# SUPPORT UNIT ASSESSMENT GUIDELINES ACADEMIC AND STUDENT SUPPORT SERVICES (AES)

**Updated September 2023** 



# **Abbreviations & Definitions**

Assessment, Evaluation, Feedback, & Intervention System (a cloud-

based assessment management system)

AES Administrative Educational Support Units, Academic and Student Support

Units

FAQs Frequently Asked Questions

OIARP Office of Institutional Assessment, Research, and Planning

OBJ Objective

**AEFIS** 

SLO Student Learning Outcomes

## **Table of Contents**

# **Table of Contents**

Introduction to AES Assessment	1
Components	
Roles	2
Guidelines Description	2
AES Assessment Deadlines	4
Using AEFIS to Document Annual Assessment	7
Getting Started	7
Accessing Assessment Forms	7
Submitting Assessment Forms	8
How to Locate Assessment Forms Not Showing on Your Acti	on Items 9
Form History	9
Email Notifications	
Responding to Feedback	
Program Mission	11
Division/Unit Mission FAQs	11
Outcomes/Objectives	12
Types of Outcomes/Objectives	12
Relevant Associations	16
Criteria	17
OBJ/SLO FAQs	18
Measures & Targets	20
Targets	21
Relevant Associations	Error! Bookmark not defined.
Criteria	23
Measure & Target FAOs	24

Findings	26
Criteria	26
Findings FAQs	27
Action Plan	29
Criteria	29
Action Plan FAQs	30
Office Reviewer Approvals	31
OIARP Comments	32
Appendix: AY2022-23 AES Assessment Workflow	33
Appendix: AY2023-24 Support Unit Assessment Workflow	34
Appendix: AY2024-25 Support Unit Assessment Workflow	35

#### Introduction to AES Assessment

#### **Purpose**

The purpose of AES assessment is to gather information on which to inform continuous improvement of functions and processes within the division/unit. The information presented in each section of this manual defines Texas A&M International University's (TAMIU) expectations for the documentation of outcome/objective assessment. This "how-to" manual is designed to guide academic and student support units (hereafter referred to as *AES units*) through the assessment process and highlight best practices.

#### **Components**

The **Assessment Plan**, completed every Spring semester, identifies the outcomes/objectives that will be assessed during the *upcoming* year (academic or fiscal), as well as the measures and targets used to assess each one. Units may identify as many outcomes/objectives as they see fit to assess each year, but **at least two must be assessed annually**.

The Assessment Plan consists of the following:

- Division/Unit Mission
- Outcomes/Objectives
- Measures & Targets

The **Assessment Report** completed every Fall semester, summarizes assessment results (i.e., findings) gathered over the course of the *previous* year, as outlined in the established Assessment Plan for that year. The Assessment Report also includes the division's/unit's action plan. In this section, the division/unit (1) reflects on knowledge gained from the analysis of the findings of this assessment cycle, (2) describes the action(s) the staff will implement in future cycles to improve their outcomes/objectives or the assessment of them, (3) reflect on action(s) taken from previous assessments within this cycle that have been successful, unsuccessful, or provided no change to the findings, (4) report general issues they believe the Vice President of President should be made aware of based on their findings, and (5) describe how the data and resulting decisions have or could have impact on budgets.

The Assessment Report consists of the following:

- Findings
- Action Plans

#### Roles

Over the course of the two-year assessment cycle, assessment forms follow a 9-step workflow. Individuals in the following roles participate at one or various points in the cycle:

- **Program Coordinators**: Staff and/or unit leadership responsible for documenting and submitting Assessment Plans and Reports in HelioCampus Formerly AEFIS
- Department Academic Liaisons: Appointed individuals by the President or the Vice President
  of the division who work with OIARP to provide support and communicate expectations to
  Program Coordinators in their respective divisions; responsible for providing internal
  feedback on Assessment Plans and Reports. This position is commonly referred to as "office
  reviewer"
- OIARP: The University's administrative office responsible for providing support to those in the
  roles defined above as they participate in the annual AES assessment process; responsible for
  managing the assessment platform (HelioCampus Formerly AEFIS) and publishing resources
  for users, as well as providing feedback and final comments on completed Assessment Plans
  and Assessment Reports

#### **Guidelines Description**

The components making up the Plan and Report are covered individually and in detail throughout this manual. The walkthrough sections of this companion manual follow the same order of the sections comprising the Assessment Plan and Assessment Report.

Component sections include:

- A description of the component
- Criteria for what each component should include and on which feedback is provided
- Examples
- Frequently Asked Questions (FAQs)
- Screenshots of what the components look like in HelioCampus Formerly AEFIS

The information presented in each section of this manual defines Texas A&M International University's expectations for the documentation of AES assessment. This how-to manual is designed to guide AES units through this process, highlight best practices, and facilitate the review of Assessment Plans and Assessment Reports.

Please pay particular attention to the **callouts** with the red exclamation mark image on the left. These callouts mark important information.

Each section of this companion manual includes an FAQ section. The FAQs in **blue text** indicate information that addresses functionality within the HelioCampus Formerly AEFIS system. The HelioCampus Formerly AEFIS logo on the left indicates callouts for important technical information about HelioCampus Formerly AEFIS.

### **AES Assessment Deadlines**

Deadlines for the AY2023-24 and AY2024-25 assessment cycles are listed below, and visual representations of these workflows can be found in the Appendices.

### AY2023-24 Deadlines

Workflow Step	Step Name (In HelioCampus Formerly AEFIS)	Assigned Role	Step Purpose	Submission Deadline*
Step 1	Program Coordinator Plan Submit	Program Coordinator	Draft Plan Submission	February 17, 2023
Step 2	Office Review Plan Checklist	Department Academic Liaison	Internal Division Approval and Feedback on Plan	March 3, 2023
Step 3	Program Coordinator Plan Submit	Program Coordinator	Revise based on Internal Division Feedback/ Submit Plan	March 10, 2023
Step 4	Assessment Office Plan Rubric	OIARP	OIARP Approval and Feedback on Plan	April 21, 2023
Step 5	Program Coordinator Plan Submit	Program Coordinator	Assessment Plan Returns to Program Coordinator for Reviewing Feedback and any Necessary Revisions	September 20, 2024
Step 6	Program Coordinator Report Submit	Program Coordinator	Draft Report Submission	October 04, 2024
Step 7	Office Reviewer Report Checklist	Department Academic Liaison	Internal Division Approval and Feedback on Report	October 18, 2024
Step 8	Program Coordinator Report Submit	Program Coordinator	Revise based on Internal Division Feedback/ Submit	October 25, 2024

			Final Report	
Step	Assessment Office Report Rubric	OIARP	OIARP Provides Feedback and Approval on Report	November 29, 2024

### AY2024-25 Deadlines

Workflow Step	Step Name (In HelioCampus Formerly AEFIS)	Assigned Role	Step Purpose	Submission Deadline*
Step 1	Program Coordinator Plan Submit	Program Coordinator	Draft Plan Submission	February 16, 2024
Step 2	Office Review Plan Checklist	Department Academic Liaison	Internal Division Approval and Feedback on Plan	March 1, 2024
Step 3	Program Coordinator Plan Submit	Program Coordinator	Revise based on Internal Division Feedback/ Submit Plan	March 8, 2024
Step 4	Assessment Office Plan Rubric	OIARP	OIARP Approval and Feedback on Plan	April 19, 2024
Step 5	Program Coordinator Plan Submit	Program Coordinator	Assessment Plan Returns to Program Coordinator for Reviewing Feedback and any Necessary Revisions	September 19, 2025
Step 6	Program Coordinator Report Submit	Program Coordinator	Draft Report Submission	October 03, 2025
Step 7	Office Reviewer Report Checklist	Department Academic Liaison	Internal Division Approval and Feedback on Report	October 17, 2025
Step 8	Program Coordinator Report	Program Coordinator	Revise based on Internal Division	October 24, 2025

	Submit		Feedback/ Submit	
			Final Report	
Step 9	Assessment Office Report Rubric	OIARP	OIARP Provides Feedback and Approval on Report	November 28, 2025

<sup>\*</sup>The submission deadline denotes when the form needs to be submitted to the *next* workflow step. For example, in the 2023-24 cycle, the deadline for forms at Step 3 to submit to Step 4 is March 10, 2023.

### Using HelioCampus Formerly AEFIS to Document Annual Assessment

#### **Getting Started**

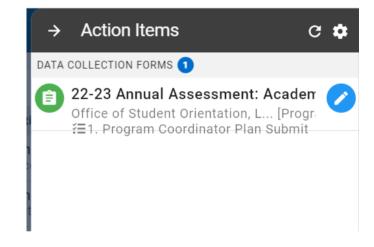
Program Coordinators responsible for the submission of Assessment Plans and Reports are called **Program Coordinators** in HelioCampus Formerly AEFIS. Program Coordinators use their NetID and password to <u>log in to HelioCampus Formerly AEFIS</u> (<u>tamiu.aefis.net</u>).

Newly appointed Program Coordinators should refer to the <u>AEFIS User Guide</u> for specific instructions on logging in, accessing, and submitting Assessment Plans. This visual guide includes helpful tips, things to remember, and information about system features that Program Coordinators may find useful. The following information covers the basics of using AEFIS for program assessment.

#### **Accessing Assessment Forms**

Assessment forms assigned to Program Coordinators will appear in the Action Items list on the right side of the screen in to AEFIS. Click the blue pencil icon to edit the information in the assessment form.

If the Action Items list does not automatically appear, it can be accessed by clicking on the bell icon at the top right of the screen in the blue bar, which is pictured below.





Please pay particular attention to the academic year listed on the form in which you are working. At any given time, there are **two** active assessment cycles—the cycle for which the Plan is being documented and the cycle for which assessment data is being collected and the Report is being documented. Sometimes those forms will be visible in the Action Items list at the same time. Program Coordinators should verify they are working in the intended form.

Upon opening the 23-24 assessment form for the first time, Program Coordinators will find information

is already entered in some fields. The following information has been pre-populated in the 23-24 forms (from the previous cycle's forms):

All Outcomes/Objectives



New divisions/units will not have any information pre-populated in their 23-24 forms.

#### **Submitting Assessment Forms**

Over the course of the assessment cycle, Program Coordinators will submit the Assessment Plan three times (Step 1, 3, and 5) and the Assessment Report twice (Steps 6 and 8). See the Appendices for a visual representation of the assessment cycle.

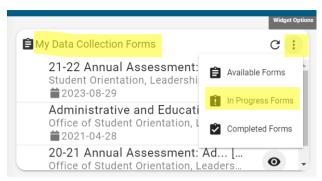
Upon submitting the Plan, it will be sent to the Office Reviewer after step 1 and OIARP after step 3 for feedback and approval from both entities. Simply click the "Submit the Form" button at the bottom of the form to submit it.



After receiving feedback and approval on the Assessment Plan from the Office of Institutional Assessment, Research, and Planning (i.e., when the form is at Step 5), Program Coordinators may update the Mission, OBJs/SLOs, Measures, and/or Targets as they see fit. However, the form should NOT be submitted again until ready to enter the Assessment Report (Findings and Action Plans) information, which won't be until the Fall semester of the NEXT year. Simply use the "Continue Later" button to save any changes made to the form. The form will conveniently remain in the Action Items list over the course of the academic year as assessment data is gathered.

#### How to Locate Assessment Forms Not Showing on Your Action Items

After the Program Coordinator submits a form, it will no longer appear on their Action Items list. However, Program Coordinators can view read-only copies of submitted forms from their AEFIS dashboard widget labeled "My Data Collection Forms." Simply click the three-dot icon at the top right of the widget and filter by "In Progress Forms."



Completed assessment forms from previous cycles (e.g., AY 21-22, AY 20-21) can also be accessed from this widget. Simply select "Completed Forms."

#### **Form History**

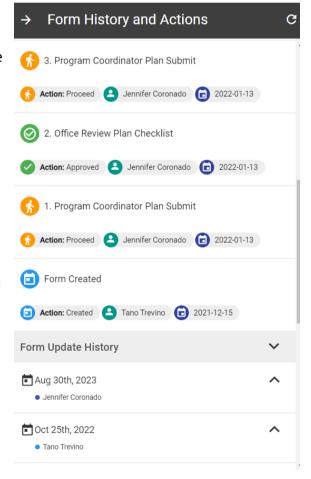


AEFIS tracks the changes made within assessment forms and the progression of assessment forms through the workflow. While in a form, you can review this information by clicking the clock icon at the top right of the form (pictured above).

The resulting menu has two sections:

- Form Actions. This section shows the submission history of the form, including date, time, whether the form was sent forward in the workflow (Action: Proceed or Action: Approve) or backward (Action: Rejected), and by whom.
- Form Update History. This section shows a list of dated sessions in which the Program Coordinator, Office Reviewer, and/or OIARP staff member was making edits in the form. Each section is date-stamped and labeled with the user's name.

Expand a section by clicking the caret (^). This view will show each individual change that was made in the form (timestamped). Clicking on an individual change/update will automatically navigate you to that section of the form.



This feature is useful if more than one Program Coordinator is responsible for entering information in

the assessment form. It provides a total history of what has been entered, when, and by whom.

#### **Email Notifications**

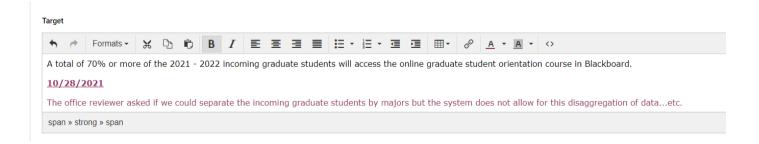
When feedback is submitted to Program Coordinators—whether from the Office Reviewer or OIARP staff—the system automatically sends an email notification indicating that an assessment form is available on the Program Coordinator's Action Items list. The sender of these notifications is listed as "TAMIU AEFIS System," but the notifications are sent automatically by the AEFIS system. Please read these email notifications carefully as they provide important information, such as who provided feedback, next steps and future deadlines, and technical information about the AEFIS system.

If you have a student (@dusty.tamiu.edu) and a work (@tamiu.edu) email address, you may need to forward these notifications from your student account to your work account. AEFIS receives a nightly update from Banner, the University's Student Information System, during which student email addresses could overwrite work email addresses. If you do not believe you are receiving notifications, please check your student email account and set up the forwarding function.

#### Responding to Feedback

Office Reviewers provide feedback on Assessment Plans and Reports twice over the course of the cycle (Steps 2 & 7). Beyond making revisions or updates to the Plan/Report itself, there may be some cases in which the Program Coordinator wishes to respond to the feedback (e.g., perhaps because the recommended revision cannot be made, and the Program Coordinator wishes to provide an explanation).

To respond to the feedback provided in your form, simply type your response in the text box that includes the content on which the feedback was provided. That is, if the Office Reviewer provided feedback on a target, type your response in the target text box. OIARP recommends *dating* your response, as well as making the text a *different color* so that it stands out from the other content in the text box. See below for an example:



### **Division/Unit Mission**

In this first section of the Assessment Plan, Program Coordinators are asked to provide their division/unit mission. When developing or refining your mission statement, consider the following:

- 1. Who are you as a unit?
  - a. Does the office/unit mission state your office's name.
  - b. Avoid vague pronouns like "Our mission is..."
- 2. What does your office/unit do?
  - a. Include the primary functions or actives of the office/department.
  - b. Illustrates the most important functions, operations, outcomes and/or offering of the office/department.
- 3. Why does your office/unit do what you do?
  - a. State the purpose of the office/department.
  - b. Should include the primary reasons why you perform your major activities or operations.
- 4. For whom do you provide services for?
  - a. These are the stakeholders (e.g., students) of your office/department.

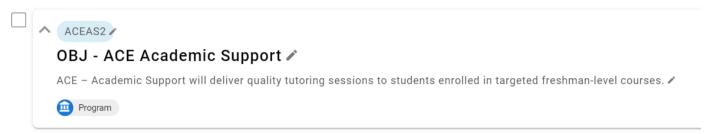
#### **Division/Unit Mission FAQs**

### Q: Do we have to continually change the mission? Can we just leave it as it is?

**A:** The existing information as it pertains to the mission of the unit can stay the same, but Program Coordinators are encouraged to refer to previous year's forms to see if there was any feedback provided in which revisions were suggested.

### **Outcomes/Objectives**

The primary purpose of assessment is to continually improve the effectiveness and efficiency with which the unit operates and/or provides services to stakeholders. This process begins with an examination of the unit's core objectives (sometimes called outcomes when referring to student learning). Strong objectives identify these key services and operations and define what they would look like in a high-functioning unit.



All AES divisions/units are expected to establish a minimum of three objectives that comprise the unit's comprehensive Assessment Plan. However, these objectives may be assessed on rotation. Leadership and staff should determine the most meaningful course of action for annual assessment, whether that means focusing on two objectives or all objectives. Some divisions may have specific internal requirements regarding objectives that are to be assessed. **Units are expected to meet the minimum requirement of assessing at least two objectives per assessment cycle.** 

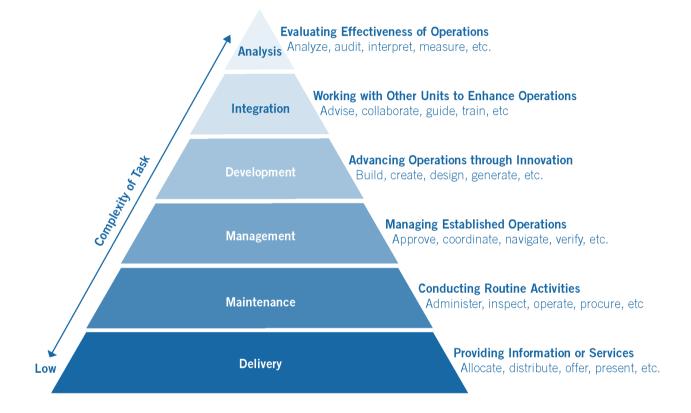
#### Types of Outcomes/Objectives

Divisions and units develop objectives based on Shults Dorimé – Williams (SDW) Taxonomy. The SDW Taxonomy provides AES units with a method of organizing and describing the complexity of tasks performed within their respective areas. Units that directly support student, faculty, or staff may also include objectives that are clearly related to **student**, **faculty**, **and/or staff success**. Units that employ student workers or support student involvement in educational/campus activities may find it useful to assess **student learning outcomes** and are encouraged to do so. More information about types of outcomes/objectives is presented below.

#### 1. Shults Dorimé – Williams (SDW) Taxonomy

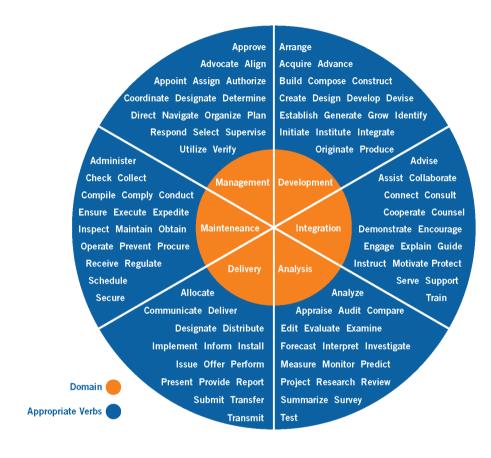
Shults Dorimé-Williams (SDW) Taxonomy provides AES units with a method of organizing and describing the complexity of tasks that are performed within their respective areas. The domain areas in which the Shults Dorimé Taxonomy exist are seen in figure 1 below:

**Figure 1**Shults Dorimé Williams Support Outcomes Taxonomy



Additionally, the taxonomy provides a verb wheel (Figure 2) which helps to develop the objective sentence once the domain has been selected for the division/unit.

Figure 2
Support Outcomes Verb Wheel



Moreover, descriptors pertaining to the objectives' goals of appropriateness, completeness, consistency, quality, and timeliness can be found in Figure 3.

Figure 3

Descriptors

Appropriateness	Completeness	Consistency	Quality	Timeliness
Appropriately	Accurate	Consistent	Acceptable	Concise
Increase/Decrease	Complete	Constant	Adequate	Efficient
Meaningful	Comprehensive	Continually	Clearly	Prompt
Necessary	Fully	Reliable	Competent	Timely
Needed	Integrated	Seamlessly	Correctly	Updated
Reduce/Expand	Systematic	Uniform	Effective	
Relevant	Thorough		Excellent	
Required			Quality	
Specific			Satisfactory	
Targeted			Sufficient	
Useful				

Examples of using the Taxonomy:

- The unit will respond to all inquiries and requests in a timely manner. (Management -Timeliness)
- The unit will produce meaningful, digestible reports for various stakeholders. (Development Appropriateness)
- The unit will provide students utilizing [specific service] sufficient service. (Delivery Quality)

#### 2. Student, faculty, or staff success

AES units that directly support students should identify and assess objectives that are clearly connected to student success. If it may not be immediately evident to someone outside the unit how an objective is connected to student success, please provide a brief explanation of the connection. These units may also include objectives related to faculty and staff success if relevant. Objectives related to the Shults Dorime Williams may also address student/faculty/staff success. Examples:

• Students who utilize the services offered by the unit will achieve a higher level of academic

success than students who do not utilize these services, as indicated by grades, retention, and graduation rates. (Student success)

- The unit will provide workshops for faculty that will enhance their classroom processes and communications with students. (Faculty success)
- The unit will offer trainings and workshops to enhance staff knowledge and comfort with socially just assessment practices. (Staff success)

#### 3. Student learning

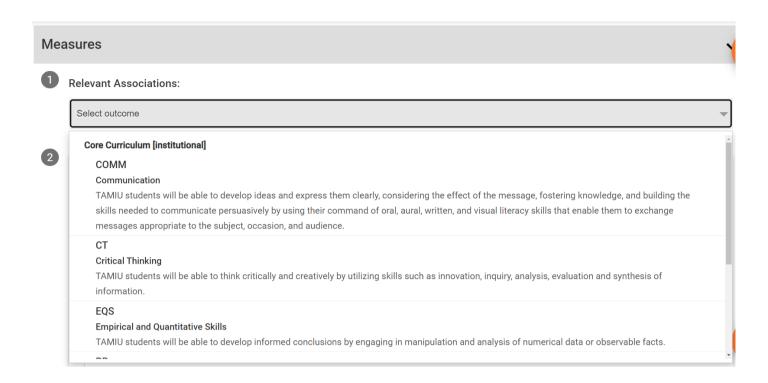
Units that serve students directly (e.g., employ student workers or graduate assistants, host student educational activities, provide student trainings and workshops) are encouraged to assess relevant student learning outcomes. These outcomes might align with the University undergraduate and graduate-level outcomes, or they might be specific to the content of a particular training or workshop. Examples:

- Students who participate in [training/workshop] will be able to articulate [topic].
- Student workers who participate in the [event/service/training] will demonstrate high-quality oral communication skills.

#### **Relevant Associations**

For each objective/outcome in the Plan, Program Coordinators are prompted to select Relevant Association(s) from a dropdown menu in AEFIS. The menu lists the six Institutional Learning Outcomes:

Institutional Learning Outcomes – TAMIU has identified six learning outcomes which
describe the knowledge and skills undergraduate students should possess upon
graduation from TAMU. These also apply to undergraduate certificates. These six
outcomes match the Texas Higher Education Coordinating Board (THECB) established
six skills which prepare students for the job market and their role in a diverse world
and democratic society. These skills are introduced and reinforced throughout the
Core Curriculum.



Please only select Relevant Associations *directly* related to the objective/outcome. If none of the listed Relevant Associations are closely aligned to the objective/outcome, it is acceptable to leave this field blank.

#### Criteria

1. OBJs/SLOs reflect what is accomplished at the end of or as a result of the program/activity/service/workshop/training/etc.

OBJs/SLOs are written to reflect the objective or outcome of the division's/unit's operations or services. They should not reflect something that has no relation to the operations or services of the division or unit. However, this does not mean objectives should focus on completion of a task or a project. Objectives should not reflect the completion of a task or a project as this is not appropriate for AES assessment.

2. Two OBJs/SLOs are tested in a cycle.

As stated previously OBJs/SLOs selection per cycle is a minimum of two per cycle. However, all OBJs/SLOs for a division/unit must be tested once within three years.

3. OBJs/SLOs are written clear enough to infer action and measurability.

OBJs should establish what is expected of the division/unit providing a rich description of the task domain. SLOs should establish what is expected of the student providing a rich description of the content/skill/or attitudinal domain the student will gain. Additionally, the OBJs/SLOs should contain precise verbs that promote measurability, avoiding vague words (e.g., understand, know, appreciate, etc.).

4. If an SLO is being tested, they should specify who should be assessed

SLOs should specify whom should be assessed, (e.g., "enrolled first time freshman").

#### **OBJ/SLO FAQs**

#### Q: Why can't we include objectives about completing a task or project?

**A:** If the division/unit is working toward completion of a project or task, the focus of the objective should be on the *impact* of the completed project or task (i.e., effectiveness, efficiency, or stakeholder/customer perception). Objectives that can be measured dichotomously (e.g., "Completed/Not Completed") do not typically provide sufficient insight or information to guide continuous improvement efforts, nor do they fit the cyclical assessment process facilitated by this reporting structure.

# Q: Do we have to measure the same objectives every year? / Can we measure the same objectives every year?

**A:** Unit staff and leadership should guide the assessment process, determining which objectives are to be measured and when. Some units place their objectives on two- or three-year rotations, focusing on just one or two each year. In any case, assessment planning should be an *intentional* process. For some units this might mean measuring the same objectives annually, and in other units this might mean measuring them on rotation. Even units that assess their objectives on a planned rotation might need to deviate from their rotation from time to time, depending on the current needs of stakeholders or changing priorities.

# Q: Regarding the selection of Relevant Associations, is it better to select all that are somewhat associated or to only select the most closely related ones?

**A:** The selected Relevant Associations should be as closely aligned to the objective as possible. If two associations are closely related to the objective, both may be selected. Conversely, it might be that

none of the Relevant Associations directly align with the objective, in which case no selections should be made.

# Q: If we plan to make significant changes to one of our objectives or outcomes, should we revise the existing objective/outcome or add a new objective/outcome in the assessment form?

A: If the revision is one that will fundamentally change how that objective or outcome will be measured (e.g., changing a Customer Satisfaction objective to an Operational Efficiency objective), always add a new objective/outcome instead of simply revising the existing objective/outcome. This ensures that the old version of the objective/outcome remains intact and tied to its relevant measures in assessment forms from previous cycles. Add the new objective/outcome and simply de-select the old outcome to indicate that it will not be assessed in the current cycle. These outdated objectives/outcomes can be permanently deleted later.

# Q: Can I de-select an objective/outcome (i.e., un-check the checkbox) after I've finished entering all the information for it?

**A:** As long as the objective/outcome is selected/checkmarked again prior to submission, it's okay to deselect the objective/outcome while you're working. Minimizing an objective/outcome by unchecking it may make the form easier to navigate while you're actively working in it. However, if you do not remember to select the objective/outcome again, that information will not move forward in your submission.

# Q: We are adding a new outcome—what should we enter in the Outcome Code field in the assessment form?

**A:** The Outcome Code is an identifier no more than 20 characters long. We suggest naming your outcome code your OBJ or SLO #. Additionally, you can add your program name if you wish, but it is unnecessary.

#### **Measures & Targets**

#### Measures

A **measure** describes the method of collecting and evaluating assessment data. A strong measure description makes the assessment strategy easy for internal stakeholders to replicate and easy to understand for an external party who is not intimately involved in the day-to-day operations of the unit/division.

Measures can be direct or indirect. All OBJs/SLOs must be assessed with two measures with one of those being a direct measure.

**Direct Measures** designed to measure the efficacy of services, programs, initiatives, etc. within areas that test objectives not related to student learning. These types of objective measures may relate to efficiency of processes, effectiveness of programs, etc. Student learning outcome direct measures require students to demonstrate their competency or ability in a way that is evaluated for *measurable quality* by an expert, such as an instructor, assessment professional, internship supervisor, or industry representative. Some examples of direct measures are:

- Activity Accuracy (OBJ)
- Activity Volume (OBJ)
- Industry Standards (OBJ)
- Number of users who access or participate in services (OBJ)
- Retention rates (OBJ)
- Written assignments, oral presentations, portfolios, or demonstrations to which a rubric—or other detailed criteria—are applied (SLO)
- Employer or internship supervisor ratings of student performance (SLO)
- Competency interviews (SLO)

*Indirect measures* provide secondhand information about student learning and the division's/unit's effectiveness or efficiency of its operations or services. Whereas direct measures are concerned with the *quality* of work as it relates to certain OBJs/SLOs, indirect measures are indicators of attitudes, perceptions, feelings, values, etc. Often, indirect measures are too broad to depict the achievement of specific OBJs/SLOs. Some examples of indirect measures are:

- Focus groups
- Interviews
- Debriefing sessions
- Open-text responses on surveys

#### **Targets**

A **target** is the level at which a unit considers their outcome to be "met" on a given measure. Strong targets are clear levels of achievement. Below are some examples of acceptable targets. Keep in mind some of these examples are generically worded; units should include contextual information from the measure description in their targets.

- 80% of students will select "Agree" or "Strongly Agree" that the training improved their mentoring skills.
- 75% of service requests will be acknowledged within 24 hours.
- Women student's enrollment in this activity/event will increase 15% from last year.
- 90% of reports will be submitted on time.
- Demographics of students participating in this experience will match the demographics of students on TAMIU campus (list percentages).

Below are some examples of **unacceptable** targets with accompanying explanation.

• All participants will engage in the focus group.

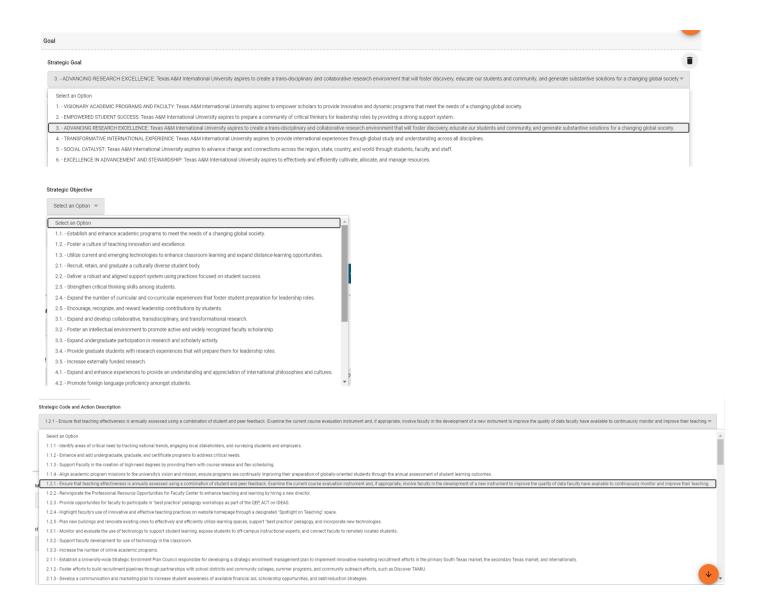
In this case, the statement likely does not align with the outcome. The outcome is not about the quality of the focus group interview, but rather about the quality of the service the focus group participants utilized. In other words, the purpose of the focus group is not the participants' engagement in the focus group; the goal should be to determine the effectiveness of the service, gather information about the user experience to make the program as effective as it can be, and/or identify what populations are not well served by the program.

• Service requests will be acknowledged this cycle faster than the last cycle.

In this case, the statement does not provide a quantifiable and measurable target. We want outsiders to look at the target and determine the goal for this cycle so that when we see the findings, we can readily see if the goal was met or not met. A target of an increase may be possible, but we want to quantify what that increase looks like.

#### Strategic Goal Association

For each measure in the Plan, Program Coordinators are prompted to select the strategic goal alignment, strategic objective alignment, and strategic code and action description alignment from three separate dropdown menus in AEFIS.



The first dropdown, strategic goal, is a mandatory selection, the other two selections are optional. You also have a button below the three dropdowns to add an additional goal if you so wish. Please, only select strategic alignments *directly* related to the measure being recorded.

Measures and targets are reviewed based on the criteria described below.

#### Criteria

#### 1. Source of data and intended use is clear

The information in each measure description should provide a clear picture of (1) where the data are coming from and (2) how the data are to be evaluated and reported. Many processes for measuring outcomes are automated (e.g., software that generates a number, results extracted from a database such as Compass). In such cases simply indicate the primary source of data and the format in which they will be reported (number, percentage, average, etc.). For less automated collection methods, such as focus groups, the questions that align with the outcome should be identified.

#### 2. Measure is consistent with the outcome as defined.

This criterion focuses on the *alignment* of the measure with the targeted outcome. That is, is the measure capable of adequately capturing the achievement of the outcome as it is defined? Also, consider whether the methodology is appropriate given the description of the outcome. The measure(s) should reflect sound assessment practices, designed to provide usable and interpretable results for continuous improvement at the unit level.

3. Target(s) include the minimally acceptable performance level or threshold.

Strong targets have the following characteristics: (1) Alignment with the measure and outcome in terms of language and specificity and (2) the level at which the targeted outcome is determined to be "met" or achieved should be clearly stated.

4. All referenced or relevant documents are attached or sufficiently described.

Surveys, spreadsheet templates, sample reports, rubrics, focus group questions, or other instruments used for data collection and reporting may be attached to the assessment form in AEFIS as supporting documentation. Alternatively, the Program Coordinator may instead choose to provide a detailed description of the instrument(s) in the Measure Description text

box. For example, if an item on a customer satisfaction survey is used to gather data on a targeted outcome, the unit may choose to attach the survey instrument and indicate the item number, or they may include in the measure description the exact text of the survey item and the scale on which customers are asked to respond to the item.

Please note the supporting documentation box appears in the reporting stage, but you are allowed to upload in planning if you wish. Refer to AEFIS guide on how to do so.

#### **Measure & Target FAQs**

# Q: Should we use more than one measure to assess an objective? Do we have to use more than one measure?

**A:** Yes you have to use two measures. A single measure might only provide limited information about the extent to which outcomes/objectives are achieved. Very broad objectives might call for three measures to determine whether it was achieved or not. Units are encouraged to use multiple measures because doing so provides a more complete picture of effectiveness and/or efficiency of unit processes. As a byproduct, utilizing multiple measures will help facilitate conversations about continuous improvement.

# Q: The details of the method are not finalized by the due date of the plan in AEFIS. What can I do to provide the requested level of detail?

**A:** The Measures & Targets section can be updated when the details of the method are finalized. For example, if your unit plans to conduct a focus group but the questions have not yet been finalized, the Program Coordinator should enter any available details and potential questions of the plan in AEFIS by the due date. After the questions have been finalized, the questions that align with the outcome can added to the form in AEFIS. These details can also be added to the Measures & Targets section in step 5 before submitting the Findings.

#### Q: Do the file names of uploaded supporting documents matter?

**A:** The file name of a supporting document should be descriptive enough that it is clear to a reviewer how it relates to the measure to which it is connected. If supporting documents are sometimes revised year-to-year, we suggest instituting a naming convention that includes the assessment cycle to which the document is relevant.

#### Q: How often, if at all, should targets be updated?

**A:** Staff and unit leadership should revisit targets annually and update them as necessary, particularly if the targets are met year after year. Targets that are consistently met every year may also be a sign that other methods of measuring the objective should be explored. It is considered good practice to rely on multiple measures for evidence of an objective.

#### Q: Do we have to justify our targets?

**A:** Although not mandatory, including a brief description of the origins or rationale for each target will likely prove to be beneficial in the future when targets are being reviewed and/or when other individuals become involved in the assessment process. These explanations are particularly useful when targets are based on state standards and other external requirements. Justifying target is considered an exemplary score on the AES rubric.

# Q: We have more than one target for one of our measures—how should we indicate this in the assessment form?

**A:** You might want to consider if these are multiple measures. Is it a secondary target? Meaning that the minimum threshold is "80% will turn this document on time," and the secondary target is "no more than 5% will be one week late." If your second target is a secondary target go ahead and include it in the same text box as your target.

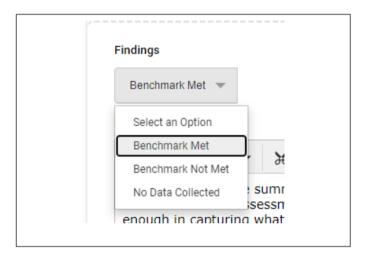
If the second target is a true second target on the same project, event, service, etc. then this might constitute a second measure. Contact OIARP and your office reviewer to see what works best.

### **Findings**

Findings are the results from analysis of assessment data. Strong Assessment Reports will consistently communicate findings in a clear manner using language that aligns with the related measure and target.

In addition to the findings statement itself, divisions/units should select the appropriate designation— whether the Target was "Met," or "Not Met,"—from the provided list. As a reminder, divisions/units are *not* penalized if their target(s) are not met.

What is important with any target and finding is that there is reflection.



If there are no findings to report for a given measure/target, units may select the third target status indicator—"No data collected" If this option is selected, please provide a brief explanation in the appropriate text box.

#### Criteria

1. Discusses the current findings as they relate to previous assessment findings or other relevant trends.

The findings are reported in the "Findings" text box in the AEFIS assessment form. Additionally, in this text box divisions/units should briefly reflect on how the current findings compare to the findings from the last time the OBJ/SLO was measured. If possible, findings should be discussed in the context of past results, as the longitudinal pattern of findings can provide valuable information to the division/unit. If a mean result is reported, it may be useful to

report the sample size along with the mean to provide further context for the finding. If the OBJ/SLO has not been assessed before, what do the findings imply about the achievement of the objective/outcome? Are there any other contextual factors that might be relevant?

2. Where appropriate, Specific/unique populations(s) served is/are discussed (if applicable)

AES divisions/units can identify the ways in which they provide support to different unique student populations and/or how unique student populations experience the services provided by the unit. Findings have the option to disaggregate for the identified unique student population(s) served by the unit (e.g., student classification, by college, etc.). See FAQs for more information.

#### **Findings FAQs**

Q: All of the targets were met, which is an indication that the unit is functioning well. Can we just say that in the Findings Decription text box?

**A:** Saying simply that the findings are an indication that the unit is functioning well is essentially the same as indicating the target is "Met." The reflection should go one step further by contextualizing the results. This can be done in a variety of ways, but one of the most powerful ways to discuss the meaning of results for continuous improvement is to describe the longitudinal trend. How has the division/unit performed on this OBJ/SLO/measure over the past few assessment cycles? Is progress being made? If not, to what might staff attribute this trend (this portion will be addressed in the action plan responses)?

#### Q: How should finding statements be structured?

**A:** There is not a prescribed template all finding statements must follow. However, the following is a template that units might find useful:

- **First sentence:** Present the assessment results in the context of the measure (e.g., 86% of respondents indicated that they were either Satisfied or Extremely Satisfied with the training session.).
- **Second sentence:** Reiterate the target, stating whether it was met, not met, or partially met (e.g., The target of 80% indicating they were Satisfied/Extremely Satisfied was met.).
- Third sentence (second text box): Contextualize the results by discussing longitudinal data trends, presenting other supporting data (if available), and/or by reflecting on the results.

# Q: Should we upload supporting documentation for our findings? If so, what are some examples of appropriate documentation?

**A:** Supporting documentation in the Findings section is mandatory. The best supporting documentation is documentation that the division/unit has met to discuss the results and make decisions based on the results (minutes, email thread, zoom transcript, etc.). Additionally, some units may find it useful to upload documents that further illustrate their findings (reports, charts and graphs, raw data, etc.), as AEFIS becomes a central location for that information from year to year. **Please ensure that uploaded documents do not include any identifying information**. You will upload this documentation in the supporting documentation area located below the action plan box.

#### **Action Plan**

Developing and implementing actions based on assessment results is a process called *continuous improvement*. Participation in continuous improvement communicates a commitment to the enhancement of the division's/unit's provided services and functions to meet the needs of stakeholders and support the mission of the University.

The action(s) discussed in the "Action plan" section of the Assessment Report should have a close, clear connection to the data collected during the assessment cycle. You will be prompted to answer five questions in each action plan text box.

- 1. What did you learn from the assessment reports about the present effectiveness of your unit's programs or services in achieving their outcomes?
- 2. What steps should be taken to enhance the effectiveness of outcomes assessment to improve programs or services in your units?
- 3. What are some examples of productive new actions taken by staff to improve their programs or services?
- 4. What are some general issues that emerged in your reading of the reports that the Vice President or President should be aware of?
- 5. Describe how the data and resulting decisions have or could impact budgets

Every division/unit is expected to answer questions 1-3, regardless of whether all targets are met. The fourth and fifth question are optional. You can answer the questions in numerical order in the text box or paragraph text, but please be sure all questions are addressed.

#### Criteria

1. Specific actions taken or planned to take are described.

Questions two and three ask the division/unit to reflect on actions that should be taken to enhance the effectiveness based on results and what actions have been taken that have produced these results. The actions described in these responses should be clearly articulated. There should be enough detail provided that an external reviewer is able to understand how findings inform these actions and what specific changes are being made to affect positive change in the achievement of the objective/outcome. See FAQs for additional information.

When reflecting on previous actions, clearly state the *specific* results of the subsequent

OBJ/SLO assessment and how these results compare to the previous findings (e.g., the specific findings that prompted the action in the first place). Avoid vague statements such as "the target wasn't met in the previous report." Be as specific as possible: *In the AY19-20 Report, only 70% of transfer students attended our event, but after implementing the action and reassessing the outcome we found that the percentage of transfer students attending increased to 78%.* 

#### **Action Plan FAQs**

#### Q: Do we have to submit a new action for every finding in the Assessment Report?

**A**: Not necessarily but you must answer the first three questions. Ideally, divisions/units will be prepared to address objectives/outcomes for which targets were not met. During the planning stage staff should consider the division's/unit's capacity for engaging in continuous improvement. For example, divisions/units that plan to assess four or five objectives/outcomes each year should be prepared to determine appropriate actions for all the objectives/outcomes should all targets be unmet.

#### Q: Can the action be a change to the division's/unit's assessment strategies?

**A:** Changes to measurement strategies and/or to the overall assessment process do fit this criterion and could be added if the division/unit wishes to do so. However, we want to focus that the assessment strategy is not what we should be focusing on as a major means of action. We need to focus major means of action on the continuous improvement of functions and processes within the division/unit.

#### Q: How do we determine an appropriate, intentional action when all the targets are met?

**A:** Met targets are a sign that the established objectives/outcomes are achievable. It does not mean, however, that all the work is done and there is no further need for assessment or attention to continuous improvement. Therefore, the division/unit should still consider how the collected data can inform continuous improvement efforts. Possible approaches include, but are not limited to:

- Drilling down into the results further, perhaps by demographics or by some other dimension, to identify possible gaps or disparities.
- Adjusting the target in future Assessment Plans. **However**, if the unit chooses to pursue this strategy, it is critical to include a discussion of what the unit will do to meet the new target. This keeps the focus of the action on the change rather than simply on updating the target (which would be considered a change to the assessment strategy).

### **Office Reviewer Approvals**

Division leadership should be actively engaged in the program assessment process, particularly when it comes to reviewing assessment data and developing data-informed actions. In addition, division leadership plays an important role in the division approval of Assessment Plans and Reports. The Department Academic Liaison role as defined in AEFIS, hereafter referred to "Office Reviewer" in the annual Assessment Review process allows Vice Presidents (and/or Associate Vice Presidents, Assistant Vice Presidents, Executive Directors, Directors, Associate Provosts, or Deans) to complete a final quality check of Assessment Plans and Reports before they are submitted to OIARP. Office Reviewers will be notified via email when Assessment Plans and Reports are available for review.

#### **Email Notifications**

AEFIS automatically sends an email notification to the Office Reviewer when a Program Coordinator submits their Assessment Plan or Report for review. The sender of these email notifications is listed as "TAMIU AEFIS System," but the emails are sent automatically by the AEFIS system. Please carefully read these emails as they include deadlines for plan/report approval.

#### Logging in to AEFIS

Go to <a href="https://tamiu.aefis.net">https://tamiu.aefis.net</a> to log in to AEFIS. The website will automatically redirect you to authenticate through SSO (Single Sign On) using your NetID and password.

#### **Accessing Assessment Plans or Reports**

Assessment Plans or Reports will appear in the Action Items list on the right side of the browser after logging in. Click the blue pencil icon to review the report. If the Action Items list does not automatically appear, it can be accessed by clicking on the bell icon at the top right of the screen.

Once in the plan/report, you will notice that none of the fields are editable except for your checklist section at the bottom of the report.

#### **Approving & Rejecting Assessment Reports**

All information in the plan/report is viewable by the Office Reviewer. Read through the plan/report, paying particular attention to each section as you go. If you feel revisions are necessary, provide specific feedback in the appropriate text box and/or at the bottom of the report, click "Reject Form" and then click "I'm Finished, Submit." This action will send the report back to the Program

Coordinator. You may also want to notify the Program Coordinator via email that the form was rejected.

Conversely, if the report is in good shape and no revisions are deemed necessary, the report can be approved and submitted. We suggest you still provide feedback because any form of feedback is helpful to coordinators. To approve a report, click "Approve Form" and then click "I'm Finished, Submit."

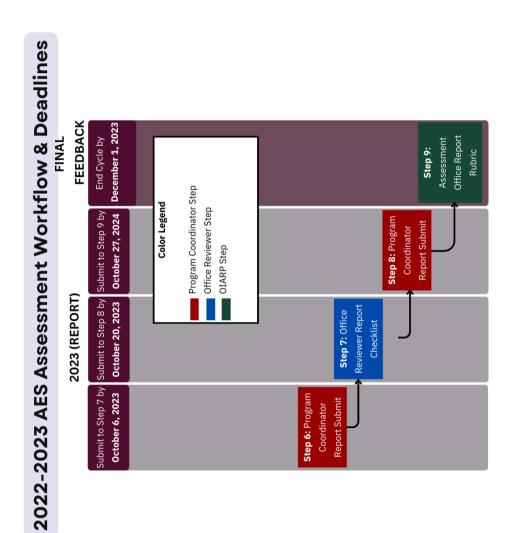
#### **OIARP Comments**

The last feedback given during each stage of the assessment cycle is provided by staff in the Office of Institutional Assessment, Research, and Planning (OIARP). In the planning and reporting stages, OIARP will 1) provide feedback on whether there is sufficient description provided 2) rate overall assessment plan and report, and 3) provide qualitative feedback if necessary.

When rating the division's/unit's overall assessment plan and report (as documented in AEFIS), OIARP staff uses the Assessment Plan Rubric and the Assessment Report Rubric.

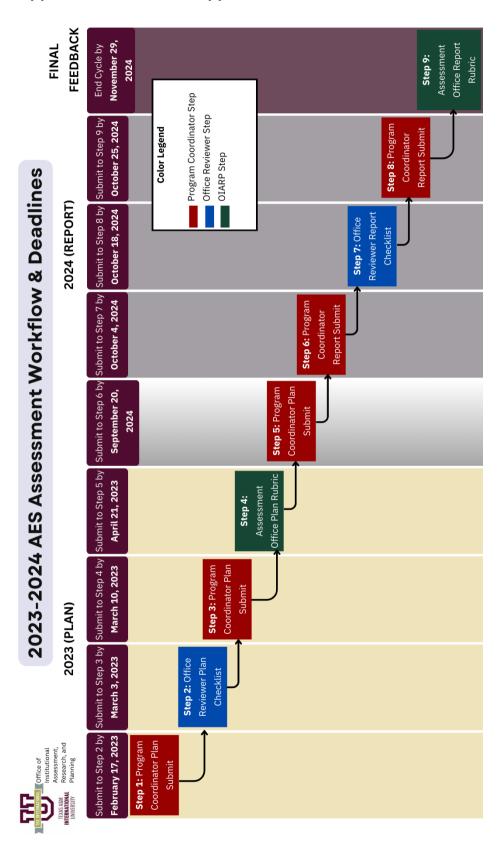
The levels of performance for both rubrics are Exemplary (3), Sufficient (2), Developing (1), Needs Attention (0). OIARP works with each AES division/unit to ensure that they achieve sufficient or exemplary in each assessment report element.

### Appendix: AY2022-23 AES Assessment Workflow





### **Appendix: AY2023-24 Support Unit Assessment Workflow**



### **Appendix: AY2024-25 Support Unit Assessment Workflow**

