

# INSTITUTIONAL EFFECTIVENESS HANDBOOK



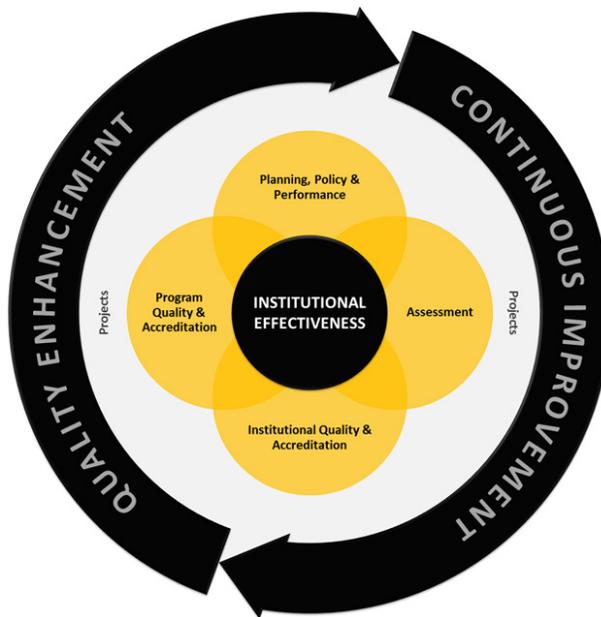
Office of Institutional Effectiveness

# Institutional Effectiveness Handbook

KENNESAW STATE UNIVERSITY

The Office of Institutional Effectiveness (OIE) promotes excellence through stewardship of Kennesaw State University’s quality enhancement and continuous improvement initiatives. OIE is comprised of five directorships, as depicted in the model below:

- Planning, Policy and Performance
- Assessment
- Program Quality and Accreditation
- Institutional Quality and Accreditation
- Projects



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*This handbook was developed with the intent of providing a concise “how to” guide for assessment and continuous improvement. Additional information is available in the appendices.*

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# 1 Quick Reference

The KSU vision, mission, and strategic plan define the fundamental criteria for assessing institutional effectiveness at the University. The President's Cabinet identifies which cabinet member is responsible for each action step in the strategic plan, and each cabinet member assigns action items to the appropriate unit(s).

While the focus of institutional effectiveness is to improve all aspects of the University, KSU must be mindful of external expectations from the U.S. Department of Education (U.S. DOE), the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC), the Board of Regents of the University System of Georgia (BOR-USG), and discipline and program accrediting agencies, among others. The SACSCOC Resource Manual (Core Requirement 2.5, Comprehensive Standard 3.1.1, Comprehensive Standard 3.3.1, and Federal Requirement 4.1), the BOR Policy Manual (Sections 2.9, 3.6.3, and 10.4), and the USG Academic Affairs Handbook (Section 2.3.6) inform the KSU community about many of those expectations.

## 1.1 Who

All facets of KSU contribute to the realization of the strategic plan and to the success and improvement of the university. Assessment activities of the University are organized as follows:

- Educational Programs
- Administrative Support Services
- Academic Support Services
- Student Support Services
- Research
- Community and Public Service

## 1.2 What and When

Assessment results and reports are an integral part of the University's decision-making process. Each reporting entity must maintain an Assessment Plan and submit an Improvement Report within KSU's assessment system "Improve KSU."<sup>1</sup>

**An Assessment Plan includes, at minimum, the following:**

**For an educational program:**

- Three performance outcomes (at least one related to productivity and one related to quality);
- Three student learning outcomes; and
- Two measures per outcome (minimum of one direct measure per outcome).

**For an administrative, academic or student support services unit, research, or community and public service:**

- Three outcomes (performance and/or learning) and
- Two measures per outcome (one or more direct measures recommended).

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<sup>1</sup> Reports of assessment activity may include elements of a program or discipline accreditation report in addition to other information. See the *Institutional Effectiveness Planning and Assessment Policy*, section 6f. Office of Institutional Effectiveness (OIE) staff will collaborate with institutional units on this requirement.



Each unit or educational program must submit an Assessment Plan and Improvement Report in “Improve KSU” annually by the announced date.

### 1.3 Plan and Report Approval and Review

Review and approval for each Assessment Plan and Improvement Report follow a University-defined workflow. Additionally, reports, redacted as necessary, will be made available to all relevant constituents.

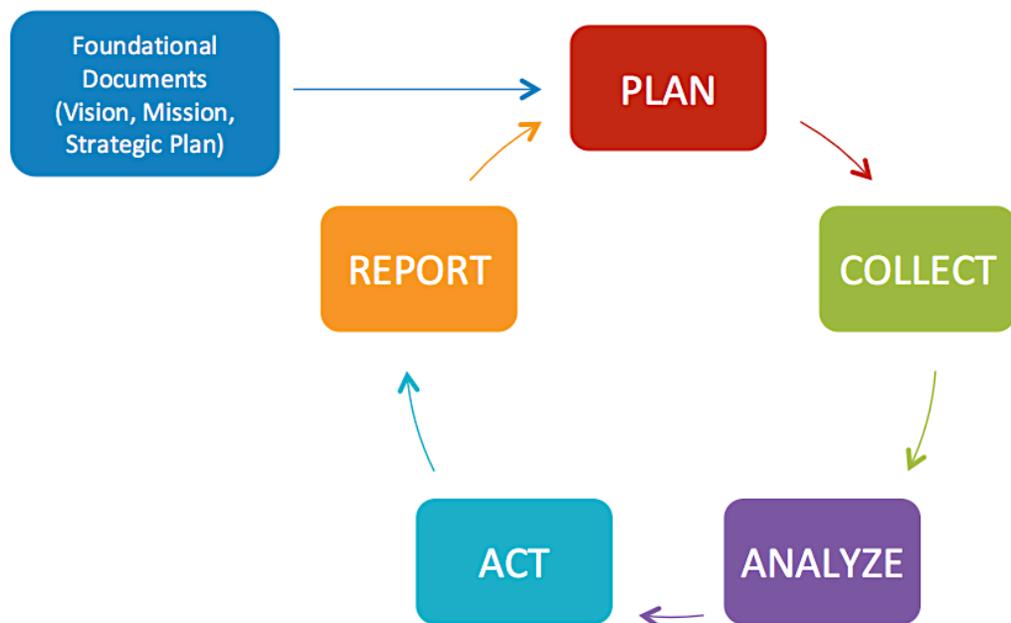
### 1.4 Improve KSU<sup>2</sup>

KSU utilizes a purchased, secure, cloud-based system to manage assessment activities. Access and training are available to staff, faculty, and administrators who produce and/or review Assessment Plans and/or Improvement Reports.

UTS provides training on the use of “Improve KSU” for individuals who will be inputting their plans and reports on behalf of their unit. Contact [assessment@kennesaw.edu](mailto:assessment@kennesaw.edu) to schedule a training.

## 2 Assessment Cycle

Figure 1: Assessment Cycle



<sup>2</sup> The Improve KSU system will be implemented during 2015 and 2016.

The steps in one assessment cycle are:

## PLAN

- Establish or edit outcomes
- Create or revise Assessment Plan

Collect

- Collect data

## ANALYZE

- Analyze collected data
- Identify potential areas for improvement

## ACT

- Implement strategies and/or practices

## REPORT

- Determine if implemented strategies or practices resulted in improvement(s)
- Create Improvement Report

## 2.1 Plan

### 2.1.1 Establish or Edit Outcomes

An outcome is a target rather than a process; outcomes describe end results. The following questions are helpful when writing outcomes:

- Is the outcome relevant, such as to the unit, program, strategic plan, etc.?
- Is the outcome clearly stated and specific?
- Is the outcome measurable?
- Will assessment of the outcome be manageable?
- How will one know if a target has been met?
- Is there room for improvement?

### EXAMPLES OF WELL-WRITTEN OUTCOMES:

#### Performance Outcomes:

- Increase the number of “high-impact educational practices” used.
- Increase space utilization rate across the campus.
- Increase the prestige of the venues of student presentations/ publications/ performances.
- Increase the pedagogical richness of technology-enhanced education.
- Decrease turnover rates in the organization.
- Expand online and/or off-campus offerings while maintaining quality.
- Increase external funding from sponsored grants and/or contracts.
- Increase the number of students who complete the program per academic year.
- Reduce the average time for program completion.
- Increase the number and academic profile of applicants accepted into the program.
- Decrease student-faculty ratios in targeted courses to enrich student-faculty interactions in those courses.



- Increase the number of student peers (leaders, mentors, supplemental instructors, teaching assistants, etc.) serving the program.
- Increase the number of students who complete a disciplinary-specific honors program.

**Student Learning Outcomes:**

- Program graduates will be able to communicate effectively in writing.
- Program graduates will be able to conduct a qualitative research study.
- Program graduates will be able to utilize correct grammar and various literary devices in creating an essay.
- As a result of attending resident assistant (RA) training, RAs will be able to accurately assess the strengths and weaknesses of their leadership skills.
- Program graduates will be able to explain how key values and social practices associated with American life have evolved in distinct historical periods.
- Program graduates will be able to define and interpret methodological and statistical constructs.
- Program graduates will be able to devise a qualitative research study.

Bloom’s Taxonomy is a helpful resource for selecting verbs, especially for learning outcomes.

## 2.1.2 Create or Revise Assessment Plans<sup>3</sup>

Assessment Plans are the living documents that outline how reporting entities will assess, analyze, and improve the unit, program, and/or student learning. The plans should list specific, measurable outcomes and describe in detail the measures that will be used to assess those outcomes. Outcomes should be consistent with the strategic mission of both the University and of the reporting entity. The plan should also include clear descriptions of what data will be collected, how it will be collected, and when it will be collected.

As living documents, Assessment Plans are revised annually based on the analysis of the data collected, which is used to identify areas for improvement. Revised plans should clearly identify those areas and include new outcomes and measures, as necessary that reflect the areas for improvement. The decision about who develops an Assessment Plan is left largely to the senior administrator of the reporting entity. For educational programs, the task will most likely be assigned to the department and/or college Program Improvement and Curriculum Committees. For questions and assistance in developing assessment plans for other entities, contact the KSU Director of Assessment.

## 2.2 Collect

### 2.2.1 Collect Data

Multiple measures must be used for each outcome. Measures may be qualitative or quantitative. One survey, exam, focus group, or rubric may provide multiple measures, and may contain measures for

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<sup>3</sup> KSU Institutional Review Board (IRB) review and approval is required prior to collection of data involving human participants. See <http://www.kennesaw.edu/irb/>.

more than one outcome. The evidence gathered should be credible, applicable to decision making, and directly related to the outcome(s).

For student learning outcomes, direct measures are tangible, visible, and self-explanatory and include compelling evidence of exactly what students have and have not learned; indirect measures consist of signs that students are probably learning.

### **DIRECT MEASURES OF STUDENT LEARNING EXAMPLES:**

- Comprehensive exam item
- Item on rubric used by supervisor to evaluate internship student
- Jury-judged capstone assignment criterion
- Licensure/professional exam item
- Rating of student skills by supervisor
- Portfolio of student work over time
- Pre/post-test item
- Presentation or project
- Thesis/dissertation
- Standardized test item
- Employer rating of student skills

### **INDIRECT MEASURES OF STUDENT LEARNING EXAMPLES:**

- Survey item
- Focus group question
- Graduation rate
- Graduate school acceptance
- Honor/award
- Retention rate
- Student evaluation of teaching question
- Student satisfaction survey question
- Transfer acceptance
- National Survey of Student Engagement (NSSE) data

Course grades and course completion may not be used as sole evidence of student learning. Grading criteria often include behavior or activities, which, while valued and correlated to learning, typically are not direct measures of learning. Student learning assessment methods should measure what knowledge, skills, and attitudes the student has learned. The goal is to obtain useful data upon which modifications and decisions may be based.

While graduation, retention rates, and satisfaction surveys are indirect measures of student learning, they may be direct measures of related performance outcomes. Graduation and retention rates are direct measures of program productivity (Recruitment, Retention, Progression, and Graduation - RRPg). A survey administered by Student Affairs may be a direct measure of program effectiveness.



## **EXAMPLES OF PERFORMANCE OUTCOME MEASURES WITH DESCRIPTORS:**

- Increase space utilization rate across the campus
- Percent classroom utilization for 8am to 5pm, Monday through Friday (direct, quantitative)
- Percent classroom utilization for 8am to 11pm, Monday through Friday (direct, quantitative)
- Increase the number of “high-impact educational practices” used
- List of courses utilizing high impact education practices (HIPs) (indirect, qualitative)
- Number of different HIPs used in program (direct, quantitative)
- Increase the number of students who complete the program per academic year
- Number of students completing each required course in program (indirect, quantitative)
- Number of graduates in academic year (direct, quantitative)

## **EXAMPLES STUDENT LEARNING OUTCOME MEASURES WITH DESCRIPTORS:**

- As a result of attending Resident Assistant (RA) training, RAs will be able to accurately assess the strengths and weaknesses of their leadership skills
- RA Self-Evaluation (indirect, quantitative and/or qualitative)
- Direct Supervisor Rubric (direct, quantitative and/or qualitative)
- Explain how key values and social practices associated with American life have evolved in distinct historical periods
- Historical Cluster Assessment Rubric (may be multiple direct, quantitative measures for multiple outcomes)
- Define and interpret methodological and statistical constructs
- Select items from ETS Major Field Test for Psychology (may be multiple direct, quantitative measures for multiple outcomes)
- Communicate effectively in writing
- AAC&U Written Communication VALUE Rubric (multiple direct, quantitative measures)

Assessment methods should clearly align with the specified outcome. The following questions should be considered when reviewing assessment methods:

- Are selected direct and/or indirect measures appropriate for the outcome?
- What types of measurements are used?
- Does assessment occur at different points in the program of study?
- When using indirect measures, should you collaborate with another unit to collect data? Ask the University Assessment Council how the same data can be used to measure two distinct outcomes.

## **2.3 Analyze**

### **2.3.1 Analyze Collected Data**

Analysis helps describe general trends, similarities, and differences to help others understand the information. Interpretation relates evidence to the measured outcomes, explores the relationships among multiple measures, and evaluates the significance of the results. Data analysis involves iden-

tifying patterns in the data by isolating important findings and combining sources of information to create synthesis and reach a larger understanding. Data analysis also includes making decisions about how to organize, interrelate, compare, and display information, depending on questions asked, types of data available, and input from stakeholders.

Conclusions should be made in relation to the expected criteria. Finally, it is important to identify and implement recommendations for action that are based on the evidence. These should be well-reasoned and should factor in available resources, goals, and mission.

## 2.3.2 Identify Potential Areas for Improvement

Continuous improvement is the primary goal of assessment. To “close the loop” in the continuous improvement process, a program must establish outcomes, plan, develop measures for the outcomes, collect data for the measures, analyze the data, plan changes, implement changes, and measure the results of the changes to verify when improvement has occurred. Improvement – not data collected, targets met, and/or change implemented – is the true measure of success of an assessment effort.

### EXAMPLES:<sup>4</sup>

#### PERFORMANCE OUTCOME: INCREASE PARTICIPATION IN COUNSELING SERVICES

Measure 1: Number of students counseled

Measure 2: Ten-item satisfaction survey of counseled students (Each item may be a separate measure.)

Measure 3: Focus Group (May provide multiple measures.)

#### RESULTS YEAR 1:

Measure 1: 1,279 students counseled from August 1, 2013, to July 31, 2014

Measure 2: Summary of satisfaction survey results attached

Measure 3: Summary of focus group themes attached

**Analysis:** While 1,279 is a significant number of students, it represents only 5 percent of the student population. Student survey results pointed to success of counseling services provided but a lack of awareness of the availability and scope of services offered.

**Planned Change:** Develop and implement a program to increase awareness of available services. Request and hire two additional counselors to cover increased demand.

Results Year 2:

Measure 1: 1,552 students counseled from August 1, 2014, to July 31, 2015

Measure 2: Summary of satisfaction survey results attached including comparison of results with year 1

Measure 3: Summary of themes from the focus groups including any comparison from year 1 attached

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<sup>4</sup> Examples do not include actual data, and related units are not required to use the outcomes and measures listed.



## **DESCRIPTION OF IMPROVEMENT:**

Efforts to increase awareness of available services were successful, as demonstrated by student survey results and a 21 percent increase in participation. Surveys of participating students indicated maintenance of quality. One additional counselor was hired midway through the academic year, which helped to cover increase. However, at least one additional counselor will be needed to cover expected increases in demand, partially driven by increasing enrollments at both campuses.

**Student Learning Outcome:** Demonstrate an ability to participate effectively in the planning and execution of team projects.

Measure 1: Capstone Project Presentation evaluated by Industrial Advisory Board members and faculty members for project management capabilities using defined rubric (Each item may be a separate measure.)

Measure 2: Students write self-reflection on their participation and learning in the capstone

Results Year 1: Analysis of the capstone rubrics by the faculty showed that most students achieved an acceptable level in the planning of team projects; however there were several differences in the execution of the team projects – particularly for the amount of participation among team members.

Measure 1: Summary of rubric from fall semester attached

Measure 2: Summary of self-reflections from fall semester attached

**Analysis:** It appears that many students do not adequately follow through with their assignments for the capstone project. Other members of the team are then either forced to pick up the “slack” or take a reduced project grade based on poor performance by team members.

**Planned Change:** Each team member will be evaluated by his/her team members at 3 weeks, 6 weeks, 9 weeks, and at the end of the course. If a team member is found not to be participating adequately, the faculty member will intervene to assist the team in dealing with the student.

Results Year 2: Analysis of the capstone rubrics by the faculty, showed a 5 percent improvement of students participating at an adequate level from the previous year.

Measure 1: Summary of rubric from fall semester attached

Measure 2: Summary of self-reflections from fall semester attached

**Description of Improvement:** With the addition of student evaluations throughout the capstone project, the faculty member was able to intervene early to assist the team.

## **2.4 Act**

Once assessment data has been collected, the results analyzed, and areas for improvement identified, improvements should be enacted. Doing so ensures the application of a closed-loop feedback system that will result in the systematic and consistent improvement of each program.

## 2.4.1 Implement Strategies and/or Practices

The implementation strategies and/or practices are based upon what works best for each educational program, administrative, academic, or student support services, research, or community and public service unit. The following are some examples of strategies.

Changes to the program assessment plan might involve

- Revising the program mission or strategy
- Revising program outcomes or student learning outcomes
- Changing the number or type of measures used to evaluate outcomes

Changes in processes might include

- Modifying the frequency or schedule of course offerings
- Making technology-related improvements
- Making personnel-related changes
- Implementing additional training
- Revising standards or processes
- Revising admission criteria (if applicable)

Changes to program curriculum might include

- Revising or enforcing prerequisites
- Revising course sequences
- Revising course content
- Adding courses
- Deleting courses

Publicity and marketing changes might include

- Acknowledging in print media the honors and awards received by students each year.
- When yearly assessment results indicate that students have earned high scores, this information can be used in the recruitment materials that are revised annually.

## 2.5 Report

### 2.5.1 Determine if Strategies or Practices Resulted in Improvement(s)

Assessment results and Improvement Reports are an integral part of the University's decision-making process. The President's Cabinet and the President's Planning and Budget Advisory Committee will have access to all reports. Additionally, reports, redacted as necessary, will be available to all relevant constituents.

By the announced date, the reporting entity will submit an Improvement Report in "Improve KSU." Each report will

- Include name of the reporting unit or educational program;
- List clearly stated outcomes;
- Relate each outcome to the KSU Vision, Mission and Strategic Plan, as well to other strategic



- initiatives, as appropriate;
- Provide data, including data files, rubrics, IRB approval if applicable, etc., from at least two measures for each outcome;
- Describe analyses of data from each measure;
- Describe potential areas for improvement that follow from the analyses, and strategies or practices to be implemented for each of those areas;
- Describe verified improvements related to the outcomes for each outcome that was assessed in more than one cycle; and
- Include updates to the Assessment Plan if appropriate.

Each unit and educational program is responsible for maintaining information related to the assessment process, including plans, methods, data, analyses, changes planned, improvements made, assessment reports, review(s) by internal and external entities, and external accreditation/licensure reports, responses, and actions. In addition, at the onset of new accreditation or reaffirmation of accreditation processes by the program and/or agency, please contact the Director of Program Quality and Accreditation. The Director of Program Quality and Accreditation will be available to collaborate on the requirements, reporting cycles, and reviewer reports for those accredited programs. External accreditation/licensure reports, responses, and actions must be maintained by the office of the relevant member of the President's Cabinet.

### **3 KSU Reporting Schedule**

Each unit or educational program must complete submission of an Improvement Report in "Improve KSU" by the announced date.

### **4 Records Retention**

Improvement Reports and any periodic and summary statistical reports that are not reflected in the final Improvement Report must be maintained permanently. (Board of Regents, Records Retention Manual, Administrative Reports (A2))

## **5 Templates**

### **5.1 Assessment Plan**

A template for each unit or program's Assessment Plan is available in "Improve KSU." The essential elements are:

- Name of the reporting unit or educational program
- List of three performance outcomes
- List of three student learning outcomes for each educational program
- For each outcome, provide:
  - o Relation to the KSU vision, mission, and strategic plan, as well as other strategic initiatives and reports
  - o List of measures and instruments

- o Data source for each measure
- o Administration dates for each measure
- o Responsible party/parties for administering each measure
- o Relation to a federal grant awarded to the department or unit

## 5.2 Improvement Report

A template for each unit or program's Improvement Report is available in "Improve KSU." The essential elements are:

- Name of the reporting unit or educational program
- List of three performance outcomes
- List of three student learning outcomes for each educational program
- For each outcome, provide:
  - o Relation to the KSU vision, mission, and strategic plan, as well as other strategic initiatives and improvement reports
  - o List of measures and instruments
  - o Relation to a federal grant awarded to the department or unit
  - o For each measure, provide:
    - Instrument(s) (e.g., rubric, survey)
    - Data source
    - Administration dates
    - Responsible party/parties
    - Brief description of the assessment, evidence items, instruments, and how the assessment evidence is used by the unit or educational program staff/faculty
    - Data
    - Brief analysis of results and findings
    - Potential areas for improvement that follow from the analyses, and strategies or practices to be implemented for each of those areas
    - Description of verified improvements
    - Updated Assessment Plan

## 6 Appendices

### 6.1 What Is Institutional Effectiveness?

At its core, institutional effectiveness (IE) "is the systematic, explicit, and documented process of measuring performance against mission in all aspects of an institution" (SACSCOC Resource Manual). Institutional effectiveness is the conscious and ongoing process by which an institution demonstrates that it is effectively accomplishing its mission and goals. IE evaluates specific functions and outcomes at every level of the organization. The purpose of IE is to demonstrate continuous improvement in student learning and performance outcomes across the broad spectrum of institutional activity. IE is guided by certain principles established by the Southern Association of Colleges and Schools Commission on Colleges, including:



- Principle 2.5 – “The institution engages in ongoing, integrated, and institution-wide research-based planning and evaluation processes that (1) incorporate a systematic review of institutional mission, goals, and outcomes; (2) result in continuing improvement in institutional quality; and (3) demonstrate the institution is effectively accomplishing its mission.”
- Principle 3.3.1 – “The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results in each of the following areas:
  - o 3.3.1.1. Educational programs, to include student learning outcomes
  - o 3.3.1.2. Administrative support services
  - o 3.3.1.3. Academic and student support services
  - o 3.3.1.4. Research within its mission, if appropriate
  - o 3.3.1.5. Community/public service within its mission, if appropriate

IE shows how institutions can use data-driven decision-making to evaluate and continually improve the purpose and performance of the programs and services they provide.

## **6.2 Institutional Effectiveness Philosophy**

KSU strives to continuously improve the quality of all aspects of the institution by employing integrated and institution-wide research-based planning and evaluation processes that will ensure it is effectively accomplishing its mission. The KSU vision, mission, and strategic plan serve as the blueprint for defining the fundamental criteria for assessing its institutional effectiveness.

All faculty, staff, administrators, and students have various opportunities to assist in the achievement of improvement activities. Many units in the University maintain a mission and strategic plan, aligned with the University’s mission and strategic plan, that must identify outcomes, assess the outcomes, analyze the results of the assessments, and demonstrate improvements for those units and/or programs. The administrators, staff, and faculty are responsible for assessment of and annual reporting for their respective units and/or educational programs. Assessment results and reports are an integral part of the University’s decision-making process. Administrators at all levels will use the results of this institutional effectiveness process to make strategic decisions. Improvement Reports will be made available to the President’s Cabinet and the President’s Planning and Budget Advisory Committee. Additionally, reports, redacted as necessary, will be made available to all relevant constituents.

## **6.3 External Program and/or Unit Accreditation or Licensure**

Many KSU units and educational programs are accredited or licensed by external agencies beyond SACSCOC. External accreditation/licensure validates the quality of specific programs/units, promotes national recognition, and, in some cases, ensures students are prepared for professional licensing. External accreditation/licensure is in no way a substitute for annual self-evaluation of a unit, including Improvement Reports. However, assessments, data, and improvements for program/unit accreditation/licensure may be appropriate for Improvement Reports and vice versa. While reporting formats vary, institutional effectiveness and continuous improvement are the core of both

efforts, thus reducing duplication. “Improve KSU” includes standards and formats for many internal and external reporting needs. Units whose accrediting bodies require data from outside their unit should contact the Director of Program Quality and Accreditation to facilitate the collection of information.

## **6.4 Program Review**

Program review includes an evaluation and assessment of a degree-granting program by an internal process. The programs under review are evaluated for such things as program viability, student achievement, faculty and support resources, facilities, and other additional aspects of the program. If any areas of improvement are needed from the analysis of the program review, the dean and department chair will address the issue(s) and make the necessary improvements. Additional information about program review will be provided in the future.

### **6.4.1 USG Requirements**

The Board of Regents for the University System of Georgia has a Comprehensive Program Review policy as follows (3.6.3 Comprehensive Academic Program Review):

Each USG institution shall conduct academic program review on a periodic basis. Consistent with efforts in institutional effectiveness and strategic planning, each USG institution shall develop procedures to evaluate the effectiveness of its academic programs to address the quality, viability, and productivity of efforts in teaching and learning, scholarship, and service as appropriate to the institution’s mission. Institutional review of academic programs shall involve analysis of both quantitative and qualitative data, and institutions must demonstrate that they make judgments about the future of academic programs within a culture of evidence. Planning and conduct of academic program reviews shall be used for the progressive improvement and adjustment of programs in the context of the institution’s strategic plan and in response to findings and recommendations of the reviews. Adjustment may include program enhancement, maintenance at the current level, reduction in scope, or, if fully justified, consolidation or termination (BOR Minutes, April 2010).

Except for programs requiring a formal accreditation review, an institution’s cycle of review for all undergraduate academic programs shall be no longer than seven (7) years, and for all graduate programs no longer than ten (10) years. Newly approved programs should automatically be reviewed seven years after launch. If successfully reviewed, the new program will then become part of the regular institutional cycle. If unsuccessful, the institution will present a plan of action to the System Office. Programs accredited by external entities may not substitute an external review for institutional program review, but material submitted as part of an external accreditation process may be used in the institutional review. Institutions may align program review cycles with required external accreditation review, so long as no program review cycle at any level exceeds ten (10) years. Institutions must also review General Education every five (5) years; learning outcomes for each Area A-E of institutional core curricula must be approved by the Council on General Education. Institutions are also encouraged to review Learning Support programs (BOR Minutes, April 2010).



Each USG institution shall provide a web link outlining institutional comprehensive program review procedures and shall post program review results on a password protected institutional web site, which shall include the institutional review cycle and a summary of current institutional reviews (BOR Minutes, April 2010).

Academic Affairs staff will perform periodic analyses on the posted institutional comprehensive program reviews to ensure that reviews are being used to inform institutional decision-making on the issues of program quality, productivity and viability. The System Office staff will continue to provide data on programs with low enrollment for institutional information (BOR Minutes, April 2010).

## 6.4.2 Administrative Requirements

Units in administrative support services, academic support services, student support services, research, community and public service, and others are encouraged to participate in a program review process to help guide improvement. Units interested in undergoing this process may contact Business Process Management in Human Resources or their division's director of assessment, if applicable.

## 7 Glossary

*Academic support services:* Academic support services pertain to students at all levels as well as to faculty. This includes, but is not limited to, academic teaching and resource centers, tutoring, academic advising, counseling, disability services, resource centers, laboratories, and information technology. (SACSCOC Resource Manual)

*Accreditation:* Accreditation is the recognition that an institution or degree program maintains standards requisite for its graduates to gain admission to other reputable institutions of higher learning or to achieve credentials for professional practice. The goal of accreditation is to ensure that education provided by institutions of higher education meets acceptable levels of quality. Maintaining an accredited status plays a role in fostering public confidence in an institution and helps to ensure its effectiveness and compliance with specific expectations. See the KSU Institutional Effectiveness Planning and Assessment Policy for more information.

- Accreditation may be achieved at the national, regional, or programmatic level. In the U.S., the federal government relies on accreditation to assure the quality of institutions and programs for which the government provides federal funds and for which the government provides federal aid to students. The U.S. Department of Education (USDE) does not accredit educational institutions or programs. However, the Secretary of Education is required by law to publish a list of nationally recognized accrediting agencies that the Secretary determines to be reliable authorities as to the quality of education or training provided by institutions of higher education and the higher education programs they accredit. An agency seeking national recognition by the Secretary must meet the Secretary's procedures and criteria for the recognition of accrediting agencies. USDE-recognized accrediting agencies are posted on the USDE website at: [http://www2.ed.gov/admins/finaid/accred/accreditation\\_pg5.html#NationallyRecognized](http://www2.ed.gov/admins/finaid/accred/accreditation_pg5.html#NationallyRecognized).

- o Institutional accreditation is a voluntary and self-regulatory process that is awarded following a review of an institution's mission, programs, resources, and services according to standards and requirements specified by an accrediting body.
- o National accreditation focuses on the evaluation of curriculum provided by career, vocational, and trade schools across the United States.
- o Regional accreditation is a form of institutional accreditation that involves a comprehensive review of all institutional functions. Regional accrediting organizations do not accredit individual programs, although new programs are actively reviewed through the substantive change process.
- o Specialized or professional accreditation focuses on programs in a specific discipline within an institution, but does not evaluate the entire institution. Specialized accreditation exists in the fields of business, education, engineering law, medicine, nursing, chiropractic, computer science, and more than 90 other disciplines. Some professions that are regulated by and dependent upon a state or national licensing board may require job applicants to have graduated from specific academic programs that have specialized, professional, or programmatic accreditation status. Most specialized accreditors require regional accreditation as a foundation for their reviews and as assurance of the fiscal integrity and health of the institution.

*Administrative support services:* Administrative support services include, but are not limited to, finance, administrative facilities, administrative services, development/advancement, and the president's office. (SACSCOC Resource Manual)

*Assessment:* The systematic collection, review, and use of information undertaken for the purpose of improving performance or student learning and development.

*Assessment method:* A tool used to collect data about a specified topic.

*Community and public service:* Community/public service within an institution includes centers and institutes that focus on community needs, and units and formal programs that deliver the outreach mission. (SACSCOC Resource Manual)

*Direct measure:* A direct measure provides specific evidence for an outcome. The number of graduates for an academic year is a direct measure for graduation rates. A student satisfaction survey may provide multiple direct measures of student satisfaction. An exam item may be a direct measure of student learning.

*Educational programs:* A coherent set of courses leading to a credential (degree, diploma, or stand-alone certificate) awarded by the institution.



*Indirect measure:* An indirect measure provides evidence tangentially related to an outcome. The number of graduates is an indirect measure of student learning. A student satisfaction survey may provide multiple indirect measures of program quality. An exam item for a required course is an indirect measure of graduation rates.

*Institutional effectiveness:* The term used to describe how well an institution is accomplishing its mission and how it engages in continuous improvement. It focuses largely on two of the SACSCOC Principles of Accreditation, Core Requirement 2.5 and Comprehensive Standard 3.3.1.

*Measures:* Methods used to collect evidence. Reference direct and indirect measures.

*Mission:* A written declaration of an entity's core purpose and focus, its constituency, what it offers, and its sphere of operation. A mission statement additionally articulates an entity's values and its work, and is the foundation for its strategic plan.

*Performance outcome*<sup>5</sup>: Performance outcomes are descriptions of specific goals for the unit or educational program. For educational programs, outcomes include program outcomes and student learning outcomes.

*Qualitative measures:* Qualitative measures interpret written and oral communications through identification of recurring patterns and themes. Such measures may be used to evaluate written products, presentations, focus groups, interviews, observations, or open-ended survey questions.

*Quantitative measures:* Quantitative measures yield numerical values that may be analyzed statistically. Graduation rates, retention rates, and Likert-scale survey items are quantitative measures.

*Research:* Research within an institution normally includes (1) research units, research centers, institutes, etc.; (2) sponsored research programs, usually with defined areas of research (e.g. energy environment, innovative technologies, etc.); and (3) degree programs and courses where research is an expected outcome. (SACSCOC Resource Manual)

*Rubric:* A tool that lists performance and scoring criteria. A rubric may be provided to the student to make expectations clear and may be used by the instructor to score an assignment. Rubric use may foster scoring consistency among instructors of similar assignments, across multiple course sections, and/or between semesters.

*Southern Association of Colleges and Schools Commission on Colleges (SACSCOC):* Federally recognized regional accrediting body of higher education institutions in Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas, Virginia, and Latin

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<sup>5</sup> Terminology may differ among accrediting organizations. For example, outcomes-related terminology used by ABET includes student outcomes and program educational objectives.

America. SACSCOC accredits institutions that award associate, baccalaureate, masters, or doctoral degrees. The SACSCOC official website is at <http://www.sacscoc.org/index.asp>.

*Strategic plan:* An organization's process of defining its strategy, or direction, and making decisions on allocating its resources to pursue this strategy.

*Strategic initiative:* A means through which a vision is translated into practices. A collection of finite-duration discretionary projects and programs, outside of the organization's day-to-day operational activities, that are designed to help the organization achieve its targeted performance.

*Student learning outcomes:* Expected knowledge, skills, attitudes, and competencies that students are expected to acquire at an institution of higher education.

*Student support services:* The term student support services applies to undergraduate and graduate programs that enhance the educational development of students at all levels. This includes support services and programs for students at all locations, including off-campus instructional sites, branch campuses, and those enrolled in distance and correspondence education.

## **8 Links**

### **8.1 KSU Strategic Plan**

### **8.2 Cabinet responsibilities – Strategic Plan**

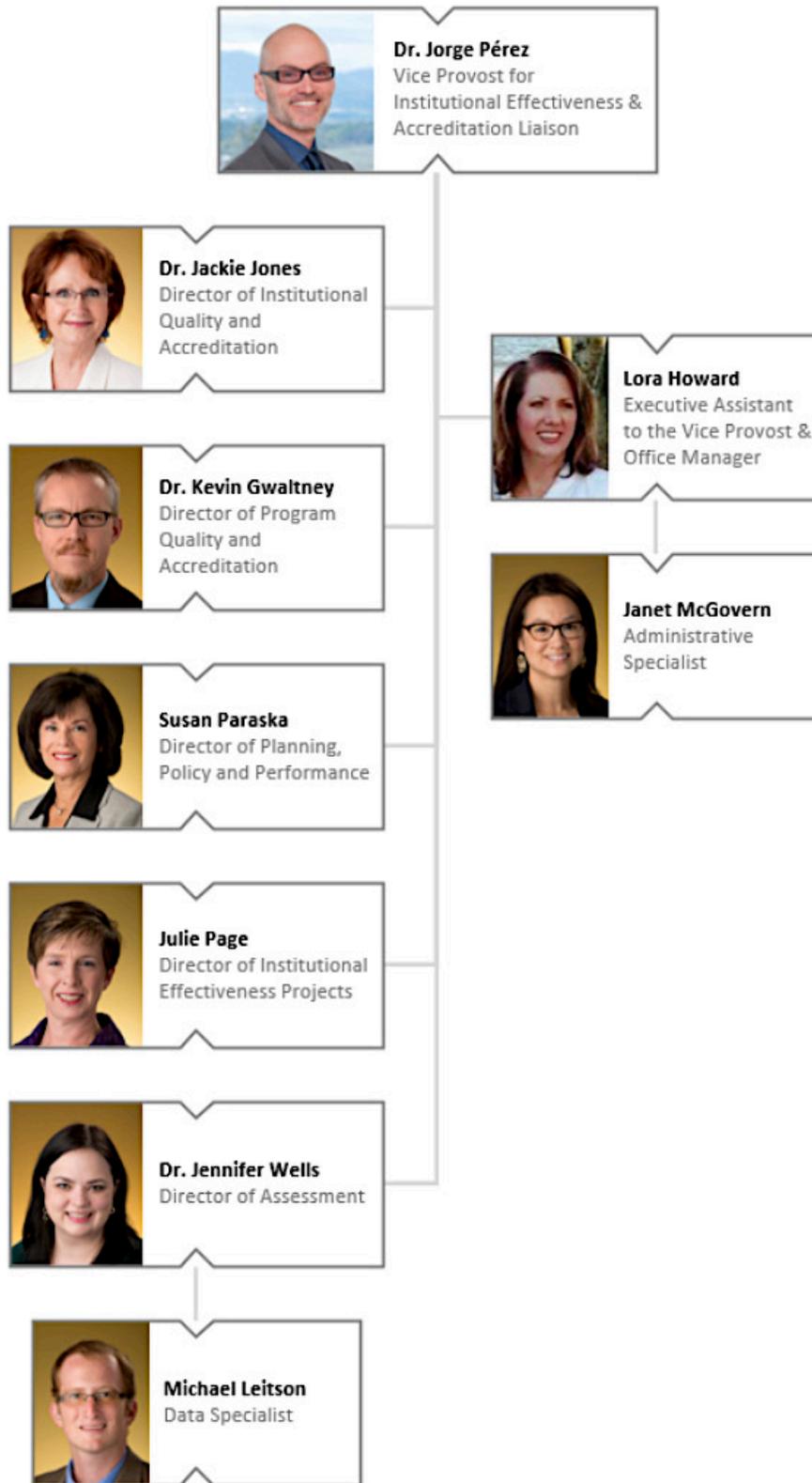
### **8.3 Discipline and Program Accrediting Agencies**

### **8.4 SACSCOC Resource Manual**



# THE OFFICE OF INSTITUTIONAL EFFECTIVENESS (OIE)

## Organizational Chart



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The mission of the Office of Institutional Effectiveness is to lead, coordinate and support Kennesaw State University's quality enhancement and continuous improvement initiatives. OIE promotes a commitment to excellence through stewardship of strategic planning, assessment, academic program quality, accountability and accreditation.

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