2015-16 Assessment Cycle

Meta-assessment Analysis Report for the College of Health Sciences

Please return the completed report back to the Office of Academic Planning and Assessment by March 31, 2017.

Meta-assessment Analysis Report for the College of Health Sciences

Assessment is an important best-practice in higher education that helps programs determine whether key objectives are being met, identify areas for improvement, and develop actions to improve program effectiveness. Additionally, meaningful and effective assessment is the corner stone of many discipline-specific accreditations, as well as our University's regional accrediting body, the Southern Association of Colleges and Schools Commission on Colleges. Meta-assessment is an important tool for helping ensure that all programs at Sam Houston State University are engaging in a meaningful and effective continuous improvement assessment process.

Meta-assessment serves two important roles for the College and the University. First, it provides valuable feedback to units regarding ways in which they may continue to improve their annual assessment processes. Second, it provides College and University leaders with a way to observe the overall quality of assessment processes for their units. The purpose of this report is to detail the Meta-assessment process utilized by the College of Health Sciences, the College's plan for distributing the completed Meta-assessment rubrics to their departments and programs, the assessment strengths observed within the reviewed assessment plans, the areas for improvement of assessment practices, the strategies for implementing those improvements, and the training or resources needed to implement those strategies.

Section 1: Description of Meta-assessment Methodology Employed by the CollegeDetail the College's Meta-assessment methodology and process. Include a description of who was involved (e.g., a committee of senior faculty or college administrators), your methodology

was involved (e.g., a committee of senior faculty or college administrators), your methodology for evaluating unit-level assessment plans, steps for ensuring reliability, and your timeline.

For the 2015-16 meta-assessment cycle, COHS began planning in November, 2016 by nominating faculty members to serve on the college's first meta-assessment committee. Each college department is represented on the committee and the members are:

- Valencia Browning-Keen (FACS)
- Laura Burleson (FACS)
- Stephen Nkansah-Amankra (HLTH)
- Stephen Brown (HLTH)
- D.T. Ratnapradipa (HLTH)

- José Santiago (KINE)
- Gary Oden (KINE)
- Pam Slagle (NURS)
- Lilibeth Al-Kofahy (NURS)
- E'Loria Simon-Campbell (NURS)

Of the ten member COHS Meta-assessment Committee, nine members hold a Doctorate degree in their department and one member holds an MSN degree in their department. The committee members met with Jeff Roberts (Office of Academic Planning and Assessment) for an initial training session that included a discussion of the rationale for assessment as well as an overview of the assessment nomenclature and process of assessment at SHSU. Mr. Roberts also instructed the committee on the meta-assessment rubric and led the members in a norming session. On 1/27 and 2/1 team members met with the interim Dean and were provided their assigned readings and meta-assessment documents. During these meetings, the interim dean reinforced the meta-assessment purpose and process and reviewed the rubric instructions.

The following departments and programs were assessed for the 2015-16 cycle:

- Family and Consumer Sciences (Department, Interior Design, Dietetics) for a total of three.
- Kinesiology (Department, PETE) for a total of two.
- Nursing (Department, BSN) for a total of two.
- Population Health (Department, Public Health) for a total of two.

Thus, a total of nine programs/departments were assessed by the 10-member committee. Each committee member assessed two to four of the programs for a total of 27 reports.

All of the programs within the college were not assessed. Therefore, the following provides a rationale for the selection of the programs within each department for the meta-assessment:

Family and Consumer Sciences: Interior Design provides an assessment of a program that is typical for the undergraduate programs that require an internship. It is representative of the assessment used for Fashion Merchandising, FCS General, and Food Service Management. The Dietetics program represents the highest enrolled master level program and is the best representation of a graduate level program in FACS. Additionally, this program is accredited by ACEND, as is the undergraduate Food Science and Nutrition program. It is representative of the assessment data required by ACEND.

Kinesiology: Physical Education Teacher Education (PETE) certification was selected as it is the program with the longest continuity in the department. Athletic training (ATTR) is a new program and would be better served by conducting a meta-assessment in subsequent years. It should be noted that the ATTR program's assessment plan is currently in place and is aligned with the assessment required by their accrediting agency, CAATE. The applied exercise science and clinical exercise science programs were recently separated and the department will spend the next cycle fully developing the assessment plans for each program.

Population Health: The Public Health degree was selected for assessment as it has the largest amount of declared majors in the department, and the program will begin working on the accreditation process during the next calendar year. In addition, the program is one of the fastest growing majors in the university and is expected to continue in growth during the next presidential administration.

Nursing: The BSN is currently the only degree offered in the School of Nursing. The school will create a separate assessment plan for the RN-BSN program in the coming year.

By February 10, 2017, committee members returned completed meta-assessment rubric documents to the office of the dean. The results were recorded in spreadsheet form by the COHS administrative coordinator as instructed by the interim dean who is responsible for the assessment.

The completed rubrics as well as the spreadsheet summarizing the results are available in Appendix A. The coding for the spreadsheet is as follows: developing =1, acceptable =2, and exemplary =3.

Section 1-A: Preliminary Evaluation of Results

Before proceeding to Sections 2 through 6 of the report, a note regarding the changes in key personnel in COHS is warranted. During the 2015-16 assessment cycle, COHS experienced the following administrative changes to key personnel:

- 1) Dean's Office: The dean stepped down in January 2016 to accept a provost position at another university. An interim dean (#1) began employment with COHS in January 2016 and then stepped down in June 2016 to accept another position on campus. The current interim dean (#2) began employment with COHS in June 2016. A dean's search is currently under way.
- 2) <u>Population Health and Dean's Office</u>— The chair of Population Health stepped down in February 2016. One of the associate deans is currently managing the duties of interim chair of Population Health while simultaneously managing the associate dean duties. A chair search is currently under way.
- 3) <u>Nursing</u>: The director of the School of Nursing stepped down in June 2016. One of the nursing faculty is currently serving as interim director. A search for a director of the School of Nursing will begin within the next two years.
- 4) <u>Kinesiology</u>: The chair of Kinesiology stepped down in October 2016. A team of two co-interim chairs are temporarily filling the position of chair for the department of Kinesiology. A chair search will begin once the dean's position is filled.

Despite the personnel setbacks, the programs continued to function with quality teaching and positive results in student learning outcomes.

Section 2: Plan for Distributing Completed Rubrics to Units

Detail the College's plan for sharing the complete meta-assessment rubrics with its departments and programs.

The chairs were emailed on February 10, 2016 requesting individual appointments with the Dean in order to review the meta-assessments for the 2015-16 cycle as well as utilize the information to prepare for the 2016-17 cycle in Campus Labs. The individual meetings took place on February 22, 23, and 24. The meetings focused on interpreting the results and strategizing on how to utilize the information to improve the assessment process for the respective departments. The goal beyond the meetings is to ensure that the assessments carried out by each program and department are linked to the process of strategic development and planning as well as student performance. More specifically, chairs responded to the following questions:

- (1) Does the meta-assessment review accurately reflect the actual assessment plans for the programs and departments?
- (2) Which areas of assessment does the department plan on updating/changing as a result of the meta-assessment review?
- (3) Is (and how is) the assessment process being used to improve student performances or outcomes?

The department chairs reported that the results from the meta-assessment did not necessarily reflect the status of the assessment plans for the departments and programs. As an example, the interim chair of the department of Population Health stated that the meta-assessment was "too generous" for the Public Health program. Further, the chair of Family and Consumer Sciences stated "some comments from the reviewers indicate additional training is necessary to provide meaningful assessment feedback." The interim director for the School of Nursing stated that "comments reflect an overall lack of understanding related to the relationship of the performance objectives and the CCNE accreditation standards."

Further explication to these questions are summarized in the remaining sections of this report. The chairs of the respective departments in COHS will receive a copy of this final report on or before March 31, 2017.

Section 3: Observed Strengths within College Assessment Plans

Detail the general strengths identified by the College after reviewing its units' assessment plans. What general aspects of the annual assessment processes are units mastering? Are there any units that you would recommend serve as exemplary models?

As a young and growing college, the chairs and directors demonstrated improvement over the last assessment cycle in their completion of assessment strategies. The assessment revealed that all departments are at acceptable levels in goals and findings. In fact, the overall average of 1.77 in the scoring of goals is the second highest average in the meta-assessment with only findings scoring higher at 1.89. Of the four departments, Population Health's assessment revealed that they are at a strong acceptable level while the other three departments still need additional specificity in stating their goals. Several degree programs in the college are nationally accredited and serve as quality programs within their disciplines. These include the BS in Kinesiology (All Level Teacher Certification), BS in Nursing, the combined MS in Dietetics and Dietetic Internship Program, and the BA/BS in Family and Consumer Sciences (Interior Design). The chairs, program directors, and program faculty will strive to have their programs reflect such status.

Of the programs reviewed, Dietetics received some of the highest ratings in the meta-assessment process scoring in the exemplary category by one of the reviewers. However, this is the program that had the most occurrences of a difference of more than one degree among the reviewers illustrating the concern of the chairs and the dean that further reviewer training on assessment is necessary. Besides the Dietetics program in FACS, the indicators reviewed in FACS performed at the acceptable level, with the results for the findings approaching an acceptable level (1.89).

In Population Health the meta-assessment revealed that the goals, objectives, KPIs, findings, and PCI scored at the acceptable level, in spite of the chair's and dean's perception that the assessment scores were "too generous."

The meta-assessment of the BSN program indicated that the criteria and findings were at the acceptable level, however, similar to FACS, there were several occurrences with differences of more than one degree. The chair of Family and Consumer Sciences and the new interim director (2016) in the School of Nursing both re-evaluated the existing assessment programs which

resulted in completely rewriting the goals, objectives, indicators and criterion to align with the accreditation standards for the Dietetics and BS in Nursing programs.

In reviewing the results, the interim dean noted inconsistencies between reviewers in their grading with 10 occurrences having differences of more than one degree in the reports. Though many comments were constructive for improvement, some comments reflected a need for improved assessment skills. Additional training strategies for committee members is discussed in Section 6.

Section 4: Observed Weaknesses within College Assessment Plans

Detail the general weaknesses identified by the College after reviewing its units' assessment plans. What general aspects of the annual assessment process are units struggling with?

The changes in key personnel as noted in Section 1-A created a setback on the continuous improvement plan for COHS which is reflected in the meta-assessment comments. The assessment exercise clarified several areas of weakness for which the chairs and program coordinators were already aware and for which corrective measures are already in the development and completion stages.

Several themes were identified as weaknesses in the program rubrics:

- The departmental chairs with accredited programs provided CampusLabs input that reflected the standards as required by their program's accrediting body and not necessarily SACSCOC's standards as required for meta-assessments. The chairs were not particularly clear on how to integrate the two differing standards into CampusLabs.
- Adherence to 2015-16 assessment plans were inconsistent. The interim chair of Population Health stated the assessment plans for 2015-16 cycle "were not effectively maintained due to a change in leadership in the department of Population Health."
- Program objectives, indicators, and criterion need to be more specific in relating them to the goals.
- Use of quantitative measures for criterion is needed and, if pertinent, rationalize the use of grades as a criterion.
- More validity in measurement is needed.
- The use of actionable data in findings and results is recommended.
- Improvement needed in articulating prior year's assessment and the plan for continuous improvement.
- The COHS assessments process, in its short history, has not been effectively or efficiently used for implementing Plans for Continuous Improvement in the various programs for the academic year subsequent to the assessment cycle.

Section 5: Strategies Needed to Address Identified Weaknesses

Detail the College's strategies for addressing the general weaknesses identified after reviewing its units' assessment plans.

Continuity in leadership is needed for the college and departments in order to advance in the growth of the programs. In addition to the hiring of key personnel, the following strategies will be instituted:

- Modify criteria in the learning objectives to include more quantitative measures to assess student learning.
- Utilize data to formulate the continuous plan for improvement within the departmental programs.
- Strategically align Public Health program curriculum to their accreditation standards which will be reflected in the next assessment cycle.
- Revise CampusLabs input for accredited programs to reflect measurement standards that satisfy both the accrediting body and SACSCOC requirements.
- Coordinate additional CampusLabs and assessment training to chairs and program coordinators to target assessment weaknesses.
- COHS shall incorporate an internal timeline for CampusLabs assessment input by chairs and program coordinators which shall include earlier deadlines dates than what is required by the Office of Academic Planning and Assessment. The earlier deadline dates shall allow sufficient time for implementation of New Plans for Continuous Improvement for the academic year immediately following its assessment cycle. The COHS Internal Assessment Assessment Cycle Deadline is attached as 'Appendix B'.

Section 6: Training/Resources Needed to Implement the College's Improvement Strategy Detail the types of training and resources that would assist the College with implementing its improvement strategies.

- The Office of the Dean will ensure all departmental chairs, program coordinators and administrative assistants are initially trained in (and have access to) CampusLabs by Jeff Roberts or his staff from the Office of Academic Planning and Assessment. The Office of the Dean has an administrative coordinator dedicated to the oversight of assessments who reports directly to the interim dean. The administrative coordinator will coordinate additional ongoing CampusLabs training to chairs and program coordinators which will be tailored to address the weaknesses that emerged through the 2015-16 meta-assessment process and to provide an ongoing dialogue of program assessment.
- For accredited programs, a meeting shall be coordinated to include the departmental chairs, accredited program coordinators and the Office of Academic Planning and Assessment. The focus of the meeting shall be to determine a common format for CampusLabs input that would simultaneously satisfy SACSCOC and the program accrediting bodies.
- The assessment process will continue to be an integral component of all the degree programs in the COHS. This will be the responsibility of the department chairs, program coordinators and faculty, and the administrative team in the COHS.