



MSCHE Self Study

Working Group V

Standard V: Educational Effectiveness Assessment

Third Interim Report

December 4, 2020

Standard V: Assessment of student learning and achievement demonstrates that the institution's students have accomplished educational goals consistent with their program of study, degree level, the institution's mission, and appropriate expectations for institutions of higher education.

Overview:

Interim Report III synthesizes the findings or evidence gathered in support of Mercyhurst University's congruence with MSCHE Standard V, Educational Effectiveness Assessment. The Working Group identified a myriad of evidence to suggest compliance with this standard as well as evidence that Mercyhurst continues to develop and refine assessment processes and systems to support data-driven decision making to fuel educational improvement. The Working Group has identified a few areas of growth, namely the solidifying of the cyclical assessment processes to close feedback loops between OIE, Deans' Offices, and Departments in regard to assessment results. The report breaks down each of Standard V's criteria into a listing of the potential evidence, a summary of the evidence, and a summary of compliance within each criterion.

Criteria :

Standard V-1: Clearly stated educational goals at the institution and degree/program levels, which are interrelated with one another, with relevant educational experiences, and with the institution's mission.

Potential Evidence

- Mission, Vision, and Core Values, 2019- 2020 Graduate / Undergraduate Catalog
- Departmental Mission Statements, 2019- 2020 Graduate / Undergraduate Catalog
- Strategic Plan HUB site
- Strategic Plan Update 2.14.20
- Annual Assessment Reports in the Assessment Handbook
- Curriculum Map
- Syllabi repository HUB site
- Statement of Accreditation status

Summary of Evidence:

wellbeing.”

Standard V-2: Organized and systematic assessments, conducted by faculty and/or appropriate professionals, evaluating the extent of student achievement of institutional and degree/program goals. Institutions should:

- a. define meaningful curricular goals with defensible standards for evaluating whether students are achieving those goals;

Potential Evidence:

- x Curriculum Map
- x Annual Assessment Report Process found within the Assessment Handbook
- x Syllabi Repository Hub Site
- x 5 Year Self Study Process found within the Assessment Handbook
- x IDEA Global Learning Outcomes
- x Departmental Mission Statements as found within the Catalog

Summary of Evidence (V-2a):

The Standard V Working Group identified several lines of evidence to demonstrate that MU defines meaningful curricular goals with defensible standards for evaluating whether students are achieving those goals. Evidence items under this standard include Departmental Mission

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outcomes and each course has a lead faculty member assigned responsible for drafting an assessment report in the year due on the delineated outcome.

The Syllabi Repository Hub Site was implemented in 2007 and, with a coordinator to oversee the process of syllabi submission, this site contains the syllabi for all courses taught from 2007 to the present. Each syllabus includes course and program goals as well as evaluation

and Survey Data, enrollment and graduation data, licensure exam data, position surveys, and field/capstone evaluation forms.

such as Physician Assistant Licensure Exam Data is available in the Dean's office. The Associate of Science in Nursing (ASN) is a licensure program that prepares the graduate to sit for their licensure exam, the NCLEX-RN. A minimum first-time pass rate of 80% on the NCLEX-RN is required by

There is a clear annual assessment process as noted in the Assessment Handbook and referred to in V-2a. Every degree/program has student learning outcomes that are assessed on an annual basis. The results of those assessments are reported to the Office of Institutional Effectiveness via the annual assessment reports. This annual assessment report is reviewed by the associate dean of the college and if the assessment does not reach the desired goal, an Action Plan is developed and the student learning outcome is reassessed the following year. All data collected is available in the office of Institutional Effectiveness. The 5-year Self-Study process, listed on page 13 of the Assessment Handbook, allows programs to complete a more in-depth look into the assessment of students and trend assessment data over time. The process of the 5-year self-study is clearly delineated. Some accredited programs do share this data with communities of interest, such as Advisory Boards and Accreditors. However, as it relates to the findings of these studies are not widely communicated to external stakeholders.

All programs/departments maintain ongoing academic assessment of student learning, as detailed in the 2019 Assessment Handbook. As part of this assessment process, many programs/departments make use of Field/Clinical/Internship Evaluation Forms to gather data from students' experiential learning. As part of the on-going program/departmental assessment process Field/Clinical/Internship Evaluations Forms constitute an important component of data collection. Representative examples may be considered from the Pre-nursing program (associate degree) or the Physician Assistant program (graduate degree). Ultimately, these data are used to assess student achievement of Program Learning Goals and Outcomes, the results of which are reported as part of the annual assessment reports. Field/Clinical and Internship evaluation forms provide critical data/information regarding student achievement during experiential learning, typically at an off-campus facility and sometimes under the supervision of a non-Mercyhurst employee.

Current program accreditations are listed in the beginning of each catalog. These range from Police Academy certification to 6.7 (G) 2 (i) 0.7 (ad) 0.7 (ip) 6 (r) 5.7 (o) 6 (g) 22.6 (r) 5.18 (h) 2.7 (i) 0.7 (e)

outcomes. The Mercyhurst Public Website is regularly and consistently updated to make available necessary student achievement data. This information is frequently mandated by program/department accrediting agencies. Relevant examples can be seen by viewing the Department of Physician Assistant Studies website at <https://www.mercyhurst.edu/academics/graduate/programs/physicianassistantstudies/mission> and <https://www.mercyhurst.edu/academics/physicianassistantstudies/nccpa->

x Annual Report for Accredited Programs

d.

Evidence items in this subcategory document that Mercyhurst considers and uses assessment results to

non-

recommends any changes. Programs use these to assess courses and curricula. For example, Public health changed the course level for PUBH 105 Public Health Policy and Law based on assessing student outcomes. Seeing that less than half of students achieved mastery in the course, they applied to change the course number to a 200-level course.

The system for making changes to academic programs is formal and rigorous. Faculty may only change course names, prefixes, numbers, or descriptions by documenting their justification for

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how the overall program mission ties into the larger university mission and strategic plan. As

There is robust evidence that the mechanisms and practices are in place for academic programs to assess their learning outcomes. The office of institutional effectiveness keeps detailed accounts of both assessments and action plans. The same might be said likewise of teaching excellence, since the loop is quite external: faculty are evaluated against their own goals both for individual courses and for their overall excellence goals.

What remains hard to find is evidence of these policies being individual correctives. Given the confidential nature of student evaluations and the newness of the IDEA tool (especially with the interruption of course delivery methods and the herculean effort to pivot to new modality of

Standard V-4. if applicable, adequate and appropriate institutional review and approval of assessment services designed, delivered, or assessed by ~~third~~ party providers; and

Potential Evidence:

- Accreditation reports
- External Review portion of the 5-year Self-study via Assessment Handbook

Summary of Evidence:

The Standard V Working Group identified limited evidence items related to ~~third~~ assessment outside of assessment activities related to accrediting bodies and the external reviewers utilized during assessment processes such as the five-year self-study. Mercyhurst has 17 Programmatic Accreditors with 6 accredited associate programs, 18 baccalaureate accredited programs, 4 graduate accredited programs across its four colleges. While the accreditation review process and reporting requirements differ ~~across~~ programs, each department works with the Office of Institutional Effectiveness to prepare documents, analyze assessment data, etc. One example, Mercyhurst's Education Department recently conducted their ~~year 10~~ Major Review with the Pennsylvania Department of Education for their 22 teacher certification programs. As described by PDE, the Major Review is, "A comprehensive review of a provider's approved certification programs to document and evaluate the level of program compliance with all PDE Framework Guidelines and regulations." Each separate program's application underwent review by a designated PDE liaison as well as an external reviewer. Each application received a separate external reviewer, and their comments, requests, and recommendations were provided to Mercyhurst. All 22 programs received PDE approval. The next PDE Major Review will occur in 2029.

Another institutional review process that involves assessment by ~~a third~~ provider is the 5-year self-study process, which is detailed in the ~~Assessment~~ Assessment Handbook. Per pp. 113 of the Assessment handbook, "Each department should solicit an unbiased external assessment of the program. Departments should work with the Assessment Coordinator to determine who will ~~uf.6~~ .

history.” They also cite the reviewer’s emphasis to further develop public history projects

assessment such as revision of field placement evaluation tools and methodologies to gather data from placement LEAs. Another example of a periodic assessment ~~eval~~ within our accredited programs can be seen in the ACEN Final Report which was a focused review of the Associate Nursing program's systematic plan of evaluation, specifically the results of assessment focused on student learning outcomes. The report ~~note~~ compliance with ACEN's standards and a demonstration of student achievement on each ~~of~~ program SLO. The report also notes that the

Requirements of Affiliation (related to Standard V)

ROA 1: The institution is authorized or licensed to operate as a postsecondary educational institution and to award postsecondary degrees; it provides written documentation demonstrating both.

Authorization or licensure is from an appropriate governmental organization or agency within the Middle States region (Delaware, the District of Columbia, Maryland, New Jersey, New York, Pennsylvania, Puerto Rico, and the U.S. Virgin Islands), as well as other agencies as required by each of the jurisdictions, regions, or countries in which the institution operates. Institutions that offer only postsecondary certificates, diplomas, or licenses are not eligible for accreditation byt-0 06c (y)-10.6 (a)6 (t.g)12 (s)11.8a.15 Td [(A)11.(h)12 (1)22.7.6 (i)0.7d22

every 35 years and stated. This could be directed by the Vice President for Mission Integration, who then shares important takeaways from the review with the campus community. The detailed and robust strategic planning process has served the institution well in creating a set of mission grounded, achievable, and assessable institutional goals.

ROA 8. The institution systematically evaluates its educational and other programs and makes public how well and in what ways it is accomplishing its purposes.

Potential Evidence:

1. Mercyhurst Public Website
2. Assessment Handbook
3. Syllabi Repository
4. OIE Hub Site

Summary of Evidence:

Evidence items in this subcategory demonstrate that Mercyhurst supports assessment processes and communicates our assessment results to our stakeholders. Such evidence items include: the Assessment Handbook with processes such as the annual assessment report-yearly self-study; the Cease Enrollment form and Exit Interview form; the Sophomore Reviews process; the Undergraduate Catalog; Program accreditation status, found within the Undergraduate and Graduate Catalogs; Advisory Board Reports; the Field/Clinical/Internship Evaluation Forms; and the Mercyhurst Public Website.

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forms provide critical data/information regarding student achievement during experiential learning, typically at an off-campus facility and sometimes under the supervision of a non-Mercyhurst employee.

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captured on the form provides important information when creating or reviewing student learning support programs. The data, through Colleague, is shared with internal stakeholders. Yet, upon interview of faculty, there doesn't seem to be a clear process of generating these reports and getting them to the program faculty for program assessment, even though there are reasons for withdrawal, such as faculty being responsive and academic rigor, that are essential for program assessment.

Summary of Compliance The examples listed above, in the summary of evidence, support the assertion that Mercyhurst University systematically evaluates its educational and other programs and makes public how well and in what ways it is accomplishing its purposes.

ROA 9. The institution's student learning programs and opportunities are characterized by rigor, coherence, and appropriate assessment of student achievement throughout the educational offerings, regardless of certificate or degree level or delivery and instructional modality.

Potential Evidence:

1. Undergraduate and Graduate Catalogs
2. Syllabi Repository
3. ODL Course Development Checklists
4. Assessment Handbook
5. IDEA Evaluation

Summary of Evidence:

The Standard V Working Group several evidentiary items in congruence with ROA 9. The Undergraduate and Graduate Catalogs clearly stated educational learning goals for each program and lay the foundation for the course structure which can be seen in syllabi found within the Syllabi Repository. Also, evidenced in course syllabi found within the Syllabi Repository are high levels of rigor, coherence, and assessment of student achievement across the associates, bachelors, and masters degree level. The adherence to rigor, coherence, and appropriate assessment of student achievement remains constant not only across degree levels across delivery modalities. Online courses that are also offered in a traditional, face modality share the same rigor, learning outcomes, etc. Additionally, online courses are required to work with the Office of Distance Learning's Instructional Designers to ensure their online course is in compliance with all learning standards set internally and externally by our accreditors. Online course instructors work with ODL to complete a Course Development Checklist to ensure full compliance. The Assessment Handbook houses descriptions and instructions related to processes for both annual program assessment and the 5-year self process including the identification of student learning outcomes, mapping outcomes to learning experiences (curricula), and a specific timeline for assessment planning and reporting. While faculty driven, this process is supported by the Office of Institutional Effectiveness (OIE). Annually, action plans are developed for student learning outcomes that do not meet the expected level of achievement set by the faculty. Soliciting student feedback after each course allows for the evaluation of goal achievement. IDEA

