2.3.a Unit Assessment System

<div align="center">Introduction</div>

The IU Southeast School of Education's Unit Assessment System (UAS) is comprised of two processes. One is a process to improve individual candidate's performance and program quality by collecting and analyzing enrollment, demographic, survey and candidate performance data. The second process is designed to examine the effectiveness of the unit's operations. The development of the assessment system has continued to evolve since 2005 through the review and modifications after cycles of data review and input from stakeholders. The UAS system is structured to determine if candidates' (1) are **high quality**, (2) exhibit **caring dispositions**, (3) have the knowledge and skills needed for **transformation of schools** and (4) can work effectively in a **diverse society**.   The structure of the workflow, decision making and planning of the UAS is developed, implemented, and managed by (a) program teams and (b) Quality Teams 1-6, each of which has responsibilities aligned to a 2008 NCATE Standard. The Quality Teams (QTs) are:

> QT 1: Curriculum Development & Candidate Knowledge, Skills, Professional Dispositions and Conceptual Framework
> QT 2: Program Assessment & Unit Evaluation (PAUE)
> QT 3: Field Experience & Clinical Practice
> QT 4: Diversity
> QT 5: Faculty Performance & Development & Student Support & Recognition
> QT 6: Unit Governance & Resources

As the Unit moves toward target in Standard 3, it will continue to seek and utilize the longstanding guidance of a broad range of stakeholders (i.e. alumni, employers, current candidates, practicing professionals and campus colleagues) and enter into more robust reciprocal relationships with P12 schools to improve the UAS.

<div align="center">History</div>

The Unit began implementing an assessment transition plan in 2000-2001 to comply with NCATE 2000 standards and the new Indiana licensing standards. One of the first transition initiatives in 2001-2002 was to approve the revised CF to reflect changes in state licensing (Rules 2002) and NCATE 2000 standards. The Unit delineated four themes (high quality educators, caring professionals, continuous renewal of schools, and multicultural society). The UAS was incorporated into the CF to ensure coherence and that program standards were aligned to the CF.   To determine what changes might be warranted in the CF, the Unit and members of the professional community reviewed the document during the 2009-2010

academic year, and revisions to the main document were approved on December 10, 2010. The theme "continuous renewal of schools" was changed to "continuous transformation of schools" and the theme "multicultural society" was changed to "diverse society." The Diversity Proficiencies were added when they were approved by the Unit in May 2009. The modifications to the CF influenced the UAS as programs began to align assessments to the new themes and to the Diversity Proficiencies.
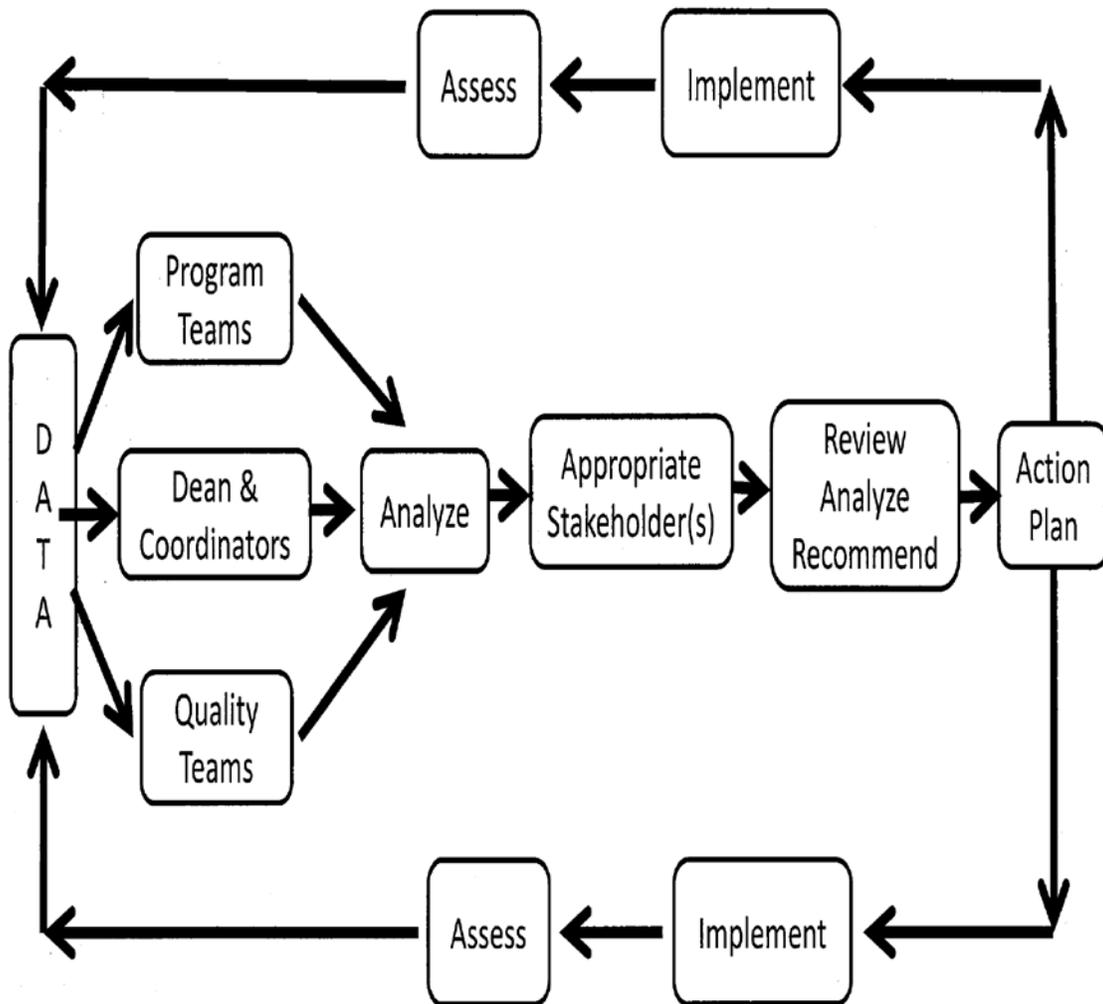
In 2001, the SOE designed NCATE Quality Teams (Curriculum Development, Program Assessment and Unit Evaluation, Field and Clinical, Diversity, Faculty Performance and Development/Student Support and Recognition, and Governance and Resources) to monitor coherence to the CF and NCATE Standards. The structure developed in 2001 is still in place. Each QT has specific duties that are delineated on page 8.

Current

The Unit has evolved in the way it views the UAS. In 2005, the focus was on using candidate data to make program improvement. The UAS has a sharpened focus on measuring the effectiveness of Unit operations, including using more data and monitoring the degree to which programs and the Unit are meeting the NCATE Standards and moving to target.

The following flow chart provides a visual of the UAS.

UNIT ASSESSMENT SYSTEM FLOW CHART

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┌────────┐       ┌──────────┐       ┌───────────┐
│ Assess │ ◄──── │ Implement │ ◄─── │           │
└────────┘       └──────────┘       │           │
    ▲                                │           │
    │                                │           │
    │   ┌─────────┐                  │           │
    │   │ Program │                  │           │
    │   │  Teams  │ ──┐              │           │
    │   └─────────┘   │              │           │
  ┌───┐               ▼              │           │
  │ D │   ┌───────────┐   ┌─────────┐   ┌──────────────┐   ┌─────────┐   ┌────────────┐   ┌────────┐
  │ A │──►│  Dean &   │──►│ Analyze │──►│ Appropriate  │──►│ Review  │──►│  Action    │
  │ T │   │Coordinators│  └─────────┘   │Stakeholder(s)│   │ Analyze │   │   Plan     │
  │ A │   └───────────┘       ▲         └──────────────┘   │Recommend│   └────────────┘
  └───┘               ┌───────┘                            └─────────┘
    │   ┌─────────┐   │                                         
    │   │ Quality │ ──┘                                         
    │   │  Teams  │                                             
    ▼   └─────────┘                                             
    ▲                                                           
    │                                                           
┌────────┐       ┌──────────┐                                  
│ Assess │ ◄──── │ Implement │ ◄───────────────────────────────
└────────┘       └──────────┘                                  
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Explanation of the UAS Flow Chart

Fundamentally, the structure of the UAS is a loop of information, decisions, and actions that is in constant motion and state of refinement. The starting point for the UAS is "data." Data flow to the (a) Program Teams, (b) Dean and Coordinators meeting as the School Council, and/or (c) Quality Teams, and from there to stakeholders. The channeling of data is as follows:

Data to Program Teams: Candidate performance data are regularly collected by program teams with most submitted to the Data-base Coordinator. The Data-base Coordinator compiles, aggregates, and prepares summary reports. Data include the following:

- Transition Points. Assessments identified for each program's transition points, or summative decision points called Decision Points (DP). Each program has DPI for admission to the program, DPII or DPIII for admission to clinical or capstone, and DPIII or DPIV for completion of the program requirements. Details on each program's Decision Points are found in this exhibit under "decision points for all programs."
- Dispositions. Each program collects candidate disposition data at various points in the program. Details on each program's assessment of dispositions are found in 1.3.e.
- Key Assessments. These are candidate performance data for SPA assessments and State Program Reviews. They are aligned to the CF and the Diversity Proficiencies. Those data are recorded and processed by each program[1] with the support from the SOE's Data base Coordinator and the SOE's Records Specialist. The key assessments for the MS in Elementary and Secondary (MEST) program are papers linked to DPII and DPIII.
- Other candidate data include:
  - Candidate enrollment data compiled by the Records Specialist
  - Exit, alumni and employer surveys distributed and processed by the Data-base Coordinator; exit reflections and feedback
  - Programs' surveys for immediate candidate input on specific issues and needs assessments

Data to Dean and Coordinators/School Council: Data this group considers includes Unit enrollment; impact of campus budgetary decisions/cuts; changes in faculty lines; feedback from advisory groups such as the Superintendent's Advisory Group, the SOE Advisory Council, and the Campus COPEP (faculty and administers from across the campus).

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[1] Once programs have been Nationally Recognized (without conditions) a process will be developed for the Data-base Coordinator to compile, aggregate, and prepare summaries for SPA and State Program Review Assessments. The Reading program has piloted a process.

Data to Quality Teams: Each Quality Team has specific responsibilities and directly collects or facilitates the collection of qualitative and/or quantitative data. Each team's responsibilities are found in the chart "Unit Assessment System: Its Collection and Analysis of Data to Fulfill the Mission of the Unit." Refined QT responsibilities and delineation of data sources were added to the chart to support "moving to target" in Standard 3. Those additions are described in the Addendum to the CF and are highlighted on the chart. Quality Teams request information from Program Teams, faculty, the Dean's office, SOE student services staff, and campus offices. Data protocols created by teams streamline the collection procedures and analyses processes. Protocols include curriculum maps to ensure alignments to state and national standards, diversity proficiencies, and multiple forms of assessment; prompts in the form of questions to examine the fairness, accuracy, and consistency of assessments, including avoidance of bias; a matrix to document the systematic assessment of dispositions; surveys of faculty use of best practices in instructional strategies; and a syllabi analysis checklist to determine alignment with Unit policy.

Efforts to move to target in Standard 3 will require earlier incorporation of substantial dialogues with school partners in the UAS data flow process.   Ongoing collection and analysis of data measuring the effect of the SOE's broadened and deepened partnerships will be incorporated by the Unit so program quality and unit effectiveness continues to improve.

Analyze the Data: Program Teams, the School Council, and Quality Teams review and analyze the data and summarize findings. After the initial **analysis process** is complete**,** they determine what findings need to be taken to the appropriate **stakeholder group(s)**. Stakeholders may be K-12 educators, candidates, other Quality Teams, other Program Teams, or other campus units. The appropriate **stakeholder group** reviews the data, analyzes it, and summarizes the findings to determine if an **action plan** is needed to address and issue or concern identified. Teams meet with stakeholders face-to-face, through emails and phone calls, and in online meetings.

If an **action plan** is needed, it is developed, **implemented,** and relevant **data** are collected to feed back into the UAS assessment loop. Examples of the UAS assessment loop process include:
Example 1: F200 is the introductory course taken before being admitted to an undergraduate SOE program. Data for F200 had been collected by undergraduate programs and submitted to the Data-base Coordinator who compiled, aggregated, and prepared a summary. PAUE reviewed and analyzed the data and identified concerns related to the variations in how candidates performed and inconsistencies in how programs used the results. PAUE took the issue to the undergraduate programs who were the appropriate stakeholder group members. Based on the analysis of the data, a plan was designed and implemented to address the concerns. Data are being collected to determine if the plan has resulted in better decisions.

Example 2: Council on the Preparation of Education Professionals (COPEP), the campus content advisory group. Content data results for undergraduate programs were collected, aggregated, and analyzed by programs for SPA Assessments 1 and 2; data were compiled and a summary prepared by the Data-base coordinator. The data results were taken to the stakeholder group COPEP as the group responsible for the content preparation. COPEP members reviewed the results and did not find any issues or concerns.

Example 3: Quality Team 5 surveyed faculty on Brown Bag (PD) topics and preferred times for holding them. The Dean and Coordinators, who set faculty meeting agendas, were the appropriate stakeholders; the results indicated the Brown Bags should be embedded in faculty meetings as a more effective means of unit operations.

Example 4: The Special Education team sought advice from its Advisory Committee in the Fall 2012 regarding temporarily ceasing to accept more candidates into the post-bac program. Given the unknowns of pending licensure rules in the State, the program's shrinking enrollment, and challenges presented by candidates completing sufficiently broad and deep clinical experiences, the Committee endorsed keeping the program dormant.

Example 5: After conducting a curriculum audit using the NCATE Standards, MEST found that while there was a pedagogy course, there was no content pedagogy course requirement. Using feedback gathered by a survey of principals and a needs assessment survey of current candidates, MEST developed a framework for a content pedagogy course. Feedback regarding that framework will be sought from MEST candidates enrolled in core courses and SOE advanced methods faculty before finalizing the framework.

Program Teams, the School Council, and Quality Teams meet monthly. Program Teams and Quality Teams develop work plans around their goals at the beginning of each academic year and submit reports on work accomplished each June. Quality Teams include their UAS assignments in the plans. (2.3.i) All teams document changes in their meeting minutes; summaries of changes are found in the document Unit Change Summary. (2.3.h)

To strengthen the Unit's data analysis process as a shared responsibility, in May, 2011 QT 2 PAUE planned and facilitated the Unit's first Data Day with an emphasis on programs analyzing Alumni and Employer Survey results. Some program teams were alerted to areas that needed to be watched. In some cases, concerns expressed by respondents in the surveys were already being addressed. For example, the Elementary Team added a behavior management class and the Secondary team added a diversity course.

Prior to August 2011, Program Teams systematically reviewed the aggregated candidate performance data at the August faculty retreat. In August 2011, they reviewed the data being submitted with the SPA reports and other candidate data during the year. One challenge was the amount of data to review since the SPA Assessments provided much more detail on candidate performances. Programs also had alumni and employer survey trend data available as well as enrollment data, exit data, and Unit Assessment Survey results.

To address the amount of data that should be analyzed, PAUE developed protocols for two Data Days. The first protocol involved cross-program teams and the analysis of alumni and employer trend data and the analysis of the Unit Assessment Survey trend data. A summary of the findings is in exhibit 2.3.d, items A and B. The second day's protocol involved program team analysis of the most recent candidate performance data and Decision Point Data. (2.3.d, parts C and D) The findings are found in the responses to 1.1 in Standard 1. Programs will share findings with K-12 Stakeholders at their next meetings in 2013.

While these two Data Days were more successful in identifying areas of concern, faculty feedback suggested that too much data were being reviewed at one time. In response, PAUE developed a monthly schedule for reviewing data. The schedule will ensure that data are collected, compiled, aggregated, and summarized in a sequence that is practical. Data will be reviewed and analyzed at faculty meetings. Program Teams will review and analyze candidate data; faculty will review and analyze data presented by Quality Teams; faculty will review and analyze data presented by the Dean. The plan is presented on the chart "Unit Assessment System: Data Analysis Cycle" on pages 9-11.

At the end of 2013-2014, PAUE will evaluate the effectiveness of the monthly schedule to determine if the analysis cycle has ensured a more routinized process for programs to effectively analyze candidate performance data to identify strengths and areas for improvement and the Unit to identify strengths and areas for improvement in the effectiveness of Unit operations. Special attention will be paid to how school partners are being meaningfully, substantially, and regularly involved in program development and candidate assessment.

During 2014-2015, the UAS will need to be revised to align to the new CAEP Standards. Faculty representing Program and Quality Teams are attending AACTE sponsored events on the transition to CAEP to prepare for that work.

Unit Assessment System: Its Collection and Analysis of Data to Fulfill the Mission of the Unit						
Program Quality & Candidate Performance	Unit Operations Designed to Support Candidate Performance, Program Quality and Unit Efficiency					
	QUALITY TEAM 1: MAJOR DUTIES	QUALITY TEAM 2: MAJOR DUTIES	QUALITY TEAM 3: MAJOR DUTIES	QUALITY TEAM 4: MAJOR DUTIES	QUALITY TEAM 5: MAJOR DUTIES	QUALITY TEAM 6: MAJOR DUTIES
Program Teams' MAJOR DUTIES Ensures Candidate Performance & Program Quality Related to Content Knowledge; Professional Knowledge, Skills & Dispositions; Impact on Student Learning	• Facilitates periodic review of CF. • Provides 1st level of review curr changes. • Monitors SPA statuses & Title II reports. • Monitors alignment of curriculum with CF, Dispositions, Diversity Prof. & Outcomes. • Monitors updating of programs' data-based change documents. • Verifies rigor of collaboration with K12 partners. & stakeholders.	• Oversees UAS. • Monitors assessments for alignment • Monitors fairness of assessments. • Monitors data collection & analysis • Facilitates unit & program admission data analyses. • Verifies partners jointly design, select & assess candidates, and evaluate partnership effectiveness. • Helps unit & partners design assessments , including observations, of candidates' impact on student outcomes	•Monitors procedures used to ensure high quality field & clinical experiences. •Reviews collaboratively planned field & clinical experiences with regard to diversity. •Facilitates unit's efforts to move toward target in Standard 3. • Reviews performance data for candidates entering & exiting clinical work. • Assesses completeness of field and clinical handbooks & assessment tools. • Facilitate partnerships that lead to joint program design & candidate selection & assessment.	• Monitors curriculum alignment with SOE Diversity Prof. • Facilitates collection of data regarding diversity of the site schools. • Works with campus staff to recruit & retain diverse candidates. • Updates unit policies, procedures & efforts to recruit diverse candidates, & for candidates to teach all students and impact learning.	• Plans SOE student recognition event. • Reviews quality of tool used to evaluate adjuncts. • Monitors quality of K12 clinical faculty for Counseling & School Leadership. (with QT3) • Monitors procedures for judging quality of adjuncts. • Facilitates SOE & collaborative PD activities with K12 partners.	•Conducts elections for standing committees. •Provides 1st level review for unit policies. •Reviews adequacy of unit resources, technology, fac workload, governance & organizational structure needed for unit effectiveness & K12 partnerships. • Initiates changes in T &P procedures. •Updates SOE's Policy Book & organizational chart. •Facilitates review of advising & counseling resources.
DATA	DATA SOURCES	DATA SOURCES	DATA SOURCES	DATA SOURCES	DATA SOURCES	DATA SOURCES
•SDP, SPA, Disposition & Diverse Prof. Data •Surveys of alumni, employers, exiting candidates •Stakeholders' meetings	• Mapping of CF, dispositions, & outcomes. • Data-based justifications for proposed changes. • Periodic reviews of CF by faculty with input from stakeholders. • Review of SPA, state findings, & Title II. • Unit survey questions. • Records of discussions, decisions & evaluations with partners.	• Results of analyses of unit data & assessment fairness. • Record of programs' updated transition points & data-driven change timelines. • Review of match consistency between UAS policies, procedures & practices. • Review of admission data. • Proof of complaint policy implementation • Unit survey questions. • Record of meaningful & substantial decisions with partner schools.	• Yearly team reports on Standard 3 target efforts • Fld Plcmnt Office's annual data on field diversity. • Evaluation of teams' strategies & data regarding quality of field and clinical placements & faculty. • Record of complete field & clinical handbooks, assessment tools & procedures. • Performance data of candidates entering & exiting clinical. • Unit survey questions. • Evidence of high quality partnership agreements & practices that are mutually beneficial.	• Bi-annual audit of diversity proficiencies in curriculum maps & built into K2 partnerships. • Annual report of existing diversity & recruit efforts for faculty & candidates. • Verification of efforts to ensure candidates can teach all students & impact their learning. • Diversity data of field & clinical schools. • Unit survey questions.	• Relevant unit survey questions. • Needs assessment for SOE faculty PD • Tri-annual review of review tool for adjuncts & procedures to monitor their quality. • Accounting & results of PDs shared with partners. • Qualifications chart of SOE faculty & K12 clinical faculty. • Tally of service & collaborative activities.	•An up-to-date policy book & organizational chart. •Comparable budget data. •Technology needs assessment. •Relevant unit & program survey questions. •Review of consistency between campus & SOE policies. • Evidence that partnerships meet technology expectations (with QT3) • Evidence that partnerships are financially & administratively supported.

Type of Data		When Collected for Reporting	September Faculty Mtg.	October Faculty Mtg.	December Faculty Mtg.	February Faculty Mtg.	March Faculty Mtg.	April Faculty Mtg.	May Retreat
Aggregated Candidate Performance Data					Timeframe				
SPA 1		End of Academic Year		✓					
SPA 2		End of Academic Year		✓					
SPA 3		End of Academic Year		✓					
SPA 4		End of Academic Year		✓					
SPA 5		End of Academic Year		✓					
SPA 6		End of Academic Year		✓					
SPA 7 if applicable		End of Academic Year		✓					
SPA 8 if applicable		End of Academic Year		✓					
SDP 1		End of Academic Year	✓						
SDP 2		End of Academic Year	✓						
SDP 3		End of Academic Year	✓						
SDP 4		End of Academic Year	✓						
Dispositions		End of Academic Year	✓						
Attrition/Retention/Failure Analysis		End of Academic Year	✓						
Demographic									
Enrollment		End of each semester	✓						
Race/Ethnicity/Gender		End of each semester	✓						
Stakeholders									
Candidates	In program	As needed to provide identified information	*	*	*	*	*	*	*
	Exiting program	Unit Assessment Survey and Program Specific Surveys						✓	
	Alumni (survey)	One year out for undergraduate and graduates						✓	
K-12 Personnel	Practicing professionals (clinical faculty)	Feedback through surveys and/or interviews			✓				
	Practicing	By Programs in advisory			✓				

	professionals (teachers)	groups							
	Practicing professional (administrators)	By Programs in advisory groups\By Dean once a year			✓				
	Employers (survey)	One year out for undergraduate and graduates						✓	
	Dean's Advisory Group	By Dean Once a Year			✓				
Campus	In subject matter content areas relevant to specific license	As needed by programs to review changes mandated by the IDOE and to review recommended changes suggested by SOE or Content Faculty	*	*	*	*	*	*	*
	Office of Institutional Research and Assessment OIRA	Data reports submitted yearly for review by Academic Assessment Committee and OIRA—feedback provided							✓
	COPEP	Two times a year			✓				
SOE	Adjunct Annual Reviews	February after calendar year by Dean				Dean			
	Adjunct Candidate Evaluations	October, March and August by Dean and Program Coordinators		Dean			Dean		
	Faculty Annual Reviews	March by Dean. Faculty use candidate feedback to revise courses & teaching strategies; report scholarship and service					Dean		
	Review of Fairness of Assessments	Conducted by PAUE each year to monitor and provide assistance					✓		
	Quality Team Reports	Annually or Biannually as per UAS cycle				✓			

Key to Chart:

*As needed based upon time sensitive issues and concerns

Dean refers to administrative action the Dean take based upon data.