2020-2021 SUPPORT UNIT ASSESSMENT

ADMINISTRATIVE & ACADEMIC AND STUDENT SUPPORT SERVICES

ASSESSMENT GUIDELINES

Updated March 2021
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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.
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 address technical 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

Status Update Report (formerly Assessment Reflections & Closing the Loop). Most support units are required to provide evidence of continuous improvement. This is achieved by providing a status update on a previously identified action from a past Assessment Report. In this narrative, support unit staff summarize subsequently gathered assessment to determine whether or not the described action led to improvements in the unit’s outcomes/objectives.

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1 Contact your OIEE liaison if you are unsure whether this requirement applies to your unit.
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 below:

- **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.

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3 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 met. 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 as one type unique student population. Consideration should also be given to unique characteristics such as undergraduate students vs. graduate or professional students; majority students vs. minority students; or students with disabilities vs. non-disabled students.

3 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 two-year assessment cycle during which staff assess the effectiveness and efficiency of their departments and divisions. The specific dates will vary slightly by cycle.

**AY 2020-2021**

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

**ASSESSMENT PLAN:**
- September 4, 2020: DRAFT Assessment Plans submitted to internal Assessment Liaisons\(^4\) for feedback
- October 2, 2020: Assessment Liaisons submit feedback\(^5\) 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 feedback\(^5\) to units
- **January 14, 2022:** FINAL Assessment Reports submitted to OIEE
  - OIEE will submit feedback to units without internal liaison feedback by **February 25, 2022**

**STATUS UPDATE REPORT (formerly Assessment Reflections & Closing the Loop):**
- **November 29, 2021:** Report forms available in Action Items
- **January 14, 2022:** Report submitted to OIEE
  - OIEE will submit feedback by **February 25, 2022**

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\(^4\) Units without an internal feedback loop should refer only to the FINAL deadlines for submission of the Assessment Plan and Assessment Report.

\(^5\) There are a number of units that do not have this internal liaison-level feedback step. For more information please contact your unit’s OIEE consultant.
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/units 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 pgs. 25-28 for more specific information about this role. Though all support units have an Assessment Liaison, not all support units participate in an internal feedback loop.

Getting Started

Program Coordinators use their NetID and password to [log in to AEFIS](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 also includes useful tips and things to remember as the Assessment Plan is documented in the AEFIS system.

Accessing Assessment Forms

Support 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 internal feedback loops.** Throughout the assessment documentation cycle Program Coordinators will submit the Plan twice, the Report twice, and the Status Update Report once (see pgs. 26-27 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 internal feedback loops. Unlike support units that have internal Assessment Liaisons, units that do not have internal Assessment Liaisons will only submit the Plan and Report one time each. The Status Update Report is also submitted only once (see pgs. 26-27 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 and are no longer showing in your Action Items list.

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 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.
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.)

If the unit only serves students at their specific geographic location (e.g., 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.

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

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/objectives that comprise the unit’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 assess **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.

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7 “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 unit 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: We received feedback from OIEE on the 2020-21 Assessment Plan. The outcomes we didn’t select are now missing from the form. What happened?

A: This is a new characteristic of assessment forms after the final Assessment Plan has been submitted to OIEE. Whereas in the past Program Coordinators have had access to all of the unit’s outcomes even through the Report stages of the workflow, this is no longer the case. The reason for this limited view is to encourage meaningful and intentional assessment planning. Unit staff and leadership are encouraged to discuss their intentions for the upcoming year of assessment well before the assessment takes place.

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 outcome 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: 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.

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 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. 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.
Status Update on a Previously Identified Action

In this separate report—formerly called Assessment Reflections & Closing the Loop—Program Coordinators are prompted to respond to the following:

1. Provide an update on an action from a previous assessment report.
2. What changes, if any, have occurred in assessment results since the action was taken?

Ideally, the response to the first item will describe an action that has been fully implemented by the unit (and the targeted outcome reassessed). Previous assessment results (i.e., the results that informed the action) should also be presented here.

In response to the second item, subsequently gathered assessment data should be presented. The response should include a reflection on these findings and whether unit staff believe the action made a difference.

If no actions from previous assessment reports have yet been fully implemented, a discussion on where the unit currently is in the implementation process should be provided, as well as when the unit expects to be able to report follow-up assessment results.

Feedback Criteria

1. Status update on a previously identified action is provided

   Provide a summary of the previously identified action. Describe the specific action that was taken, which Assessment Report it was from (including the assessment findings that prompted it), and which outcome(s) the action was intended to improve.

2. Described action is one that was designed to improve the outcome/objective (i.e., not a change to the assessment process)

   The action for which a status update is being provided should be one that was designed to improve one of the unit’s outcomes/objectives. That is, it should not be an action that was focused on changes made to the assessment process. It is expected that a unit’s assessment strategies will change over time as the unit develops and evolves, but those changes are reflected in the Assessment Plan each year and thus should not be updated here.

3. Discusses the impact of the action to date

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

   When possible, clearly state the specific results of the subsequent outcome assessment and how these results compare to the previous findings (i.e., the specific findings which prompted the action in the first place). Avoid vague statements such as “the target wasn’t met in the previous report.” Be as
specific as possible: “In the AY18-19 Report, 68% of help requests were solved within three business days but after implementing the action and re-assessing the outcome we found that the percentage of help requests solved within three business days increased to 75.”

FAQs

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

A: The purpose of this process is to engage in and provide evidence of seeking improvement. There are no repercussions for unmet targets or unimproved assessment findings. 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 guide improvement.

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

A: As noted above, if an action has not yet been fully implemented (and if there are no other fully implemented actions on which to provide a status update), describe in detail where the unit is in the implementation process and when staff expect to be able to re-assess the targeted outcome(s).

Q: **What should we write in the Status Update section if our unit is brand new (or new to being formally assessed)?**

A: If the unit is brand new as of the current reporting cycle (or if it is new to being formally assessed) there won’t be a previous action on which to provide an update, so the Program Coordinator can simply state this in the text box.

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 evolves. The unit’s reflection on the efforts made to improve outcomes is more important than ensuring directly comparable assessment results.
2020-2021 Support Unit Assessment Workflow
Units WITH Internal Liaison Feedback

**Additional Dates & Deadlines:**

- **20-21 Status Update Report** (formerly Assessment Reflections & Closing the Loop)
  - Forms available: November 29, 2021
  - Due to OIEE: January 14, 2022
  - OIEE feedback by: February 25, 2022
2020-2021 Support Unit Assessment Workflow

Units WITHOUT Internal Liaison Feedback

2022 [Report]
Deadline: January 14, 2022
By February 25, 2022

2020 [Plan]
Deadline: November 20, 2020

Additional Dates & Deadlines:
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STEP 1: Program Coordinator Submits Plan
STEP 2: OIEE provides feedback
STEP 3: Program Coordinator submits Report
STEP 4: OIEE provides Report feedback

Color Legend
- Program Coordinator step
- OIEE step