** Apply the action plans and make the necessary changes to the program.
- **Reassess and Review:** After implementing changes, reassess to determine their effectiveness.
- **Document the Cycle:** Clearly record each step taken from outcomes development to reassessment, illustrating how feedback led to improvements.

# Common Reporting Errors:

- Overreliance on one assessment method.
- Repeatedly stating "will continue to monitor."
- No evidence of assessment results is reported, or the evidence is so general and so brief, that it does not report anything meaningful.
- Overuse of the same SLOs with targets that have been met cycle after cycle (3 years). After 2 years of meeting goals for the same SLO you must submit new SLOs for the next assessment cycle.
- No evidence that the department is using assessment findings to inform planning or continuous improvement.
- Interpretation of the results does not refer back to the outcomes, targets (benchmarks), or methodologies.
- No explanation provided when report concludes that “no action” is required.
- Not tying your analysis to last year's report (Closing the Loop).
- No evidence at all (rubrics, charts, graphs, survey results, surveys, evidence of changes, etc.)

# Tips:

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- Keep documentation organized and accessible for easy reference during reporting.
- Regularly update your knowledge on changes to standards to ensure compliance.





## Additional Tips

- **Regular Updates:** Keep the report active by regularly updating it as new data and insights become available.
- **Seek Feedback:** Consult with experienced colleagues or utilize professional development resources to enhance your reporting skills.
- **Adhere to Guidelines:** Always follow SACSCOC reporting guidelines to ensure compliance and completeness.
- **Engage Stakeholders:** Involve professors, staff, supervisors at clinical sites, and students in your department to gain diverse insights for a well-rounded assessment plan.
- Refer to the Exemplar for Report Completion: **Handout**

# Mastering Data Analysis for Informed Decision-Making



- Data is not just numbers; it's the story of our student's journey. Let's become master storytellers!
- Good analysis shines a light on what's working and what's not. It's our beacon in the night, leading us to better educational shores.

# Student Learning Outcomes Assessed

## Results from This Assessment with Analysis and Interpretation:

- Has the target been met?
- How many students or work products were assessed and how many achieved the intended outcome?
- Summarize the results from the analysis of data collected. Include tables and graphs for quantitative data if feasible and descriptions of qualitative findings.
- What relative strengths and weaknesses in student performance were identified through this assessment? To what do you attribute those results to?



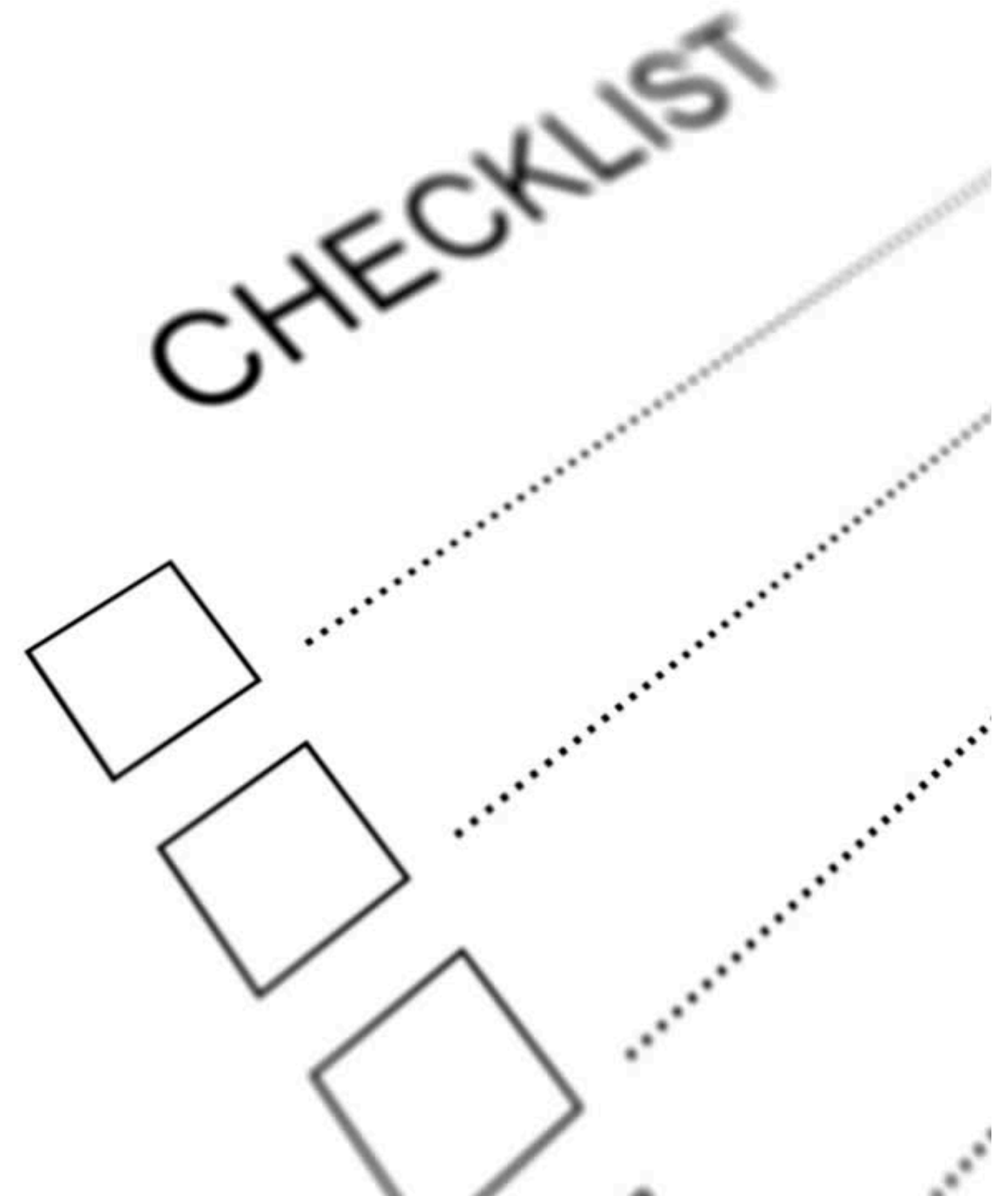
# Tips

## ***Data Collected Should***

- Provide detailed data (avoid “most” or “majority”).
- Use specific numbers (not rounded).
- Be clearly and succinctly presented.
- Align with outcome and target.
- Support actions taken later to improve program.
- Be reported for each Assessment Method.

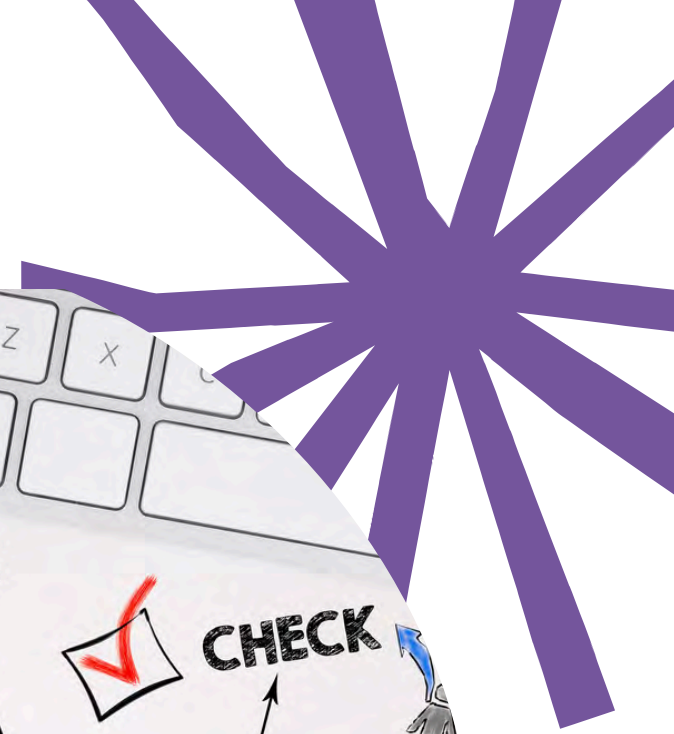
## ***Use of Results Should***

- Address gaps identified by assessment results.
- Be directly related to the outcome.
- Provide details of improvement made.
- Avoid “continue” or “maintain” or “refer to Committee.”
- Be substantive, not trivial.
- Be reported for each Assessment Method.





# Formulating an Action Plan for Continuous Improvement



## Step 1: Identify Improvement Areas

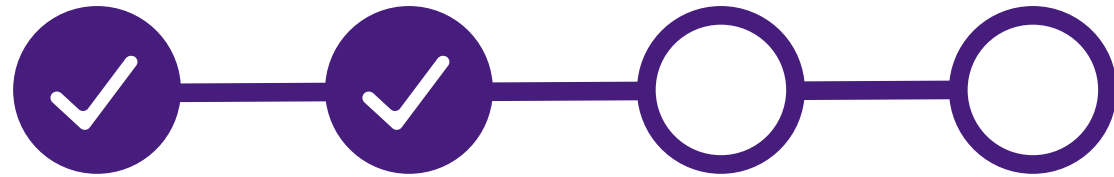
- **Assess Current State:** Evaluate existing processes, performance, and outcomes to identify areas that need improvement. This might involve analyzing data, gathering feedback, and comparing performance against benchmarks or standards.
- **Define Scope:** Clearly define the scope of the areas you want to improve to ensure focus and manageability.

## Step 2: Set Specific Goals

- **SMART Goals:** Establish specific, measurable, achievable, relevant, and time-bound (SMART) goals that directly address the identified improvement areas.
- **Prioritize Goals:** If there are multiple areas for improvement, prioritize the goals based on impact, urgency, and available resources.

## Step 3: Develop Strategies and Actions

- **Brainstorm Solutions:** Generate a list of potential strategies and actions that could lead to achieving each goal. Involve team members and stakeholders to leverage diverse perspectives and expertise.
- **Select Strategies:** Choose the most effective strategies based on feasibility, potential impact, and resource requirements.



# Making Data Driven-Decisions



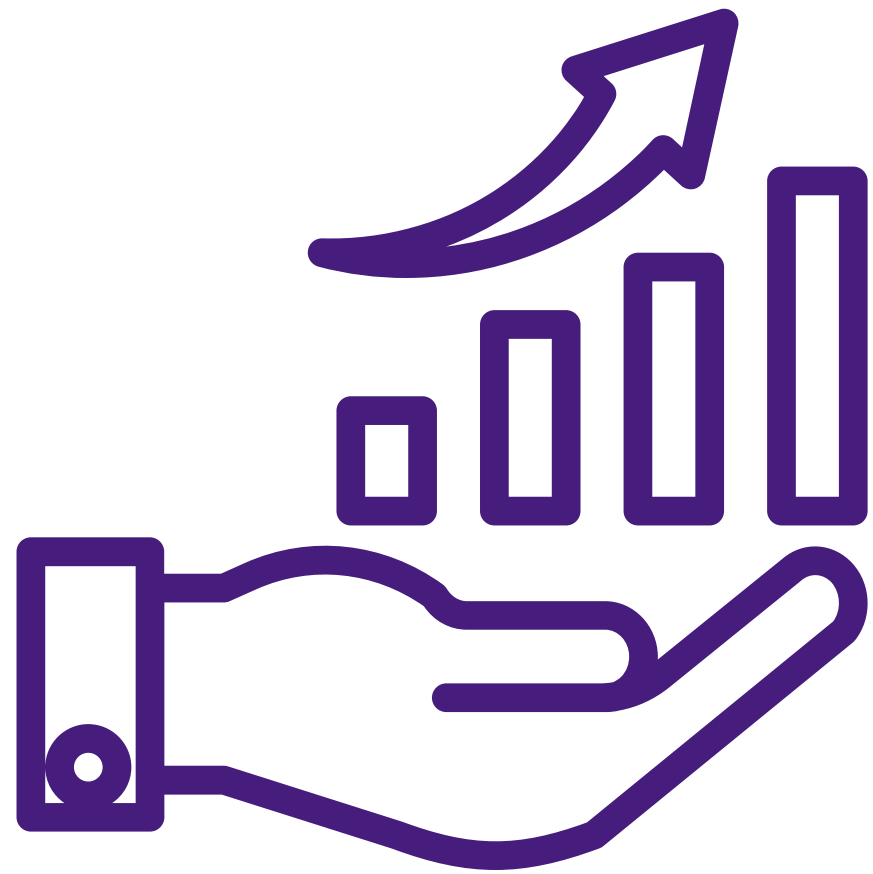
- The real power of data comes from making informed decisions.
- If data shows that students struggle with a specific concept, perhaps we need to adjust our teaching approach or provide additional resources.
- If data shows high engagement or success, it might be something to replicate in other areas.
- Always link your findings back to actions.
- Ask yourself: ***Based on this data, what should I start, stop, or continue doing?***

# Student Learning Outcomes Assessed

## Actions Taken or Plan to Improve, Enhance, or Sustain Student Success in Achieving This Learning Outcome

If the performance target was met or exceeded, describe the program's efforts to further enhance or sustain student success related to this outcome. **AVOID STATING REPEATEDLY THAT "NO IMPROVEMENT NEEDED" or "WILL CONTINUE TO MONITOR."** Our accreditor, SACSCOC, requires programs to provide evidence of seeking improvement!





## Examples of Aspects of a Program that can always be Improved

### Curriculum

- Revise course or assignments
- Widely share anchors/models with students
- Modify the frequency or schedule of course offerings
- Add or delete course(s)

### Resources

- Hire or re-assign faculty and/or staff
- Increase classroom space

### Academic Process

- Revise advising standards or processes
- Revise admission criteria
- Communicate quality of student work and student voices to stakeholders in Brochures, Websites, Recruiting materials and Requests for funding

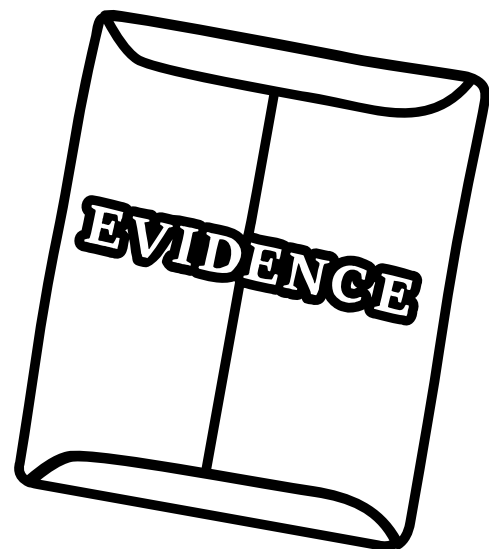
### Assessment Process

- Select alternative assessment strategies
- Reconsider performance targets

# Changes and Potential Evidence

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If a change takes effect in the next academic year, you have to provide evidence that the change was made. Consider the examples below.



Change	Potential Evidence
Develop and implement a new assignment to reinforce the knowledge needed to achieve the outcome.	The new assignment. A syllabus that shows how the new assignment figures into the course grade.
A new Textbook	A screenshot of the new book cover. A syllabus that shows the new book.
New laboratory equipment	A PO or, better yet, a vendor invoice for the purchase.
Increased instruction in the Library	A syllabus showing the additional library instruction. Communications detailing the specific instruction needed or handout from the librarian handling the instruction.
Adding a prerequisite to increase base knowledge before enrolling in the class in which the outcome is assessed.	Curriculum forms that show the added prerequisite. Catalog page that shows the new prerequisite.

## Action Items for Continuous Improvement

After considerable discussion, the decision to pursue the conversion of the undergraduate program to a speech-language pathology assistants certification program was recommended by the Clinical/Undergraduate Faculty. The Speech-language pathology assistant certification has recently been approved by the American Speech-Language Hearing Association (ASHA). This credential will make WKU undergraduate students more marketable with a nationally recognized certification to provide certain speech-language assessment/intervention activities under the supervision of a certified speech-language pathologist. (Begin implementation study Fall 2021)

Curriculum Map will be revisited this next academic year (Fall 21-22) in light of the faculty decision to convert the undergraduate program to the speech-language pathology assistants certification program.

Program Faculty identified new artifacts and courses to measure outcomes One and Three on odd academic years.

Program Faculty specified most appropriate sections of the Rubric: "Evaluation of Undergraduate Clinical Internship" (attached) to assess clinical outcomes to be measured on even academic years. Areas/Sections II. Development and Preparation for Therapy and III. Therapy Implementation will be used to assess SLO 2 regarding basic clinical intervention processes; Sections II. Development and Preparation for Therapy and IV. Written Documentation will be used to assess SLO 4 regarding the ability to correctly document clinical information. (Began use with this assessment cycle – Fall 2020)

Student Learning Outcome assessment was added as an ongoing agenda item to be discussed at every clinical supervisors meeting and at each Clinical Faculty and/or undergraduate faculty meeting to help identify needs, concerns, appropriate assignments, strategies to measure outcomes and to enhance and refine skills. (Ongoing)

Advising will be divided amongst the full-time clinical faculty and/or undergraduate instructors giving students opportunities to connect with a number of program faculty.

Program faculty identified the need to add an "Essential Functions and Technical Standards" document to the undergraduate application/admissions process to promote students' self-evaluation of abilities to perform and/or learn functions and skills of practice either with or without accommodations. This went through the Curriculum process and passed faculty senate in May 2021.

**Closing the Loop:  
Ensuring  
Ongoing Quality  
and Compliance**





**Celebrations are in order! You've made it to the final stage of the assessment cycle, commonly known as "Closing the Loop." This is a remarkable achievement, and it reflects your unwavering dedication to assessment and continuous improvement. Well done!**



# Closing the Loop

“Our Moment of Reflection”



## Overview of Closing the Loop

Follow-up on previously implemented action plans.

Assess the effectiveness of these changes.

## Purpose of Closing the Loop

Integral part of the assessment cycle focused on continuous improvement.

Provides feedback on progress and areas needing further improvement.

## Benefits to Stakeholders

Departments, faculty, unit heads, and administrative professionals gain insights into progress and effectiveness of actions taken.

# Closing the Loop

## Methods for Closing the Loop

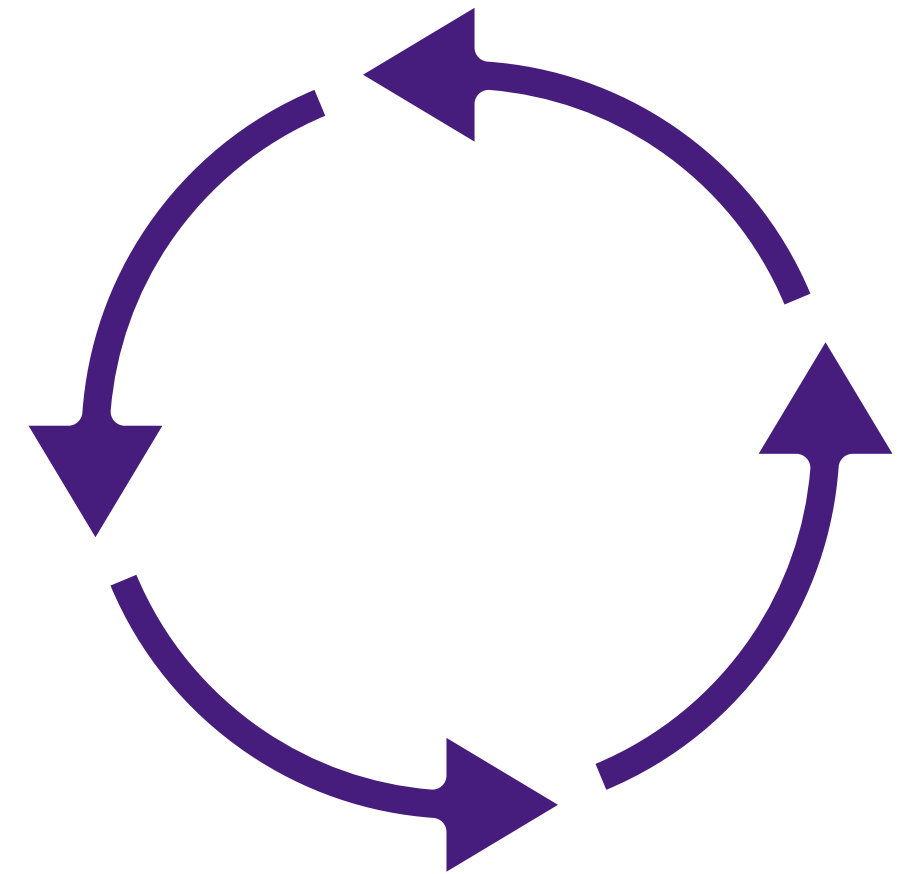
- Continue measuring successful outcomes in future assessment cycles.
- Adjust or enhance current strategies to improve performance.
- Revise or replace the outcome or measure if goals are not met.

## Decision Paths Based on Assessment Findings

- If Outcome Achieved:
  - Continue with ongoing measurements and incremental improvements.
- If Outcome Not Achieved:
  - Option A: Implement additional changes to improve specific outcomes.
  - Option B: Reevaluate and possibly modify the outcome or assessment method.

## Strategies for Enhanced Effectiveness

- Implement regular review meetings to discuss progress and adjustments.
- Use data-driven decision-making to guide changes and improvements.
- Foster a culture of accountability and adaptability within the program or unit.



## Important Dates to Remember

**June 30, 2024**

**General Education  
Final Report**

**July 31, 2024**

**Findings, Data Analysis, and Action Plans for  
Continuous Improvement 2023-24 Cycle**

**September 1, 2024**

**Assessment Plan 2024-25 Cycle**

**Report is due**

# Questions?????

