

# Assessment Review Report 2013-14

## IEC Sub-Committee on Academic and Support Unit Assessment

### Overview

This year, the Sub-Committee on Academic and Support Unit Assessment reviewed Academic and Student Support Units as specified by the IEC Assessment Review Plan (see Appendix). The six reviewers divided into three teams that each assessed approximately one third of the units; JEC Library was assessed by the entire subcommittee as a norming and training exercise before beginning to assess the other units in teams. Results for individual units are passed on an average of assessments by each of the two-person teams.

Since there are no units at GSW that are entirely or principally devoted to research, the sub-committee decide to seek advice from the full committee on whether and how to review assessment of research.

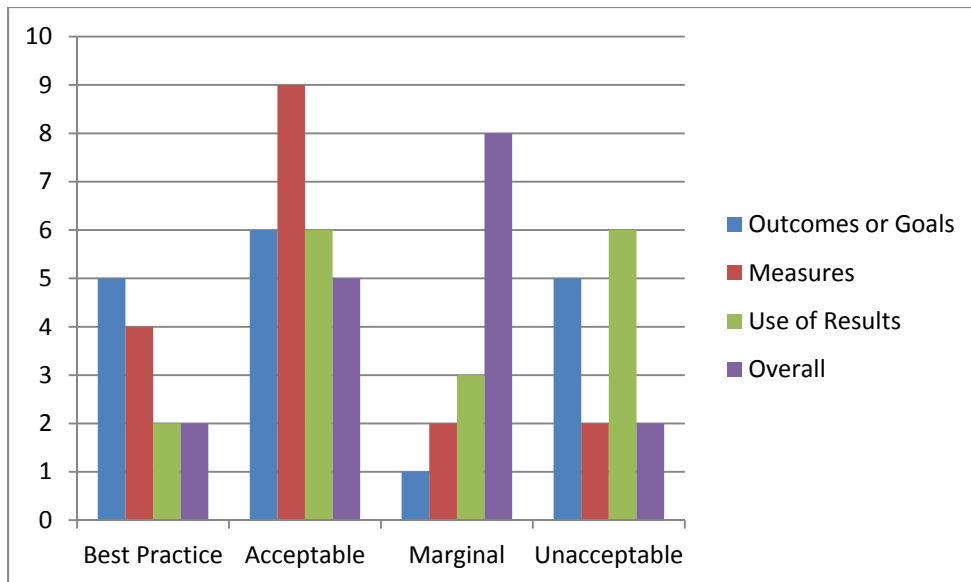
### List of Units Reviewed

Associate Vice President Academic Services  
Academic Resource Center  
Disability Services  
English Language Institute  
Student Support Services  
Admissions  
Registrar  
Assistant Dean of Student's Office  
Campus Life  
Campus Recreation  
Career Services  
Counseling Services  
Financial Aid  
Health Services  
Residence Life  
Athletics  
Library

### Results of Assessment Plan Reviews Fall 2013

#### Academic and Student Support Units

	Best Practice	Acceptable	Marginal	Unacceptable
<b>Outcomes/Goals</b>	5	6	1	5
<b>Measures</b>	4	9	2	2
<b>Use of Results</b>	2	6	3	6
<b>Overall</b>	2	5	8	2
<b>Percentage</b>	19%	38%	21%	22%



### Analysis of Results

By far, use of results was the weakest of the areas reviewed (see Appendix for Assessment Rubric used). Since most units other than academic units are only in their second year of assessing program outcomes, this outcome is predictable. Given that GSW's SACSCOC On-Site Visit will occur this term, the sub-committee proposes a development workshop on using assessment results be scheduled during Southwestern Week 2014. Some reviewers also noted inconsistency in the way units report results that may also be addressed in a workshop.

### SACSCOC Off-Site Review

Since GSW's Compliance Report to SACSCOC was reviewed by an Off-Site Committee, it seems reasonable to share the results of standards and requirements related to assessment and institutional effectiveness: Core Requirement 2.5, Comprehensive Standard (CS) 3.3.1.1 Educational Programs (to include student learning outcomes), CS 3.3.1.2 Administrative Support Services, CS 3.3.1.3 Academic and Student Support Services, CS 3.3.1.4 Research Within Institutional Mission (if applicable), CS 3.3.1.5 Public/Community Service Within Institutional Mission (if applicable), and Federal Requirement 4.1 Student Achievement.

**CR 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. (Institutional Effectiveness)

### Compliance

Georgia Southwestern appears to engage in an ongoing, integrated, and institution-wide planning and evaluation process. The current strategic plan, *Moving Forward: Cultivating Growth and Excellence*, was developed from the work of committees, task forces, and the university as a whole. The process appears to be systematic and aligns with the mission of the institution. The process is relatively new, but appears to be in place and is being followed.

**CS 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 (Institutional Effectiveness):

**\*3.3.1.1** educational programs, to include student learning outcomes

**Non-Compliance**

As with standard 2.5, institutional effectiveness, the institution does identify its assessment process and related cycle. The institution identifies outcomes, assesses said outcomes, and provides evidence the data is used to make improvements. However, the information provided for review by the Off-Site Committee did not include dual degree programs, weBSIT, and the 1+2+1 programs with the various Chinese universities.

**3.3.1.2** administrative support services

**Non-Compliance**

The sample of plans submitted by administrative support services was representative of the institution. The process used for institutional effectiveness is documented, but there is no consistency in the terminology used from office to office. The units appear to identify outcomes (activities). It is unclear if the information presented is the “evidence” (the institution’s word): It is unclear if the information presented as “evidence” is the measurement or the data resulting from the measure. The report does address changes made based on the data collected.

**3.3.1.3** academic and student support services

**Compliance**

The sample of plans submitted by academic and student support services was representative of the institution. The process used for institutional effectiveness is well-documented. It is clear there is a process in place and is being followed. The report addressed improvements made based on the data collected. There is inconsistency between units regarding the use of the terms “goal” and “activity.”

**3.3.1.4** research within its mission, if appropriate

**Compliance**

The institution stated that although research is not identified in its mission statement and there are no established research units or centers, there are some research activities occurring on-campus. In fact, there is limited, funded research within the faculty. The institution did address the student learning outcomes in the graduate degree programs where research is an expected outcome. The institution did identify outcomes, and provided evident [sic] it does assess said outcomes and uses the data to make improvements.

**3.3.1.5** community/public service within its mission, if appropriate

**Non-Compliance**

Two of the three units identified as providing community/public service provided evidence of identified goals, activities to help achieve said goals, and data collected. Also, there is evidence of the data being used to make improvements. The Center for Business and Economic Development (CBED) did not

provide evidence of identified outcomes; therefore, there are no measures identified to assess outcomes. There appears to be no assessment cycle in place for the CBED.

**\*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. (Student achievement)

### **Non-Compliance**

Georgia Southwestern uses various methods to assess student success. The institution presented information regarding enrollment (2003-2012), retention (2000-2011), progression (2007-2010), graduation (2009-2008), but no threshold of achievement was identified.

No threshold of achievement was identified with the other data (i.e., NCLEX-RN licensure exam scores and GACE II pass rates) presented.

### **Analysis of Off-Site Review Report Results**

The findings of compliance for CR 2.5, CS 3.3.1.3, and CS 3.3.1.4 resulted largely from the ongoing work of the IEC.

The non-compliance findings for CS 3.3.1.1 and FR 4.1 resulted from imperfect reporting of data in the compliance certification report, and have been adequately addressed in Focused Report sent to the On-Site Review Team.

The non-compliance findings for CS 3.3.1.2 and CS 3.3.1.5 resulted from inconsistencies of practice and reporting among various units. In addition, while the off-site committee found GSW in compliance with CS 3.3.1.3, they did note ". . . inconsistency between units regarding the use of the terms 'goal' and 'activity.'" These findings are consistent with the observations of the sub-committee reviewers reported above, and support the need for continuing faculty and staff development in the area of assessment.

## APPENDIX

### GSW Assessment Review Cycle

- First Year (beginning 2011-12): Academic Programs (cf. SACS-COC Comprehensive Standard 3.3.1.1)
- Second Year: Administrative Support Services; and Community, and Public Service (cf. CS 3.3.1.2 & 3.3.1.5)
- **Third Year: Academic and Student Support Services; and Research (cf. CS 3.3.1.3 & 3.3.1.4)**

### Rubric for Assessment Process Review

Process Elements	Best Practice	Acceptable	Marginal	Unacceptable
	(3)	(2)	(1)	(0)
<b>Outcomes or Goals</b>	<ul style="list-style-type: none"> <li>• Outcomes/goals embody the mission of the unit, and institution.</li> <li>• Outcomes/goals are clearly linked to improvements in student success or the learning environment.</li> <li>• Outcomes/goals are communicated to the community.</li> </ul>	<ul style="list-style-type: none"> <li>• Outcomes/goals are clearly related to unit's purpose or mission.</li> <li>• Each outcome/goal statement is clear, concise, and contains only one construct.</li> <li>• Unit agrees to outcomes/goals.</li> </ul>	<ul style="list-style-type: none"> <li>• Outcomes/goals are not clearly related to unit's purpose or mission.</li> <li>• Outcomes/goals contain more than one construct.</li> <li>• Adoption of professional association's suggested outcomes/goals, but not adjusted for unique characteristics of unit or institution.</li> </ul>	<ul style="list-style-type: none"> <li>• List of outcomes/goals does not exist.</li> </ul>
<b>Measures</b>	<ul style="list-style-type: none"> <li>• Measures are tracked over time.</li> <li>• Several types of measures are used.</li> <li>• Measures identify appropriate levels of student success or improvement in the learning environment.</li> </ul>	<ul style="list-style-type: none"> <li>• Measures establish appropriate targets for improvement of student success or the learning environment.</li> <li>• Measures lead to actionable results.</li> </ul>	<ul style="list-style-type: none"> <li>• Measures not based on prior performance or normative data.</li> <li>• Expectations are unfounded or unrealistic.</li> <li>• Measures do not lead to actionable results</li> </ul>	<ul style="list-style-type: none"> <li>• Only one type of measure for multiple outcomes/goals.</li> <li>• Not able to determine application of results if expectati</li> </ul>

				ons not met.
<b>Use of Results</b>	<ul style="list-style-type: none"> <li>• Results discussed with students and other community members.</li> <li>• Results lead to action plans with realistic targeted dates, goals, responsibilities, and resources identified to improve student success or the learning environment.</li> </ul>	<ul style="list-style-type: none"> <li>• Results shared with colleagues and administrators.</li> <li>• Results identify areas for improvement in student success or the learning environment, but action plans are insufficient.</li> </ul>	<ul style="list-style-type: none"> <li>• Results are not connected to improvements in student success or the learning environment.</li> </ul>	<ul style="list-style-type: none"> <li>• Results not used, or always lead to the conclusion that no action is necessary.</li> </ul>