



TEXAS A&M UNIVERSITY

Office of Institutional Effectiveness
& Evaluation

**2020-2021 ADMINISTRATIVE AND ACADEMIC & STUDENT SUPPORT
UNIT/DIVISION ASSESSMENT**

ASSESSMENT REVIEW GUIDELINES

August 2020

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Foreword

The purpose of assessment is to gather information to inform continuous improvement of functions and processes within the unit. The information presented in each section of this manual outlines Texas A&M University's expectations for the documentation of outcome/objective assessment. This "how-to" manual is designed to guide administrative and academic and student support units (hereafter referred to as *support units*) through the assessment process, highlight best practices, and facilitate self- and peer-review of Assessment Plans and Assessment Reports.

As of Spring 2019, administrative and academic and student support units across TAMU document 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, the following steps were taken with the implementation of AEFIS:

1. The documentation of administrative and academic 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 (see pgs. 37-38) and,
3. New strategies have been implemented to provide more timely feedback regarding planned and ongoing assessment efforts.

These changes are briefly outlined in the following sections.

Components of Support Unit Assessment

The sections of this companion manual follow the same order of the sections comprising the Assessment Plan and Assessment Report as outlined below.

NOTE: Each section of this companion manual includes an FAQ list. The FAQs in **blue text** include technical information and address functionality within the AEFIS system.

Assessment Plan. The *Assessment Plan* 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. Units may identify as many outcomes/objectives as they see fit to assess in a given year as long as at least one is assessed in that timeframe. The *Assessment Plan* is submitted annually in early summer.

Components making up the *Assessment Plan*:

- Department/Unit Purpose
- Outcomes/Objectives
- Measures
- Targets

Assessment Report. The *Assessment Report* summarizes assessment results (i.e., findings) gathered over the course of the previous year (as outlined in the previously established Assessment Plan). Data-informed actions based on the assessment findings are also included in this report. These data-informed actions are changes which will be implemented in the future, and at least one data-informed action designed to improve one of the outcomes/objectives is required each year. The *Assessment Report* is submitted annually in the late fall or early spring semester.

Components making up the *Assessment Report*:

- Findings
- Data-Informed Actions

Assessment Reflections and Closing the Loop Report. Most support units are required to respond to two sets of prompts—*Assessment Reflections* and *Closing the Loop*. Like the Assessment Report, this final report is completed in the late fall/early spring.

Assessment Reflections

Program Coordinators are asked to explicitly discuss the involvement of unit staff and leadership in the assessment process. Next, they are asked to reflect on the usefulness of assessment efforts undertaken during the previous year (as addressed in the Assessment Report). Anticipated changes to assessment strategies for the upcoming cycle (e.g., revised measures, expanded sources of data, updated targets, etc.) are also described in this section of the report.

Closing the Loop

Program Coordinators are asked to identify a recently-implemented change (i.e., typically a change implemented at 2-3 years ago, or one that has been fully implemented). Subsequently gathered assessment data is summarized and discussed in terms of whether the described change led to improvements.

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 units include divisions such as finance and administration, facilities and physical plant operations, research, marketing and communication, external affairs, and development, among others. 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 and/or faculty success. These units typically include library and learning/information resources, faculty resource centers, tutoring, writing centers, academic computer centers, student disability support centers, financial aid, residence life, student activities, and the dean of students' office, among others. Most institutions 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, and/or have a specific co-curricular mission that supports the college experience.

Assessment of these two types of units follows the same process. 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 11 for contact information).

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

A Note About Special Consideration of Unique Student Populations

Where applicable, academic and student support units should address how they routinely and systematically evaluate whether (1) *online students* and (2) *students at alternate geographic locations* have access to comparable services as students who attend TAMU locally. Units responsible for providing or overseeing the provision of support services to all TAMU students (regardless of mode of delivery or geographic location) should clearly state this and describe the strategies used to ensure identified outcomes/objects are being met². There are criteria specific to consideration of unique student populations in the Department/Unit Purpose section of the Assessment Plan and in the Findings and Data-Informed Actions sections of the Assessment Report. Please refer to the related sections of this manual for more detailed information. *It is important to recognize that it may be necessary to assess online services and/or services at alternate geographic locations using different outcomes and/or measures.*

Online students and students at alternate geographic locations should be considered unique student populations. Consideration should also be given to unique characteristics such as undergraduate students vs. graduate or professional students; majority students vs. minority students; and/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.*

Support Unit Assessment Cycle at Texas A&M University

Support units engage in an approximately 18-month assessment cycle during which staff assess the effectiveness and efficiency of their departments and divisions. The specific dates will vary slightly by year.

2020-2021 Assessment Cycle

NOTE: Assessment Plans for the upcoming year are typically due in the late spring/early summer; however, the AY 2020-21 Plan deadlines have been pushed to the Fall semester to better accommodate staff as the University institutes temporary changes in response to the spread of COVID-19.

ASSESSMENT PLAN:

- September 4, 2020: DRAFT Assessment Plans submitted to internal Assessment Liaisons³ for feedback
- *October 2, 2020: Assessment Liaisons submit feedback⁴ to units*
- **November 20, 2020:** FINAL Assessment Plans submitted to the Office of Institutional Effectiveness & Evaluation (OIEE)

ASSESSMENT REPORT:

- November 19, 2021: DRAFT Assessment Reports submitted to internal Assessment Liaisons for feedback
- *December 17, 2021: Assessment Liaisons submit feedback³ to units*
- **January 14, 2022:** FINAL Assessment Reports submitted to OIEE
 - *OIEE will submit Assessment Report feedback by **February 25, 2022***
 - *Units should acknowledge feedback in AEFIS by **March 4, 2022***

ASSESSMENT REFLECTIONS & CLOSING THE LOOP REPORT:

- **January 14, 2022:** Report submitted to OIEE
 - *OIEE will submit Assessment Report feedback by **February 25, 2022***
 - *Units should acknowledge feedback in AEFIS by **March 4, 2022***

2019-2020 Assessment Cycle (Report Stage)

ASSESSMENT REPORT / ASSESSMENT REFLECTIONS & CLOSING THE LOOP REPORT:

- October 31, 2020: *DRAFT* Assessment Report submitted to internal Assessment liaisons for feedback
- *By November 20, 2020: Feedback submitted to units*
- **December 18, 2020:** Final Assessment Reports submitted to OIEE

³ Units without an internal feedback loop should refer only to the FINAL deadlines for submission of the Assessment Plan and Assessment Report.

⁴ There are a number of units that do not have this internal liaison-level feedback step. For more information please contact your OIEE liaison (see page 11 for contact information).

Using AEFIS to Document Annual Assessment

Terminology

Staff who are responsible for the documentation and submission of Assessment Plans and Reports are called **Program Coordinators** in AEFIS.

Assessment Liaisons are individuals identified within the unit, division, or branch campus to provide assessment support to the unit(s) in the division or on the branch campus. These individuals also work with OIEE staff to communicate assessment information to their respective units. Assessment Liaisons responsible for providing internal feedback to their units should refer to pages 30-35 for more specific information about this role. Though all support units have an assigned Assessment Liaison, not all support units participate in the internal feedback loop (see previous page).

Getting Started

Program Coordinators use their NetID and password to [log in to AEFIS \(tamu.aefis.net\)](https://tamu.aefis.net).

Program Coordinators may refer to the [AEFIS User Guide](#) for a step-by-step walkthrough of logging in, accessing, and submitting assessment forms. This visual guide includes helpful tips, things to remember, and information about system features that Program Coordinators may find useful as assessment is documented in AEFIS (such as using *Tasks* and *Notes* to communicate with other Program Coordinators in the system).

Accessing Assessment Forms

Support Unit Assessment forms assigned to Program Coordinators will appear in the Action Items list on the right side of the browser after logging in. Click the blue pencil icon to edit the information in the form. *If the Action Items list does not automatically appear, it can be accessed by clicking on the bell icon at the top right of the screen.*

Please pay particular attention to the academic year listed on the form in which you are working. At any given time, there are active Support Assessment forms for two assessment cycles—the cycle for which the Plan is being documented and the cycle for which the assessment is occurring and the Report is being documented. Sometimes those forms will both be visible in the Action Items list. Program Coordinators should verify they are working in the correct form.

Upon opening the 2020-21 assessment form, Program Coordinators will find information is already entered in some fields. The following information has been pre-populated in the 2020-21 forms:

- The mission statement from the 2019-20 form (pre-populated into the “Department/Unit Purpose” text box)
- All outcomes/objectives entered into the 2018-19 and 2019-20 forms
- Measures and targets from the 2019-20 form listed under each outcome/objective

Submitting Assessment Forms

Units with the internal feedback loop. Throughout the assessment documentation cycle, Program Coordinators will submit the Plan twice, the Report twice, and the Assessment Reflections & Closing the Loop Report once (see pages 38-39 for graphic representations of the documentation workflow). When

submitting the 2020-21 Plan for the first time, it will be sent to the Assessment Liaison for internal feedback. Simply click the “*I’m Finished, Submit*” button at the bottom of the form to do so.

For all submissions *after* the initial submission an additional step is required. There are two additional buttons that appear above the “*I’m Finished, Submit*” button: *Approve Form* and *Reject Form*. **In order to successfully submit the form, *Approve Form* must be selected first.** This button indicates the form should move to the *next step* in the workflow. The *Reject Form* button indicates the form should move *back a step* in the workflow. Program Coordinators will likely not use the *Reject Form* button very often, if at all (for example, it may be used in rare cases when the Assessment Liaison asks for the form to be sent back to them).

Units without the internal feedback loop. Unlike support units that have Assessment Liaisons providing feedback, these units will only submit the Plan and Report one time each. The Assessment Reflections & Closing the Loop Report is also submitted only once (see pages 38-39 for a graphic representation of the documentation workflow). To submit the Assessment Plan simply click the “*I’m Finished, Submit*” button at the bottom of the form.

When preparing to submit the Report, notice that there are two additional buttons above the “*I’m Finished, Submit*” button: *Approve Form* and *Reject Form*. **In order to successfully submit the Report, *Approve Form* must be selected first.** This button indicates the form should move to the *next step* in the workflow. The *Reject Form* button indicates the form should move *back a step* in the workflow. Program Coordinators will likely never need to use the *Reject Form* button.

Once a form is submitted it will not display on the Action Items menu; however, it is still accessible in a read-only format from the dashboard widget labeled *My Data Collection Forms*. Filter the list that appears in this widget by “In Progress Forms” to see assessment forms that have been submitted.

NOTE: After receiving feedback on the Assessment Plan from OIEE, Program Coordinators may update the Department/Unit Purpose, Outcomes/Objectives, Measures, and/or Targets as they see fit. However, the form should **NOT** be submitted again after making revisions. The form will not be submitted again until the Assessment Report (Findings and Data-Informed Actions) is due the following fall semester (unless this information is documented and ready to submit before then). Simply use the “Continue Later” button to save any changes made to the form.

Email Notifications

When feedback is sent to Program Coordinators—whether from the Assessment Liaison or from OIEE staff—the AEFIS system automatically sends an email notification indicating that an assessment form with feedback is available on the Program Coordinator’s Action Items list. The sender of these notifications is listed as “The Office of Institutional Effectiveness & Evaluation,” but the notifications are sent automatically by the AEFIS system. **Please read these email notifications carefully as they provide important information such as who provided feedback, next steps and future deadlines, and technical information about the AEFIS system.**

NOTE: If you have a student email address (@email.tamu.edu) in addition to your work email address (@tamu.edu), you may need to forward these notifications from your student account to your work account. AEFIS receives a nightly update from the University’s Student Information System, during which student email addresses overwrite work email addresses (even those that have been manually entered). Therefore, if

you do not believe you are receiving these notifications please check your student email account and set up the forwarding service.

Assessment Support

Program Coordinators and Assessment Liaisons are supported in their assessment efforts by OIEE assessment consultants. Each division/branch campus is assigned to an assessment consultant within OIEE as follows:

OIEE Staff Member and Contact Information		
Alicia Dorsey amdorsey@tamu.edu	Elizabeth Bledsoe Piwonka ebpiwonka@tamu.edu	Alyce Odasso a.odasso@tamu.edu
I-School	VP & Associate Provost for Diversity	VP for External Affairs
Division of Marketing & Communications	VP for Enrollment & Academic Services	Office of Graduate & Professional Studies
Health Science Center	Dean of Faculties & Associate Provost	Division of Information Technology
Office of the President	Division of Finance & Operations	Division of Research
Office of the Provost	University Libraries	VP for Student Affairs
Galveston Campus	Qatar Campus	

OIEE staff work closely with the division/branch campus Assessment Liaisons throughout the year to ensure training, expectations, and deadlines are clearly communicated to all units. Requests for additional training or questions can be submitted to assessment@tamu.edu. Unit directors and staff involved in the assessment process are welcome to contact their assigned OIEE consultant listed above for guidance on assessment efforts.

On the following pages, each section of the Assessment Plan and Report are outlined in detail. Prompts for Assessment Reflections and Closing the Loop are also provided and explained. Please use this manual as a guide as the unit works to plan and document the assessment process.

Department/Unit Purpose

This description of the department/unit should include three things:

1. The name of the unit
2. A summary of the purpose of the unit
3. The primary group(s) the unit serves (e.g., unique student populations, faculty, prospective students, etc.)⁵

If the unit only serves students at their specific geographic location (e.g., in College Station, Galveston, Qatar, Fort Worth, etc.) this should be noted. Be sure to indicate if the unit serves students at multiple locations (i.e., distance education students or students at approved off-site locations).

Feedback

Unlike the other sections of the Plan and Report, internal Assessment Liaisons and OIEE staff do not provide feedback on the Department/Unit Purpose by selecting *Yes/No* to indicate whether certain criteria are present in the description. Only qualitative feedback is provided.

FAQs

Q: *The unit's mission statement from the 19-20 assessment form is already populated in this text box. Can we just leave it as it is?*

A: If the existing information covers the three primary items listed above [i.e., unit name, purpose of the unit, primary group(s) served] then the information can be left as is. However, if the existing mission statement does not capture the primary group(s) served by the unit please add this information, including the capacity in which each group is served.

Q: *What are "unique student populations"?*

A: *Unique student populations* primarily refers to distance education students and students at alternate geographic locations (i.e., students taking courses away from the "home" campus/site), among other characteristics (e.g., other populations based on demographic characteristics). Units responsible for providing or overseeing the provision of support services to all TAMU students (regardless of mode of program delivery or geographic location) should clearly state this. Alternatively, units responsible for providing or overseeing the provision of support services only to local students should clearly indicate this as well.

⁵ In the event services are provided through contracts or alternative means, please include that information here as well.

Outcomes/Objectives⁶

The primary purpose of assessment is to examine the effectiveness of the unit's ability to carry out key operations and the efficiency with which they do so. Strong outcomes specifically identify these key operations and what they should look like in a well-functioning unit.

All support units are expected to establish a minimum of three outcomes that comprise the program's comprehensive Assessment Plan. However, **units are only required to select and assess one outcome annually**. Unit staff and leadership should determine the most meaningful course of action for annual assessment, whether that means focusing on one outcome or on multiple outcomes. Some divisions may have specific internal requirements regarding outcomes that are to be assessed.

Types of Outcomes/Objectives

The strongest, most comprehensive Assessment Plans are comprised of outcomes related to **stakeholder/customer perceptions** and **efficiency, effectiveness, or reach**. Units that directly support students and/or faculty in their educational programs or the enrichment of the overall college experience should also include outcomes that are clearly related to **student and/or faculty success**. Units that employ student workers or support student involvement in campus activities may find it useful to include **student learning outcomes** and are encouraged to do so. More information about types of outcomes is presented below.

1. Stakeholder/customer perceptions

Support units are encouraged to assess at least one stakeholder experience outcome (either annually or on rotation). Feedback from stakeholders is a rich source of information for determining how the unit can further improve its services and functions.

Example:

Participants will be satisfied with the high-quality trainings offered by the unit.

2. Efficiency, effectiveness, or reach

Outcomes related to efficiency, effectiveness, and reach are about the quality of services provided and the extent to which those services are used by stakeholders.

Examples:

The unit will respond to all inquiries and requests in a timely manner. (Efficiency)

The unit will produce meaningful, digestible reports for various stakeholders. (Effectiveness)

The unit will continue to increase the number of students utilizing [specific service]. (Reach)

3. Student and/or faculty success

Academic and student support units should identify and assess outcomes that are clearly connected to faculty and/or student success. **If it may not be immediately evident to someone outside the unit how an outcome is connected to student/faculty success, please provide a brief, clear explanation of the connection.** Outcomes related to stakeholder perception and effectiveness, efficiency, and reach may also address student/faculty success.

⁶ "Outcome" and "objective" are used interchangeably throughout this manual.

Examples:

Students who utilize the services offered by the unit will achieve a higher level of academic success than students who do not utilize these services, as indicated by grades, retention, and graduation rates. (Student success)

The unit will provide high-quality trainings for faculty that will enhance their classroom processes and communications. (Faculty success)

4. Student learning

Units that serve students directly (e.g., employ student workers or graduate assistants, host student educational activities, provide student trainings and workshops) are encouraged to assess relevant student learning outcomes. These outcomes might align with the University undergraduate and graduate-level outcomes, or they might be specific to the content of a particular training or workshop.

Examples:

Students who participate in [training/workshop] will report improved understanding of [topic].

Student workers who participate in the [event/service/training] will demonstrate high-quality oral communication skills.

Though it is only required that units assess one 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.

Relevant Associations

For each outcome/objective, Program Coordinators are prompted to select Relevant Association(s) from a dropdown menu in AEFIS. This menu lists institutional goals and priorities for the following initiatives:

- [2020-2025 Strategic Plan](#) – 6 priorities
- [University Diversity Plan](#) – 3 goals
- [Student Success Initiative](#) – 5 goals

Please only select Relevant Associations *directly related* the outcome/objective. If none of the listed Relevant Associations are closely aligned it is acceptable to leave this field blank.

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.

FAQs

Q: *Can outcomes focus on whether or not a project or task is completed?*

A: No. If the unit intends for a specific project or task to be the focus of an outcome, the focus should be on the *impact* of the completed project or task (i.e., effectiveness, efficiency, or stakeholder/customer perception of the project/task). 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.

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

A: Unit staff and leadership should guide the assessment process, including determining which outcomes are to be measured and when. Some units place their outcomes on two- or three-year rotations, focusing on just one or two in a given year. However, assessment planning should be an *intentional* process. In some cases, this might mean measuring the same outcomes annually, and in other cases this might mean measuring outcomes on rotation. Even units that assess their outcomes on a planned rotation might need to deviate from the rotation from time to time, depending on the current needs of stakeholders or changing priorities.

Q: *When selecting Relevant Associations is it better to select all that are somewhat associated with the outcome or to only select those that are directly related?*

A: The selected Relevant Associations should be as closely aligned to the outcome as possible. If two associations are closely related to the PLO, both may be selected. One purpose of the associations is to demonstrate how the program is assessing the university-wide outcomes through its annual assessment practices.

Q: *If we plan to make significant changes to one of our outcomes, should we revise the existing outcome or add a new outcome in the assessment form?*

A: If the revision is one that will fundamentally change how that outcome will be measured (e.g., changing a satisfaction outcome to an efficiency outcome), always add a new outcome instead of simply revising the existing Outcome tile. This ensures that the old version of the outcome remains intact and tied to its relevant measures in assessment forms from previous cycles. Add the new outcome and simply de-select the old outcome to indicate that it will not be assessed in the current cycle. These old outcomes can be permanently deleted later on.

Q: *We are adding a new outcome—what should we enter in the Outcome Code field in the assessment form?*

A: The Outcome Code should be a unique identifier no more than 20 characters long. All Outcome Codes should begin with the division code and unit code, separated by a dash, and end with characters that will make it easy to identify the focus of the outcome. For example, Student Life Studies in the Division of Student Affairs might include a Client Satisfaction outcome, for which an appropriate outcome code might be “DSA-SLS-SATISFY”. Refer to the outcomes that were pre-loaded into the assessment forms at the start of the 18-19 cycle for the appropriate division and unit codes.

Measures

A measure is the method of collecting and evaluating assessment data. A strong measure description makes the assessment strategy easy to follow for an external party who is not intimately involved in the day-to-day operations of the unit. The Measures section can be thought of as a miniature methods and data analysis section of a research paper—it is a description of methods used to gather and analyze assessment data, with enough detail that the process could be replicated. As a reminder, every identified outcome should have at least one measure. Feedback on measures will be based on the presence or absence of the criteria described below.

Feedback Criteria

1. Data collection and methodology/analysis are clear

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. Many processes for measuring outcomes are automated (e.g., software that generates a number, results extracted from a database such as Compass). In such cases simply indicate the primary source of data and the format in which they will be reported (number, percentage, average, etc.).

2. Measure is consistent with the outcome as defined

This criterion focuses on the *alignment* of the measure with the targeted outcome. That is, is the measure capable of adequately capturing 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 and continuous improvement.

3. All relevant documents are attached or sufficiently described

Surveys, spreadsheet templates, sample reports, rubrics, or other instruments used for data collection and reporting may be attached to the assessment form in AEFIS as supporting documentation. Alternatively, the Program Coordinator may instead choose to include a description of the instrument can be included in the Measure Description. For example, if an item on a customer satisfaction survey is used to gather data on a targeted outcome, the unit may choose to attach the survey instrument and indicate the item number, or 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: No. If the unit is assessing a specific project or task, the focus of the measure should be on the *impact* of the completed project or task. Measures that focus solely on tracking completion rates typically do not provide sufficient information for consideration of continuous improvement. As a general rule, measures should

reflect methodology that will result in some variability of scores or results over time (e.g., *not* a “Yes/No” or “Complete/Incomplete” result).

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, depending on the nature of the outcome. Very broad outcomes might call for two or three measures in order to determine whether the outcome was achieved or not. 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, utilizing multiple measures will facilitate conversations about continuous improvement.

Q: *Do the file names of uploaded supporting documents matter?*

A: The file name of a supporting document should be descriptive enough that it is clear to a reviewer how it relates to the measure it is connected to in the system. If supporting documents are sometimes revised year-to-year, we suggest instituting a naming convention that includes the assessment cycle to which the document is relevant. Documents are carried forward into the new assessment forms every year (accessible from the ‘Manage Artifacts’ menu), so using this kind of naming convention will make it easier for new Program Coordinators to see the historical record of assessment-related documents.

Targets

A target is the level or threshold at which the unit considers an outcome to be “met” on a given measure. Strong targets are clear, static levels of achievement. Targets will be evaluated based on the presence or absence of the criteria described below.

Feedback Criteria

1. *Target clearly states the minimally acceptable performance level*

The level at which the targeted outcome is determined to be “met” or achieved should be clearly stated. For example: *80% of students will select that they either Agree or Strongly Agree that the training improved their mentoring skills.*

2. *Target aligns with the outcome and measure*

The target for a given measure should align with the measure description by using consistent language and format. In cases where surveys or questionnaires are used, make sure the target statement specifically refers to the desired response option(s) on the item response scale (e.g., Agree/Strongly Agree, Satisfied/Very Satisfied, etc.).

FAQs

Q: *What are some examples of strong targets?*

A: Below are some examples of acceptable targets. Keep in mind these examples are generically worded; units should include contextual information from the measure description in their targets.

- 75% of service requests will be acknowledged within 24 hours.
- 85% of workshop participants will indicate that they are either Satisfied or Extremely Satisfied with the content of the workshop.
- Female student enrollment in this activity/event will increase 15% from last year.
- 90% of reports will be submitted on time.
- Demographics of students participating in this experience will roughly match the demographics of students on TAMU campus (list percentages).

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

A: Unit staff should revisit targets annually and revise them as unit staff see fit, particularly if the targets are met year after year. Targets that are consistently met year after year may also be a sign that other methods of measuring the outcome should be explored. It is considered good practice to rely on multiple measures for evidence of a particular outcome.

Q: Do we have to justify our targets?

A: Although not mandatory, 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. These explanations are particularly useful when targets are based on state standards and requirements.

Q: *We have more than one target for one of our measures—how should we indicate this in the assessment form?*

A: At the bottom of each Measure section in the assessment form there is an “+Add Target” button. Additional Target text boxes can be added using this feature. After receiving feedback from OIEE on the Assessment Plan, a Findings text box will appear under each individual target. However, it is up to the Program Coordinator whether separate Target sections are added or whether all targets are included in a single Target text box. If all are included in the same text box please be sure to address all targets in the Findings text box when reporting results.

Findings

Findings are the results from the analysis of assessment data. Strong Assessment Reports will consistently communicate findings in a clear manner that aligns with the language of the related measure and target. In addition to the finding statement itself, units are prompted to select the appropriate designation (called the *target status indicator*) of *Met*, *Not Met*, or *Partially Met* from the provided menu in the AEFIS form. Please see the FAQs section for information about the appropriate use of *Partially Met*.

If there are no findings to report for a given measure/target, units may select a fourth target status indicator—*No data collected/reported*. If this option is selected please provide a brief explanation in the appropriate text box.

Findings will be evaluated based on the presence or absence of the criteria described below.

Feedback Criteria

1. Findings align with the outcome/measure/target

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. Includes a brief discussion about the meaning of the 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 the program 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: 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.

Q: *What kind of supporting documentation should be uploaded and linked to the Findings section(s)?*

A: Supporting documentation in the Findings section is optional. Some units may find it useful to upload documents that further illustrate their findings (reports, charts and graphs, raw data, etc.), as AEFIS then becomes a central location for that information from year-to-year. Please ensure uploaded documents do not include any identifying information.

Data-Informed Actions

Data-informed actions are specific steps the unit intends to take in response to the assessment results. These actions should have a close, clear connection to the data collected during the assessment reporting cycle. **Every unit is expected to submit at least one data-informed action that fulfills the criteria below.** In addition, units are expected to address use of results for each individual finding statement. See FAQs section for additional information.

Feedback Criteria (All Units)

1. *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 the targeted 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 the outcome. ***If any gaps are identified (e.g., between locations, identified groups, etc.) once results are disaggregated, strategies for reducing these gaps should be the focus of at least one of the unit's data-informed actions.*** See FAQs for additional information.

2. *Description addresses why the unit believes the action will improve or strengthen the outcome*

The data-informed action should identify how and/or why the unit believes the action will improve assessment results in the future. This might be a description of how the action will directly affect customers, faculty, or students; 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. *Includes specific implementation details (e.g., tentative timeline, responsible party, etc.)*

Including a timeline demonstrates that the action has been carefully considered and implementation has been discussed amongst responsible parties within the unit. The responsible party/group members do not need to be identified by name but could be described by title, for example. In addition, 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.").

Criteria specific to Academic and Student Support Units:

4. *Designed specifically to enhance student/faculty success (if applicable)*

Academic and student support units should establish at least one data-informed action that is designed to improve student and/or faculty success.

5. *Description acknowledges the relevance of the proposed action(s) to student populations (if applicable)*

Units that support student and/or faculty 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 distance education students and students at alternate geographical locations, if applicable).

FAQs

Q: Do we 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: Changes to the assessment process are a natural part of the assessment cycle. However, a change to the assessment process or 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. However, it does not mean 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

The Assessment Reflections & Closing the Loop report serves three purposes. It is an opportunity for support units to demonstrate: (1) how unit staff and leadership are involved in the assessment process, (2) what they have learned and/or plan to change about the employed assessment strategies, and (3) how they engage in the most important part of the assessment process—closing the loop on identified outcomes/objectives.

In AEFIS there is a Supporting Documentation upload feature in both sections of this report form. Supporting documentation in these sections is optional; this feature is included for the convenience of the unit.

Assessment Reflections

In this section support units are asked to reflect on the *assessment processes and practices* they have employed over the course of the last year. Specifically, units should 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. These changes may also be included in data-informed actions sections *as long as at least one data-informed action is focused on directly improving an outcome in the Plan.*

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 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.

Internal Feedback: Information for Assessment Liaisons

The Liaison Role in the Assessment Process

Some support units undergo an internal feedback loop wherein Program Coordinators are responsible for entering assessment information in AEFIS and the Assessment Liaison provides feedback before the final form is submitted to OIEE. In such units, Assessment Liaisons provide internal feedback to Program Coordinators twice each cycle—once on the Plan and then again on the Report. The purpose of this is to provide useable feedback to the unit prior to the final submission, ensuring clear, aligned, high quality Assessment Plans and Reports. In addition to providing feedback, Liaisons are encouraged to work with unit staff throughout the year to provide support and emphasize the importance of the assessment process.

Support assessment is inextricably tied to TAMU's SACS-COC accreditation status. TAMU's 10-year reaffirmation document, which will include assessment work, is due Fall 2021. The following will be reviewed by a SACS-COC Peer Reviewer:

- **AY2018-19** – Select examples of Assessment Plans/Reports to demonstrate the new assessment process adopted by TAMU
- **AY2019-20** – Large sample of Assessment Plans/Reports and Assessment Reflections & Closing the Loop Reports
- **AY2020-21** – Large sample of Assessment Plans [Note: All Assessment *Reports* will be made available during the onsite review in March 2022]

Providing Feedback

This manual can serve as a guide for Assessment Liaisons as well as for Program Coordinators. Liaisons are encouraged to refer to the Plan and Report sections of this manual when providing feedback to their units.

Types of Feedback

Feedback in this program assessment review process takes two forms:

1. Categorical: *Yes, No, Not Applicable*

Yes should be selected only in cases where the criterion is completely fulfilled. The *Not Applicable* option is new as of the 20-21 assessment cycle; it should be used in instances where a particular criterion is not relevant to the outcome, measure, finding, etc. *For example:* Assessment Plans for administrative units are not required to focus their outcomes on student and faculty success, so *Not Applicable* is the appropriate selection for that criterion in the Data-Informed Actions section.

2. Qualitative

Each section of the Plan/Report includes a text box where qualitative feedback can be provided. OIEE recommends providing qualitative feedback in sections where *No* is selected for any of the

related criteria. Qualitative feedback helps Program Coordinators understand what specific revisions are being requested and why.

Submitting Feedback

If the Liaison would like to provide feedback on the Plan (or Report) but does not wish to review the form a second time after the Program Coordinator makes revisions, enter the appropriate feedback and select the “Approve Form” button. Once the button is highlighted, click “I’m Finished, submit” to send the feedback forward in the workflow to the Program Coordinator. When the Program Coordinator submits the Plan/Report it will go directly to OIEE for final review.


The “Reject Form” button can and should be used in cases where Liaisons would like to review the Plan or Report again before advancing it through the rest of the workflow. Select the “Reject Form” button and click “I’m Finished, Submit” to send the form with feedback *backwards* in the workflow to the Program Coordinator. This action ensures the Liaison will see the form again before it is submitted to OIEE by the Program Coordinator.

Liaisons should use their best judgment (in concert with this manual) to determine which programs might benefit from multiple iterations of internal feedback.

Using Tasks to Notify Program Coordinators of Feedback


When the “Reject Form” feature is used to provide feedback, the Liaison should either (a) notify the Program Coordinator (via email) that the form was sent back for revisions and will be reviewed a second time by the Liaison once submitted again, or (b) assign a Task in the assessment form. Assigning a task is a useful feature because the AEFIS system does not currently send specific email notifications when a form is “Rejected;” notifications are only specified when forms are “Approved” and when tasks are assigned.

To Assign a Task:

1. Click the *Manage Artifacts* icon at the top right of the assessment form 
2. In the first section of the pop-up menu labeled “Tasks”, select the +Add button
3. Title the task (e.g., Revisions requested) and include task details (e.g., Please see the feedback in the Measures section of the [AY, Unit Name] form and make the requested revisions before submitting)
4. Select a deadline
5. Assign the task to one or more Program Coordinators by searching by email address or last name
6. Select Save
7. Reject and Submit the form to the Program Coordinator

The assigned Program Coordinator(s) will receive a notification indicating that a task was assigned. When they log in to AEFIS the task will appear at the top of their Action Items list. It will also appear as a notification on their *Manage Artifacts* icon in the form itself. Once a task is completed, the Program Coordinator can open the task from either location and select the option that says “I have completed this task.” The task will then appear as completed on the Liaison’s Action Item list.

Form History

The Form History feature allows liaisons to easily determine whether Program Coordinators made changes to the assessment form between feedback iterations. To access Form History, click the *Show History* icon at the top right of the assessment form .

The first section of the *Form History* menu, labeled *Form Actions*, shows the submission history for the assessment form, including date, time, whether it was sent forward in the workflow (*Action: Process*) or backward (*Action: Rejected*), and by who.

The second section of the *Form History* menu, labeled *Form Update History*, shows a list of “sessions” in which Program Coordinator(s), Liaison(s), and/or OIEE staff was working in the form. Expanding a session entry will show every change that was made in the form during that session. Each change is timestamped and labeled with the user’s name. Clicking on an individual change within a session will automatically navigate you to that section of the form.

Changes to Feedback Fields

Some changes have been made to the feedback fields as of the 20-21 cycle. Most notably, Liaisons are now able to edit the feedback they provided on the Plan after Program Coordinators submit the first draft of the Report (i.e., Plan feedback provided at Step 2 is editable at Step 6 of the workflow). Liaisons can now edit their prior feedback if Program Coordinators made revisions based on Liaison and/or OIEE feedback.

In some sections, feedback fields were combined, deleted, or re-worded for clarification. Please see the relevant sections of this manual for a comprehensive list of the feedback fields for each part of the Plan and Report.

Specific Feedback Considerations for Plan and Report

Department/Unit Purpose

- Program Coordinators can freely describe the purpose of the unit. This does not necessarily need to resemble a mission statement, but mission statements likely include much of the relevant information. There are not any review criteria specifically related to the description they provide.
- Of greatest import is the inclusion of the primary groups served by the unit. The description should list the groups served (e.g., faculty, staff, students, etc.), but should provide more detailed information about student groups served, specifically. Emphasis should be placed on whether students at alternate geographic locations are served, where those locations are, and the capacity in which the central unit serves those students. If the unit does not serve students outside of College Station campus (or Galveston or Qatar for the units located on those campuses) this should also be stated. Specific characteristics of students should be included as well (for example, if the unit primarily serves undergraduate students, international students, veterans, etc.).

Outcomes/Objectives

- Selection of outcomes to assess in the upcoming academic/fiscal/calendar year should be an intentional decision. Encourage Program Coordinators to open this discussion with staff and leadership well in advance of when Assessment Plans are due. Even units with a rotating schedule for assessing their outcomes might benefit from having this conversation annually.
- Appropriate selection of Relevant Associations is important because OIEE uses those associations to run a variety of reports for institution and system reporting. In instances where an outcome is broadly linked to a number of Relevant Associations, provide feedback encouraging Program Coordinators to only select those that most closely align with the outcome. It is acceptable to leave the Relevant Associations section blank if none are closely related to the outcome.

Measures

- Units are strongly encouraged to use more than one measure to obtain evidence of an outcome, when possible.
- Supporting documents such as surveys, spreadsheet templates, sample reports, and rubrics are always useful to include, but are not necessarily crucial to include as long as all aspects of the measure are thoroughly described in the Measure Description.

Targets

- Particularly with the use of surveys, target statements are sometimes written too generally. For example: "80% of respondents will report a positive experience using this service." Survey item targets should incorporate language used in the response scale for that item. For example: "80% of respondents will indicate that they were *Satisfied* or *Extremely Satisfied* with their experience using this service."

Findings

- All academic and student support units should disaggregate assessment results by relevant demographic characteristics when possible. Race/ethnicity and gender are the standard, but other demographics such as first generation vs. non-first generation and graduate vs. undergraduate students might be explored if applicable to the services provided by the unit. Units looking at faculty success, specifically, might disaggregate based on college or rank. Some measures may not allow for disaggregation of data, but if the academic and student support unit does not disaggregate *any* of their results the Liaison should provide feedback reminding them to do so.
- Academic and student support units *responsible for providing student services at other locations* must disaggregate results by geographic location whenever possible. Some units may find it easier to use separate measures for assessing services at other locations. If the academic and student support unit does not disaggregate or include measures for services at other locations the Liaison should provide feedback reminding them to do so.

- If Program Coordinators select *No data collected/reported* they are expected to provide an explanation as to why. There is a separate text box specifically labeled and meant for a response to this selection.
- Strong finding statements include more than just the current results. Units should contextualize their results in some way, though it is up to them how they do this. OIEE often recommends discussing the longitudinal trend of the findings, discussing whether the results were affirming or surprising, disaggregating results by different groups, or performing further analysis on the data for more granular results. Sometimes units address this in the related Data-Informed Actions text box, which is acceptable.

Data-Informed Actions

- “Pre-actions” are not appropriate data-informed actions (e.g., “We will meet to discuss assessment results” or “We will review the data in a staff meeting to determine future actions”). The assessment reporting cycle has been purposefully adjusted to allow more time in the Fall semester for unit leadership and staff to discuss assessment results from the previous year. By the time the Report is submitted unit staff should have convened to discuss the assessment results and establish data-informed action(s).
- If any gaps are identified (e.g., between locations, identified groups, etc.) ensure that strategies for reducing these gaps are the focus of one of the unit’s data-informed actions.
- At least one data-informed action in the Assessment Report must be a change clearly designed to improve the outcome. Some units may discuss assessment process-related actions in the other Data-Informed Actions text boxes; OIEE encourages providing feedback in response to these process-oriented actions that reminds Program Coordinators to also discuss these changes in the *Assessment Reflections* section of the Report.
- Program Coordinators are required to enter information in each data-informed action text box. This information might reflect changes to the assessment process, intent to continue collecting data before any action is taken, or monitoring success on the given outcome/measure. These are all appropriate responses **only if** the Report includes at least one data-informed action specifically designed to improve the outcome in the future. Responses like “N/A” or “No action needed” warrant qualitative feedback encouraging units to reflect on what was learned through the assessment process and what the next steps will be.

Assessment Reflections & Closing the Loop

Although Liaisons do not provide internal feedback on this report within the AEFIS system, they are strongly encouraged to work closely with units as they craft responses to these prompts. Here are some considerations to keep in mind:

Assessment Reflections

- Changes to the assessment process should be reported in this section. Units are prompted to reflect on the usefulness of the assessment data they collected and discuss changes they have made or

intend to make to measurement strategies that will ensure greater usefulness of data in the future. If more guidance is needed, encourage Program Coordinators to review the feedback on previous Assessment Reports. Feedback from previous assessment cycles in AEFIS are accessible within the system, and Liaisons have access to previous years' feedback reports via the Reports landing page accessible from the [OIEE website](#).

Closing the Loop

- Closing the Loop is arguably the most important part of the assessment process. Though these prompts have been revised for clarity, Liaisons should work closely with Program Coordinators to ensure that there is no confusion about the appropriate, effective way to close the loop. The action discussed in this narrative should be focused on improving an outcome/objective versus improving the unit's assessment strategies. The targeted outcome should have since been re-assessed so that follow-up findings can be reported. Remind Program Coordinators that the action discussed in this narrative does not need to have been submitted in a previous Assessment Report. Please see the *Closing the Loop* section of the manual for additional information.

Glossary

Academic and student support units

Departments, offices, or divisions that support student and/or faculty success. These units typically include library and learning/information resources, faculty resource centers, tutoring, writing centers, academic computer centers, student disability support centers, financial aid, residence life, student activities, and the dean of students' office, among others. Most institutions 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, and/or have a specific co-curricular mission that supports the college experience.

Administrative units

Departments, offices, or divisions that primarily serve the institution by ensuring the effective and efficient operation of the institution. Typically, these units include divisions such as finance and administration, facilities and physical plant operations, research, marketing and communication, external affairs, and development, among others. 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.

Alternate geographic location

Campus or approved off-site location where students take coursework; geographically different location from where the central support unit exists and operates

Assessment Liaison

Texas A&M University and AEFIS terminology for college, school, or campus liaisons who work with the Office of Institutional Effectiveness & Evaluation on behalf of their respective unit, division or campus; some may also provide internal feedback on their respective units' Assessment Plans and Reports

Closing the loop

Analyzing results from outcome assessment, using the results to make changes to improve unit functions/processes, and re-assessing outcomes in order to determine the effect those changes had on the functions/processes

Continuous improvement

An ongoing, coordinated, and collaborative effort to ensure effectiveness, efficiency, and/or delivery of quality services to students and faculty; includes establishing intentionally designed outcomes, assessing the extent to which the unit achieves those outcomes, and informed reflection to reinforce and enhance current success and redirect efforts as needed to ensure future success

Data-informed action

A change based on assessment results; an explanation of "next steps" to be taken in light of assessment data

Faculty success

For purposes of assessment, faculty success is the extent to which units support professional development and personal growth of faculty across the institution

Finding

Results from the analysis of assessment data

Measure

A term describing the process by which assessment data is collected and evaluated, including what the data is, how it is collected and from where, and the methodology used to analyze it

Outcome/Objective

A goal that is closely aligned to one or more of the mission-critical processes or functions carried out by the unit

Program Coordinator

AEFIS terminology for individuals who are responsible for documenting assessment information and submitting assigned assessment forms in the AEFIS system

Student success

Student preparedness to accomplish their current and future academic, personal, and professional goals; student success should be specifically defined from the perspective of the support unit; refer to the Student Success Initiative link on pg. 14 of this manual for Provost-mandated metrics of student success at TAMU

Support units

An encompassing term for all administrative and academic and student support units

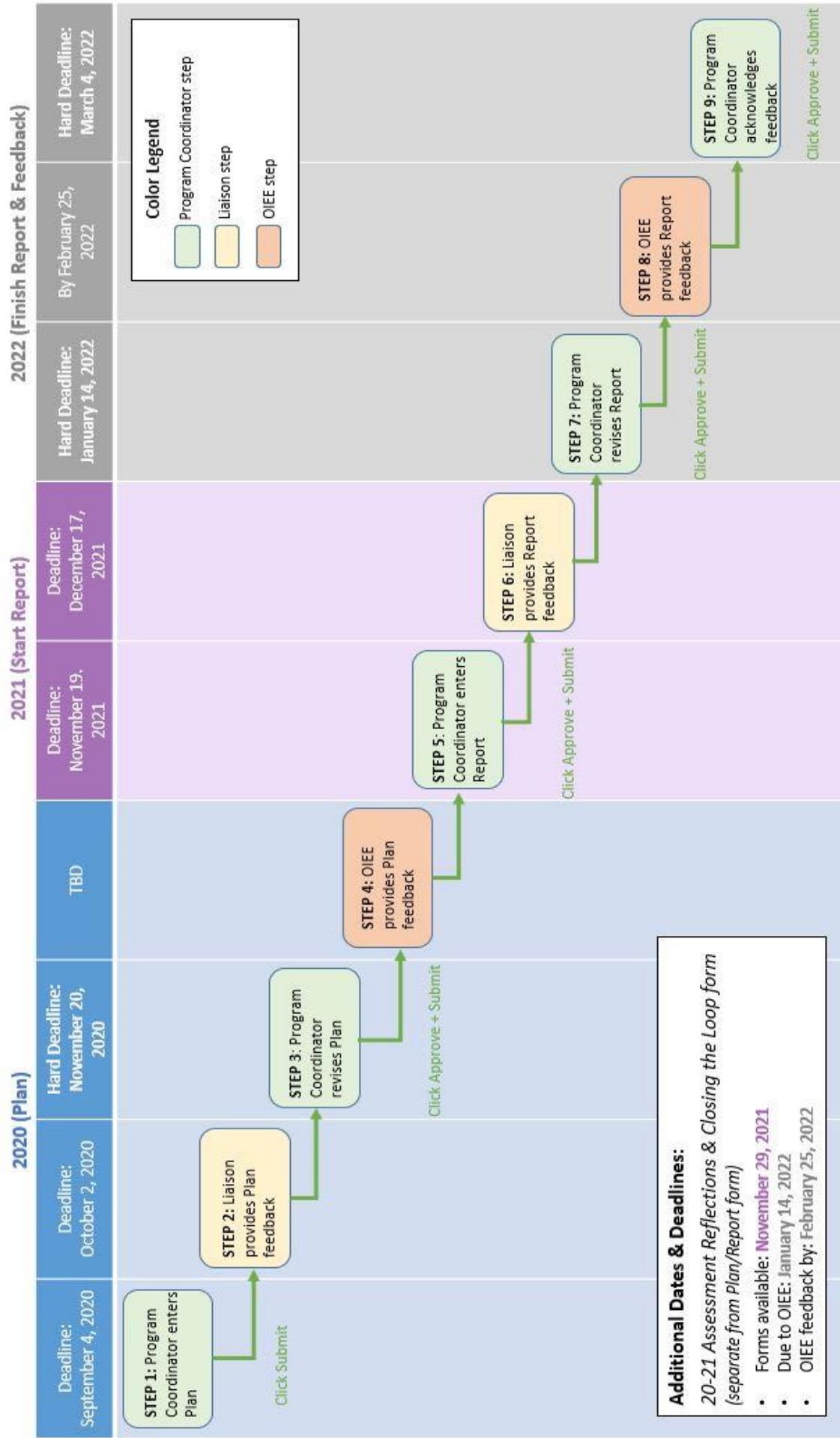
Target

The level at which an outcome is considered to be “met” or achieved on a given measure

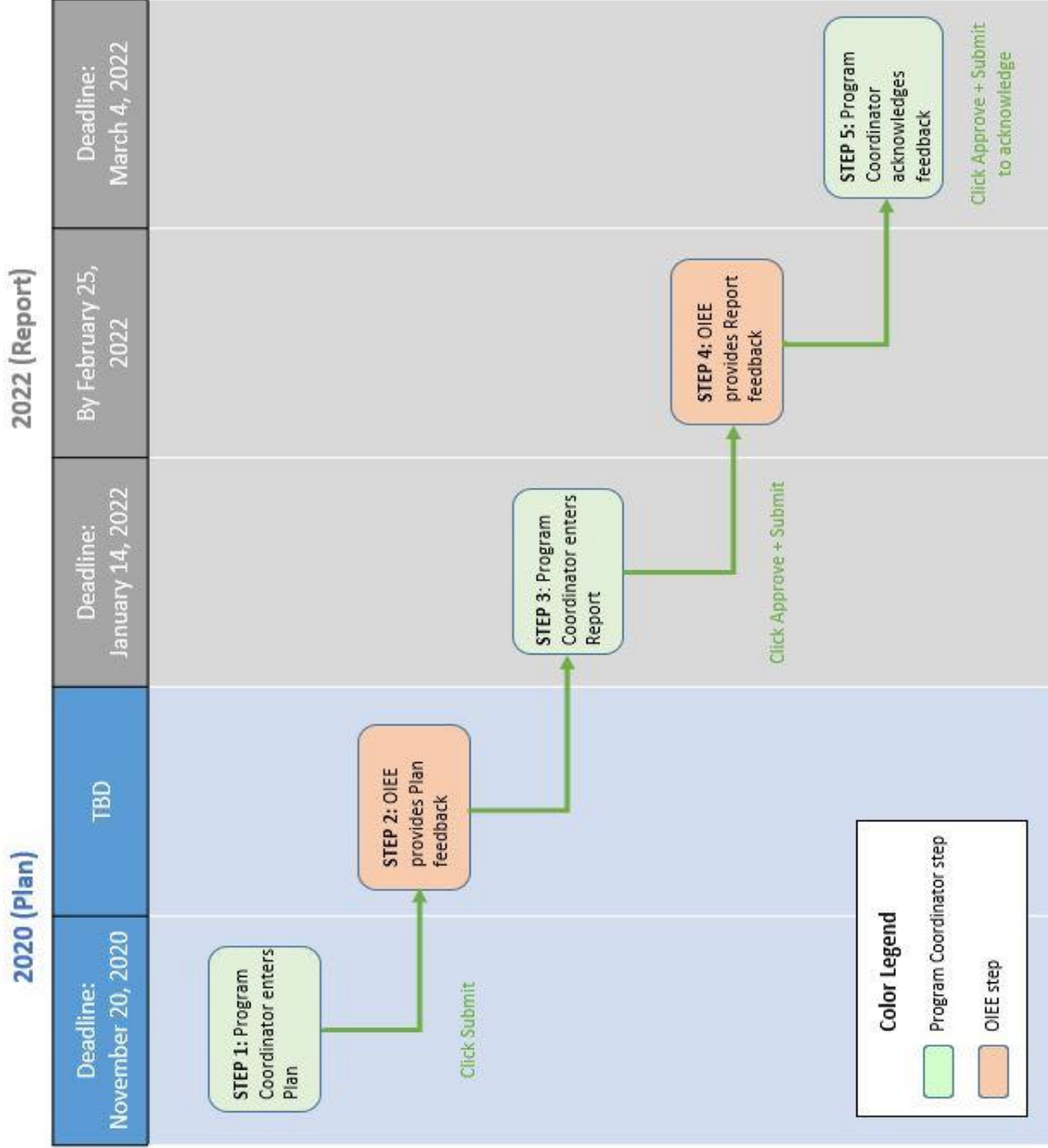
Unique student populations

Refers to distance education students and students at alternate geographic locations (i.e., students taking courses away from the “home” campus/site), among other characteristics (e.g., other populations based on demographic characteristics).

2020-2021 Support Unit Assessment Workflow – Units With Internal Liaison Feedback Loop



2020-2021 Support Unit Assessment Workflow – Units WITHOUT Internal Liaison Feedback Loop



Timeline

Summer 2020 – Fall 2020

- Create and submit assessment plan for 20-21
- Possibly start collecting assessment data (if able)

Spring 2021 – Fall 2021

- Carry out assessment activities/practices
- Analyze data
- Plan continuous improvement efforts

Early Spring 2022

- Submit assessment findings and data-informed actions (+ Assessment Reflections & Closing the Loop)

Additional Dates & Deadlines:
 20-21 Assessment Reflections & Closing the Loop form (separate from Plan/Report form)

- Forms available: **November 29, 2021**
- Due to OIEE: **January 14, 2022**
- OIEE feedback by: **February 25, 2022**