Association for the Assessment of Learning in Higher Education
AALHE
PROMOTING ASSESSMENT FOR LEARNING

# INTERSECTION

*A journal at the intersection of assessment and learning*

Winter/Spring 2018

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# Message from the President

*By Monica Stitt-Bergh*

Assessment practitioners have a passion for and curiosity about learning and use of information. Similar to many of you, I've been recently reminded that not everyone views assessment practices as based on a desire to know about the learning environment—its effectiveness—and to evolve the curriculum and co-curriculum using that knowledge. Instead, opinion articles in *The Chronicle of Higher Education* and *The New York Times* have focused on very different understandings of assessment practices and purpose: assessment-for-accountability and assessment-for-compliance. These purposes of assessment, as we well know, can quickly become bureaucratic exercises that are too distanced from teaching and learning. They strip away our passion and curiosity, leaving us and subject area faculty in an unpleasant, unproductive place. As assessment practitioners, we need to promote assessment *for* learning, assessment *as* learning, as well as assessment *of* learning as foundational to teaching and learning. Our expertise needs to be applied to assessment activities that benefit students, faculty, the campus, and the public good. As an organization, AALHE will do its part by providing position statements and resources aimed at educating and supporting assessment practitioners, faculty development professionals, subject area faculty, administrators and other stakeholders in higher education.

Monica Stitt-Bergh, President of AALHE, University of Hawai'i at Mānoa.

Because of the recent opinion articles, a colleague, new to the field of assessment, asked me how to avoid burnout. That is a good question given that some us have had to respond to subject area faculty who are vindictive, confused, unsupported, etc., after they read the opinion pieces. Burnout is a threat to our field if we must spend our brain power on rebuttal instead of on ways to collaborate with subject area faculty to ensure students graduate prepared for their personal, professional, and community lives. So, how to avoid burnout? I instantly thought of passion and curiosity. I encouraged her, and I encourage all of us in the field of assessment, to undertake assessment-related projects and share the knowledge gained with our community and beyond. Let our passion and curiosity about learning—student learning, faculty learning, program learning, organizational learning—be our backbone. A few specific ideas to consider:

- Find a peer interested in a particular area of learning outcomes assessment and do a joint project. These peers are on AALHE member network, the ASSESS listserv, at the AALHE conference and other assessment and teaching and learning conferences.

- Partner with subject area faculty to conduct an inquiry project, a research project, or an action research project, etc., that has a goal of learning improvement—student, faculty, program, or campus learning.
- Read articles/books from other fields to spark new ideas, e.g., fields such as program evaluation, organizational learning, conflict management, leadership and team building, data visualization, predictive and prescriptive analytics.
- Conduct a campus needs assessment and use the findings to move in new directions. If your campus is similar to mine, assessment-related needs and available technology tools for collaboration have changed over time. Use needs assessment to model good practices related to use of findings.

Importantly, assessment practitioners need to share findings and critical analyses. Various dissemination options exist: conferences, technical reports, online (websites, LinkedIn, Facebook, blogs, Twitter), journal articles. AALHE offers this publication, *Intersection: A journal at the intersection of assessment and learning*, as well as *Emerging Dialogues* and the annual conference and conference proceedings. NILOA, the *Journal of Research & Practice in Assessment*, the Assessment Institute, and regional assessment conferences, and your campus website are all good venues. We have expertise and passion; let's tell others what we know about assessment and its intersection with learning and teaching.

*Monica Stitt-Bergh is President of the AALHE and an educational psychologist in the Assessment Office at the University of Hawai'i at Mānoa.*

# Note from The Editor-In-Chief

*By Jane Marie Souza*

*Jane Marie Souza, University of Rochester; Intersection Editor-in-Chief*

In the call for papers for this edition of *Intersection*, we asked for articles focused on assessment strategies employed in disciplines with specialized accreditation in an effort to support folks facing potentially unique challenges within various areas of specialized study. The response was excellent, and we are happy to present articles from fields including nursing, education, business, social work, occupational therapy, sports management, and medical education. In addition, some articles deal more broadly with communication and collaboration strategies that are applicable across a range of programs as they prepare for reporting and accreditation.

In the light of the recent national conversation on assessment (sparked in part by an article in the Fall edition of *Intersection*), it is noteworthy that seven of the nine published papers were authored or co-authored by faculty members. Within this edition one can see examples of case studies, research and informed practice that exemplify how faculty and assessment professionals can collaborate for educational improvement. Such work is evidence that the too-easy rhetoric that faculty all hate assessment is untrue. As the only national membership organization for assessment, AALHE is dedicated to serving its membership by helping to identify assessment success stories, as well as areas to improve the profession and its standing with faculty members. Look for a future call for papers on the theme of faculty perspectives on, and use of, assessment.

In the meantime, please be sure to read a related article offered in AALHE's online publication, *Emerging Dialogues.* And remember we always appreciate feedback, which may be addressed to publications@aalhe.org.

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# Bridging University Institutional and Accreditation Standards: An Advanced Practice Registered Nurse (APRN) Program Exemplar

*By Robin Arends, Victoria Britson, and Mary Minton*

The complexity of the health care environment requires the nursing profession to effectively anticipate current and future health care needs. Similarly, nursing education must ensure preparedness of future nursing professionals as well as meet the rigor of program accreditation standards. South Dakota State University (SDSU) College of Nursing Master's and Doctor of Nursing Practice (DNP) programs are accredited by the Commission on Collegiate Nursing Education (CCNE), one of the two national specialized accrediting bodies for nursing. Both graduate programs must align with an American Association of Colleges of Nursing (AACN) Essentials document that corresponds to the respective degree and specialty, e.g. family nurse practitioner (FNP). Required curricular framework, components, and competencies are mapped within *The Essentials of Master's Education in Nursing* and *The Essentials of Doctoral Education for Advanced Nursing Practice*. Both documents inform curricular content needed to meet core competencies specific to all Advanced Practice Registered Nursing (APRN) roles, such as the family nurse practitioner (AACN, 2006).

Nursing programs educating APRN students must also align curricular competencies with a document developed by The Nurse Practitioner Organization of Nurse Practitioner Faculties (NONPF). *The Core Competencies for Nurse Practitioners* (NONPF, 2017) outlines entry into practice competencies that graduates must meet upon graduation. This document, which provides curriculum content, is supplemented by *Population-Focused Competencies for Nurse Practitioners* (NONPF, 2013) such as those foci for Family Nurse Practitioners.

In addition to the multiple standards and competencies an accredited nursing program must follow, universities may define student learning outcomes (SLO's) statements. SLO statements communicate the knowledge, skills, and competencies that students are expected to attain at that university. SDSU has defined a broad set of SLO's as well as program specific SLO's, which the graduate nursing program (South Dakota State University, n.d.) must also align to in addition to the national standards and guidelines discussed above.

**SDSU Graduate Nursing Process**

To meet the requirements of the accreditation and university standards, a competency grid was developed for the MS-FNP and DNP programs and included program specific SLOs. As the SLOs are based on university and the *Essentials* for DNP and MS curriculum, the appropriate essential was matched to the corresponding SLO on the vertical axis of a spreadsheet. On the horizontal axis, all courses found in the plan of study were listed. The course assignment meeting the SLO and the essential was listed. A threshold for the criterion to meet or not meet that standard was established from the grading system in place for the Graduate Nursing program which was to receive an 81% or higher. At the end of the semester, course faculty reported the number of students who met the criterion. A designated faculty member maintains the grid. Periodic review is in place to note trends or patterns of concern, and a subsequent course and assignment review determines need for content adjustment.

Periodically, this grid was reviewed by the APRN curriculum coordinator and the graduate nursing curriculum committee to ensure assignments continued to meet the standards set forth by the accrediting bodies and the university. If a change to one set of standards was completed, the assignments associated to this standard were reviewed to ensure relevant assessment. Similarly, if a course assignment or objective was changed, the grid would be reviewed to ensure the change continued to meet the standard.

The NONPF organization provides a crosswalk that aligns the APRN core competencies with each APRN specialty. Table 1 shows an example of this crosswalk.

***Table 1. NONPF Core and Population Focused Competencies Crosswalk***

| **Competency Area** | **NP Core Competencies** | **Family/Across the Lifespan NP Competencies** | **Course Objective** | **Assignments** |
|---|---|---|---|---|
| Independent Practice Competencies | Functions as a licensed independent practitioner. | Obtains and accurately documents a relevant health history for patients of all ages and in all phases of the individual and family life cycle using collateral information, as needed. | NURS 631<br><br>Critically synthesize data, research, and evidence to develop an effective and appropriate evidence-based plan of care for the patient, taking into consideration personal history and health status, gender, life circumstances, and genetic, ethical, cultural, ethnic, and developmental variations to ensure the delivery of high quality care to patients in the primary care setting. | NURS 631<br><br>Case Study<br>H & Ps<br>Genogram<br>Validation Exam |

The APRN Curriculum Coordinator and the FNP practicum course faculty reviewed this crosswalk and placed appropriate assignments with the competencies. Not all competencies are covered in the practicum courses, so faculty utilized the *Essentials* grid to ensure these competencies were being met. As the organization refines and adapts these competencies to meet changes in the healthcare field, faculty reviews the changes and ensures all competencies are met through content and assignments.

If an area in either the *Essentials* or NONPF competency grid is found to be deficient or weak as evidenced by not meeting the benchmark in content and/or assessment, the graduate nursing curriculum committee is notified and follow–up faculty meetings ensure content and assignments are appropriately revised. Ongoing review of the assessment plan each semester is crucial to ensure timely assessment of standards and competencies. Additionally, the Associate Dean for Graduate Nursing schedules an annual review to ensure this step is not overlooked. Tables 2 and 3 show course mapping for an essential and NONPF competency respectively.

***Table 2. DNP Program SLO #4 with DNP Essential VIII***

| **Student Learning Outcome** | **Course Specific Content** | **Course Assignment Metric** | **Course Assignment Benchmark** | **Outcome** |
|---|---|---|---|---|
| SLO 4<br>Integrate cultural learning into nursing practice to effectively tailor health care to the diverse lifeways of clients.<br><br>Essential VIII: Clinical Prevention and Population Health for Improving Health<br><br>Recognizes that the master's prepared nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, and Aggregates/ identified populations. | NURS 615<br><br>One module on cultural care | NURS 615<br><br>Graded discussion and optional final exam essay questions | NURS 615<br><br>90% of students will receive 92% or above on graded discussion of a cultural case scenario. | Fall 2016<br><br>MET 100% of students achieved 92% or higher. |
| | NURS 675<br><br>Demonstrate cultural knowledge by creating a culturally specific teaching tool to enhance knowledge levels and awareness when providing culturally competent health care for a specific cultural group. | NURS 675<br><br>Cultural Teaching Tool Grading Rubric (Internal Evaluation) | NURS 675<br><br>90% of the students will receive 92% or higher. | Spring 2016<br><br>UNMET 82.3% of the students received 92% or higher |

***Table 3. NONPF, NP Core, NP Population Specific Competencies and Supportive Content***

| **NONPF Competency Area** | **NP Core Competency #1** | **Family/Across the Lifespan NP Competency #1** | **Supportive Curricular Content** |
|---|---|---|---|
| Leadership competencies | Assumes complex and advanced leadership roles to initiate and guide change | Works with individuals of other professions to maintain a climate of mutual respect and shared values | • Role of each APRN specialization<br>• Role of the FNP in the healthcare setting<br>• Translational leadership models |

One challenge to this process is that there are two sets of standards (Table 2 and Table 3) to ascertain student learning. While standards are generally congruent between the university and accreditation, some differences exist such as content pertaining to Family Nurse Practitioner skills. Faculty must recognize these differences and ensure students meet both standards. Meeting both standards may indicate removal

of a curricular component that is no longer relevant to university or accreditation standards; however, faculty may have difficulty letting go of a topic they feel is important. To support making curricular changes, faculty use a process-oriented dialogue. This dialogue occurs over the course of both fall and spring semester via formal committee meetings of the Graduate Curriculum and Graduate Faculty as well as taskforces initiated by the Associate Dean for Graduate Nursing. The task force process includes course faculty feedback to the larger committees. The graduate nursing curriculum committee puts forth recommendations to the Graduate Nursing Faculty committee where a final vote is taken for consensus.

Another challenge is communication. Faculty must understand the importance of communicating changes within a given course. Academic freedom allows faculty to make changes to curriculum to meet the needs of the course. However, courses, as a part of a larger assessment plan, need to meet the standards set forth by the accreditation agencies and the university. Making sure faculty communicate changes to the assessment or curriculum team is important. In addition, making sure faculty continue to have freedom to teach the concepts as they see best (while meeting standards) is an important part of the process. To build awareness and foster consistent communication, a line item specific to practice standards and guidelines is on all our monthly committee agendas. In addition, the APRN curriculum coordinator takes an active role in periodically reviewing syllabi and corresponding with faculty for courses and assignments that are marked for meeting competency assessment criteria. Dialogue through taskforces, curriculum meetings, and faculty meetings ensure appropriate input is solicited to meet all standards and competencies.

Overall, this process has strengthened the program and student learning by identifying appropriate content and learning assignments to guide curriculum based on the assessment plan. This plan includes both university and accreditation standards. In addition, content and assignments, which do not meet university or accreditation standards, are reviewed to determine their importance within the full curriculum.

**Lessons Learned**

Having key members of the faculty who are familiar with both the University and Accreditation assessment standards is vital. The composition of the committee or select group should ensure that if a faculty member leaves, he or she is not taking the wealth of information with them. This committee or select group must have an awareness of the interplay between the university and accreditation standards regarding the assessment process. A change in either set of standards has implications for the type of assessment data needed and possibly the method of data collection.

Each level of a department has an assessment plan and disseminates this plan to the faculty members. In the College of Nursing, this means the undergraduate, master's, DNP, and PhD program of studies should each have an assessment plan. Many aspects of these plans will be connected as common courses are shared; however, they may address different objectives for a given degree. It is important for the program of study to align with accreditation standards along with the standards set forth by the institution to develop an assessment plan. The assessment plan should indicate both course and assignment specific detail matched within an SLO or accreditation competency. Multiple points of data collection for a given criteria is important to track the number of students who met the requirement as well as provide opportunity for those who did not meet the requirement to do so.

It is important to share the assessment plan with members of the faculty. Faculty may be unaware of the pertinent role they play in program assessment and may not realize how changing objectives and course assignments affects the assessment plan. In this way, faculty should be aware of the communication needed for changes within a course. Reviewing the course syllabi can ensure pertinent information is not removed

and can easily be assessed for any needed adaption, i.e. identify accreditation standard or university standard with each course SLO and assignment. Consequently, assignments that do not meet any given standard are reviewed. Aligning syllabi objectives and assignments to the *Essentials* and NONPF competencies removes unnecessary content. In addition, assignments acknowledge the component of the assessment plan for students. Finally, curriculum and assessment committees should collaborate to ensure collection of data needed to complete the assessment plan.

Developing an assessment plan to ensure students are meeting requirements from both the university and accreditation standards is a challenge. Meeting standards for different organizations that may have similar but slightly different requirements requires attentiveness on part of the program to ensure students are meeting all expectations. However, organization and communication helps create a plan with clear measurements of student learning to ensure they are ready to meet the needs of the workforce. Having both accreditation and university standards strengthens outcomes and enhances the curriculum for students.

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# Assessing the Effectiveness of Instructional Technology Tools in Online Business Programs

*By Denise Bollenback and Wendi M. Kappers*

**Abstract**

An evaluation rubric was developed to assess instructional technology tools used within online business programs to enhance learner engagement and content presentation skills. The evaluation was designed to determine if the instructional technology within the lesson helped to engage the learner, impact the assessment of outcomes, and improve the ability to present the content of the learning material. In this case study example, an instructional lesson was developed to instruct learners in creating a Work Breakdown Structure (WBS) using a project management software tool. This lesson was designed to be completed in 30 minutes or less. Step-by-step guides for obtaining a free copy of the project software application and creation of a WBS, including a visual example of a finished WBS, were built into this lesson. The lesson also included performance objective alignment to support future analysis of student performance across all courses in which this lesson existed within the Learning Management System (LMS). This evaluation rubric was built into the LMS for the evaluation team (n= 69) and yielded highly positive results of the training lesson across five categories of evaluation: (a) Technology Use (24.05/25), (b) Learner Engagement (19.05/20), (c) Goals and Objectives (19/20), (d) Assessment Value (19.05/20, and (e) Content Presentation (14.05/15). The rubric is one form of evaluation to address assessment elements within courseware development and will be validated in future research projects.

**Overview**

An evaluation rubric was developed to assess instructional tools used within courses to improve learning. This case study concerns using a project management software tool for creating a Work Breakdown Structure (WBS) within business programs, such as the Bachelor of Science in Technical Management and the Master of Science in Project Management. A thirty-minute lesson includes a step-by-step guide for obtaining a free copy of the project management software tool software application and creating a WBS, concluding with a visual example of a finished WBS. The lesson also included performance objective alignment to support future analysis of student performance across all applicable courses within the Learning Management System (LMS). The intended audience for this lesson was learners within the project management minor currently enrolled in the Bachelor of Science in Technical Management degree program.

A formative evaluation was completed to ensure the lesson was designed well and met the instructional design criteria required by the program. The goal of the evaluation was to determine the appropriateness of the training lesson in relationship to other activities within the course and alignment with other courses in the program. For ease of use, the evaluation rubric was built into the LMS for the evaluation team (n= 69) and once completed yielded highly positive results of the training lesson across five categories of evaluation: (a) Technology Use (b) Learner Engagement, (c) Goals and Objectives, (d) Assessment Value, and (e) Content Presentation. The evaluation also included interviews and aggregated rubric results from learners, an instructional design team, and subject matter experts. The rubric will continue to be used and validated in future research projects. The intent of this article is to give the motivation for the rubric's use and initial findings.

## Design

This was a mixed methods study using rubric evaluations and interviews. The subject matter experts and the instructional design team were provided with an adaptation of the exemplary course rubric (Appendix A) previously used to assess instructional design. This rubric was completed online, and students were sent a formative evaluation protocol to ensure each participant was fully aware that all information collected within the interviews would be kept confidential and that the interview was completely voluntary. Once consent was given, an interview was conducted with the learners after completing the lesson. Aligned with the foundations of good qualitative interpretative research (e.g., Creswell, 2007;Glesne, 2011), the interview responses were coded to find trends and related responses. The interviews were analyzed again to minimize the number of categories and to identify emerging themes. The themes were validated by comparing the results with the aggregated rubric results from the instructional design experts and subject matter experts.

## Participants

The subjects for the formative evaluation using the evaluation rubric included subject matter experts, the instructional design team, and business degree seeking students with various levels of prior experience and knowledge of project management concepts and tools. The subject matter experts were instructors and instructional designers. The instructors (N=6) were grouped into categories; those who were considered experts in the field of project management or those who have taught many courses in the program and with some considered to be course monitors indicating a high familiarity with the material. The instructional designers (N=6) were experts in designing courses and rubrics within the LMS and were experienced with project management courses. It should also be noted that some of the subject matter experts were also certified project managers and, therefore, very familiar with the WBS process.

The new student group (n=16) included anyone having little knowledge of the WBS, and who was not familiar with the project management software tool. These were postsecondary students ages 25 and older, many of whom were military with little background in using software applications. The second learner grouping (n=22) was selected for being partially familiar with project management phases, but not necessarily familiar with how to create WBS. This second group had some experience using software applications, but not the project management software tool. This learner grouping represented an intermediate target group. Lastly, the third learner grouping (n=19) represented the intermediate-to-advanced target group. These students were well-versed in project management phases and knew how to create a WBS outline. This grouping was also familiar with using the project management software tool and had hands-on experience in managing projects within the workplace. However, while experienced, this group did not have experience with creating a WBC using the project management software tool,

## Instruments

The WBS activity was designed within the LMS and included an evaluation rubric that aligned to the lesson objectives. An email with account instructions was sent to the experts along with the procedure for completing the evaluation rubric. The evaluation rubric was also set up within the LMS to allow the subject matter experts and the instructional design team to fill out the rubric online for ease of use. Once the evaluation rubric was completed, a statistical report was created to display the summary results. The WBS was evaluated using the work breakdown structure rubric. Phone interviews with students were also conducted with open ended questions regarding the overall impression of the use of the project management software within the courses. The results of the interview were collected and used after completion of all learner interviews. The results were coded and categorized to identify themes. The

themes were verified by a self-check by the instructional designer. The learner was also given access to the instructional design interactive rubric to evaluate the effectiveness of the integration of the project management software tool within the lesson. The results of the interview questions and the instructional design rubric were used to measure the effectiveness of the lesson and whether or not the learner was able to meet the performance objectives outlined in the lesson.

**Procedures**

The experts were sent an email with the protocol document that was signed and sent back to the instructional designer. Once the signed document was received, a second email was sent with account information and instructions for accessing the lesson within the Learning Management System. This email also contained instructions for accessing the interactive rubric. The experts then completed the lesson. Upon completion of the lesson, the experts used the rubric to score and submit the results. The lesson and evaluation were completed within two weeks. Submitted results were captured and reported back with a rubric statistics report.

All learners were sent the protocol document to be signed and sent back to the instructional design team. Once the protocol document was received, the learners completed the lesson within the Learning Management System on their own. The learners were given 30 minutes from the time they access the lesson to complete the lesson. Upon completion, a member of the instructional design team used the WBS rubric to assess the deliverable. A phone interview was setup within the following week with the learner. The learner also completed the instructional design interactive rubric to evaluate the effectiveness of the integration of the project management software tool within the lesson. All results from both the learners and the experts were compiled in the final evaluation results of the print-based instructional lesson.

A phone interview was conducted, and results of the interviews were collected and coded and categorized to identify themes. The themes were verified by a self-check by the instructional designer. The learner was also given access to the instructional design interactive rubric. The results of the interview questions and the instructional design rubric were used to measure the effectiveness of the lesson and use of the instructional technology, which included whether the learner was able to meet the performance objectives outlined in the lesson.

**Results**

The evaluation rubric was categorized with 25% weighted on the use of technology, 20% on learner engagement, 20% on goals and objectives, 20% on assessment value, and 15% on content presentation. The concluding report presented the following results, which were overwhelming positive as categorized under the five assessment areas of the rubric: (a) Technology Use (24.05/25), (b) Learner Engagement (19.05/20), (c) Goals and Objectives (19/20), (d) Assessment Value (19.05/20, and (e) Content Presentation (14.05/15). Interviews were also conducted but varied based on the level of involvement from subject matter experts, the instructional design team, and learners.

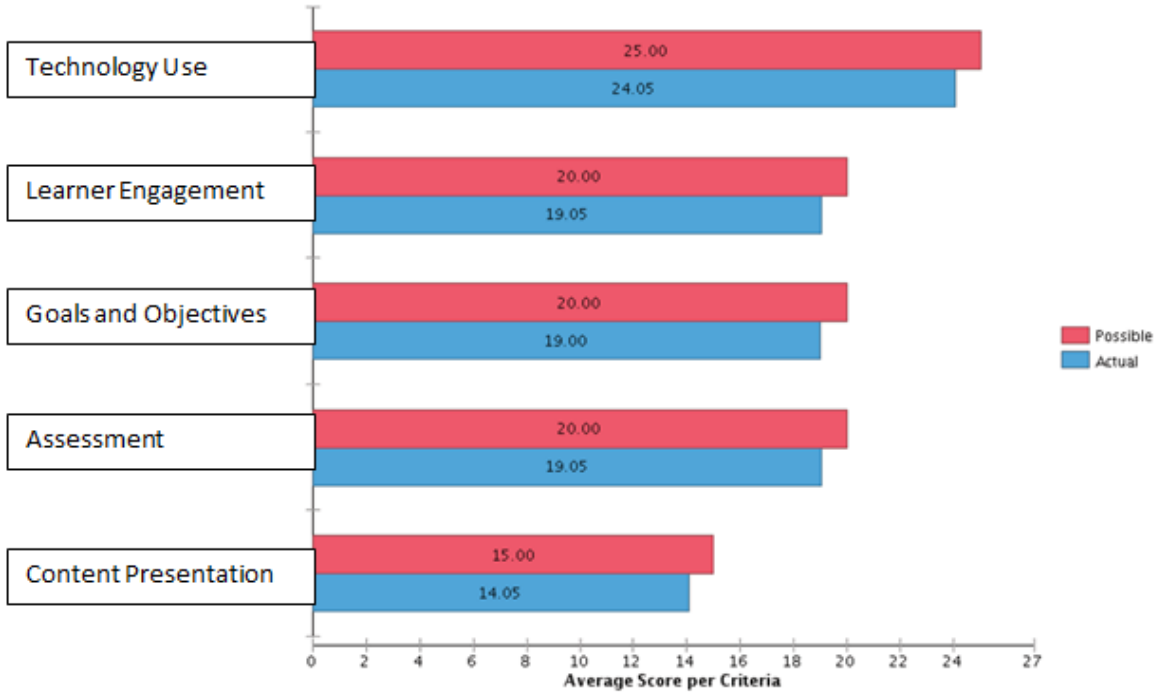
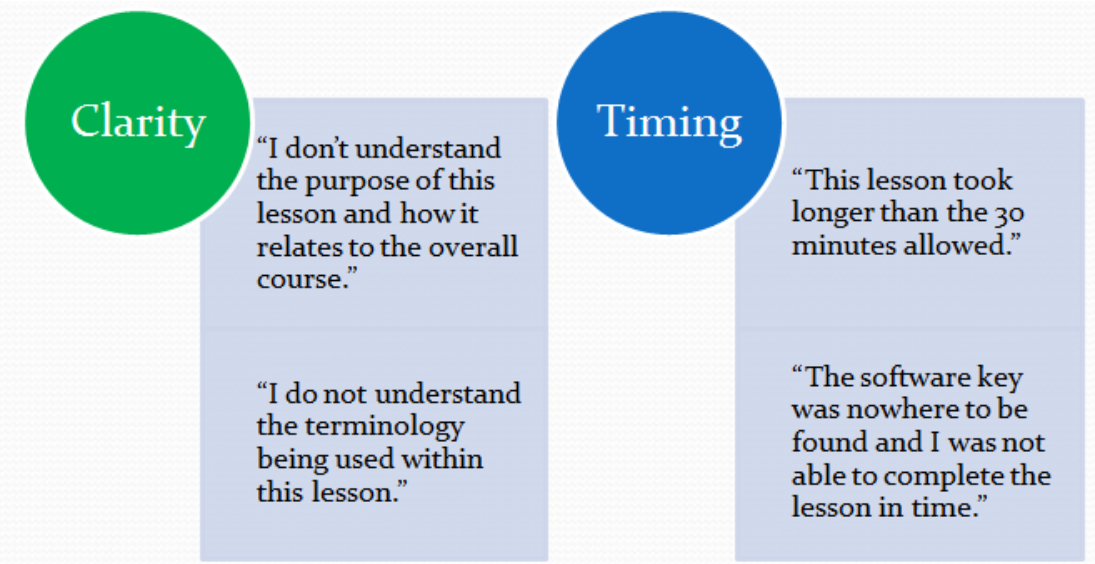



***Figure 1: Rubric Statistics Report Results***

The following coding themes are the end result of the training lesson assessment:




The subject matter experts, who had been in the program curriculum for a longer period, indicated that the instructional materials were clear, and they had no trouble knowing what to do at first glance. They understood the concepts from the onset, and therefore, easily followed the set of instructions related to the concepts to create the WBS. The subject matter experts, having less involvement in the overall development other than teaching the course one time a year, were not so impressed with the training lesson

at first glance. They felt more clarity was needed in the beginning instructions. The more advanced learners, who had been in the program and experienced with the curriculum for at least a year, also felt that the lesson was easy to follow, however the new learners had more difficulty with the terminology used within the training lesson since they were not as familiar with project management terminology.

The structure and placement of the instructional materials were within good design standards according to all interviewed, except for the WBS example. The experts and learners on all levels agreed that the example WBS should be place in a separate document and more clearly labeled. Both advanced experts and experienced learners felt the instructions were intuitive. However, the newer experts and learners took more time to go through the print-based lesson. On average, the lesson took 40 minutes to complete rather than the expected 30-minutes. The most confusing part of the lesson appeared to be after the software was downloaded and a software key was needed to be obtained. These directions were not included as an instruction in the materials alongside where and when to enter the key within the software application. Therefore, it was determined that additional details and instructions were needed within the training lesson. Overall, all experts and learners would recommend this lesson to a colleague or friend once more detail and clarity has been added to the instructions.

## Conclusion

Based upon the results of this first round of evaluation, the authors will revise the instructional materials to include a more detailed step-by-step document explaining in detail how to obtain the product key and where to insert the product key within the project management software tool. Additionally, an overview document will be included to explain the lesson's purpose alongside an alignment to the performance objective. Lastly, it was confirmed that a glossary should also be included for the learners to explain the terminology as it relates to the lesson.

In conclusion, we found this evaluation rubric to be useful in obtaining invaluable feedback with regard to evaluation of the inclusion of tools for learning. While the use of the project management software worked well for those who had more project management experience, there were several aspects within the design of the course activities which required additional training and instructions for both instructors and learners.

## *APPENDIX A: INSTRUCTION DESIGN RUBRIC*

| Sub-Category (weight) | Exemplary 5-6 | Accomplished 3-4 | Promising 2 | Incomplete 1 |
|---|---|---|---|---|
| **Goals and Objectives (x3)** | • Goals and objectives are easily located within the course<br>• Goals and objectives are clearly written at the appropriate level and reflect desired outcomes<br>• Goals and objectives are written in measureable outcomes (students know what they are expected to be able to do)<br>• Goals and objectives are made available in a variety of areas in the course (within the syllabus and each individual learning unit) | • Goals and objectives are located within the course syllabus or the individual learning units<br>• Objectives are written to reflect desired learning outcomes, although not all are written as measureable outcomes<br>• Students have some understanding of what is expected of them | • Goals and objectives are not easily located within the course<br>• Goals and objective are not clearly written in measurable learning outcomes<br>• Students may be unsure of what they are expected to be able to do<br>• The level does not match the desired outcomes | • Goals and objectives are not easily located within the course<br>• Some are missing and others poorly written<br>• The level does not match the desired learning outcomes |
| **Content Presentation (x3)** | • Content is made available or "chunked" in manageable segments (i.e., presented in distinct learning units or modules)<br>• Navigation is intuitive<br>• Content flows in a logical progression<br>• Content is presented using a variety of appropriate mechanisms (content modules, single pages, links to external resources,)<br>• Content is enhanced with visual and auditory elements; supplementary resources are made available and are well-integrated with other course materials (integrated publisher resources, e-textbooks, course manuals, etc.) | • Content is made available or "chunked" in manageable segments (i.e., presented in distinct learning units or modules)<br>• Navigation is somewhat intuitive, but some "exploring" is required to determine the flow of content<br>• Content is presented using a variety of mechanisms (content modules, single pages, links to external resources, RSS Feeds, print material)<br>• Visual and/or auditory elements occasionally enhance the content; supplementary resources are made available (course CDs, textbooks, course manuals, etc.) | • Some content segments are overly large (or possibly too small) for the specified objectives<br>• Navigation is only occasionally intuitive, thus the flow of content is sometimes not easily determined<br>• The design does not avail of the content presentation tools (content modules, single pages, links)<br>• Few or no visual and/or auditory elements are used to enhance the content<br>• Supplementary resources may be made available (course CDs, textbooks, course manuals, etc.) | • Content is not "chunked" into manageable segments;<br>• Navigation is not intuitive and the flow of content is unclear<br>• The design does not avail of the content presentation tools (content modules, single pages, links)<br>• No visual or auditory elements are used to enhance the content;<br>• Supplementary resources are not made available (course CDs, textbooks, course manuals, etc.) |

| Sub-Category (weight) | Exemplary 5-6 | Accomplished 3-4 | Promising 2 | Incomplete 1 |
|---|---|---|---|---|
| **Learner Engagement (x3)** | • It is clear how the instructional strategies will enable students to reach course goals and objectives<br>• Course design includes guidance for learners to work with content in meaningful ways<br>• Higher order thinking (e.g., analysis, problem solving, or critical reflection) is expected of learners and explained with examples or models<br>• Individualized instruction, remedial activities, or resources for advanced learning activities, such as integrated publisher resources, are provided | • Instructional strategies are designed to help students to reach course goals and objectives, although this relationship may not be obvious to learners<br>• Guidance is provided, but could be improved with greater detail or depth<br>• Higher order thinking is required for some activities but is not well-explained or supported (e.g., by providing examples of "good answers")<br>• Differentiated instruction (such as remediation) may be available on a limited basis | • It is not clear how the instructional strategies will help learners achieve course goals and objectives<br>• Guidance in using content materials may only be provided on a limited basis<br>• Higher order thinking is not required or encouraged<br>• Differentiated instructional opportunities are not provided, although there may be supplementary content resources available | • Instructional strategies do not provide students with skills needed to achieve course goals and objectives<br>• Content is provided but it is not clear what students are expected to do with it<br>• Higher order thinking is not expected from students<br>• No supplementary resources or activities are provided for remediation or advanced study |
| **Technology Use (x1)** | • Tools available within the LMS are used to facilitate learning by engaging students with course content<br>• LMS tools are used to reduce the labor-intensity of learning (e.g., providing links to needed resources where they will be used in the course, integrating publisher resources that are tailored to the course materials, and providing streamlined access to supplementary materials)<br>• Technologies are used creatively in ways that transcend traditional, teacher-centered instruction<br>• A wide variety of delivery media are incorporated into the course<br>• An effort has been made to use low-cost or no-cost materials when available | • Tools available within the LMS could be utilized more (or more creatively) to engage learners with course content<br>• LMS tools are made available to assist students, but could be organized or arranged for even greater usefulness<br>• Technologies within the course are used in many cases merely to replicate traditional face-to-face instruction<br>• There is some variety in the tools used to deliver instruction | • Tools available within the LMS are not used to their full extent or not used when it would be appropriate to do so<br>• Only a few tools (of those available within the LMS) are used in a way that streamlines access to materials and activities for students<br>• Technologies within the LMS are used primarily by instructors and not students ("students as recipients of content" model)<br>• There is little variety in use of technologies within the LMS | • Technologies used within the LMS do not engage students with learning<br>• Tools that could reduce the labor-intensity of online instruction are not utilized<br>• Students are not expected to use technologies available within the LMS<br>• Only a few technologies available within the LMS are used |

| Sub-Category (weight) | Exemplary 5-6 | Accomplished 3-4 | Promising 2 | Incomplete 1 |
|---|---|---|---|---|
| **Expectations (x3)** | • Assessments match the goals & objectives<br>• Learners are directed to the appropriate objective(s) for each assessment<br>• Rubrics or descriptive criteria for desired outcomes are provided (models of "good work" may be shown, for example)<br>• Instructions are written clearly and with sufficient detail to ensure understanding | • Assessments match the goals & objectives<br>• Rubrics or descriptive criteria for desired outcomes are included for some assessment activities<br>• Instructions are written clearly, with some detail included | • Students are assessed on the topics described in the course goals and objectives<br>• There may be some explanation of how assessments will be scored/graded Instructions lack detail that would help students understand how to complete the activities | • Assessments bear little resemblance to goals & objectives<br>• Expectations or grading criteria are not provided<br>• Instructions are limited or absent |
| **Assessment Design (x3)** | • Assessments appear to measure the performance they claim to measure (e.g., activities are explained using appropriate reading level and vocabulary)<br>• Higher order thinking is required (e.g., analysis, problem-solving, etc.)<br>• Assessments are designed to mimic authentic environments to facilitate transfer<br>• Assessment activities occur frequently throughout the duration of the course<br>• Multiple types of assessments are used (research project, objective test, discussions, etc.) | • Assessment activities have "face validity" (i.e., they appear to match the curriculum)<br>• Some activities involve higher order thinking<br>• Assessment activities may focus on tasks similar to real-world application of skills<br>• Multiple assessments are included; at least three different types of assessments are used | • It is not clear whether the assessment activities actually measure the desired skill<br>• The vast majority of assessments require only low-level thinking (memorization, for example)<br>• Assessment activities typically do not include tasks that are relevant beyond the scope of this course; multiple assessments are included<br>• Two types of assessments are included, at a minimum | • Assessment activities appear to lack validity due to bias, lack of clarity in questions or tasks, or because students are evaluated on performance unrelated to the stated objectives<br>• No higher-order thinking skills are required to complete assessment activities<br>• There is little or no evidence of authenticity built into assessments<br>• Assessments are too few and far apart for the course content |
| **Self-assessment (x1)** | • Many opportunities for self-assessment are provided;<br>• Self-assessments provide constructive, meaningful feedback | • Some self-assessment activities are included<br>• Self-assessments provide feedback to learners | • There may be self-assessment activities, but they are limited in scope and do not offer useful feedback | • A few self-assessments may be included, but they offer little more feedback than flash cards |
| **Accommodations for Disabilities (x1)** | • Supportive mechanisms allow learners with disabilities to participate fully in the online community<br>• The design and delivery of content integrate alternative resources (transcripts, for example) or enable assistive processes (voice recognition, for example) for those needing accommodation<br>• Links to institutional policies, contacts, and procedures for supporting learners with disabilities are included and easy to find<br>• Design factors such as color, text size manipulations, audio and video controls, and alt text reflect universal accessibility considerations | • Supportive mechanisms allow learners with disabilities to participate in the online community for most activities<br>• The design and delivery of content integrate some alternative resources or enable assistive processes for those needing accommodation<br>• Links to institutional policies, contacts, and procedures to support learners with disabilities are included but may not be easy to find<br>• Design factors such as color, text size manipulation, audio and video controls, and alt text have been considered in some cases | • Supportive mechanisms allow some learners with disabilities to participate fully in the online community<br>• The design and delivery of content do not include alternative resources nor enable assistive processes for those needing accommodation<br>• Links to institutional policies, contacts, and procedures to support learners with disabilities are not evident<br>• Design factors such as color, text size manipulation, audio and video controls, and alt text have not been considered | • Supportive mechanisms allow some learners with disabilities to participate in the online community for some activities<br>• The design and delivery of content do not apply alternative resources nor enable assistive processes for those needing accommodations<br>• Links to institutional policies, contacts, and procedures to support learners with disabilities are not evident<br>• Design factors such as color, text size manipulation, audio and video controls, and alt text have not been considered |

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# Occupational Therapy and ACOTE: A Case Study in Curriculum Framework Development

*By Erin Crisp*

## Introduction

In January 2017, as the doctorate in occupational therapy (OTD) program at Indiana Wesleyan University pursued accreditation through the Accreditation Council for Occupational Therapy Education (ACOTE), program director Doug Morris determined that a diagram of the curriculum framework would be beneficial.

A curriculum framework diagram visually presents the priorities of the academic program. Even though every accredited OTD program aligns to the same ACOTE objectives, each institution has distinct features meant to meet a specific need or speak to a particular audience. An institutional, OTD curriculum framework, then, is both visually appealing and functional. It helps situate the essential big ideas of the program, regardless of the course a student is taking. Presenting the framework on the cover of every syllabus, homepage of every course site, and on the program website, reinforces the essential big ideas and provides faculty with a visual method for connecting student learning in one course, assignment, or project to that of the next. A framework visual is not a logo, although a simplified version can become part of the program's branding. In summary, a curriculum framework is a bit like a mall map that is presented to the students regularly with different "You are here" stickers on it. Students should be able to build connections among concepts. A visual framework helps learners conceptualize the goals of the program, i.e. What concepts are foundational? What principles wrap-around everything? What is the central idea?

The program faculty members had already aligned courses to the ACOTE objectives and demonstrated this alignment in a document listing each objective with two courses where that objective would be taught and assessed. The faculty had also written program learning outcomes representing eight broad goals of the program but had concerns that these broad program outcomes would be lost among the "weeds" of the granular course objectives without careful planning and visual representation.

Morris contracted with an internal instructional designer and director of assessment, the author of this article, to create a curriculum framework diagram, revise the curriculum design document, create a matrix spreadsheet showing how outcomes are addressed from course to program to institution, and document a system for continuous review and improvement.

## The Development Process

After reviewing the provided documentation, I met with the OTD faculty members to present a draft curriculum framework diagram, along with the results of a curriculum analysis. The following items had previously been provided to me to inform the development of the framework. First, the program uses a popular occupational therapy approach called Person-Environment-Occupation-Performance (PEOP) as its guiding model. PEOP results in a more complexed and nuanced analysis of client situations because it looks at multiple contexts affecting clients. Second, program learning outcomes, authored by the faculty, specify the program's expectations for students. Third, the Occupational Therapy Practice Framework

(OTPF) has a client-centered focus and represents the foundational knowledge and skill to be obtained. A central feature of all of these guiding elements is "client-centered care." Client-centered care, therefore, became the core concept of the framework. While synthesizing ACOTE standards and faculty outcomes, several other themes surfaced: servant leadership, moral character, scholarship/research, global perspective, evidence-based practice, occupational therapy theory, and advocacy.

At this point, the team paused to refine the program learning outcomes. The before and after revisions are reflected in Table 1. Revisions were suggested so that program outcome statements would better reflect what students should be able to do after they graduate. The following tests were applied to each outcome and discussed by the group:

- Is it observable/measurable?
- Is it attainable given time or location constraints?
- Is it relevant to the discipline and/or the field of practice?
- Can it be demonstrated under authentic conditions?

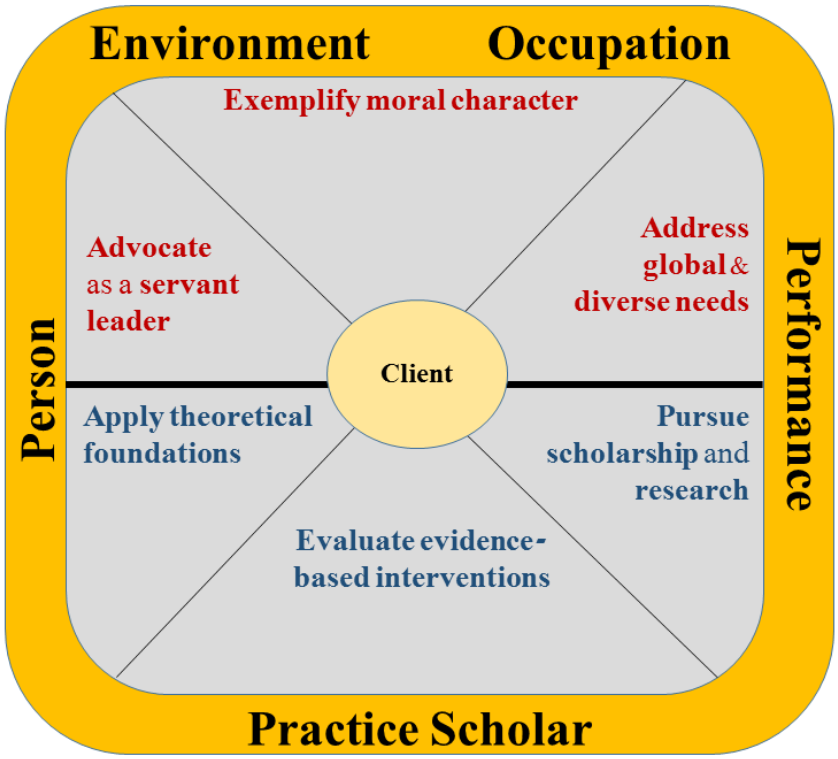
| **Upon successful completion of this program, learners will be able to:** | |
|---|---|
| **Before** | **After** |
| 1a. Demonstrate **service to** and active involvement in local, state, or national occupational therapy and related health professions organizations. | 1. **Advocate**, on behalf consumers and the profession, as **servant leaders** who are actively involved in professional and community organizations. |
| 1b. **Advocate** on behalf of rehabilitation consumers and professional organizations dedicated to the provision of occupational therapy and engage in meaningful educational programs to promote occupational therapy and the needs of consumers before healthcare policy makers. | |
| 2. Articulate Christ-like attitudes, values, and worldview related to occupational justice and address the individual, institutional, and societal issues of marginalized communities and populations. | 2. Promote occupational justice as people of **moral character** who apply Christ-like attitudes and ethical values. |
| 3. Describe occupational needs of culturally and socioeconomically diverse communities through practical experience gained in a transcultural experience. | 3. Address **global** & diverse occupational needs. |
| 4. Increase the body of knowledge in occupational therapy practice by conducting and disseminating scholarly research that demonstrates critical thinking and a commitment to lifelong learning. | 4. Increase the body of knowledge in occupational therapy through **scholarship** and **research** in preparation for practice and life-long learning. |
| 5. Evaluate, synthesize, and apply occupational therapy scientific knowledge to create effective intervention programs and/or protocols that are culturally inclusive and client-centered. | 5. Apply occupational therapy scientific knowledge to **create evidence-based intervention** programs and/or protocols that are culturally responsive and client-centered. |
| 6. Apply theoretical models and practice frameworks when developing systems for the delivery of occupational therapy services. | 6. Apply **theoretical** models and practice frameworks when developing systems for the delivery of occupational therapy services. |

| | |
|---|---|
| 7. Discern appropriate use of value-adding behaviors to attain inter-professional objectives while collaborating with others. | Omit |
| 8. Demonstrate advanced-practice competency in the student's chosen specialty area of occupational therapy practice by engaging in an "Advanced Experiential Component" project as part of their residency course. | 7. Demonstrate **advanced-practice** competency in a chosen residency area. |

***Table 1: Before and after of Program Learning Outcomes***

After the new program outcomes were approved in the various committees, the group reconvened to work on the framework visual. The instructional design consultant presented a draft diagram, and the group refined language, resulting in a sketch to send to the graphic designers for completion (Image 1). The top three elements inside the framework reflect the *art* of occupational therapy while the bottom three reflect the *science*. The team felt that a color scheme could provide a visual reminder of the artistic elements and the scientific elements of OT. The statement to the right of the diagram serves as the description of the image. Using the image, every faculty member could easily provide the same verbal communication with students, orienting every class to the central tenants of the program, providing repetition of key ideas and cohesiveness across courses.

***Image 1: Draft of program framework diagram and descriptive statement***




**The Art and Science of Occupational Therapy at IWU**

The IWU OTD graduate will keep the client at the center and will:

- Advocate as a servant leader
- Exemplify moral character
- Address global & diverse occupational needs
- Pursue scholarship & research
- Evaluate evidence-based interventions, and
- Apply theoretical foundations

Within the PEOP framework, as a practice scholar.

The graphic designers in the marketing department returned a proof, Image 2, which was adjusted somewhat, but which has since been made available, in several image formats, for all faculty to use in their course syllabi and/or online course sites.

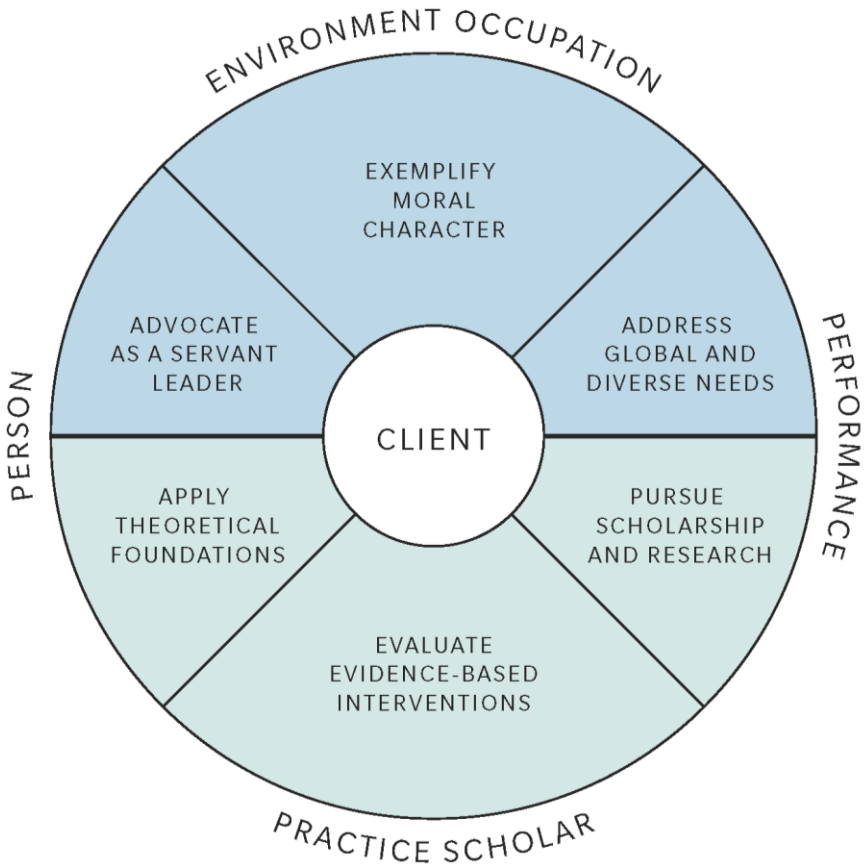



***Image 2: Marketing proof for OTD curricular framework***

The final work for the curriculum aspects of the OTD program involved creating a matrix to show where and how the eight program learning outcomes would be assessed. Using a spreadsheet, the program learning outcomes were listed down the middle column with alignments to courses designated to the right in sequence (Image 3). Each program learning outcome is assessed in at least one trimester each year. In the pictured example, PLO #1 is assessed in the Fall of year one in OTD 700. (Image 3 is for illustration only and is not a full or actual map.)

## Program Matrix: Occupational Therapy

| Threaded Program Learning Outcomes | | | | Year One (SAMPLE) | | |
|---|---|---|---|---|---|---|
| ACOTE | WCA | PLO # | Program Learning Outcome | Fall | Spring | Summer |
| | | 1- Servant leadership | Demonstrate service to and active involvement in local, state, or national occupational therapy and related health professions organizations. | OTD 700 | | |
| | | 2- Moral character | Articulate Christ-like attitudes, values, and worldview related to occupational justice and address the individual, institutional, and societal issues of marginalized communities and populations. | | OTD 725 | |
| | | 3- Scholarship/ Research | Increase the body of knowledge in occupational therapy practice by conducting and disseminating scholarly research that demonstrates critical thinking and a commitment to lifelong learning. | OTD 705 | | |
| | | 4- Global perspective | Describe occupational needs of culturally and socioeconomically diverse communities through practical experience gained in a transcultural experience. | | IPE 730 | IPE 730 |

***Image 3: Program matrix: Occupational therapy***

Next, to complete the program matrix, a tab on the spreadsheet was designated for each trimester of each year: Year 1 Fall, Year 1 Spring, Year 1 Summer, Year 2 Fall, etc. On each tab (see Image 4), the following information was captured: the program learning outcome to be assessed; alignments to ACOTE objectives; the course ID; the aligned course learning objective; the key assessment title; and descriptions of the four levels of criteria used to evaluate the student's demonstration of learning. When appropriate, criteria level description cells sometimes include exam scores instead of criteria descriptions.

| Year One: Fall A (SAMPLE) | | | | | 1- Introductory | 2- Developing | 3- Competent | 4- Mastery |
|---|---|---|---|---|---|---|---|---|
| PLO # | Other Alignment | Course ID | Course Learning Objective | Key Assessment Title | Mastery Criteria | | | |
| 1- Servant leadership | B.2.10 | OTD 700 | Compare, contrast, and integrate a variety of models of practice and frames of reference used in occupational therapy | Framing Project | Describe the key aspects of an entry level attempt. | Describe the key aspects of a product that shows promise but isn't competent. | Describe the key aspects of a minimally competent product. | Describe the key aspects of an excellent product. |
| 3- Scholarship/ Research | B.3.3 | OTD 700 | Employ theories, models of practice, and frames of reference to direct and inform evaluation and intervention. | Theory, Practice, and Model Evaluation Project | Describe the key aspects of an entry level attempt. | Describe the key aspects of a product that shows promise but isn't competent. | Describe the key aspects of a minimally competent product. | Describe the key aspects of an excellent product. |
| 6- Occupational Therapy Theory | B.2.9 | OTD 700 | Articulate support for quality of life, well-being, and occupational engagement of persons, groups, or communities to promote physical and mental health and prevent injury and disease while considering the context and environment. | Quality of Life Paper | Describe the key aspects of an entry level attempt. | Describe the key aspects of a product that shows promise but isn't competent. | Describe the key aspects of a minimally competent product. | Describe the key aspects of an excellent product. |
| 8- Advanced Practice | B.4.1 WCA.3.d | OTD 700 | Effectively utilize standardized and non-standardized screening and assessment instruments to establish the need for occupational therapy intervention. | Final Exam: Screenings and Assessments | 40-59% | 60-74% | 75-89% | >90% |

***Image 4: Year One Fall tab in the OTD program matrix***

For example, in year one of the Fall trimester, four key assessments are administered across four different courses, targeting four different program learning outcomes. Collected learning outcome data will be aggregated, anonymized, and assessed by the faculty team during program review along with several other sources of data.

The curriculum work of the team was documented and provided to ACOTE along with sample templates that would be used for data collection and program review.

**Results**

ACOTE accreditors conducted their site visit on September 11-13, 2017. The findings of the on-site visit team resulted in a report which included six major strengths, one area for enhancement, and full compliance for seven years of accreditation. The report (https://www.indwes.edu/adult-graduate/programs/doctorate-of-occupational-therapy/rac_october_10_17.pdf) is public, and the six strengths highlighted in this brief two-page document testify to the effectiveness of the curricular framework that we developed. Morris, the program director, indicated that the on-site visit team members were very pleased with the results of the curriculum work.
In summary, there were several lessons to be learned from this accreditation success story. First, look within your institution for personnel who can be leveraged to benefit the accreditation efforts of a new program or school. Faculty and leaders who are new to the institution may be unaware of the resources that exist outside of their own department. Centers for teaching and learning, faculty development personnel, assessment committees, institutional researchers, library services, and instructional design departments can all make valuable contributions to accreditation efforts.

Second, a curriculum framework that provides a high-level visual concept map of the major emphases of the program may seem decorative, but it could become an instrumental aspect of instruction. When learners are oriented to the major emphases of the skills they are expected to develop, across a program, they are better able to organize, store, and retrieve concepts from long-term memory. Skills are more readily reinforced from one course to the next as faculty employ a shared terminology to discuss concepts and principles.

Finally, engaging faculty in discussions around learning outcomes and key assessments strengthens their focus when providing instruction. Many faculty come into the institution from a disciplinary context where they have a tremendous depth and breadth of subject-matter expertise--so much so that, at times, students lose sight of the crucial concepts they are to be internalizing. Effective and efficient continuous improvement practice involves collaboration among faculty members who are willing to investigate difficult and insightful questions about their own instruction, and the Occupational Therapy faculty members, in this case, did so with commitment, honesty, and openness.

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# Using Evidence to Inform Accreditation Decisions: Council on Social Work Education

*By Robert Lucio, Michael Campbell, Maridelys Detres, and Heather Johnson*

**Abstract**

Industries ranging from healthcare to higher education have embraced strategies to leverage data as tools for evidence-based decision making. Data integration efforts have seen increased use as a critical part of institutional efforts (faculty and administration) to secure programs' ongoing accreditation (Blaich & Wise, 2011; Emil & Cress, 2014; Hutchings, 2010). Despite the mounting pressures from accreditation agencies, the literature indicates that using evidence to take meaningful action is still a concern (Rickards & Stitt-Bergh, 2016; Schoepp & Benson, 2016). While there is no easy answer to this dilemma, the application of a Data Engagement Framework that guides institutions in a variation of the planning, doing, checking and acting (PDCA) cycle could be an important tool in sustained higher education accreditation.

Increasingly, institutions of higher education are experiencing pressure from accrediting agencies for transparency and student learning accountability. This paper will explore one university's efforts to apply a data-driven approach to its Council on Social Work Accreditation (CSWE) reaffirmation efforts. We propose the Data Engagement Framework for data integration as a potential guiding structure for higher education to earn and sustain accreditation from regulatory bodies. This paper presents the framework and interview content from key stakeholders who recently applied this framework in their reaccreditation process.

## Background

The CSWE is the accrediting body for bachelor's and master's level social work programs in the United States. Starting in 2008, CSWE adopted a competency-based education approach for meeting Education Policy and Accreditation Standards (EPAS: Council on Social Work Education, 2015). This ensures students are able to demonstrate mastery of specific knowledge, values and skills, referred to as competencies. EPAS 2008 references ten competencies; in 2015, this was reduced to nine. These competencies are further broken down into practice behaviors, which are easier to measure tasks and abilities. While the competencies and practice behaviors are set by CSWE, their manifestation and assessment are left up to the programs. CSWE requires that programs provide evidence of student learning and changes to programs based on outcome assessments. There is an expectation that outcome assessment data are then used to continuously promote curriculum improvements.

## Data Engagement Framework

The Data Engagement Framework is broken down into the three main sections: Data, Analysis & Findings, and Taking Action (See Figure 1). In developing a clear framework for data integration, leaders are challenged to first identify the **right data**. Once the data have been identified, they must have **easy access to that data** in a useable format. The data must then be cleaned and presented in a format which enables

**analysis**. The results of this analysis allow leaders to **identify** programmatic problems. As these problems are identified, leaders **take action** to make improvements. Finally, they return to the beginning of the framework to **evaluate the impact** of the changes on outcomes.

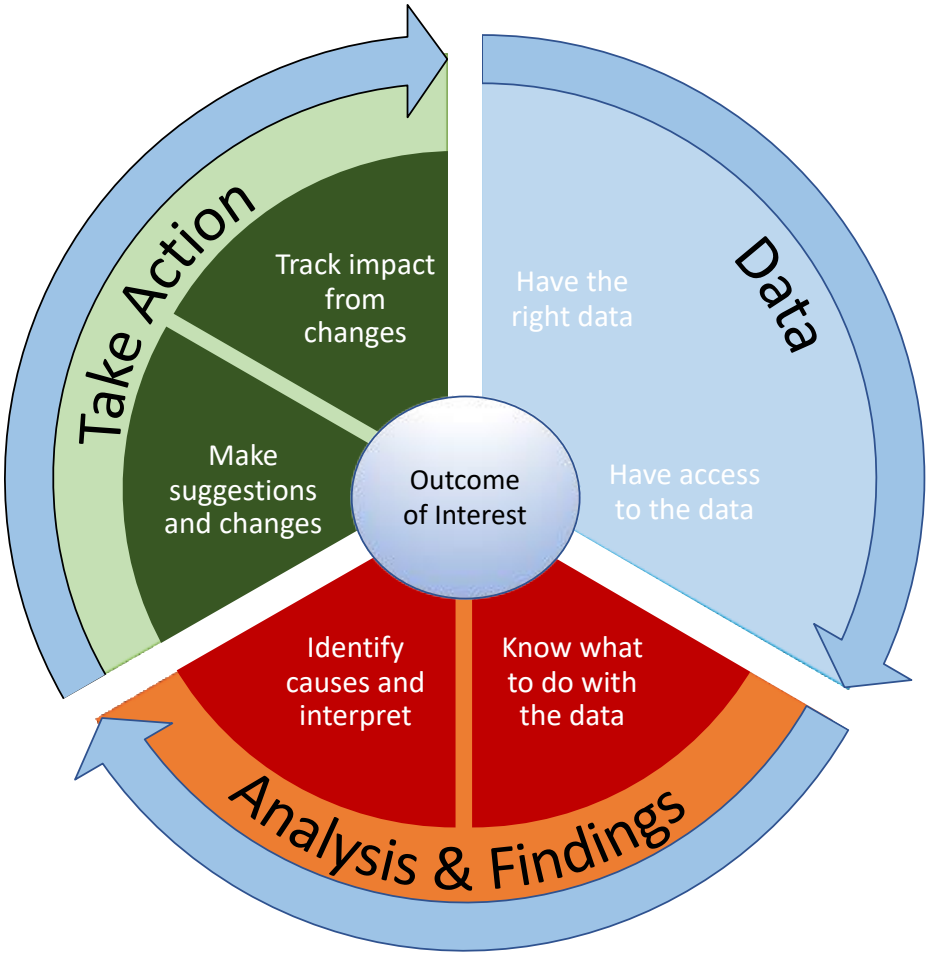


*FIGURE 1. DATA ENGAGEMENT FRAMEWORK*

This six-stage Data Engagement Framework serves as a guiding process for higher education accountability and accreditation efforts. This framework rejects seeking data to confirm predetermined answers. Instead, it is a process that tells a story and answers key critical questions. In the proceeding sections of this paper, these stages will be explored through excerpts from leaders in higher education who used this framework during their reaccreditation process. Following the successful application of the Data Engagement Framework in their CSWE reaccreditation, we interviewed four key informants (the program director, assistant program director, and two assessment committee faculty members) directly involved in the assessment piece of the reaccreditation. They were asked questions about the application of the Data Engagement Framework as it related to their reaccreditation, and the interview was transcribed, coded, and analyzed by the study team.

**Right Data**

The data available must answer the questions that are being asked. Regarding the data needed for CSWE accreditation, the key informants discussed having a mix of data types, foci, and audiences to triangulate the data. The interview revealed that while the data were useful for accreditation, to be the right data, they also had to provide a continuous process for improving learning and promoting a quality education. The three themes that developed included student learning outcomes, experiential activities, and feedback.

> **Student Learning Outcomes**. First and foremost, the group discussed the need to collect student learning data. While CSWE provides a list of competencies that should be measured, their translation into operationalized and specific measurable items is the challenge. One participant noted: observing students performing competencies in the field is the best way to measure mastery. However, this practice is often logistically unfeasible.
>
> **Experiential Activities.** The key informants highlighted two specific examples where experiential activities were providing the right data. As part of the social work program, field evaluations, in which agency supervisors rate students on their mastery of competencies, are a major component of assessment. These evaluations assess the application of classroom content. Another experiential activity that was mentioned was a summer group exercise in which students work together to propose a new program or idea to community leaders which addresses an area of social justice. The most innovative part of this activity was that an outside evaluator provided feedback on "what [the program] was teaching, the concepts, were applicable to the real work world."
>
> **Feedback**. Alumni and current student surveys provided additional feedback on program strengths and weaknesses. Although developed to ensure continuous program improvement, the surveys also provided useful feedback for reaccreditation. While the student surveys provided real-time feedback on individual courses and program progression/satisfaction, the alumni surveys demonstrated the overall effectiveness of the program. For instance, alumni surveys were helpful because the results provided a reflection on former students' education as it applies to their current employment.

**Access to the data**

It is not enough for the right data to exist. Rather, the data must also be easily accessible. Data that is cumbersome to access is unlikely to be utilized. The interviewees expounded on the importance of systematic data collection and dashboards, which allowed ready access to the right data.

> **Systematic data collection system**. The key informants revealed they had recently moved to an outcomes assessment collection system (Chalk & Wire). Previously, the gathered assessment evidence consisted of grades and assignment scores, but this provided scant details regarding student learning. Now, rubrics, which are linked to practice behaviors and competencies, are scored entirely in Chalk & Wire. The new system created one place where detailed data was collected and stored. One interviewee noted: "Chalk & Wire, that's been our biggest tool for holding it all, analyzing it and helping us drill down."
>
> **Dashboards**. Another way to access the data was through dashboards created using outcomes assessment data. These dashboards, continuously available on the school website, provided the

ability to examine individual student, course, and program level indicators. Social work faculty can move between examining competencies at the programmatic level (macro) and the student or assignment level (micro): "[The dashboards] give…much more reliable and substantive information on every level than we had before."

**Know how to use the data**

After access to the right data is secured, it is important to know what to do with the data. Anyone who views the data must be able to interpret them. This step could require extensive training. However, if the data are presented in a format with which stakeholders are familiar (dashboards), interpretation is simplified. The interviews identified the theme of benchmarking as a way to pinpoint areas of weakness.

**Benchmarking**. The goal of gathering the data at a granular level is to assess programmatic strengths and weaknesses and identify whether competencies are met. To assess student mastery of competencies and practice behaviors, the social work program developed benchmarks. Achieving proficiency requires students score a 3 (on a 4-point scale) on a competency or practice behavior. The dashboards were then designed to highlight areas that fell below the benchmark. "We could identify specific courses and drive down even more to assignments and even individual students, which gave us a full…comprehensive look to see what was going on."

**Identify causes and interpretation**

When data is easily interpretable, root causes can then be ascertained. The Social Work faculty readily identified the underperforming benchmarks using the dashboards. However, making changes to teaching, courses, or programs, requires that the root cause of learning gaps be identified. To accomplish this task, the interviews revealed the need for data precision and adequate data collection duration.

**Data Precision**. The data should be examined using multiple lenses. In one case, a practice behavior did not reach the benchmark so it was scrutinized at the program, course, and assignment levels. The social work program was able to pinpoint which courses and assignments assessed the problematic practice behavior. This enabled the faculty to explore the possibility of poorly designed or improperly sequenced assignments.

**Adequate data collection duration**. The stakeholders stressed caution with making changes on too few data points or too short of a time frame. It takes time to fully understand the causes of program strengths or weaknesses. To make meaningful changes, every avenue should be explored. One respondent remarked "it's not good practice to make drastic changes from only a few data points."

**Use the data/Make changes**

Once an area for improvement has been identified, the concern must be addressed. However, the intended action must be planned, supported, and fully implemented to be successful. This requires understanding that the change process should be focused on continuous improvement and viewed holistically.

**Continuous improvement.** The CSWE reaccreditation process occurs every eight years. However, programmatic data must be reviewed continuously, rather than only in the eighth year, to stay in compliance with reaccreditation standards. Additionally, all aspects of the program should be reviewed, not just student learning. Since the social work program gathers continuous feedback, they looked at "using data and trying to change not just content, but processes and delivery as well."

**Holistic approach.** Using data to make changes must be understood in the context of the entire program. Changing one aspect can produce a deleterious domino effect. For instance, rather than simply examining the assignments that assessed the underperforming practice behavior, the program reviewed the entire sequence of courses and assignments. "It could be that the [underperforming] practice behavior was self-reflection, but what we see is that there are other courses that could also be emphasized to be sure we achieve it better."

### Evaluate the impact of the changes on outcomes

The final step in the Data Engagement Framework is to track the impact of any interventions. This involves implementing changes through re-visioning, updating the system and addressing programmatic processes.

**Re-visioning.** One of the discussed elements was the need to use data and feedback to reflect on program efficacy: "We…laid out the whole program. That was eye-opening, and actually that was almost a form of data collection as well." The use of data throughout the entire process helped identify workload, balance among assignments, and brought everything in the program "into the sunshine." Respondents also noted that this should be done frequently to ensure "holistic program [delivery] and…[that] assignments are distributed in a reasonable way."

**Updating the system.** This refers to continuously monitoring the data, updating dashboards, courses, and changing rubrics/assignments. To support this effort, the Social Work program "hired a data manager to keep track of all the data and how it fits together." This was also seen as a commitment from the university.

**Programmatic processes**. Finally, the social work program is working on several key pieces related to their programmatic processes; one of the projects is the creation of predictive models of student success factors. This will identify struggling students and the areas in which they need assistance. These models will predict success factors as early as admission to the program. One example of this was student grades on the first paper: "that's a red flag. If you fail that paper, that's telling me a lot of things." After the first semester, the students' grades and status are compared to how well they did on the first paper in the program.

### Implications for Assessment Practice

Engaging faculty in each step of the assessment process is challenging. Time constraints and other commitments can make it difficult for faculty to fully engage in evidence-informed decision making. However, the Data Engagement Framework helps guide the process by providing key elements that must be in place for evidence-informed decision making. While it was not without growing pains, having a

framework to guide us in developing mechanisms to support the growth and knowledge of assessment campus-wide has changed the way we approach teaching and learning. Additionally, the Data Engagement Framework is applicable in any environment where data is used to drive decisions, not just higher education. It provides a systematic way to gather and analyze data to make meaningful changes.

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# Assessment Strategies for Specialty Accredited Graduate Health Programs

*By Susan Moeder Stowe*

Holding specialty academic accreditation is perceived by those inside and outside the classroom as an indicator of high quality in educational program delivery, including academic and administrative quality of structures, processes and outcomes. One may typically believe that having specialty accreditation, such as accreditation from the Commission on Accreditation of Healthcare Management Education or the Commission on Collegiate Nursing Education (CCNE) assures high quality assessment. Accreditation has offered "effective and highly economical quality assurance for more than a century" (Gaston, 2014, p. 16). However, while rigorous self-study and evaluations take place when programs seek specialized accreditation, there may remain an underlying struggle with academic assessment of student learning. This can be especially true in nursing and other healthcare disciplines, which may tend to focus more on external testing for assessment and assuring curriculum content delivery. Although accreditation is thought to be a key driver for assessment (Ewell, Paulson, & Kinzie, 2011) and accredited programs are thought to have assessment that is more fully developed (Banta, 2001), this may not always be the case.

Programs with specialty accreditations face challenges with program assessment along with additional standards and data requirements. These challenges also include barriers in the language of assessment (Hutchings, 2010), including misunderstandings of differences in assessment and evaluation. In addition, barriers to skills needed for designing, implementing and reporting assessment, and the ongoing nature of assessment (Hutchings, Ewell, & Banta, 2012) can underpin faculty resistance to this work. Specialized accreditation involves the valuation of the institution as well as the specific program or discipline and cannot be determined effectively outside of the institutional context (Gaston, 2014). Programs therefore may lean less toward assessment and more on evaluation, as there is a comfort in assurance and attainment, rather than improvements and change. Designing and documenting assessment and the subsequent improvements can be a challenge for accredited programs, yet there should be some balance between assessment and evaluation.

The program of interest is a Master's of Science in Nursing (MSN) degree, with specialty accreditation from the CCNE, the autonomous accrediting agency of the American Association of Colleges of Nursing (AACN). The program consists of multiple tracks toward different specialties (i.e. Family Nurse Practitioner, Nursing Administration) and certificate programs. Each course in this curriculum has a full-time faculty Course Chair. This program is offered by a medium size private Midwest university. The College of Nursing also offers accredited BSN and DNP programs. The University is accredited by the Higher Learning Commission on an AQIP quality improvement pathway. A faculty governed University Assessment Committee is a noted university-wide assessment support. This committee has codified the annual program assessment of student learning outcomes in academic policy with each university program required to have a 3-year plan for assessment and to submit an annual assessment report. Early in the university's evolution of assessment, the MSN program was submitting the accreditation based systematic evaluation as the assessment report. This report followed more closely the evaluation standards for accreditation rather than program learning outcomes and included minimal assessment of student learning. What follows here are strategies used to bring this accredited graduate nursing program from presenting their accreditation-based systematic evaluation plan as assessment to a more mature level of assessment; that is centered on student learning outcomes. Key challenges were a lack of understanding of the difference between evaluation for assurance and assessment for improvement and attitudinal barriers

regarding the cyclic nature of assessment. The approach taken was one of building upon current practices with the intention toward a better balance of evaluation and assessment.

**Strategies for Overcoming Assessment Barriers**

The program's use of evaluation for annual assessment reporting displays multiple barriers to assessment including a language of assessment barrier (Hutchings, 2010), demonstrating a misunderstanding in the terminology of assessment versus evaluation. It also indicated other potential barriers of a lack of skill in assessment methods and resistance, due to perceived extra work (Hutchings, 2010). Multiple strategies were used to address these identified program assessment barriers, including a faculty review and revision of program outcomes and curriculum mapping facilitated by a faculty person rather than an administrator. Other strategies include sharing the 3-year assessment plan among faculty, and the use of course chair role to facilitate assessment documentation.

The initial strategy to address the language barrier was to complete a review of the current program outcomes and mapping of the curriculum. The initial work consisted of an intentional review and revision of clear program outcomes that the program faculty members identified as measurable. From here, curriculum mapping was undertaken that documented clear links between program outcomes, course objectives, and the AACN MSN *Essentials*. This major mapping work was led and facilitated by a faculty member, rather than administrator, and included aligning the accrediting standards with program outcomes, and then aligning the program outcomes to course objectives and to individual course assignments. The mapping activity was introduced at a meeting of the graduate committee with an enlarged table and post-it notes, asking them to indicate what program outcomes their courses fulfilled in some way. This was then compiled and presented back to them. During subsequent meetings they were asked to indicate more specifically the course objectives that related to each program outcome and what student assignments are linked to the course objective. It was challenging for faculty to examine where an outcome was introduced, developed and mastered in the entire curriculum, so it was key in the curriculum mapping to begin by assigning tasks in smaller chunks that built upon each other to develop the whole map. The results were presented during monthly committee meetings over the course of an entire academic year, with faculty doing this curriculum work between meetings and delivering to the facilitator to compile. This gave the faculty group a common understanding of the entire curriculum and how students would be assessed.

Another aspect in this language barrier for this specialty accredited program is that the measures in evaluation are much more voluminous and potentially more systematic yet can remain elusive in assessing student learning. For example, in nursing a common measure of evaluation used by accreditors is the first-time pass rate. This instills a sense that the program offers what the accreditor determines as baseline knowledge and skill. These rates may only be reported annually or bi-annually and may not help a program determine where specific deficits may lie in the curriculum and student learning. Examining test blue-printing and score breakdown may offer some insights yet may not indicate where a specific program gap may lie. Therefore, for this nursing program, the use of a blend of measures, internal/external, and direct and indirect systematically, collected over the course of the academic year, was found to be a more useful strategy for assessment. Using not only credentialing pass rates, but also specific student assignments identified in the curriculum map to assess student learning gives a greater scope of assessment across the curriculum. Also used are evaluations of students by faculty and preceptors, student evaluation of clinical sites, and alumni surveys which all help to guide where there may be gaps for student learning.

The use of a dedicated faculty person with skills in assessment processes and facilitating discussion helped alleviate some of the barrier of knowing how to go about assessment along with reducing some resistance of faculty with the "extra" tasks involved in the work of assessment. In addition, this initial curricular work was undertaken over an entire academic year. Ewell and Jankowski (2015) offer that most early assessment attempts fail because of the push and rush to get something into place for assessment without having the broader and intentional dialogue as to the purpose and value assessment. Reviewing and developing these plans over time and multiple iterations allowed for faculty reflection on practice and potential innovations.

Finally, the role of Course Chair, an established department academic role for full-time faculty, was used to support assessment. With faculty members have the liberty of changing something when it is not working in the classroom experience, in a curriculum with multi-sectioned course offerings taught by multiple faculty both full-time and adjunct, consistency between courses is important so key content and skills are covered, and assessment measures are gathered across course sections. The aim is for the Course Chair to identify the assignments that cover the course objectives and then create a single scoring rubric to assess student work across all sections. Rubric data can then provide systematic ongoing examination of assignments and assessment data that reflect progress on program and course outcomes. One final activity to mention with the Course Chair strategy that supports curriculum cohesion and assessment is an annual analysis and evaluation of each course in the curriculum. For each course, the Course Chair reports out on a brief analysis of the course including any areas of concern and recommendations for changes for the following year.

**Attention to Attitudes**

Assessment is the work of faculty and needs faculty leadership for meaningful interpretations and making improvements in the classroom. This takes ongoing work and persistent dialogue with faculty and administrators in the development of a continuous quality improvement mindset. According to good practice principles for assessment of student learning, "assessment works best when it is ongoing, not episodic" (Hutchings, Ewell, & Banta, 2012). Promoting university-wide assessment requires a flexibility in how the process is introduced and developed for different disciplines (Swarat, et al., 2017) as well as addressing the "single-point" or episodic (one time per year) notion of assessment.

This episodic perspective was evidenced by the program assessment being compiled annually by an administrator in this program and then forgotten until the next reports is due, similar to accreditation reporting. This is contrary to the notion of continuous improvement and systematic assessment and harkens to the work of evaluation and assuring the standard has been met. The strategy taken to address this was to begin to develop regular communication about assessment among the faculty. Placing assessment as a regular meeting agenda item and demonstrating how it can be useful and valuable in the classroom was used as a strategy to help keep assessment in the forefront of faculty thinking more regularly. This led to informal inquiry and dialogues outside these meetings among faculty.

This focus on making assessment routine was also found to help address faculty resistance to assessment related to the lack of comfort and experience with these components of assessment, which can also lead to the faculty view of assessment as extra work (Cain & Hutchings, 2015). Nurses have a familiarity with assessing patients and their needs yet translating assessment into their classrooms can be challenging. Faculty sometimes struggle with how to design for, collect, analyze, and present data for meaning, as these are not always easily extricated systematically from their classroom experiences Presenting data and

analysis during these regular meetings allowed faculty to determine meaning and plan course and curriculum changes is important to their autonomy.

## Conclusion

Although specialized academic accreditation can assure a measure of quality to a set of standards, programs are still challenged with effective assessment of student learning and barriers to assessment for improvement. A balance between assessment and evaluation needs to be developed in the perspective of faculty who teach in programs with specialized accreditation. Strategies to address some of these obstacles include monitoring for language barriers, strengthening curricular alignment, developing faculty leadership roles, and engaging faculty in ongoing strategic dialogue. These strategies can help with faculty attitudes of assessment as episodic and resistance to the work of assessment and contribute toward the balance of accreditation and internal institutional processes.

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# Ensuring Student Success: A Systematic Approach to Specialized Programmatic Accreditation

*By Henriette Pranger, Paula Dowd, and Kelli Goodkowsky*

**Abstract**

Academic programs that seek accreditation will benefit from establishing practices that provide early identification, quick response, and immediate improvement in student achievement. Goodwin College undergoes a minimum of two accreditation visits a year due to its wide range of career-focused academic programs. Every accrediting association has different standards and resources; Goodwin implemented seven cross-program features to support individual programmatic accreditation efforts. We describe these features and provide examples of how the histologic science program applies them, with the aim of supporting efforts to successfully achieve and maintain specialized programmatic accreditation.

**Ensuring Student Success: A Systematic Approach to Specialized Programmatic Accreditation**

Maintaining public confidence in higher education remains a crucial topic in national discourse. An indicator of quality is institutional accreditation by one of the six regional accrediting agencies (U.S. Department of Education, 2017). American regional accreditation systems were initiated in 1885 with the New England Association of Schools and Colleges (NEASC) (Prince, 2012). Regional accreditation signifies that the college or university meets or exceeds criteria for institutional quality, which is periodically assessed through a peer review process. An accredited college or university has the necessary resources to achieve its mission through appropriate educational programs, substantially fulfills that mission, and gives reasonable evidence that it will continue to do so in the foreseeable future (Garfolo & L'Huillier, 2015).

Less frequently discussed but equally important quality indicators are accreditation of an individual academic program by a specialized accrediting agency and the program's assessment via a peer review process. Accountability issues facing higher education and proof of successful student learning outcomes are a predominant source of concern for not only specialized accrediting bodies but also individual stakeholders (Morse, 2014). Specialized accreditation, overseen by an external organization and using consistent criteria and trained reviewers, can help to achieve a level of credibility that internally driven program reviews cannot (Suskie, 2015).

A college or university's efforts to obtain and maintain regional and programmatic accreditation can create a culture of continuous improvement. Successful efforts involve faculty, staff, and students in planning and evaluation and assure that the curriculum, educational experiences, and demonstrated student outcomes meet the criteria for professional licensure.

Goodwin College, a career-focused, nonprofit college in Connecticut, offers 48 degree programs, 10 of which obtained specialized programmatic accreditation. Table 1 shows that Goodwin College will continue to complete a minimum of two accreditation visits a year. Each visit is preceded by a year of intensive preparations (e.g., self-study development, mock visit). The college has successfully completed

accreditation activities required by the New England Association of Schools and College's Commission on Institutions of Higher Education since 2004. The college mission is

> … to educate a diverse student population in a dynamic environment that aligns education, commerce and community. Our innovative programs of study prepare students for professional careers while promoting lifelong learning and civic responsibility. As a nurturing college community, we challenge students, faculty, staff and administration to fully realize their highest academic, professional and personal potential (Goodwin College Catalog, 2018, p. 6).

***Table 1: Goodwin College's Accreditation Site Visits (average two per year)***

| Accreditation Visits | 2016 | 2017 | 2018 | 2019 | 2020 | >2020 |
|---|---|---|---|---|---|---|
| | Focused Report | Substantive Change Visit | | Follow-up Visit | 10-Year Visit | |
| College's Regional Accreditation | X | X | | X | X | |
| Programmatic Accreditation Site Visits | | | | | | |
| AS Dental Hygiene | X | | | | | 2023 |
| AS Early Childhood Education | | X | | | | |
| AS Histologic Science | | X | | | | 2026 |
| AS Medical Assisting | | | | X | X | |
| AS Occupational Therapy | | | X | | | |
| AS Respiratory Care | | | X | | | |
| AS Nursing | | | | X | | |
| BS Nursing | | | | X | | |
| MS Nursing | | | | X | | |
| AS Vision Care Technology | X | | | | | 2022 |
| BS Human Services, pending | | | X | | | |

Over the years, the faculty and staff have consciously reflected upon how to obtain and maintain specialized programmatic accreditation so as to identify best practices that work across programs. As a result of their dedicated efforts, recent accreditation visits for four academic programs (Histologic Science, Ophthalmic Science, Dental Hygiene, and Early Childhood Education) were notably successful. In each case, the final report indicated that all accreditation standards were met or exceeded. No official findings or recommendations resulted from the peer review. Maintaining accreditation poses ongoing challenges, and all programs remain at risk of being placed on probation if a standard is not met (e.g., licensure pass rates or student employment outcomes). Goodwin College created systems to monitor changes in student and environmental conditions, identify problems quickly, and respond with the full support of the college's administration.

## The Process

Accreditation standards, reporting processes, and resources from individual agencies differ greatly; however, Goodwin College identified seven institutional features that contribute to successful accreditation efforts when implemented across programs. The features create a campus culture in which proactive oversight is ongoing, opportunities for improvement are identified and addressed earl, and effective practices and lessons learned are shared across programs. Every program has tools to monitor student

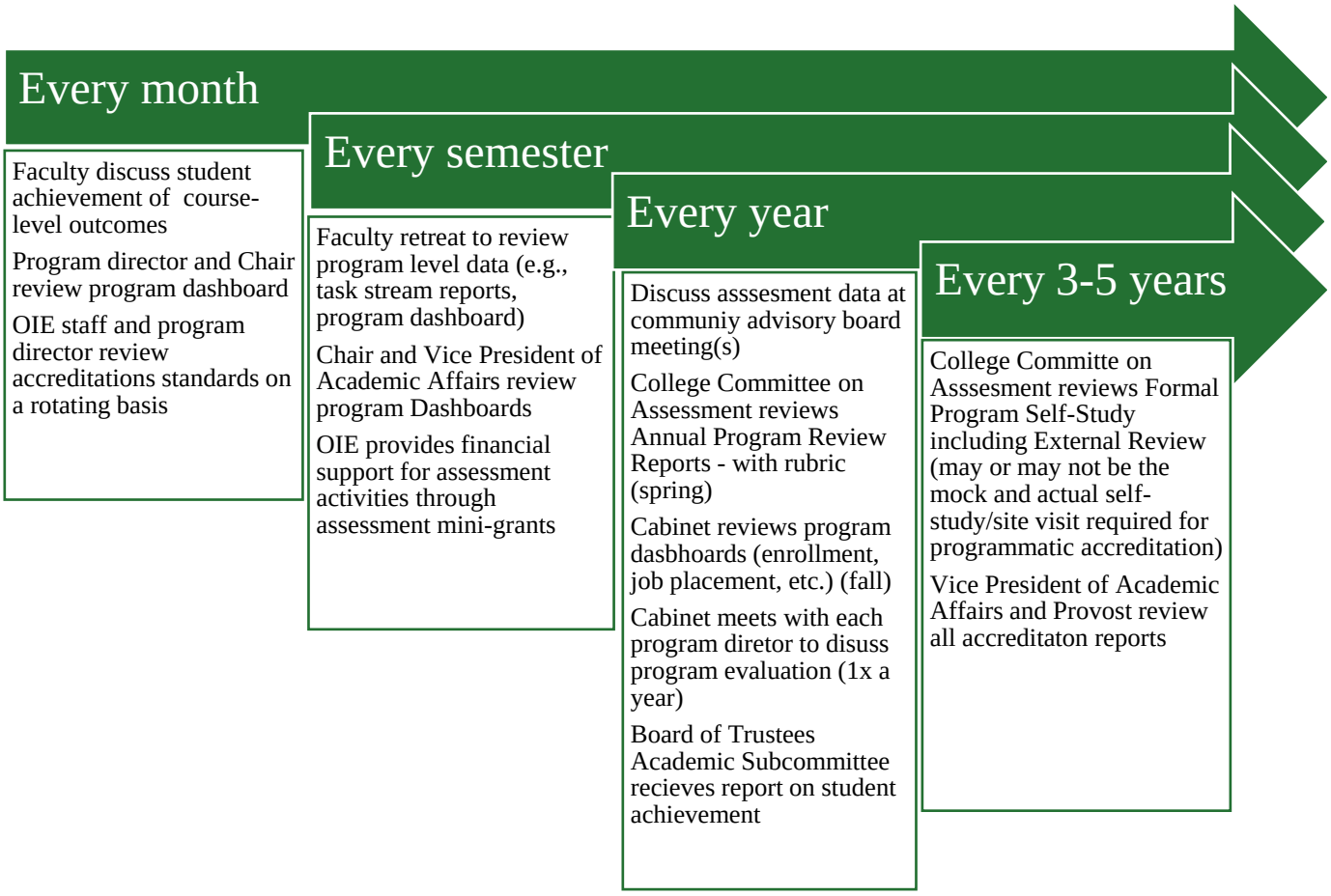
success, including student outcome dashboards, an annual assessment plan, professional development funds, online resources, access to external consultants, and regular support from administration, that are documented through an institutional policy. A central structure (e.g., staff devoted to supporting accreditation efforts across the college) contribute to a collaborative process (Deckard, 2017).

***Table 2: Institutional-Level Features That Support Specialized Programmatic Accreditation***

| **Feature** | **Explanation** | **When** | **Who** |
|---|---|---|---|
| Student Outcome Dashboards | The Office of Institutional Effectiveness (OIE) designs and updates a data dashboard that contains student information system data and external testing data. This was originally static—(Excel) and updated monthly; it is now dynamic (Izenda). Program directors enter licensure pass rates as they are made available from the licensing agency. The college's academic leadership also has access to the program dashboards. | Daily | Director of Institutional Research (IR) Assessment<br>Program Directors (PD)<br>Department Chairs<br>VP of Academic Affairs |
| Program-level Assessment Project | This assessment project includes a curriculum map and direct and indirect evidence of student learning related to at least two program outcomes (e.g., task stream). Some programs collect data on all outcomes annually. It depends on the particular accreditation requirements. | Annually | Director of IR and Assessment<br>PD<br>Faculty<br>Students |
| Ongoing External and Internal Professional Development | Roundtable discussions to share best practices and update resources. Topics include<br>• Successful advisory boards<br>• Moving the needle: using dashboards<br>• Assessing capstone program outcomes<br>• Writing and editing self-studies<br>• Involving students in accreditation<br>• Collaborating with academic support services<br>• Organizing and running a mock visit<br>• Activities before, during, and after a site visit<br>Funds are provided for program directors and faculty to participate in their professional associations, attend association accreditation workshops, and volunteer as evaluators. | Every other month | Office of Institutional Effectiveness<br>Center for Teaching Excellence (CTE) |
| Online Resources | This is a repository of information developed by program directors and OIE staff (e.g., pictures of evidence room setups, examples of timelines, agendas, self-studies, and checklists). OIE also designed a one-hour self-paced online module on accreditation is available for all new program directors. | Every semester | OIE/CTE |
| Consultant Support (e.g., Readers and Mock Site Visit Evaluator) | An external consultant and editors provide self-study development support. A different consultant with relevant experience conducts a mock site visit, with everything as if it were the real visit (e.g., meets with students, faculty, and staff, reviews all evidence, reports to program and administration to identify areas of strength and opportunities for improvement). | At least every five years; possibly again prior to actual site visit | OIE<br>Program Directors |
| College Accreditation Policy | This college policy describes philosophy, procedures, supports, and responsibilities; it is reviewed and updated every spring. | Annual | OIE, Academic Departments |
| Support from Administration | There are regular meetings to discuss program success and challenges. Program directors share accreditation standards with co-curricular and service units. | At least monthly | VP of Academic Affairs<br>Department Chair<br>Program Director |

**Timeline**

The Office of Institutional Effectiveness provides suggested timeline and checklists for program directors. For example, the timeline below illustrates the ongoing review of student learning outcomes at the program level by faculty and administration. Critical activities completed by all programs listed by month, semester, and years.




**Program Example**

Program directors align their curriculum to accreditation standards, monitor student achievement, and continuously adapt their program to changing conditions (e.g., student challenges, shifting faculty expertise, workplace demands, field advancements, and national trends). Program-level accreditation can motivate continuous quality improvement in the curriculum and student learning outcomes (Ramsay, Sorrell, & Hartz, 2015). For example, the National Accrediting Agency for Clinical Laboratory Sciences (NAACLS) accredits Goodwin College's Certificate in Histologic Science. The program director's accreditation experiences provide examples of Goodwin College's systematic support for programmatic accreditation. The program director's hospital accreditation experience, which focused on patient outcomes through laboratory practice, prepared her to learn about educational accreditation that focuses on student

outcomes. She initially familiarized herself with NAACLS' accreditation standards by actively participating in the professional association as a volunteer peer reviewer for a Histologic Science Program's accreditation self-study. Her top priority was to work with her faculty to ensure that every accreditation standard was aligned with the college's program outcomes and covered adequately in the course content (e.g., curriculum map). She worked with her faculty to ensure that key assignments were explicitly linked to program outcomes on every syllabus, and that the capstone course project was aligned to every program outcome.

After reviewing the curriculum during monthly meetings, the program director used assessment tools to monitor student achievement on a semester basis. For example, she collected and documented student, faculty, and preceptor feedback every semester that consistently indicated the final course (clinical placement) could be strengthened to better support students during the clinical experience. Additional assessment data led the program director to re-outfit the student laboratory to simulate a true clinical experience for students and assure their success during the clinical internship. The program director invited preceptors, students, and annual advisory board members to participate in a series of focus groups, and the data collected led to a redesign of the course. Such changes included a review of mathematical concepts during the clinical experience and a more robust review of mathematical concepts in the introductory lecture course and practice lab. The program's mock site visit in 2016 highlighted NAACLS' future math prerequisite for all Histotechnician programs. The focus group results also revealed a need to revise the preceptor evaluation form to correspond more precisely with program outcomes. The program director also replaced *percent achieved* on rating scales with comments. The faculty increased the frequency of student evaluations, which now occur at the beginning, middle, and end of the class and the clinical placements. Evaluation data is used to provide individualized student feedback and for guiding curricular improvements.

The director also regularly accesses professional licensing exam data, which is broken into curricular segments. She enters the scores into an electronic dashboard, and she and her chair review the trends monthly. They identify issues early and work with faculty and staff to address them. For example, she noticed a downward scoring trend in lab operations and fixation concepts. She and the faculty purchased additional equipment and increased lab operations activities, which improved student scores in those exam segments.

The program director and her faculty also complete an annual assessment project for the college's Office of Institutional Effectiveness (OIE). The data and analysis support provided by the institutional research (IR) staff allow her to complete a more complex program-level assessment project than she could complete alone. For example, in 2014, the program began accepting students into a hybrid cohort, enabling them to participate in online lectures and on-campus laboratories. Using the American Society for Clinical Pathology Board of Registry Exam results, the program director collected data scores from program performance reports to assess how students enrolled in the hybrid cohort compared with students from the fully on-campus cohort. The OIE provided support by determining the best way to compare the two groups with formal statistical analysis.

The director also uses external data to improve her program. For example, she facilitates a community advisory board meeting twice a year. The board is involved in curricular review and discusses student outcome data. The board indicated that graduates need leadership skills, so the program director added a

leadership module to an introductory histology course. She refined the module assignment and related assessment based on student feedback. Students continue to mention their leadership insights in their capstone projects. The accreditation peer reviewers highlighted the successful involvement of her advisory board, which led directly to an invitation for the program director to participate in a panel discussion on how to run effective program advisory boards.

The program director also obtains external feedback from consultants with NAACLS experience. She hired a former program director to read and discuss drafts of the program's self-study and a consultant to run a mock site visit six months before the actual site visit. Both experts suggested improvements that allowed her to better align her program with accreditation standards and position her students for success. The program director's last accreditation visit was successful—no recommendations or findings—and the accreditation period was extended until 2026.

The Histologic Science's program director mentors other new program directors. All program directors must learn and adapt their efforts to meet their specific association guidelines, but Goodwin College's directors support each other's' efforts. The college's program directors meet once a semester to discuss their efforts and continue to identify effective management and assessment practices that contribute to student success.

In summary, regional accreditation, specialized programmatic accreditation and internal program review processes work together to create a successful program. A successful program has clear evidence of 1) expected outcomes, 2) effective assessments of student learning, and 3) ongoing program improvements (e.g., in curricula, staffing, course content, mode of delivery) (Eubanks, 2018).

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# Methods for Addressing the Improvement of Experiential Learning Outcomes in Programs Accredited by the Commission on Sport Management Accreditation (COSMA)

*By Megan Schramm-Possinger and Kristi Sweeney*

**Abstract**

This study assesses sport management students' tolerance for ambiguity, as well as their perceived learning gains, after completing a senior-level, experiential learning course from which student outcome data for COSMA accreditation were derived. As part of the class, sport management students were responsible for creating, implementing, executing, and evaluating a resource development plan for a local non-profit organization. All are important competencies – requiring the adaptability often reported to be under cultivated in sport management graduates – subsumed within multiple program-specific student learning outcomes. Results indicate that those who had a lower tolerance for ambiguity reached a higher percentage of their goal. Additionally, participants reported having gained "real world experience," fostering their skills as fundraisers as well as their ability to work well in groups. Other reported benefits include cultivating professional skills (*i.e.* critical thinking and leadership), personal growth, and vocational exploration. Discussion, implications of these data, and suggestions for subsequent assessment practices are provided, so that student learning outcomes pertaining to experiential learning for COSMA accreditation and corresponding procedures can be replicated to foster needed professional competencies for graduates of sport management and other higher educational programs.

## Introduction

To date, over 450 institutions house some level of sport management education in their curriculum, including 220 master's programs in sport management in the U.S. (NASSM, 2017). Many of these programs are accredited by the Commission on Sport Management Accreditation (COSMA), which requires accredited programs to define what students will know and be able to do upon completion of their course of study, assess the degree to which these outcomes were met, describe practices for continuous programmatic improvement based on findings (Laird, Johnson and Alderman, 2015). To ensure students gain the knowledge and critical skills necessary to succeed in sport management careers, COSMA also requires accredited programs to ground their outcomes-based assessment plans in best sport industry practice (COSMA, 2016). Included therein is practical and experiential learning. As such, COSMA-accredited sport management programs should encourage and require innovation and creativity in corresponding professional realms (COSMA, 2016).

## Literature Review

As noted above, defining relevant, precise student learning outcomes that ensure graduates of sport management programs have the requisite skills to succeed in the workplace is central to assessment practices for COSMA accreditation. Smaldino, Lowther, and Russell (2007) report that all student learning

outcomes should include defining who performs the task, as well as the task itself, and the level at which it will be performed. In the context of sport management programs, the majority of students "performing the task" are largely millennials, who present education and assessment challenges given their unique outlook and motives for participating in learning compared to prior generational cohorts. For example, millennials are reported to focus less intently on mastering material and more on performance, or earning high grades, (Caruth and Caruth, 2013). Millennials valuation of authentic learning is noteworthy as well: Sixty-five percent of millennial students reporting having learned best in practical, real-world settings (Mascolo, 2012). In response, researchers have suggested pedagogical and assessment remedies including the provision of structured assignments with clear instructions, as well as the use of low-stake, low-stress assignments that are connected to the "real world," with frequent feedback (McGlynn, 2005; Meister and Willyerd, 2010). Despite use of these practices, research indicates these prescriptions have been insufficient in fostering sport management students' industry-relevant knowledge in experiential, pre-professional settings (Deloitte, 2015).

This is consequential for the accreditor of sport management programs: COSMA. Specifically, COSMA representatives articulate the benefits of hiring graduates from their accredited programs, stating, "Often they [employers] find that by restricting hiring to graduates of accredited programs, they are able to **recruit higher-quality employees** than by allowing applicants from all programs to be interviewed and tested on the job. This is especially true in new labor markets where the corporation does not have sufficient experience with graduates of various academic programs." (https://www.cosmaweb.org/hiring-graduates-from-accredited-programs.html).

COSMA's emphasis on quality is key, as experiential learning through both internships and structured volunteer projects has become a widespread pedagogical practice. Indeed, nearly 90 percent of sport management programs in the United States have mandatory internship requirements (Jones, Brooks and Mak, 2008).

Despite the prevalence of experiential learning, research indicates more, high-quality, real-world educative experiences are required. Specifically, DeLuca and Braunstein-Minkove's (2017) recent evaluation of sport management programs indicated the need for additional opportunities for practical experiences, embedded into sport management curriculum, prior to pre-professional experiences. Site supervisors generally noted that interns lacked professional skills such as: adaptability, resourcefulness, and accountability. In addition, supervisors cited the general lack of leadership qualities, experiential competencies, developed through practical applied learning.

Although applied learning opportunities have become a crucial facet of many sport management curricula, there remains a dearth of literature examining the assessment of experiential student learning outcomes and corresponding programmatic improvements in COSMA-accredited sport management programs. Our work addresses a key aspect of these extant questions by examining the associations between millennial students' tolerance for ambiguity and their performance in the field. Also analyzed are students perceived skill gains after having participated in an applied-learning opportunity. If millennial students see college as "job training programs," and if COSMA-accredited programs are likely to be more experienced, then how do we cultivate the best student learning outcomes, curricula and assessment tools for a demographic that is "notoriously difficult (or, all too easy) to characterize" (Rudick and Ellison, 2016, p. 360)?

## Methods

*Resource Development for Community Organizations* is a 16-week required course for undergraduate sport management students that also serves as an elective within the university's leadership minor. Broadly stated, this course was created to expose students to the needs of non-profit organizations, from small sport leagues and community social service agencies to major cultural institutions and colleges and universities. Accordingly, in 2012, the course was redesigned to provide students with the opportunity to experience firsthand an annual fundraising initiative of a local nonprofit, through the intentional integration of community-based learning. Redesign commenced due to the high prioritization of community-based learning (CBL) by the authors' university, which earned the esteemed designation as a Carnegie Foundation community-engaged school of higher education in 2010.

Accordingly, the primary student learning objectives (SLOs) were for students to determine how community organizations raise necessary funds and implement that knowledge to meet the nonprofits' critical fiscal needs. In addition, due to research citing the value of employees' patience, flexibility, and tolerance for ambiguity (Viola and Mcmahon, 2010), this project was designed in part to require students to complete tasks that necessitate persistence in the face of uncertainty, which is often cited to be a challenge for millennial students (Silletto, 2016). In order to complete the project, students had to make decisions extemporaneously according to sometimes ambiguous, incomplete information, and persevere despite not knowing all the answers. In order to address students' needs and scaffold their progress, the instructor and community partner worked closely with student groups and provided ongoing feedback.

Scaffolds and pedagogical practices used to structure this experiential learning project were consonant with those recommended in the CBL literature as well as those intrinsic to learning through communities of practice (Melaville, Berg, and Blank, 2006; Lave and Wenger, 1991). Students were provided with feedback on a regular basis – both formally and informally – from peers, the course professor and local non-profit partners. Many conversations with the course instructor were reflective in nature, requiring students to self-assess their progress, their concerns, and the plans they would use to advance their individual and group goals. Whole-group class exercises included students brainstorming to devise methods that could be executed to meet their goals, as well as the instructor modeling "how to implement" these strategies through legitimate peripheral participation (Melaville et al., 2006; Lave and Wenger, 1991).

Students were responsible for creating, implementing, executing, and evaluating a resource development plan for a local non-profit organization. The project required students to execute at minimum of five fundraising strategies learned through anchored instruction. Groups set their own fundraising goals, objectives, and tactics, and assigned group member roles for meeting set goal(s) as they saw fit. The goals of the project were to facilitate students' knowledge of specific subject matter, provide career development, enhance leadership skills, offer networking opportunities, develop problem solving skills, and provide real-world, hands-on experience.

## Participants

The overall student sample in this study enrolled and completed a CBL project within a required sport management course during the 2016 and 2017 spring terms. The total number of participants from two course sections were (n=118), comprised 58 percent male and 42 percent females, of whom 97.5 percent were millennials with an overall mean age of 22. The theoretical basis for the project adhered to the principles of good practice in CBL and yielded proven, measurable benefits for the community partner.

## Measures

Tolerance for Ambiguity (TA) levels were measured using the 16-item Tolerance for Ambiguity Scale in Appendix A (Herman, Stevens, Bird, Mendenhall, and Oddou, 2010). The TA Scale includes statements such as "A good job is one where what is to be done, how it is to be done are always clear," and "People who fit their lives to a schedule probably miss most of the joy of living." Items were scored on a 7-point Likert scale ranging from strongly agrees to strongly disagree. Eight negatively worded items of the scale were reverse scored. The sum of all items generated a general score for tolerance of ambiguity.

To assess student perceptions of what they found to be most valuable from this applied-learning experience, we retrospectively examined student reflection papers (Appendix B). Four trained evaluators of CBL and engagement determined that all student reflections articulated CBL and student preparedness either directly or indirectly. Authors then analyzed student artifacts independently using open coding (Corbin and Strauss, 1990).

## Results

Results indicate that those who had a lower tolerance for ambiguity in response to specific questions reached a higher percentage of their goal. This finding was consistent between both sections. For example, responses to the question "a good job is where what is to be done and how it is to be done are always clear" were negatively correlated ($r$ =-.196, p = .03)—that is, higher percentage to a goal, the lower tolerance for ambiguity. Similarly, in response to an analogous question, "a good job is where what is to be done and how it is to be done are always clear," those who had a lower tolerance for ambiguity was also negatively, significantly correlated ($r$ = -.184, p = .05) with whether the goal was "met" (at 100 percent or higher) or "not met" (< 100 percent).

The most commonly reported benefits voiced by respondents were learning how to fundraise, learning how to negotiate the challenges of group work, and gaining real world experience. Other benefits included reported included cultivating professional skills (*i.e*. critical thinking and leadership), personal growth, and vocational exploration. Weaved within the context of the themes listed were, in some instances, students' descriptions of course-related challenges cited to be "unfamiliar," "none of us had ever done a project like this before," and "it forced me to go out of my comfort zone and try things that I would never have tried otherwise." This is an interesting finding, suggesting that greater tolerance for ambiguity is cultivated as a pre-requisite for success, despite the Likert-scale data indicating an inverse relationship between attainment of fundraising goals and TA.

## Discussion

Our findings provide a more comprehensive picture of how students' tolerance of ambiguity correlates with success in this specific CBL course. Results from the TA Scale revealed a statistically significant, negative association between clearly knowing what is "to be done" for the task and funds raised. It is important to interpret this finding through the context of the course. Specifically, students determined what was "to be done" by seeking clarity from their course instructor and community partner, which required them to adapt and respond to the challenges of the assignment. Having said that, students whose TA was low, as per the measure, articulated having confronted "going out of his/her comfort zone" – arguably a proxy for TA – qualitatively. One such student, with low TA, explained:

> This project was unlike any other assignment that I have been a part of. I learned so much more by taking part in this project because it forced me to go outside of my comfort zone and try things that I would never have tried otherwise (personal communication, 2017).

Another student (low TA) wrote the following in his guided reflection assignment:

> While completing this CBL project, I learned job skills, leadership skills, critical thinking skills, and real-world skills…While critical thinking is important in any project, it was vital in this one because none of us had ever done a project like this before. As for myself, I learned new ways to raise money, I learned that I had to find different ways to appeal to individual donor interests, and I learned that rejection and a "no" aren't the end of the world (personal communication, 2017).

These data also make clear the salience of determining what skills and dispositions are associated with student success, collecting both qualitative and numeric/categorical assessment data, and the importance of considering variables, such as TA, when designing curriculum and assessment measures. Our findings provide a more nuanced picture of how students' level of tolerance of ambiguity in certain realms correlates with success in this specific CBL course and sheds light on how high-impact practices can help change students' tolerance of ambiguity over the course of semester. Specifically, our results suggest that students' ability to adapt to emergent, real-world situations is not equivalent to feeling comfortable taking on projects in the absence of clear goals. Again, this is consequential regarding the establishment of student learning outcomes and the choice of measures used to assess them for COSMA accreditation.

## Implications

Through both quantitative and qualitative methods, our work has pedagogical implications for faculty, given the unique value millennial students place on experiential learning. Specifically, the high impact practice of CBL in sport management programs is likely to cultivate professional skills (*i.e*. critical thinking and leadership); personal growth; and vocational exploration. The themes enumerated above regarding students perceived professional gains and areas of growth were articulated irrespective of their tolerance for ambiguity.

More importantly, our work answers the call for critical investigation of the way in which characteristics of millennial students' impact sport management and institutions of higher education (Deluca and Braunstein-Minkove, 2016). Findings also fill a gap in the literature regarding student preparedness for pre-professional experiences, by providing a model for how academics (students and faculty) and practitioners can successfully bridge the gap between theory and practice – while solving real problems and creating tangible skills for students.

## Suggestions for Future Research

Our work suggests that COSMA, and other discipline-specific accreditation bodies, should encourage sport management and other programs to explore how to redesign or improve curricula in ways that implement complex, real-world experiential experiences. Melaville et al., (2006) report the inextricable nature of student-in-cultural context – including its history, economic characteristics and overall environment – and "experiential learning" approaches (p. 42). Thus, our study indicates that "place-based learning," with all

of its authentic complexity, ranging from working in student groups to interfacing with resources and partners, can foster students' critical thinking, problem solving, intrapersonal, interpersonal, and pre-pre-professional competencies (Melaville et al., 2006, p. 42). These skills are associated with student learning outcomes of relevance for preparedness to successfully enter, and contribute to, a wide variety of workplace settings, which are oft prioritized by leaders of higher educational settings who wish to increase job placement rates (Marcus, 2017).

In addition, as noted above, TA was not a recurrent theme detected within these qualitative data, and those who articulated reflective comments that could be a proxy for TA, did not evidence high TA as per the Likert-scale measure. Consequently, conducting a follow-up study that includes an explicit question within the structured reflection about TA is likely to yield more information about this construct, qualitatively, thereby enabling researchers to analyze student-by-student variance in TA (via the Likert-scale) and students' qualitative responses.

*Appendix A*

## Tolerance of Ambiguity Scale

Please respond to the following statements by indicating the extent to which you agree or disagree with them. Circle the number at the right that best represents your evaluation of the item. SA = Strongly Agree; MA = Moderately Agree; A = Slightly Agree; N = Neither Agree Nor Disagree; D = Slightly Disagree; MD = Moderately Disagree; SD = Strongly Disagree. The scoring key is on page 83 of Appendix I.

| | SA | MA | A | N | D | MD | SD |
|---|---|---|---|---|---|---|---|
| 1. An expert who doesn't come up with a definite answer probably doesn't know too much. | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 2. I would like to live in a foreign country for a while. | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 3. There is really no such thing as a problem that can't be solved. | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 4. People who fit their lives to a schedule probably miss most of the joy of living. | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 5. A good job is one where what is to be done and how it is to be done are always clear. | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 6. It is more fun to tackle a complicated problem than to solve a simple one. | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 7. In the long run it is possible to get more done by tackling small, simple problems rather than large and complicated ones. | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 8. Often the most interesting and stimulating people are those who don't mind being different and original. | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 9. What we are used to is always preferable to what is unfamiliar. | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 10. People who insist upon a yes or no answer just don't know how complicated things really are. | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 11. A person who leads an even, regular life in which few surprises or unexpected happenings arise really has a lot to be grateful for. | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 12. Many of our most important decisions are based upon insufficient information. | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 13. I like parties where I know most of the people more than ones where all or most of the people are complete strangers. | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 14. Teachers or supervisors who hand out vague assignments give one a chance to show initiative and originality. | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 15. The sooner we all acquire similar values and ideals the better. | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 16. A good teacher is one who makes you wonder about your way of looking at things. | 7 | 6 | 5 | 4 | 3 | 2 | 1 |

SOURCE: Budner, 1962.

**Appendix B**

REFLECTION PAPER ASSIGNMENT

Students should write a descriptive reflection of your work on this project and how your learning was affected by doing community-based learning (CBL), rather than doing a more conventional project? Additionally, how has the CBL project within the course methodology provided and/or failed to provided learning benefits including but not limited to: subject matter knowledge, career development and job skills, leadership skills, critical thinking skills, and real world hands-on experience. Lastly, this is an opportunity to review all elements of the CBL experiences and to propose changes that should be made for next time. What concrete recommendations do you make to improve the CBTL experiences in the future?

Example of questions to consider as you reflect: What questions have arisen? How have your goals or aspirations been affected? How have your experiences challenged or confirmed your previous assumptions? What aspect of your experience has been most interesting or rewarding? Why? What aspect of your experience has been most frustrating or challenging? Why? What insights have you gained about yourself as a student, a future employee, a teammate, and/or a citizen? These questions are not required, but they are meant to illustrate types of reflection.

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# A Stakeholder-Involved Process for Reviewing Courses in a Medical School

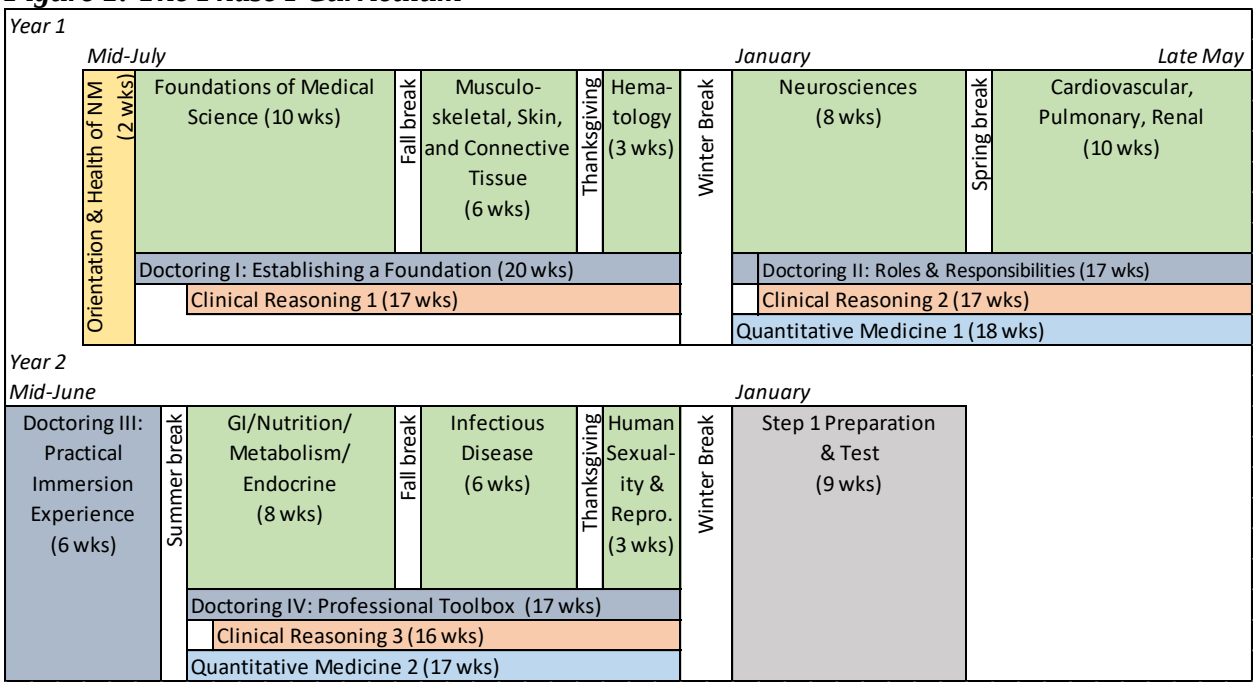
*By Nancy Shane*

Both for accreditation purposes (see Liaison Committee on Medical Education [LCME]) and to reflect best practices in higher education assessment, medical schools must ensure faculty oversight of courses. Staff and faculty members of the University of New Mexico School of Medicine Undergraduate Medical Education division (UNM SOM UME) recently overhauled its process for reviewing the Phase I curriculum – the pre-clerkship courses or 'blocks'[1] covered in the first year and a half of medical school. The purpose of the overhaul is to ensure that oversight by the UME Curriculum Committee is meaningful while still, however, respecting faculty time. This paper describes the new course assessment process, examines assessment process outcomes after its first year of implementation, and discusses areas for improvement.

**Undergraduate Medical Education at the UNM School of Medicine**

Phase I courses consist, first, of eight basic science blocks (represented in green in Figure 1). Concurrently, students take a 3-semester series of 'Clinical Reasoning' courses; a 2-semester series of 'Quantitative Medicine' courses; and four 'Doctoring' courses that focus on communication, clinical skills, professional identity, and ethics. Collectively, I refer to courses other than basic science blocks as 'skills courses.' After completing the basic science and skills courses, students prepare for their first high stakes medical degree (MD) licensure exam, the United States Medical Licensing Examining (USMLE) Step 1.

***Figure 1: The Phase I Curriculum***




[1] Basic science courses vary in length and are usually called 'blocks;' their course directors are usually called 'block chairs.' Block chairs and the course directors for the semester-long skills courses hold essentially the same roles and responsibilities.

**Phase I Course Review Process**

The UME Curriculum Committee (CC) consists of administrators, representative faculty from across the medical school curriculum, faculty from partnered departments and organizations (e.g. Public Health, the Physician Assistant Program, the local Veterans Affairs facility in which many students study), several UME staff, recent graduates (residents), and student representatives from each active cohort. The Committee meets bimonthly to consider all aspects of the UME curriculum; it is this body that is in charge of reviewing courses.

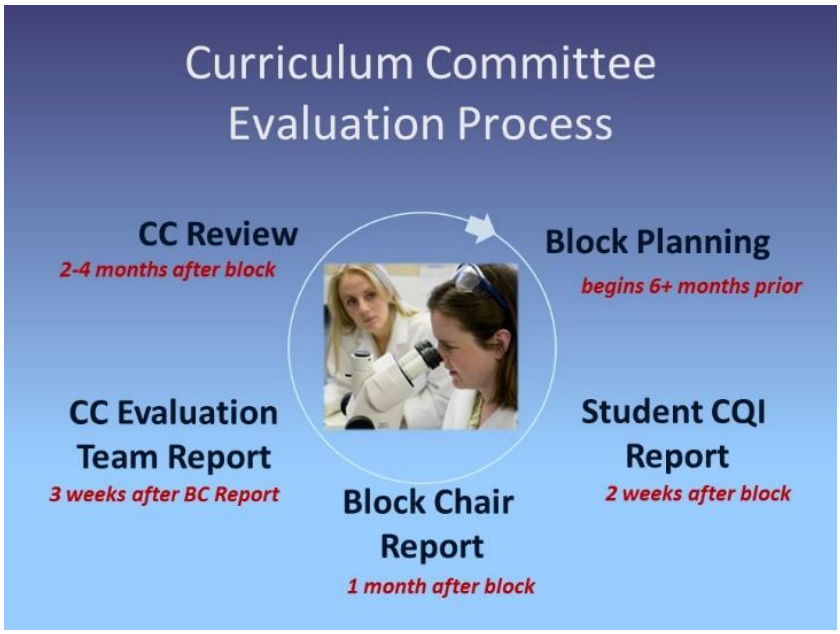
Six administrators, faculty and staff members designed the new CC evaluation process for courses in Phase I; implementation began at the start of the 2016-17 school year. For each course under review, one faculty CC member leads the evaluation team, supported by two other CC members. The Team presents its findings and recommendations to the CC for consideration and approval.

The UME assessment office, the Office of Program Evaluation, Education, and Research (PEAR), prepares a packet, including the course syllabus, the Student Continuous Quality Improvement (CQI) report, and the Block Chair report. The evaluation team uses the information provided in the packet to complete its report, consisting of six substantive sections: (A) Learning objectives and content, (B) Structure and integration, (C) Learning strategies and methods, (D) Assessment plan and student performance, (E) Faculty development and resources, and (F) evaluation data, plans for improvement, and implementation of changes. Each section includes 1-3 Likert items and an area for comments under each. In Section G, the evaluation team describes its conclusions and recommendations. All CC members receive the evaluation team report a few days before the course's review, as well as the course's CQI and block chair reports. After the evaluation team presents its findings, the Curriculum Committee votes to accept or amend the recommendations and determines when next the course should undergo the review process, either one or two years.

Important for its student voice, one document in the packet is the report from the Student Continuous Quality Improvement (CQI) process. PEAR recruits and trains six enrolled student volunteers to serve on the CQI team for each course or block. The CQI team serves as the eyes and ears for all members of their class, meeting with block chairs regularly to provide formative feedback. After the course, the CQI team summarizes the content of its conversations in its report. If applicable, the team also responds to the recommendations the CC made in its prior year's evaluation report.

Perhaps the most important document in the evaluation team's packet is the block chair report. PEAR pre-fills the report template with student end-of-block evaluation results; final grades as well as grades for major tests and assignments; and a breakdown of lecture vs. active learning contact hours. Block chairs comment on a series of mostly open-ended questions, largely mirroring the structure of the CC evaluation team report. If applicable, block chairs respond to the recommendations the CC made in its prior year's evaluation report. Block chair reports seem to be one of the key factors in the quality of the assessment process, in that approximately one-third of evaluation team recommendations are adopted (or adapted) from recommendations that block chairs created themselves.

***Figure 2: The Curriculum Committee Evaluation Process***




**Assessing the Assessment Process**

After this first year of implementation, I assessed the success of the new evaluation process by examining the extent to which the process met seven assessment outcomes.

***1. Is oversight by the UME Curriculum Committee meaningful?***
In thirteen of the fourteen reviews, the CC altered the recommendations made by the Evaluation Team in some way; by that measure, the CC membership seems to have been engaged in course reviews. By sending the evaluation team report, the block chair report, and the student CQI report to all CC members ahead of time, CC members are able to understand and respond to the evaluation team's recommendations.

***2. Do course directors receive feedback in time to implement changes by the course's next iteration?***
In two-thirds of course reviews, the CC finalized the evaluation eeport six months or more before the next iteration of the block – generally early enough to plan active learning methods and secure faculty and classroom space. Most other course reviews were completed three to four months in advance.

***3. Is faculty and student participation in the evaluation process sufficient?***
In this initial year, unusual in that nearly every block was reviewed, 23 different faculty CC members volunteered to participate in at least one evaluation team. Ten students also participated. Given the generally thoughtful nature of evaluation team reports, these numbers suggest meaningful faculty and student involvement. However, recruiting volunteers became significantly harder in the second year, even with fewer blocks under review. Therefore, UME simplified the Evaluation Report and reduced the size of teams from three members to two.

***4. Does the process ensure accountability/ feedback loops to CC recommendations?***
The Phase I course evaluation process provides feedback to CC members in two explicit ways. First, the students comment on the extent to which the recommendations are addressed in the Student CQI process in the iteration of the block following the course review. Similarly, block chairs comment on the

recommendations in their next block chair report. Thus, accountability to recommendations by the CC seems to be reasonably assured.

***5. Does the process elicit useful recommendations?***

For the purposes of this paper, I consider a 'useful' recommendation to be one that was (1) put into place and (2) of 'high quality.' To date, among only three courses that have undergone a second review, 67% of recommendations were implemented at least in part, 17% were attempted but were unsuccessfully implemented, and 16% were not attempted at all.

I defined 'high quality' on a scale of 1-3 based on its potential to impact student learning. Recommendations coded as '1' (low) were generally actions that did not touch the classroom, for example changes to the syllabus or other paperwork. Recommendations coded as '2,' with a deliberately low bar, were any changes touching on what happens in the classroom. These recommendations, sometimes vague, concerned changes in assessment, reorganization of material, or limited changes in content, pedagogy, or faculty development. Recommendations coded as '3' (high), with a deliberately high bar, were similar in kind but higher in degree, often incorporating active learning throughout the block, adding to the length of the block, major infusion of new content, or strong faculty development.

The number of recommendations ranged from one to nine, with an average of five. Just over half of reviews included at least one 'high quality' recommendation; all included one or more 'medium quality' recommendations. I view these results as promising, with some room for improvement. UME might consider defining and emphasizing high quality recommendations in its Evaluation Team instructional materials.

***6. Does the process meet the needs of all stakeholders?***

Another important question we ought to ask ourselves about any assessment process is whether it is fair and representative to all stakeholders. In this case, while block chairs and students are well-represented, the process lacks adequate representation for two groups. The process does not adequately involve supporting faculty. The CC has expressed distress from the omission of supporting faculty, in particular because many of the recommendations focus on their professional development. The second missing stakeholder group is more subtle. The University's Physician Assistant (PA) students also participate in Phase I coursework. In some courses, PA students complete all assignments and assessments. Block chairs receive PA student feedback separately from that of MS students, and may not weigh it heavily in comparison. Clinical faculty are MDs, not PAs; and MS students far outnumber PA students. Moreover, evaluation teams do not receive PA student feedback at all. PA students are not part of CQI teams, and they have no student representative on the Curriculum Committee.

## Conclusions

This analysis suggests a new course assessment process that is quite promising. The process improves Curriculum Committee oversight; members can read evaluation team materials ahead of time, resulting in engaged discussions. Most of the time, blocks are reviewed in a timely manner. We had strong faculty and student involvement in the first year. However, subsequent recruiting challenges led us to simplify the process and reduce the number of reviewers for each course. Most reviews include high quality recommendations, but there is room for improvement. UME could also do a better job incorporating two important stakeholder groups into the review process, namely, supporting faculty and PA students.

**Addendum**

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*Other faculty and staff involved in the design of the process described in this paper are: Paul McGuire, PhD; Deana Richter, MA; Joanna Fair, MD/PhD; Roger Jerabek, MA; and Debbie Dellmore, MD. Analysis of findings and reflections are those of Nancy Shane.*

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# Unifying Assessment: Collaborative Opportunities within Specialized Accreditation of Educator Preparation Programs

*By Kipton D. Smilie and Yen M. To*

## Introduction

Assessment is a tool that has the capacity to unify. By creating, monitoring, and measuring student learning outcomes, stakeholders across campus share this common ground through their myriad responsibilities and specialties. Today's higher education landscape is marked by structural divisions between and within academic departments. Specialization abounds as scholars pursue precise and focused lines of inquiry within broad fields. The accreditation process can unite different academic departments and programs on campus in achieving a common goal. In striving to reach accreditation, shared purposes, approaches, and even language can make communication and collaboration simpler to manage and foster. This essay considers some successful strategies to improve collaboration and assessment recently utilized in the reaccreditation process undertaken by the Education department at Missouri Western State University (MWSU).

## Background

Perhaps nowhere on the MWSU campus is a structural division more apparent than between teacher education programs and content-area disciplines. Students who are teacher candidates, particularly those pursuing certification in secondary education, frequently complete courses in their chosen academic fields within their specific departments (e.g., Math) and their pedagogy courses within education departments. Discipline specialists (e.g., Mathematicians) with little or no P-12 pedagogy background often teach these content-area courses (i.e., Calculus), while instructors within education departments generally have no specialized training in a content-area discipline. As a result, teacher candidates may be the only commonality shared by specialists in the content-area disciplines and in education departments. This structural division can sometimes make communication and collaboration more challenging, as the terminology used in different academic departments and programs can be quite different.

At MWSU, the Education department is accredited by the National Council for Accreditation of Teacher Education (NCATE) and will seek to continue accreditation through the new teacher education accreditation body, the Council for the Accreditation of Educator Preparation (CAEP). During the 2014-2015 academic year, the Education department underwent its reaccreditation review with NCATE. The organization bases accreditation on six standards, and the Education department received an Area for Improvement (AFI) designation on Standard 2: Assessment System and Unit Evaluation. While the Education department built its own assessment system to collect and analyze student learning outcomes data, the system did not provide a comprehensive culture of assessment. Several factors, including faculty turnover, contributed to inconsistent use of the assessment system. The system was aged and not particularly user-friendly adding to faculty members' hesitancy to participate. In addition, the Education department needed a systematic approach to data-driven decision-making. Much of the data-driven decision-making was made by individual faculty members on specific assignments within their courses based on student evaluations and feedback. A decision-making process with systematic reliance on program level data was needed. After receiving the AFI designation, the Education department had two

years to improve upon a methodical approach to assessment, particularly involving data collection and data-driven decision-making.

**Strategy**

The Education department took several steps to meet these goals including implementing a renewed plan for cross department collaboration, developing Key Assessments within disciplines, purchasing a data collection, management, and storage system (Tk20), and hiring an assessment coordinator. Prior to the AFI designation, the Education department's communication with content-area departments was primarily limited to dissemination of state requirements and mandates. Afterwards, the Education department sought to be more intentional in their interactions and increase the dialogue with content-areas to facilitate a culture of shared decision-making. New collaborative efforts based on AFI feedback provided faculty members in the Education department and the content-area departments with a shared starting place, focus, and purpose to develop a more organized approach to assessment. Faculty members within the Education department were assigned to meet with specific faculty members in a content-area department. These faculty members met twice a semester to stay updated on the accreditation process and the implementation of the new software. These collaborative meetings revolved around assessment, including developing and applying specialized rubrics to assessment measures as well as using these sources of data to inform decisions. Through this shared assessment effort, instructors from both the Education department and the pedagogical methods courses within different content-area departments selected common assignments and assessments to be designated as Key Assessments.

Based on accreditation feedback, the identification of Key Assessments was an important strategy for successful accreditation. Key Assessments are foundational course assignments or assessments aligned with teacher education standards set by the state. Clarifying student learning outcomes mutually benefited faculty members across campus and strengthened assessment. In the Education department, mapping assessments to standards allowed for the identification of deficiencies and redundancies of student learning outcomes within coursework. For faculty members in the content-area departments, the tailoring of assignments and assessments for specific learning outcomes created deeper familiarity with state certification standards and requirements. Key Assessments were strategically positioned in a variety of different courses throughout the program so that the data provided information on students both early and late in program progression. Being able to compare early and late measures allows faculty members to detect more accurately how and where a teacher candidate is growing in dispositional and learning outcomes. Faculty members can measure a teacher candidate's progress over multiple courses rather than at one time point or in one course. This strategy enables measurement of a "higher order" learning outcome, such as employing student-led assessment strategies, collected more appropriately towards the end of a teacher candidate's coursework and placement experiences. Collaborative efforts to improve assessment were bolstered by this process of developing Key Assessments across departments.

The implementation and utilization of the new management system also centered much of this collaboration. While the Education department had a data collection system in place prior to the NCATE visit, its use was isolated to the Education department. Courses outside of Education were not included in the system; therefore, faculty members in the content-area departments had no expectations to use the system. Following a comprehensive approach to assessment based on feedback from the accreditation process, the purchase of the new technology provided two key components.

First, originating from an outside entity, unlike the previous assessment system, faculty members across campus felt it was more open to access. It also did not require discipline specific training or access. It was a

shared campus-wide assessment system. Second, unlike the previous assessment system, the new management software allowed for data to be collected and entered from courses within the content-area departments. This provided content-area department faculty with a sense of ownership. Initially, the Education department began its use of the new program by collecting data only from courses within the Education department. However, to facilitate a more comprehensive approach to assessment, Key Assessments from the pedagogical methods courses housed in different content-area departments will be added into the software program. This requires Education department faculty members to train and assist content-area faculty members in use of the system such as creating rubrics, collecting data, and reporting these data. Many content-area departments do not have their own assessment systems, and collaboration between departments will be crucial to the success of assessment efforts. Conversations centered around support have allowed for better clarity in using assessment for improvement. The AFI from the reaccreditation review ultimately set the stage for improved collaboration and assessment.

The Education department's focused efforts towards shared decision-making, development of foundational Key Assessments, and utilization of a modernized assessment platform came with high monetary costs as well as of extensive faculty time and effort. Faculty members were not uniformly trained in programmatic assessment or the management of the software system. To diminish faculty burn out and account for the lack of assessment expertise, administrators agreed an assessment coordinator position was necessary. This position was designed to alleviate the workload of faculty members while ensuring the quality of improvement efforts would be maintained despite potential faculty turnover, restructuring, or platform changes. Securing an assessment coordinator was vital to the success of the Education department's assessment efforts. The position called for an assessment professional who could promote content-area relationships, monitor data from Key Assessments, manage data entry and reporting within the assessment platform, and oversee quality control of these strategies. The assessment coordinator position was also designed to enhance communication and collaboration regarding both specialized program and institutional accreditation.

## Results

Two years after the implementation of these improvement strategies, NCATE made a return visit to evaluate what progress was made towards creating a more systematic and uniform approach to data collection and data-driven decision-making. Through these efforts, in combination with other improvements (e.g., regularly scheduled review of assessment data, documented data use for decisions, and attending assessment workshops and conferences), the Education department received a satisfactory judgment on Standard 2 and subsequently received full accreditation. Assessment of student learning was improved overall while pursuing accreditation. The accreditation process also led to increased collaboration and communication between the Education department and the content-area departments. This accreditation effort helped to mitigate some of the structural divisions of academia found within our teacher education program. The accreditation process provided common and clear goals with shared methods between the various departments. Components of the system were controlled outside of any one department reducing structural division. While the accreditation process is a high-stakes and often intense endeavor, it can also lead to collaboration and communication opportunities that might otherwise remain dormant.

**Summary**

As the Education department now places its focus on achieving accreditation through CAEP, the relationships built through this process will remain essential. CAEP places focus on diversity and technology as "cross-cutting" themes that must be measured and exemplified through all five CAEP standards. The coursework, assignments, assessments, and experiences provided to teacher candidates in the content-area departments provide rich and significant contributions to these cross-cutting themes. Capturing and using data from across departments for informed decision-making is critical to maintaining accreditation. This process has become more systematic through improved collaboration and enhanced resources related to assessment. These recently formalized processes will continue to unify efforts towards assessment and specialized accreditation.

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