



TEXAS A&M UNIVERSITY

Office of Institutional Effectiveness
& Evaluation

**2019-2020 ADMINISTRATIVE AND ACADEMIC & STUDENT SUPPORT
UNIT/DIVISION ASSESSMENT**

ASSESSMENT REVIEW GUIDELINES

Updated May 2020

Table of Contents

| | |
|---|----|
| Foreword..... | 3 |
| Components of Assessment | 4 |
| Units Participating in Assessment at Texas A&m University | 5 |
| A Note About Special Consideration of Unique Student Populations..... | 6 |
| Administrative & Academic and Student Support Unit Assessment Cycle | 7 |
| Assessment Support | 8 |
| Unit-Specific Mission Statement..... | 9 |
| Outcomes..... | 10 |
| Measures..... | 12 |
| Targets | 14 |
| Findings..... | 14 |
| Data-Informed Actions..... | 18 |
| Assessment Reflections & Closing the Loop | 21 |
| Assessment Reflection Prompts & Feedback Criteria..... | 21 |
| Closing the Loop Prompts & Feedback Criteria | 23 |
| 2019-2020 Workflow Graphic (WITH internal feedback loop)..... | 26 |
| 2019-2020 Workflow Graphic (WITHOUT internal feedback loop)..... | 27 |

Foreword

The purpose of assessment is to gather information to inform continuous improvement of functions and roles of the unit and, by extension, to improve the assessment results in the future. The guidelines presented below are designed to walk student/faculty support programs and units through the assessment process, highlight best-practices, define Texas A&M University's (TAMU) expectations for the documentation of outcome assessment processes, and facilitate self- and peer-review of assessment plans and reports.

As of Spring 2019, administrative and academic and student support units across TAMU document outcome assessment efforts in AEFIS (**A**ssessment, **E**valuation, **F**eedback, and **I**ntervention **S**ystem), an integrated, comprehensive, online assessment platform. Based on feedback from faculty and staff involved in the assessment process over the years, and in an effort to support a more manageable and meaningful assessment process, three changes were implemented to coincide with the implementation of AEFIS:

1. The documentation of administrative and student support unit assessment has been segmented into three distinct components: (1) the *Assessment Plan*, (2) the *Assessment Report*, and (3) the *Assessment Reflection and Closing the Loop* report;
2. The assessment review cycle has been extended to approximately 18 months; and,
3. New strategies have been implemented to provide more timely feedback regarding ongoing assessment efforts.

Each of these changes are briefly outlined below.

Components of Assessment

Assessment Plan. The *Assessment Plan*, completed each spring, identifies specific outcomes or objectives to be assessed during the upcoming year (whether academic, fiscal, or calendar) and outlines the measures and targets used to assess each. Annually, administrative and student support units will be asked to identify which outcomes are to be the focus of assessment efforts during the upcoming year. Units may identify as many outcomes as they see fit to assess in a given year as long as at least one is assessed in that timeframe.

Assessment Report. The *Assessment Report*, completed at the conclusion of a given year, summarizes assessment findings or results gathered over the course of the year (as outlined in the Assessment Plan). Based on the results reported, data-informed actions to be implemented during the upcoming year are also outlined in the Assessment Report. Units are expected to outline at least one data-informed action to be undertaken during the upcoming year, designed to strengthen or improve at least one of the assessed outcomes.

Assessment Reflections and Closing the Loop. At the conclusion of a given assessment cycle, staff are asked to reflect on the effectiveness and usefulness of assessment efforts (addressed in the Assessment Report) undertaken during the year. Any changes to assessment strategies for the upcoming cycle (e.g., expanded sources of data, revised targets, revised rubrics) are outlined in this final report. In addition, units are asked to identify a recently implemented change (i.e., over the last 2-3 years) designed to improve a specific outcome. The final component of the report summarizes subsequently gathered assessment data used to determine whether or not the described change(s) led to improvements in the targeted outcome(s).

Units Participating in Assessment at Texas A&M University

There are three types of units that engage in assessment at Texas A&M University: (1) academic programs, (2) administrative units, and (3) academic and student support units. The guidelines in this manual address requirements for the latter two types of units. These are defined below¹:

- **Administrative units** include offices that primarily serve the institution by ensuring the effective and efficient operation of the institution. Typically, these offices include divisions such as finance and administration, facilities and physical plant operations, research, marketing and communication, external affairs, or development. Although essential to the overall operation of the institution, these units contribute to the educational mission of the university in a more indirect way than offices specifically designed to support educational programs or provide academic or student support services.
- **Academic and Student Support units** provide services that support student success. This normally includes such activities as library and learning/information resources, faculty resource centers, tutoring, writing centers, academic computer centers, student disability support centers, financial aid, residence life, student activities, dean of students' office, and so on. Most institutions would also include admissions offices within this category. These units provide direct support to faculty and students as related to their educational programs, indirect support for student learning, or a specific co-curricular mission that supports the college experience.

Assessment is the same for these two units. There are some instances where the requirements differ slightly. Those instances are noted throughout this manual. If you are unsure which category your unit falls under, please contact your liaison in the Office of Institutional Effectiveness & Evaluation (see page 7 for contact information).

¹ Per SACSCOC Principles of Accreditation, 2018; Standard 7.3 and 8.2.c

A Note About Special Consideration of Unique Student Populations

Where applicable, academic and student support units need to address how they systematically and routinely evaluate whether (1) *online students* and (2) *students at other geographical locations* have access to comparable services as students who attend TAMU locally. For units responsible for providing or overseeing the provision of support services to all TAMU students (regardless of mode of delivery or geographic location), attention should be given in the Assessment Plan as well as the subsequent Assessment Report to strategies used to ensure the identified outcomes are being met². There are criteria specific to consideration of unique student populations in the Findings and Data-Informed Actions sections of the Assessment Report, *but it is important to recognize that it may be necessary to assess online services and/or services at other geographical locations using different outcomes and/or measures.*

Online students and students at other geographical locations should be the main focus of unique student population consideration. However, academic and student support units may also choose to examine their effectiveness (as defined by their identified outcomes) for unique populations such as undergraduate students vs. graduate or professional students; majority students vs. minority students; or students with disabilities vs. non-disabled students.

² *In the event services are provide through contracts or alternative means, assessment strategies and expectations will be identified in collaboration with the Assistant Provost for IE.*

Administrative and Academic & Student Support Unit Assessment Cycle

This manual should be used as a guide to help staff plan their assessment strategies as well as a resource for how best to document their strategies and findings. As of the 19-20 cycle, Assessment Review will move to a staged process in which assessment liaisons as well as OIE&E staff will support the assessment process by providing feedback *during* the cycle (as opposed to the conclusion of the cycle as in previous years) based on the criteria outlined in this manual. Units engage in an approximately 18-month assessment process during which staff assess the effectiveness of their units in meeting identified outcomes. The specific dates will vary slightly by year. The cycle for AY19-20 is as follows:

ASSESSMENT PLAN FOR AY19-20:

- September 13, 2019: *DRAFT* Assessment Plan (that is, prioritized Outcomes with associated measures and targets) for AY 19-20 submitted in AEFIS
- *By October 11, 2019: Assessment Liaison (or Division Head) to provide feedback³ to unit (within AEFIS)*
- **By October 31, 2019: Final Assessment Plan for AY19-20 submitted in AEFIS**
 - *OIE&E⁴ will provide feedback on the Assessment Plan by no later than **November 22, 2019⁵***

ASSESSMENT REPORT FOR AY19-20:

- Fall 2019 – Spring 2020: Data collection efforts ongoing based on the AY19-20 Assessment Plan
- *By October 31, 2020: DRAFT* Assessment Report submitted in AEFIS (that is, Findings and Data-Informed Actions based on data gathered during AY19-20)
- *By November 20, 2020: Assessment Liaison (or Division Head) will provide feedback⁶ to unit (within AEFIS)*
- **By December 18, 2020: Final Assessment Report for AY19-20 submitted in AEFIS**
 - *OIE&E will provide feedback on assessment report by no later than **February 28, 2021***

ASSESSMENT REFLECTIONS & CLOSING THE LOOP REPORT:

- **By December 18, 2020: Assessment Reflections and Closing the Loop Report submitted in AEFIS (forms available in AEFIS starting November 1)**
 - *OIE&E will provide feedback by no later than **February 28, 2021***
 - *Unit acknowledgement and AY19-20 closed by **March 15, 2021***

³ There are a limited number of units that do not have this liaison-level feedback step. For more information please contact your OIE&E liaison (see page 8 for contact information).

⁴ Office of Institutional Effectiveness & Evaluation

⁵ OIE&E efforts to provide feedback in a timely manner will begin as soon as the final Assessment Plan is submitted; Assessment Plans submitted earlier than the deadline will likely receive feedback earlier in the fall.

⁶ There are a limited number of units that **do not** have this liaison-level feedback step. For more information please contact your OIE&E liaison (see page 8).

Assessment Support

Units are supported in these efforts by OIE&E assessment consultants. Each division/branch campus is assigned specifically to a liaison (assessment consultant) within OIE&E as follows:

| Alicia Dorsey amdorsey@tamu.edu | Elizabeth Bledsoe Piwonka ebpiwonka@tamu.edu | Alyce Odasso a.odasso@tamu.edu |
|---|---|--|
| VP for Academic Affairs & Strategic Initiatives | VP for Enrollment & Academic Services | VP for Student Affairs |
| OGAPS | VP & Associate Provost for Diversity | Public Partnership & Outreach |
| I-School | Division of Finance & Operations | |
| Dean of Faculties & Associate Provost | Division of Research | |
| Galveston Campus | University Libraries | |
| Division of Information Technology | Qatar Campus | |
| Division of Marketing & Communications | | |

OIE&E staff will be working closely with the division/branch campus assessment liaisons during the year to ensure training, expectations, and deadlines are clearly communicated to all unit personnel. Requests for additional training or questions can be submitted to assessment@tamu.edu. Unit directors/staff are welcome to contact their assigned OIE&E liaison listed above for guidance on assessment efforts at any point during the assessment cycle.

Unit-Specific Mission Statement

Introduction

The unit-specific mission statement details the purpose of the unit. A strong mission statement maintains its alignment with the division and university missions, but focuses specifically on the purpose or overarching goal of the unit itself. A strong mission statement will reflect the criteria described below.

Feedback Criteria

1. Mission Statement is clear and concise

Keep the mission statement focused and avoid including many details about specific projects carried out by the unit.

2. Mission Statement addresses the overall function of the unit/division

The overall purpose of the unit may relate to the unique student populations it serves, how the unit supports the institutional and/or division mission, or other related 'impact' qualities of the unit.

FAQs

Q: As a unit within a division, can I use the division mission statement?

A: No. The mission statement should be specific to the unit addressed in the assessment plan. However, references to the division mission may be included so as to demonstrate alignment with the overarching goals and processes.

Outcomes

Introduction

The primary purpose of assessment is to examine the effectiveness of the unit's ability to carry out key functions. Strong outcomes specifically identify the function of the unit as identified in the mission statement. Some divisions may have specific internal requirements regarding assessed outcomes.

Types of Outcomes

The strongest, most comprehensive assessment plans are comprised of outcomes related to **stakeholder experience** (i.e., perceptions of from stakeholders/customers) and **program/service quality** (e.g., efficiency over time, the extent to which target stakeholders/customers were reached). Units that directly support students and/or faculty in their educational programs, student learning, and/or the enrichment of the overall college experience should also include outcomes that are clearly related to **student success** (see examples below). Units that employ student workers or support student involvement in campus activities may even find it useful to assess **student learning outcomes** and are encouraged to do so.

Though it is only required that unit assess a single outcome in a given cycle, the expectation is that the comprehensive assessment plan (in which outcomes may be assessed on rotation) include each relevant type of outcome.

Feedback Criteria

1. Outcome is measurable

Strong, measurable outcomes are written using action verbs to identify specific expectations. Outcomes are also strongest when they are focused on a single objective rather than many (simple versus complex). When multiple components are used to define an outcome, measuring each component of the outcome becomes difficult and the assessment process becomes convoluted and cumbersome.

Focus of Outcomes

Beyond providing feedback regarding whether or not an outcome is measurable, feedback will also be provided regarding focus/type of outcome (see the "Types of Outcomes" section above to determine what kind of outcomes should be included in your unit's assessment plan).

1. Stakeholder experience (e.g., perceptions from stakeholders/customers)

All units should assess at least one stakeholder experience outcome, either annually or based on a rotation (e.g., assessing customer satisfaction every 2-3 years). Units should be able to demonstrate that their assessment plan addresses the satisfaction and/or perceptions of those they serve.

2. *Program/service quality (e.g., efficiency over time, target audience being reached)*

All units should assess at least one program/service quality outcome, either annually or on rotation. Units should be able to demonstrate that their assessment plan addresses the unit's goal(s) to provide services as efficiently and effectively as possible.

3. *Student success*

Academic and student support units must identify and assess outcomes that are clearly connected to student success. Often, outcomes related to stakeholder experience and program/service quality also relate to student success. For example, a unit may wish to assess student satisfaction with a leadership training program hosted by the unit. The unit might measure this satisfaction by having students indicate their level of agreement with a statement such as "This training program prepared me well for a leadership position." This outcome clearly addresses both stakeholder experience and student success.

4. *Student learning*

Beyond the three types of outcomes described above, units that serve students directly (e.g., employ student workers, host student educational activities, provide student trainings) are also encouraged to assess student learning outcomes such as critical thinking, communication, teamwork, personal and/or social responsibility, or integrative learning by using direct measures (e.g., rubrics applied to student work).

FAQs

Q: Can outcomes be about how the unit manages projects/completes tasks?

A: The primary focus of the assessment process should be the measurement of effectiveness. Outcomes that can be measured dichotomously (e.g., "Completed/Not Completed") do not typically provide sufficient insight or information to guide continuous improvement efforts, nor do they fit the cyclical assessment process facilitated by this reporting structure. Outcomes should focus on the efficiency or effectiveness of the tasks necessary to completing mission-critical processes.

Q: Do we have to measure the same outcomes every year? / Can we measure the same outcomes every year?

A: Unit staff/leadership should guide the assessment process, including determining which outcomes are to be measured any given year. Some units have placed their outcomes on two- or three-year rotations, focusing on just one or two in a given year. Outcomes will likely stay consistent for an extended period of time, so it is up to the staff/unit leadership to determine how frequently they should be measured.

Measures

Introduction

“Measure” is a term for methodology, or how data are collected and evaluated to assess outcomes. Detailed measure descriptions make the assessment process easy to follow for an external party who is not directly involved in the day-to-day operations of the unit and/or related assessment efforts. As a reminder, every identified outcome should have *at least* one measure. Strong measures will reflect the following characteristics.

Feedback Criteria

1. *Data collection is clear (i.e., where the data are coming from)*

This criterion is concerned with the data gathering *process*. The information in each measure description should provide a clear picture of (1) where the data are coming from and (2) how the data are to be evaluated and reported.

2. *Measure is consistent with the outcome*

This criterion focuses on the *alignment* of the measure with the targeted outcome(s). That is, does the measure adequately capture achievement of the outcome as it is defined? Also consider whether the methodology is appropriate given the definition of the outcome. The measure(s) should be reflective of sound assessment practices, designed to provide usable and interpretable results for unit-level information.

3. *All referenced surveys/items are attached or sufficiently described*

It is often helpful to attach a copy of the survey/evaluation form/measurement tool that is used to collect the assessment data. Alternatively, if the measure description is very detailed it is not always necessary to attach a copy of the measure. For example, if an item on a customer satisfaction survey is used to gather data on a targeted outcome, the unit may choose to include in the measure description the exact text of the survey item and the scale on which customers are asked to respond to the question.

FAQs

Q: Can tracking completion of a task be used as a measure?

A: Similar to the outcomes, measures that focus solely on tracking completion rates typically do not provide sufficient information for consideration of continuous improvement. Measures should reflect methodology that will result in some variability of scores or results (e.g., *not* a “Yes/No” or “Complete/Incomplete” response).

Q: Should I use more than one measure? Do I have to use more than one measure?

A: A single measure may provide limited information about the extent to which outcomes are achieved. Units are encouraged to use multiple measures to assess outcomes as doing so will provide a more complete picture of effectiveness and/or efficiency of unit processes. As a byproduct, using and reporting on multiple measures will facilitate conversations about continuous improvement.

Targets

Introduction

A target is a level or threshold at which a unit considers an outcome to be met on a given measure. Strong targets are static, clear-cut levels of achievement and contain the two characteristics described below at a minimum.

Feedback Criteria

1. *The standard is clearly presented*

“Standard” refers to *the minimally acceptable* level of achievement. In other words, the standard is the level of performance at which the targeted outcome is determined to have been “met” or achieved (e.g., respond with at least 3 on a 4-point Likert scale).

2. *Target is specific*

“Target” specifically refers to the proportion of customers/staff members/students that needs to have met the standard (e.g., 80% of customers).

Based on the two examples above, the complete target would read “80% of customers will respond with at least 3 on the 4-point Likert scale.”

FAQs

Q: *How often, if at all, should targets be revised?*

A: The unit should revisit targets from year to year and revise accordingly, particularly if the targets have been consistently met from year to year. Consistently met targets may also be a sign that it is time to explore other methods of measuring an outcome. It is considered good practice to rely on more than a single source of evidence.

Q: *Do we have to justify our targets?*

A: Although not mandated, including a brief description of the origins or rationale for each target will likely prove to be beneficial in the future when targets are being reviewed and/or when other individuals become involved in the assessment process.

Findings

Introduction

Findings represent the results based on the data collected throughout the assessment process. Strong assessment reports will consistently report findings in a clear manner and use appropriate designations of whether the target was *met*, *partially met*, or *not met*. Effective reporting of findings will reflect the characteristics described below.

Feedback Criteria

1. *Reported findings are consistent with the processes described in the plan*

Language and terminology used in the finding statements should mirror the language used in the measure and target descriptions. Inconsistencies between the processes described in the assessment plan and the reported findings should be avoided. What follows are examples of *inconsistent* reporting:

- The measure and target focus on achieving a certain level of customer satisfaction but the finding only reports a response rate or the number of customers who completed a survey.
- The measure and target focus on achieving a certain level of accuracy within a process but the finding focuses on the volume of what was processed (e.g., accuracy of invoices vs. the volume of invoices processed).
- The target describes one process, but the finding reports other data points not mentioned in the measure—neither process nor language is consistent.

2. *Reported findings include a brief discussion regarding the meaning/value of results for purposes of continuous improvement*

Finding statements should go beyond simply reporting results; they should also include an explanation and/or reflection about the practical significance of the results. This can be achieved by comparing the current findings to those of previous years, by discussing what was surprising or affirming about the results, or by further drilling down into the data to discover more granular information.

3. *Consideration of unique student populations is included (**if applicable**)*

Academic and student support units/divisions are required to identify the ways in which they provide support to different unique student populations and/or how unique student populations experience the services provided by the unit/division. **Findings should be reported separately for the identified unique student population(s).** If the central unit is responsible for providing services to students at alternate geographic locations, the Assessment Report should reflect this by either including measures used specifically for assessment at other locations or by disaggregating the results of measures used across locations. See FAQs for more information.

FAQs

Q: What does 'Partially Met' mean and when should it be used?

A: *Partially Met* should be used only when reporting findings for compound/complex targets. For example: A unit uses a customer satisfaction survey on which two specific items are considered evidence of achievement of their customer satisfaction outcome. The target states that 80% of customers will respond with either Agree or Strongly Agree on each item. The results show that 85% of customers Agreed or Strongly Agreed on the first item, but only 78% of customers Agreed or Strongly Agreed on the second item. This target would be *Partially Met*. **Partially Met should not be used if the Target was close to being met.**

Q: All of the targets are met. If we just say "This is an indication that our unit is performing well" will we meet the criteria of discussing the meaning/value of results for purposes of continuous improvement?

A: Saying the findings are an indication that the unit is performing well is essentially the same as indicating the target is *Met*. The finding statement should go one step further by contextualizing the results. This can be done in multiple ways (see *Feedback Criterion #2*), but one of the most powerful ways to discuss the meaning of results is to describe the longitudinal trend. How has the unit performed on this outcome/measure over the past few assessment cycles? Is progress being made? If not, to what might staff and unit leadership attribute this trend?

Q: How should finding statements be structured?

A: There is not a prescribed template all finding statements must follow. However, the following is a template units might find useful:

- **First sentence:** Present the assessment results in the context of the measure (e.g., *86% of respondents indicated that they were either Satisfied or Extremely Satisfied with the training session.*).
- **Second sentence:** Reiterate the target, stating whether it was met, not met, or partially met (e.g., *The target of 80% indicating they were Satisfied/Extremely Satisfied was met.*).
- **Third sentence:** Contextualize the results by discussing longitudinal data trends, presenting other supporting data (if available), and/or by reflecting on whether results were surprising or affirming and why.

Q: Does our unit have to disaggregate results by location? What if we don't have location data for some of our measures?

A: Academic and student support units are required to disaggregate assessment results by location *if they are responsible for serving students at alternate geographic locations*. These units should ensure there are measures in place to assess services at all locations for which they are responsible; however, it is fine to include measures that only assess services at the centrally-located office/department. In addition, all academic and student support units should disaggregate results by demographic groups when possible.

Q: Our unit doesn't serve students at other locations. Do we have to disaggregate our results?

A: All academic and student support units should disaggregate results by demographic groups when possible. Standard disaggregations include race/ethnicity/URM status and gender. Others include first generation status, graduate vs. undergraduate students, and/or any variety of group comparisons as applicable to the services provided within the unit. Units looking at faculty success, specifically, might disaggregate based on college or rank.

Data-Informed Actions

Introduction

Data-informed actions are specific steps the unit intends to take, or has taken, to improve assessment results in the future. These actions should have a close, clear connection to the data collected during the assessment reporting cycle. Effective data-informed actions meet each of the criteria below. Units are expected to address use of results for each individual finding statements. See FAQs section for additional information.

Feedback Criteria (All Units)

1. *Data-Informed Action outlines a specific course of action designed to improve/strengthen the outcome*

The data-informed action should clearly articulate a specific course of action designed to improve future assessment results for an intended outcome. There should be enough detail for an external reader to understand what specific changes are being made to affect positive change in achievement of a specific outcome. See FAQs for additional information.

2. *Data-Informed Action description addresses why the unit believes the action will lead to improvements in assessment results*

The data-informed action should identify how and/or why the unit believes the action will affect assessment results in the future. This might be a description of how the action will directly affect customers and/or students (and thus improve results), how the action addresses identified deficiencies contributing to current assessment results, or why staff believe this action will help improve the unit and the outcome results overall.

3. *Data-Informed Action includes a timeline*

Including a timeline demonstrates that the action has been carefully considered and implementation has been discussed. Consider including an estimate of when the impact of the action might first be observed in assessment results (e.g., “We will reassess this outcome in 2 years to determine if this action had an impact.”)

4. *Data-Informed Action identifies a responsible party or group*

Including a responsible party or group demonstrates that the action has been communicated to the individual or group who will be carrying out the action.

Criteria specific to Academic and Student Support Units:

5. *Data-Informed Action is designed to improve student success*

Units that support student success should establish at least one data-informed action that is designed to improve student success in some way.

6. *Data-Informed Action acknowledges the relevance of the proposed actions to unique student populations*

Units that support student success are required to identify the ways in which they provide support to different unique student populations and/or how unique student populations experience the provided services. If there are disparities, those disparities should be addressed. If not, the unit/division should communicate how their data-informed action might affect the various student populations they service (with particular emphasis on online students and students at other geographical locations).

FAQs

Q: Do I have to develop a data-informed action for every finding?

A: Text responses are required in all data-informed action text boxes, meaning the unit should have a response to all of the reported findings. If the program establishes a data-informed action for only one finding, responses to the other findings might be less involved. Here are a few examples: (1) the unit will continue monitoring performance on the outcome; (2) the unit will continue collecting data for X number of cycles in an effort to identify a trend in the data; (3) the unit will continue to gather data until there is sufficient data for analysis. Remember, **at least** one response needs to be outlining a specific action (beyond the three examples listed above).

Q: Can a data-informed action focus on a change to the unit's assessment strategies?

A: A change to the assessment strategy is not the same thing as a change designed to strengthen a particular outcome. Units should primarily discuss changes to assessment strategies in the Assessment Reflections & Closing the Loop report. Discussions in the Data-Informed Actions text boxes should be focused on improving the outcome, not the process by which the outcome is assessed.

Q: How do I write a data-informed action when all of the targets are met?

A: Met targets are a sign that the unit is functioning well and that the established outcomes are achievable. It does not mean, however, that all of the work is done and there is no further need for assessment or attention to continuous improvement. Therefore, the unit should still consider how the collected data can inform continuous improvement efforts. Possible approaches include, but are not limited to:

- Drilling down into the results further, perhaps by demographics or by some other dimension, in an effort to identify possible gaps or disparities.
- Adjusting the target

- *If the unit chooses to pursue this strategy, it is critical to include a discussion of what the unit will do in order to meet the new target. This keeps the focus of the data-informed action on the change rather than simply on updating the target (which would be considered a change to the assessment strategy and should be documented in the Assessment Reflections & Closing the Loop report).*

Assessment Reflections & Closing the Loop [Updated May 2020]

Introduction

The purpose of this section is twofold: First, to reflect on the unit's assessment activities over the course of the last year; and, second, to reflect on the impact of previously implemented data-informed actions or continuous improvement strategies specifically designed to strengthen one or more of the outcomes.

Assessment Reflections

Units will be asked to reflect on their *assessment processes and practices* they have employed over the course of the last year. Specifically, units will be asked to address each of the following:

1. **UNIT LEADERSHIP AND STAFF INVOLVEMENT:** How are unit leadership *and* staff involved in the sense-making of assessment data and decisions regarding continuous improvement efforts?
2. **CHANGES TO ASSESSMENT PRACTICES:** Think about the assessment cycle you just completed and the challenges you faced (or *potential* challenges you face) in using the data you collected. What could the unit do differently next time to ensure the data that is gathered and reported continues to be useful in guiding department/division improvements?

Be sure to include the following:

- i. Are there changes you need to make regarding what kind of assessment data is gathered? (*Is it the right data?*)
- ii. Are there changes you need to make regarding how data are analyzed and/or reported so that they are useful for continuous improvement? (*Is the data specific enough to guide changes?*)

Feedback Criteria

1. *The role of staff and unit leadership in assessment is sufficiently described*

Individuals who hold leadership positions in the unit/division should be involved in the assessment process. Responses to the first prompt should describe the role of unit staff and leadership. Questions to consider include: At what stage(s) of the assessment process were staff and staff leadership involved? In what capacity? What role did they play in data sense-making and in the decision-making processes related to continuous improvement and future assessment?

2. *Response includes considerations of the quality and utility of the assessment data for continuous improvement*

Units should reflect on whether the data they collected is meaningful and/or sufficient to guide continuous improvement efforts. For example, if a target is met at 100% every year is it still useful to keep that target/measure in the Assessment Plan? Could staff learn more from reporting the data in a different way? These are the kind of questions to consider. However,

responses to this prompt might also include a variety of other considerations: the need for establishing (or more frequently convening) an assessment committee, revising objectives or measures, changing the timing of assessment data collection, etc.

3. *Changes to assessment methodology are sufficiently described*

Based on lessons learned throughout the assessment process (including the considerations presented above), units should clearly state what changes, if any, are being implemented with regard to the way the unit approaches assessment of their objectives. Describe the concrete steps or new processes that are being implemented in response to what the program learned about their assessment practices.

FAQs

Q: What level of detail should be provided with respect to the role of staff and unit leadership in assessment?

A: Units should provide a brief narrative about the breadth and scope of staff and leadership involvement given assessment should be a collaborative effort. The response does not need to include the names of those involved but should be detailed enough to capture how the unit approaches assessment. This could be done by attaching and briefly describing minutes from a staff meeting where assessment planning and/or data were discussed. When in doubt, err on the side of providing more detail versus less detail.

Q: If we created a data-informed action that addresses changes to our assessment process, do we provide the same information here?

A: Any planned changes to the assessment *process* (e.g., adding measures, revising surveys, redefining objectives, etc.) should be described in this section.

Closing the Loop

Support units are asked to reflect on the impact of a previously implemented data-informed action OR some other change *specifically designed to strengthen an outcome/objective*. The identified action should address the specific outcome for which assessment data *has since been collected* (i.e., after the change has been implemented and unit staff could reasonably see whether the change made a difference or not).

1. **PREVIOUSLY IMPLEMENTED CHANGE:** What change did you make (approximately 2-3 years ago) in an attempt to improve a specific outcome/objective? Be explicit about:
 - i. the specific outcome/objective;
 - ii. the specific original assessment results that prompted the change (i.e., quantitative or qualitative findings); and,
 - iii. the nature of the change.
2. **FINDINGS:** Did the change make a difference? Be sure to include:
 - i. what data you gathered;
 - ii. what the specific new assessment results were (i.e., quantitative or qualitative findings);
 - iii. whether the data suggest the change made a difference in the outcome/objective; and,
 - iv. what implications there are for future unit/division changes.

Feedback Criteria

1. *Targeted outcome and assessment findings that prompted the development of the action/change are described*

Indicate the specific outcome that was the focus of the implemented change. Briefly describe the assessment findings on which the action was based. This should include a short description of the measure or measures from which the results were derived. Be sure to state the specific findings, avoiding vague statements such as “the target wasn’t met.”

2. *Action/change that was implemented is described (including contextual information)*

Provide a brief but descriptive summary of the previously implemented change that was made. It should be clear what specific change was made, when it was made, and who was involved in the implementation process.

3. *Subsequently gathered assessment data used to determine whether the action/change led to improvements are summarized*

Clearly state the *specific* results of the subsequent outcome assessment and how these results compare to previously gathered data (as discussed in Part 1 of this prompt). In doing this, the unit may wish describe the methodology that was used (e.g., describe the scale or rubric if the result is a mean situated on a scale). The results should be clear enough that an external party reading the report would have no unanswered questions about the interpretation of the results.

4. *Implications of subsequently gathered assessment data are discussed*

Consider the impact the change may have had on the outcome results. Whether results were improved or not improved, reflect on what role the change may have played and discuss how the unit aims to further improve outcome achievement in the future.

FAQs

Q: *What if there was no improvement in the targeted outcome/objective?*

A: The purpose of this process is to examine whether or not unit changes made a difference in outcome achievement. In cases where improvement was not observed, this is valuable information in and of itself. Reflect on what might be done differently in the future to ensure improvement.

Q: *What if we don't have any follow-up results yet?*

A: The **only** action discussed here should be one that has either been fully implemented or implemented enough that unit staff could reasonably tell if it made a difference in outcome results. "Closing the Loop" means being able to provide a complete narrative about actions the program has taken and whether those actions made a difference. See the next FAQ for exceptions.

Q: *What if the unit or office is brand new or new to being formally assessed?*

A: If a unit or office is only 2 or 3 years old it is possible not enough time has passed for staff to fully implement an action and/or reassess the outcome. In such cases, please clearly indicate when systematic assessment of the unit began and what efforts are currently being made to use previously collected assessment data for continuous improvement.

Q: *Can we discuss an action that was implemented more than 2-3 years ago?*

A: Yes. Some actions take longer to implement than others, so the assessment findings you discuss in Part 1 of this prompt might be from more than 2 or 3 years ago.

Q: *The unit is using different measures than before, so the pre- and post-action data aren't directly comparable. Is this an issue?*

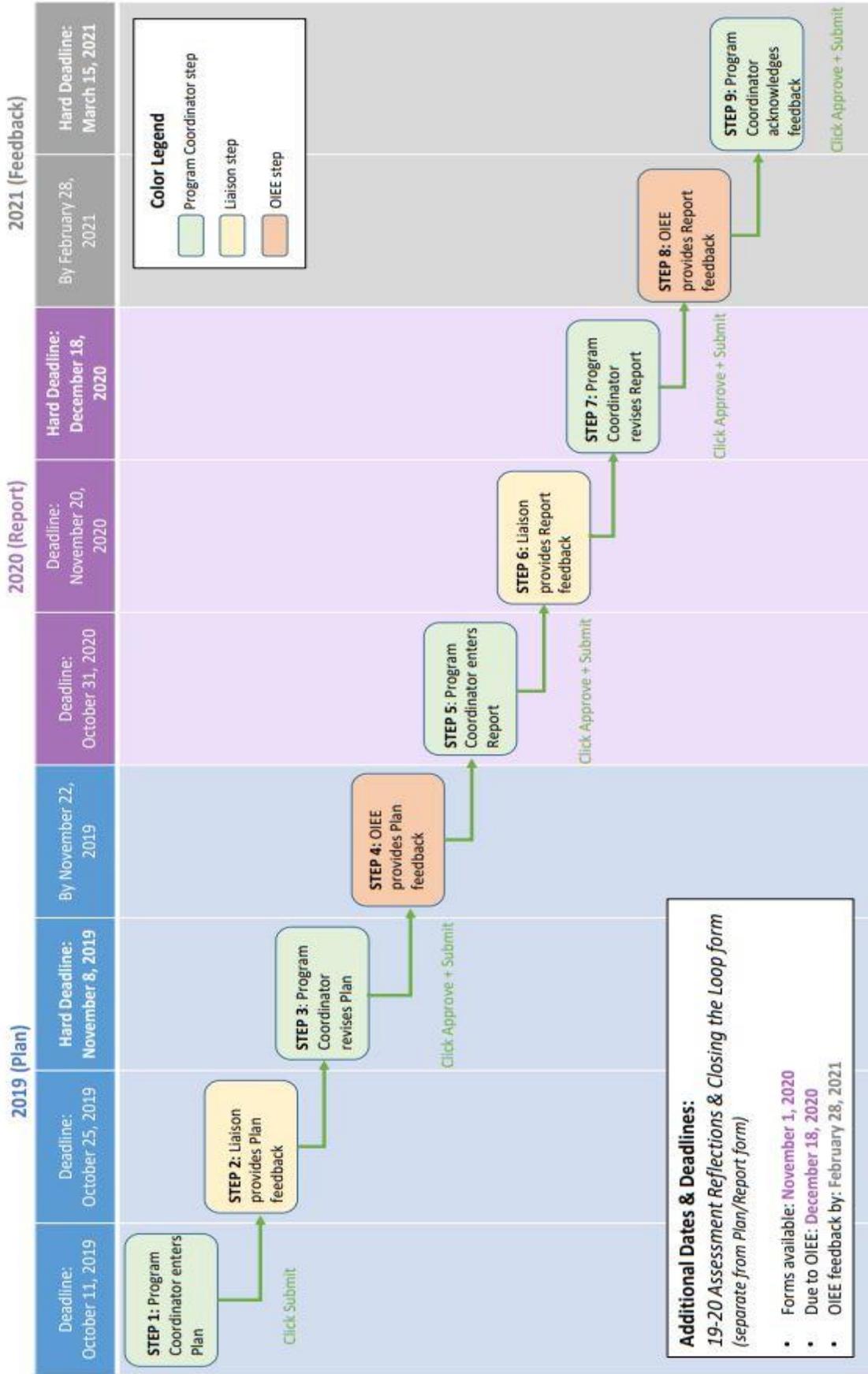
A: No, this is not an issue. Assessment is not a hard science, so it is not necessary for the methodology to stay the same throughout the process. Assessment itself is a process, so it makes sense for measures to change as the unit and its processes evolve. The reflection on the efforts made to improve core operational objectives is more important than ensuring directly comparable assessment results.

Q: *How do we respond to these prompts if we plan to discuss a change that wasn't included in a previous Assessment Report?*

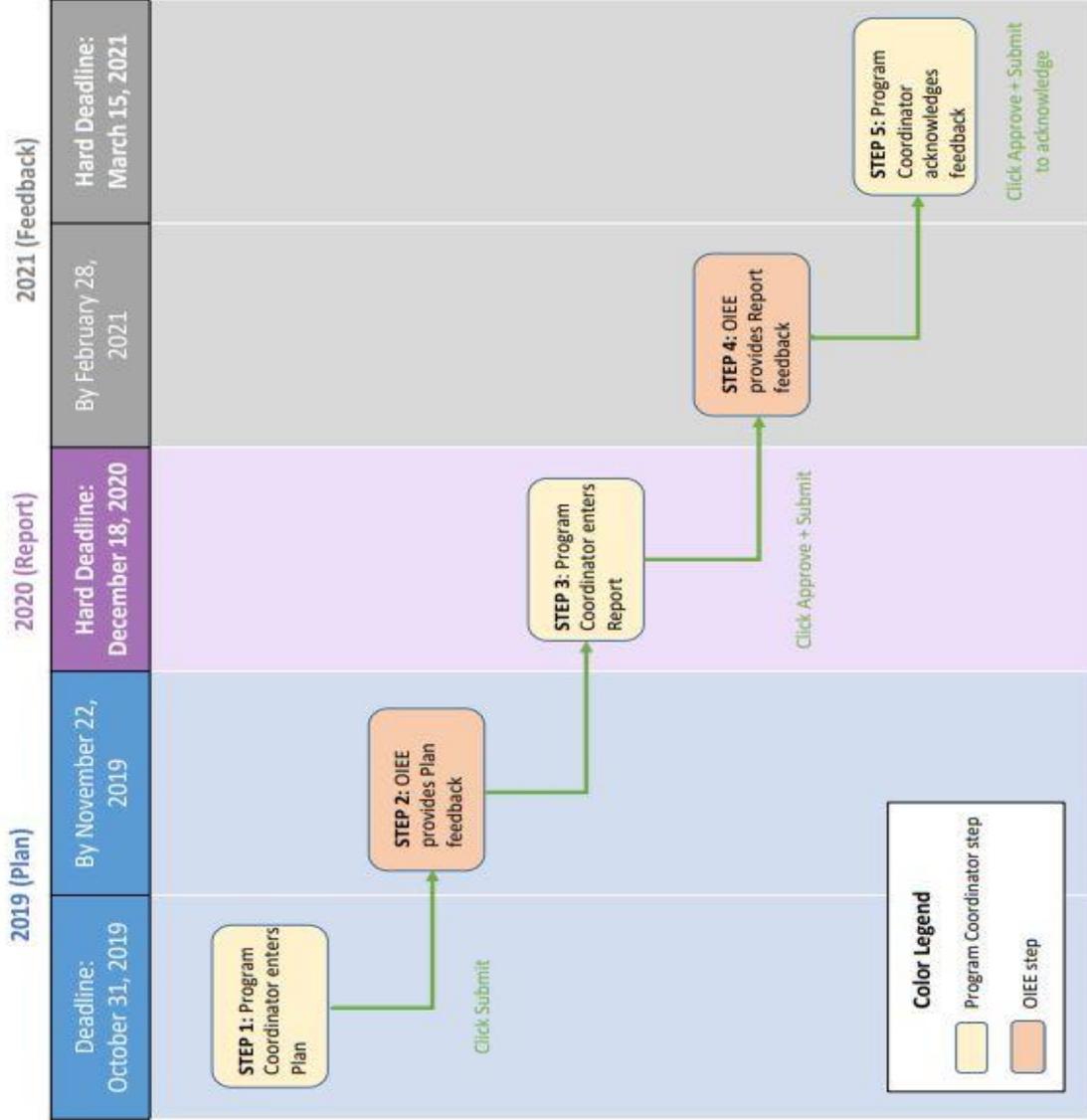
A: Changes not previously documented in an Assessment Report should be discussed in the same way as previous data-informed actions. These other changes should still be based on some kind of

data/results/observations that can be reported. If this information is qualitative in nature (e.g., a discussion in a staff meeting in which areas of concern were identified), please be sure to describe that information in detail.

19-20 Support Unit Assessment Workflow – Units WITH Internal Liaisons



19-20 Support Unit Assessment Workflow – Units WITHOUT Internal Liaison



Additional Dates & Deadlines:
19-20 Assessment Reflections & Closing the Loop form (separate from Plan/Report form)

- Forms available: **November 1, 2020**
- Due to OIEE: **December 18, 2020**
- OIEE feedback by: **February 28, 2021**