# **Assessment Synergy**

Office of Institutional Effectiveness



## **Assessment Synergy**

- Background
- Inventory Findings
- Continuous Improvement Synergy
- Recommendations/Actions
- Cycle Example
- What's Next



## Background

- Project kickoff November 2017
- Subgroup from UAC

Jen Wells Laurie McDowell

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Lori Trahan Dominique Foster

Sarah Holliday

- Conducted interviews to develop an assessment inventory
- Reviewed inventory to identify common elements
- Developed a reporting cycle broken down by unit that is responsive and flexible
- Considered the need for streamlining central repository of assessment reports



## **Inventory Findings**

- Information collected for 22 broad, institution-wide assessment initiatives/reports
- Inventory categories
  - Mandatory/ Optional
  - External v. Internal Mandate
  - Flexible
  - Scope/Reach

- Cycle
- Deadline
- Data Sources
- Strategic Plan Alignment
- Almost all of the assessment initiatives/reports are mandatory and reporting timelines not flexible
- Reporting deadlines are spread across the calendar year
- There is a lot of redundancy in the information being reported
- Improve KSU is the only formal assessment or continuous improvement process for roughly 2/3 of the units (educational, operational, administrative, and student affairs)

## Continuous Improvement Synergy

## **University Level Assessment**

University Strategic Plan **University Accreditation** 

Quality Enhancement Plan Momentum Year





#### **Educational Program Level**

Comprehensive Program Review General Education Assessment Improve KSU (Non-Accredited Programs) **Specialized Accreditation** 

#### **Performance/ Student Learning Outcomes**

#### **Data Sources**

- -IPEDS
- -Institutional Data
- -NSSE
- -Campus Climate
- -Other



- -Continuous Improvement
- -Learning Outcomes
- -Curriculum
- -Program Unit Overview

#### **Data Categories**

- -Enrollment/ Performance -External Relations
- -Budget/ Allocation
- -Policy/ Procedures
- -Faculty Data

-Program Articulation/

**Broad Course Offerings** 



### **Operational/ Admin/ Student Affairs Level**

**Business Process Improvement Diversity Action Plans** Improve KSU Library Assessment Unit Level Strategic Plan

#### **Performance Outcomes**



## Recommendations/Actions

- Utilize CPR and Program Accreditation as baseline for cycle
- Align Improve KSU with CPR and Program Accreditation (CPR to a six-year cycle)
- Those with mature assessment processes through Program Accreditation will not need to complete Improve KSU template
- Units that do not have a formal assessment or continuous improvement process outside of Improve KSU will move to the following process:
  - Annual data collection and report of findings (without narrative, trend analysis, assessment plan update, verified improvements, or strategies for improvement)
  - Full Improvement Reports reported on a 3 year cycle (includes all items listed in the above sub-bullet)
  - Example on next slide
- Gen Ed reporting move to a 3 year reporting cycle once 3 full years have been collected
- Update the IE Planning and Assessment Policy
- Transform the Improve KSU online system to be a central repository that is accommodating to the different reporting needs
- Modify the Improve KSU template



## Cycle Example

Educational Program without Specialized Accreditation

|      | Plan Phase                        | 3-Year Cycle A                        |   |   | Cycle B                               |
|------|-----------------------------------|---------------------------------------|---|---|---------------------------------------|
|      | 2017-2018                         | 2018-2019                             | 2019-2020                               | 2020-2021                               | 2021-2022                             |
|      | Submit Initial<br>Assessment Plan |                                       |   |   | Update Assessment Plan                |
|      |                                   | Submit Initial<br>Improvement Report  |   |   | Submit Cycle A<br>Improvement Report  |
| ber  |                                   | Submit Cycle A Improvement Strategies |   |   | Submit Cycle B Improvement Strategies |
|      |                                   |                                       | Submit Previous<br>Year Summary Data    | Submit Previous<br>Year Summary Data    |                                       |
|      |                                   | (Optional) Update<br>Assessment Plan  | (Optional) Update<br>Plan or Strategies | (Optional) Update<br>Plan or Strategies |                                       |
| ound | 2017-2018<br>Data Collection      | 2018-2019<br>Data Collection          | 2019-2020<br>Data Collection            | 2020-2021<br>Data Collection            | 2021-2022<br>Data Collection          |

Septem

## What's Next

- Complete formal process for updating the IE Planning and Assessment Policy
- Meet with each program with specialized accreditation
- Align the reporting cycle for non-accredited programs, student affairs, operational, and administrative units
- Explore common data elements
- Modify the central repository



## Questions

# Thankyou

