FLORIDA STATE UNIVERSITY
INSTITUTIONAL PERFORMANCE AND ASSESSMENT

ACADEMIC AND STUDENT SUPPORT SERVICES ASSESSMENT HANDBOOK

Guidelines for Assessing Institutional Effectiveness

Last updated June 2024

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Table of Contents

I. WHAT IS INSTITUTIONAL EFFECTIVENESS? **4**

II. WHY DO WE EVALUATE INSTITUTIONAL EFFECTIVENESS? **4**

A. Internal Quality Control **4**

B. Accountability **4**

C. Institutional Accreditation **4**

III. HOW DO WE ASSESS INSTITUTIONAL EFFECTIVENESS? **5**

A. Organization **5**

B. Defined Goals **5**

C. Assessment Cycle **6**

IV. WHO GOVERNS INSTITUTIONAL EFFECTIVENESS? **7**

A. Institutional Level **7**

B. Department Level **7**

V. WHEN DO WE ASSESS INSTITUTIONAL EFFECTIVENESS? **8**

A. Defining the Reporting Year **8**

B. Calendar **8**

C. Recommended Timeline **9**

VI. CRAFTING YOUR MISSION STATEMENT **11**

A. Purpose of the Unit **11**

B. Unit's Stakeholders **11**

C. Primary Functions **11**

D. Connection to University's Mission, Core Values, or Vision **11**

VII. PROGRAM OUTCOMES **12**

A. Program Outcome Category **12**

B. Level of Control over Program Outcome **12**

C. Measurability **13**

D. Program Outcome Alignment **14**

E. Stating Program Outcomes (in the IE Portal) **17**

F. Retiring Program Outcomes **17**

G. Designing the Assessment Plan **17**

H. Changing the Assessment Plan **19**
I. Setting Numeric Targets **19**
J. Providing the Results Statement **21**
K. Analyzing Results **22**
L. Formulating Improvement Action(s) **25**
Appendix A: IE Assessment Report Components Example **27**
Appendix B: 2024 IE Assessment Calendar **29**
Appendix C: Frequently Requested IE Report Changes **30**

I. WHAT IS INSTITUTIONAL EFFECTIVENESS?

Institutional Effectiveness (IE) is a cyclical planning, implementation and assessment process that allows us to evaluate whether our practices are meeting our goals. The process reinforces academic and student support services' quality and effectiveness through a systematic review of performance against unit-defined goals.

It is important to understand that we already, regularly and mostly informally, evaluate and enhance how well our departments and offices provide direct and indirect support to students and faculty. Structured, formal assessment allows us to be more organized and intentional in the valuable work we do and ensuring that assumptions of performance are supported by evidence.

II. WHY DO WE EVALUATE INSTITUTIONAL EFFECTIVENESS?

A. Internal Quality Control

IE assessment is "a self-study process that assesses the institution's or program's quality and success in meeting its mission and objectives, highlights opportunities for improvement, and includes a plan for making those improvements" (DOE Accreditation Handbook, page 17). Assessment helps us know, for a fact, that our student support services help students persist and learn throughout their academic programs, develop as individuals, and graduate prepared for success. Assessment also informs us of where we are already excelling and where we need to focus next.

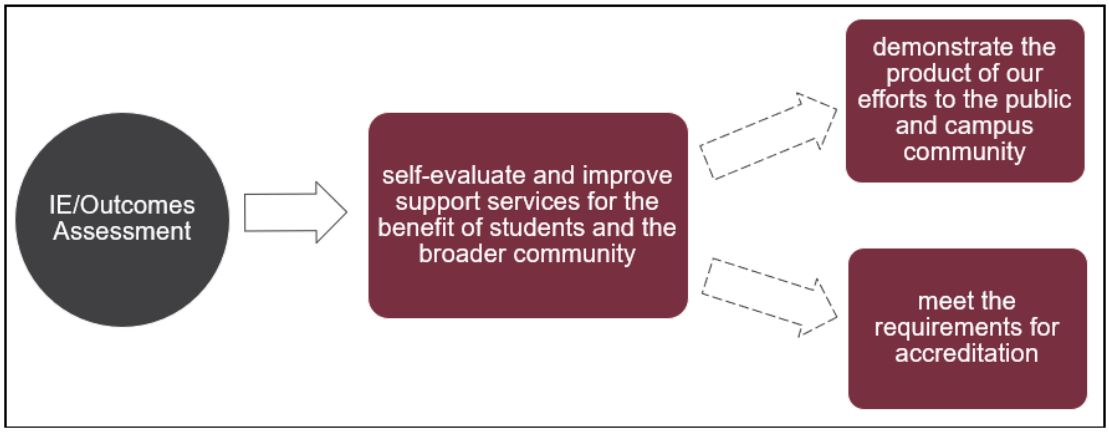
B. Accountability

As a by-product and a consequence of our assessment and quality enhancement work, we also meet important expectations that various state, regional and national organizations have for FSU as an institution of higher learning. Over the last few decades, accountability for public funds has increased and expectations became more focused on outcomes. In the state of Florida, the Board of Governors determines funding based on how well each public university meets specific student success benchmarks. Students, their families, donors, funding agencies and others are also interested in seeing evidence of institutional excellence. IE assessment strengthens our position in demonstrating the products of our efforts to the public and campus community.

C. Institutional Accreditation

Furthermore, by engaging in the systematic, explicit, and documented assessment of IE, the university meets several accreditation requirements. In the United States, institutional accrediting organizations are charged with the oversight of universities' quality and effectiveness. Federal funds, such as student financial aid, are tied to accreditation. The Southern Association of

Colleges and Schools Commission on Colleges (SACSCOC) is the current institutional accreditor for FSU. SACSCOC's accreditation standards require evidence that the university engages in genuine, systematic, and ongoing reflective evaluation practices and uses the results of these assessments to enhance instructional and student support services. FSU's accreditation was reaffirmed following its most recent decennial review in 2024.



"Student outcomes – both within the classroom and outside of the classroom – are the heart of the higher education experience. Effective institutions focus on the design and improvement of educational experiences to enhance student learning and support appropriate student outcomes for its educational programs and related academic and student services that support student success. To meet the goals of educational programs, an institution is always asking itself whether it has met those goals and how it can become even better." (pp. 67-68 in SACSCOC Resource Manual).

III. HOW DO WE ASSESS INSTITUTIONAL EFFECTIVENESS?

A. Organization

IE is typically assessed at the level of individual academic and student support services (A&SSS) units, which are defined as the basic units of organizational hierarchy, usually with a director as the head of the unit/office. For example, the FSU Career Center and the Office of Faculty Development and Advancement are considered to be individual A&SSS units for IE assessment purposes. A full list of the A&SSS units can be viewed in the IE Assessment Status Report.

B. Defined Goals

All university units define and set annual performance goals that are measured and evaluated each year. These goals are referred to as Program Outcomes (POs). Each A&SSS unit should formulate and actively advance at least two POs in any given year.

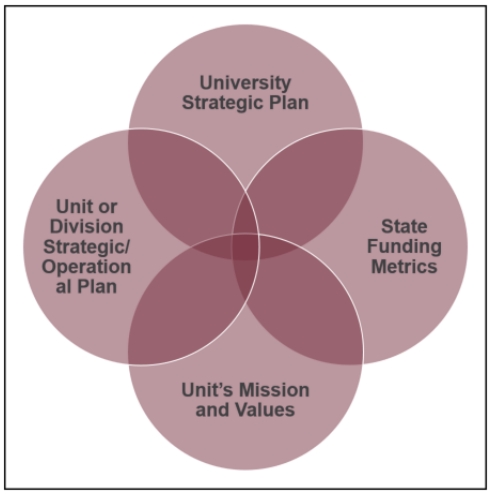
POs must directly or indirectly:

1. align with 1-3 Initiatives of the FSU Strategic Plan;

2. support state funding metrics;

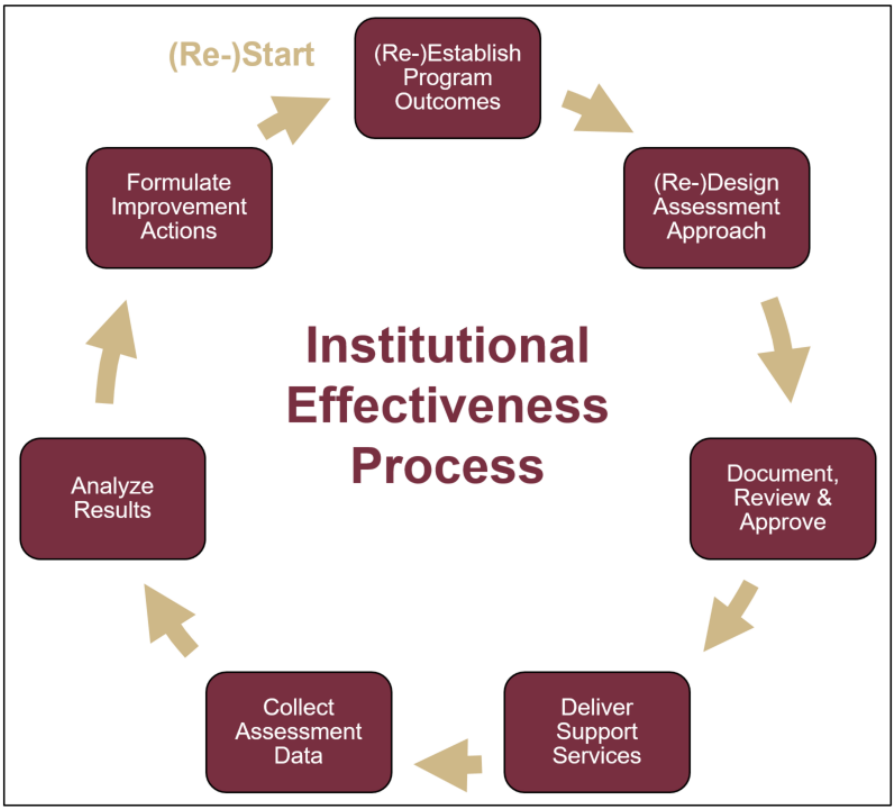
3. support strategic/operational plans of the unit or its division (for example, the Division of Student Affairs Strategic Plan); and/or

4. support the unit's mission, vision, and values.



C. Assessment Cycle

The results of the assessed outcomes are compared to the documented expectations, with any data patterns and trends and other influencing factors identified in an analysis. This analysis is used to determine where the program's processes or procedures may be improved. The changes are implemented in the next year, and the cycle begins anew.



IV. WHO GOVERNS INSTITUTIONAL EFFECTIVENESS?

A. Institutional Level

The Office of the Provost and Executive Vice President for Academic Affairs is responsible for the overall coordination of the university IE assessment processes and for the final review and approval of all assessment reports. Within The Office of the Provost, the Office of Institutional Performance and Assessment (IPA) provides related support to all reporting units by:

1. Communicating timelines for the development of assessment plans and reporting of results,

2. Offering group and one-on-one sessions in outcomes assessment, reporting, analysis, and improvement,

3. Offering training and technical support for using FSU's IE Portal to document annual assessment reports,

4. Ensuring unit-level participation in the reporting process; and

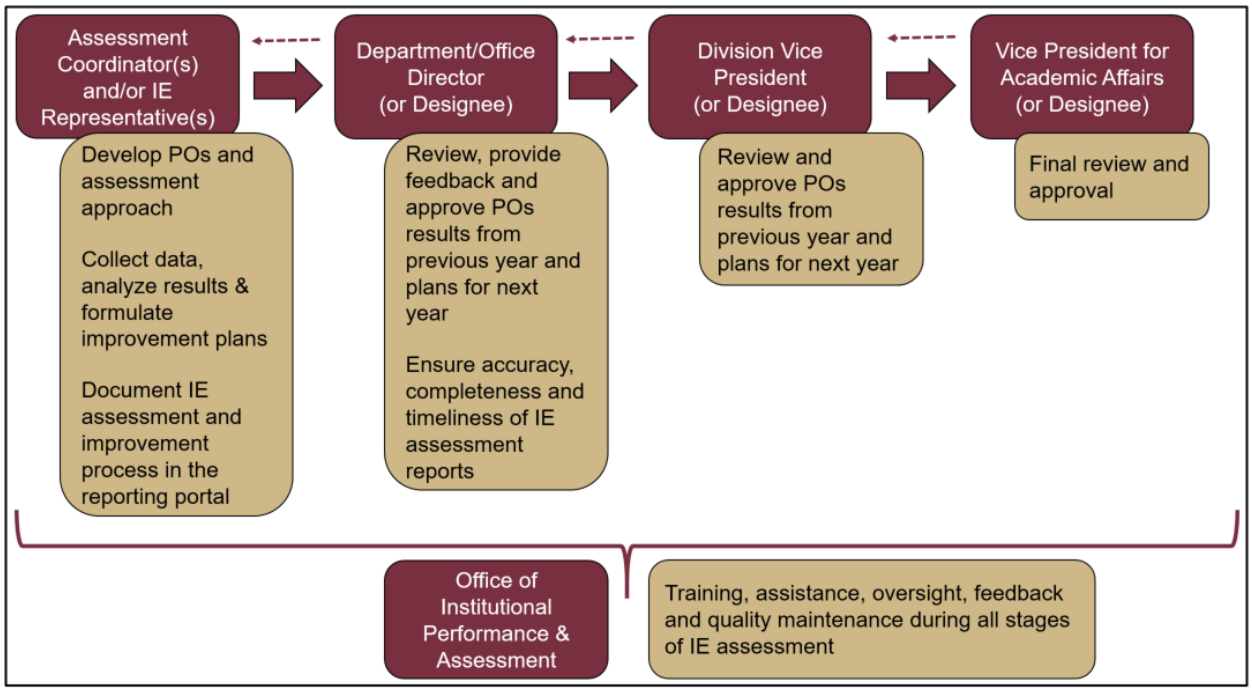
5. Providing specific quality assurance feedback to units following annual report entry and reviewing the revisions.

B. Department Level

At the level of individual units, the IE assessment process is a shared responsibility between the division's senior leadership, department heads/directors, unit assessment coordinators, IE representatives, and staff members. As such, they are all involved in an annual workflow that assures that defined outcomes are appropriately designed, measured, reported, analyzed, and improved.

Typically, each department/office has one **assessment coordinator** who leads and manages the assessment process and implementation of improvements. This individual can also function as the unit's **IE representative**, who is responsible for documenting the unit's IE assessment in the university IE portal housed in the Nuventive platform at iep.fsu.edu.

Each unit creates an assessment governance structure most suitable to its size and functions. In units with few employees, the head/director of the department can assume all three roles: function as the unit's assessment coordinator, IE representative and the **unit's head/director** who approves final IE assessment report. Regardless of the unit's size, it is expected that all employees of the unit participate in the outcomes assessment process.



V. WHEN DO WE ASSESS INSTITUTIONAL EFFECTIVENESS?

A. Defining the Reporting Year

While the process of program improvement is always continuous and ongoing, we only formally evaluate attainment of POs once a year, at the end of each unit's annual assessment cycle. Each unit determines the best start and end dates for their IE process. Generally, most departments/offices that provide academic and student support services operate on an academic year cycle. Common academic year cycle timeframes are: 1) Fall and Spring semesters, 2) Summer, Fall, Spring semesters, 3) Summer B, Fall, Spring, Summer A semesters.

B. Calendar

The timeline for submission of the prior year's results and the development and documentation of the next year's plans is similar each year. IPA provides a calendar for completing the components of the assessment process in a way that allows the reporting year's analysis of results inform the improvement actions to be implemented in the remainder of the current academic year.

For example, results for the 2023-2024 academic year (ending in May 2024) will be collected by mid-July 2024. The analysis of these results will be used to determine what changes should be made in the 2024-2025 academic year (beginning in August 2024 or earlier).

C. Recommended Timeline

Completing outcomes assessment components in the recommended order and by the recommended due dates best positions the university to engage in meaningful evaluation and enhancement of academic and student support services. Importantly, all campus units are allowed and encouraged to complete their assessment and reporting before the specified deadlines. IPA recommends the following timeline and step order:

1. *Collect Data and Study Results*

By the second Friday in July, every unit should collect information/data from the previous academic year and assess the levels at which the outcomes were achieved. Results should be analyzed and discussed with appropriate parties within and outside the unit. Based on the analysis of results, every unit should develop a set of improvements that will be implemented to enhance operations or services in the new year.

2. *Formulate Plans*

By the third Friday in July, every unit should decide which current POs will be continued into the next year and which (if any) current POs will be sunset. In most cases, current outcomes are retained to be pursued in the new assessment cycle.

If new outcomes are selected, their assessment methodology should be designed, and their numeric targets should be chosen. All new POs must be aligned with 1-3 Initiatives of the FSU Strategic Plan using corresponding functionality in the university IE Portal.

In some cases, the outcome itself may be retained, but its assessment approach may be changed because the unit determines that it is lacking in some aspect and should be replaced with a better assessment plan. The IE Portal allows for sunsetting an outdated assessment plan and entering a new one for the same PO.

3. *Document Last Year's Results and Next Year's Plans*

By the fourth Friday in July, all units should report previous year's results, their analysis, and improvement actions in the IE portal at iep.fsu.edu. Respective POs should be 'continued' into the next year with continued or revised assessment plans and numeric targets and/or new POs with assessment processes and numeric targets should be added. The unit may use the reporting templates to expedite the documentation process internally, however, the final report must be entered in the IE Portal.

4. ***Provide Feedback***

   By the second Friday in August, IPA staff will review the submitted reports. Each unit will either receive a written confirmation that their report meets the standards or a written request for revisions. Assessment reports submitted after the end of July may receive delayed feedback.

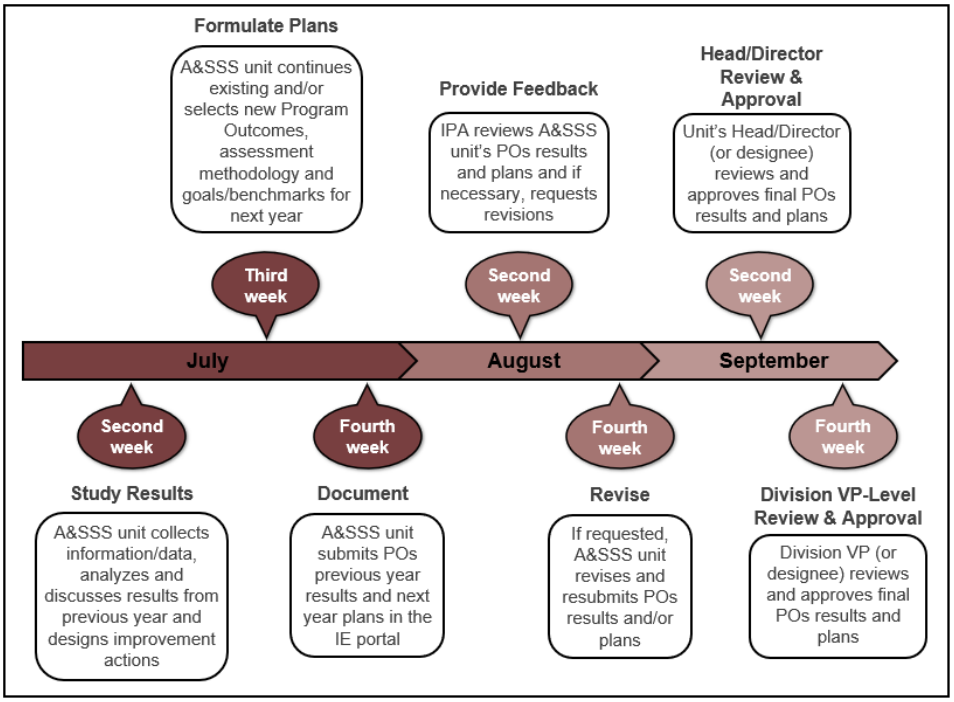
5. ***Make Necessary Revisions***

   By the fourth Friday in August, units asked to strengthen their assessment report should revise their submission and enter the revisions in the portal. Shortly after, the unit will receive a written confirmation if their revised report meets quality standards. It is rare to receive a second request for revisions.

6. ***Director-Level and Division VP-Level Review and Approval***

   By the second Friday in September, the unit's head/director (or designee) should review the final assessment report and certify in writing that it accurately represents the results and plans of the department/office. Early and continual involvement of the unit's head/director ensures that there will be no revisions requested at this stage of the reporting cycle.

   By the fourth Friday in September, the unit's assessment report should be reviewed and approved by the division VP or designated representative(s). Once achieved, final approval should be communicated in writing to the Provost-level representative and/or Office of IPA.



VI. CRAFTING YOUR MISSION STATEMENT

Every academic and student support services unit should have an active and current mission statement documented in the IE Portal. Having a clear understanding of the unit's mission helps develop strong and relevant Program Outcomes. A well-defined mission statement includes the following components:

A. Purpose of the Unit

The purpose is the reason(s) why you perform your major activities or operations; examples include helping students graduate on time, assisting faculty with leadership skill development, or supporting transfer students at FSU.

B. Unit's Stakeholders

These are the groups of individuals who participate in your programming and/or benefit from the provided services. For example, graduate students, teaching faculty, students in need of health services, internal or external oversight groups, or taxpayers of the state of Florida.

C. Primary Functions

Your unit's most important functions, operations, services, and/or offerings that directly or indirectly support student success should be included in the mission statement. For instance, those functions may include offering course design seminars to instructional faculty, coaching students from under-resourced backgrounds, or providing data-based decision support to university leadership.

D. Connection to University's Mission, Core Values, or Vision

Your unit's mission may be focused on leadership skill development and community engagement, which supports part of FSU's mission to "instill strength, skill and character". Another example is a university unit striving to "support the faculty in the important and difficult work of crafting transformative learning experiences", which directly aligns with FSU's dedication to excellence in teaching. Below is an example of the Office of IPA's mission statement, with the four components of a well-defined mission statement underlined.

(unit's stakeholders)
We are dedicated to supporting the University community in our continuous improvement efforts.
(unit's purpose)
Our goal is to facilitate systematic, comprehensive, and data-based planning and evaluation processes
(primary function)
focused on enhancing institutional quality and effectiveness.
(connection to University's mission)

VII. PROGRAM OUTCOMES

A. Program Outcome Category

POs of A&SSS units should focus our efforts on improving direct support to faculty and students, enhancing indirect support for student learning, or serving a specific co-curricular mission that supports the college experience. Most outcomes are chosen because of their assumed or proven positive impact on faculty and student success. Chosen POs should be a result of a unit's analysis of its program's strengths and weaknesses and should reflect its commitment to improving the most important services and outcomes.

Dependent on the purpose and primary functions of the unit, outcomes selected by an individual department/office/center typically fall into three categories:

1. Outcomes focused on the **efficiency, breadth and/or quality** of unit's support services. For example, FSU Office of Financial Aid may have a PO to optimize processing time in order to disburse financial aid at least two weeks before classes begin. The Office of Faculty Development and Advancement may have a PO focused on strengthening the mentoring of junior faculty by providing additional programming and training for mentors.

2. Outcomes focused on developing certain **knowledge, skills, behaviors, values, and attitudes** among students, faculty, and/or staff. The FSU Academic Center for Excellence may have a PO aimed at improving students' study skills and habits. FSU Health Services may have a PO aimed at developing Peer Health Educators' skills under the supervision of professional staff. FSU Office for Human Subjects Protection may choose a PO that targets adherence to ethical principles and laws.

3. Outcomes directly focused on a **specific aspect of the university's Mission and/or Strategic Plan**. The FSU Innovation Hub may have a PO that captures their unit's efforts to promote innovation by supporting the creative needs of the campus community. FSU Fraternity and Sorority Life may have a PO focused on instilling character through community service and philanthropic endeavors that benefit local families.

B. Level of Control over Program Outcome

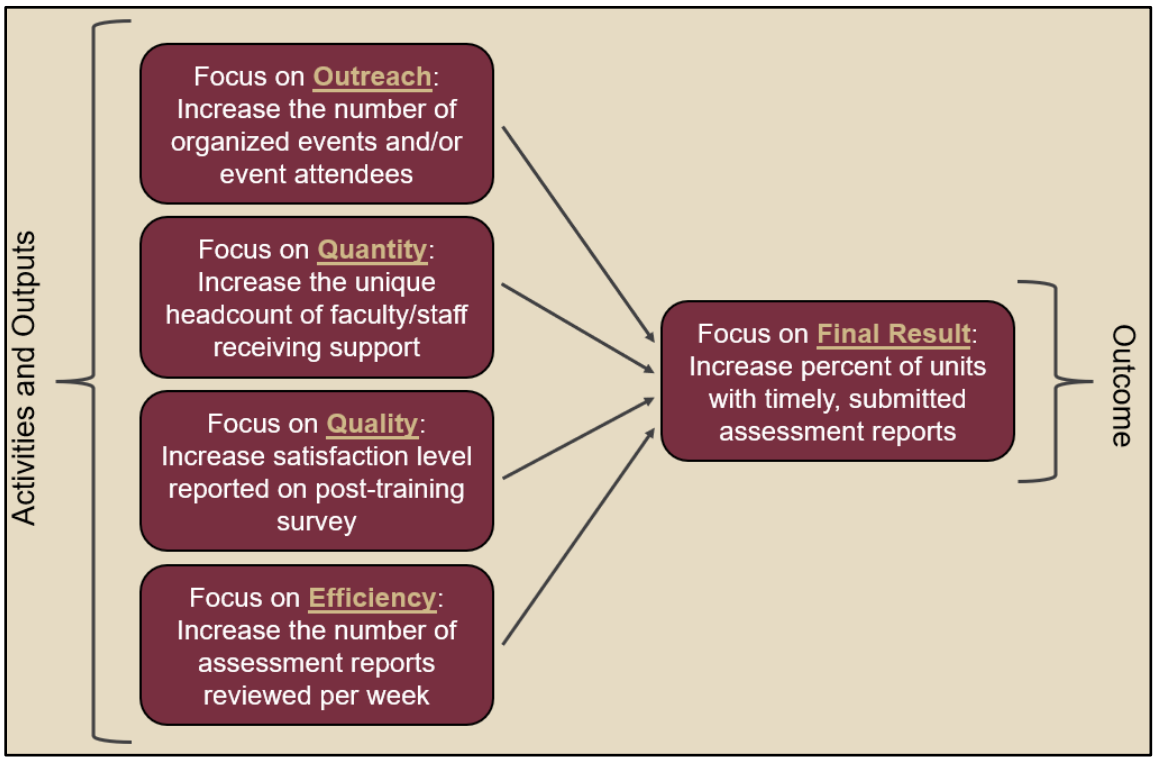
Typically, academic and student support services units can more directly influence activities and strategies aimed at achieving a certain outcome, such as:

- increasing the percentage of students attending career advising sessions to encourage post-graduation success,

- increasing the use of e-forms to increase international students' application rate,

- growing the number of researchers and departments using the Research Computing Center to boost the university's research profile,

- diversifying outreach techniques to students beginning applications for disability accommodations to support their persistence and retention.



POs that measure activities and outputs are easier to affect; POs that measure final results of (multiple) activities are often not fully within the unit's control. The Office of IPA recommends assessing new programs and services using measures of activities and outputs; when the program or service matures, the unit should focus on measuring the final desired outcomes and the effectiveness of their activities.

When achievement of an outcome is heavily reliant on new or increased funding, the unit should request it through the proper channels and attach a copy of the budget request in the IE Portal.

C. Measurability

Units are advised not to select POs that resemble a 'to-do' list or a plan to accomplish a task or a series of tasks, especially if they can only be completed if

new funding is requested and received (e.g., hiring an employee, renovating an office suite, or buying new computers). In rare cases when a unit has a strong preference for focusing on short-term (one-year) or multi-year operational processes or tasks as their outcome, the assessment plan for such a PO must include a detailed timetable with descriptions of specific steps and deliverables and their due dates. In this case, the targets for the outcome will be meeting the schedule for all deliverables outlined in the plan.

When POs are being developed, the ability of the unit to use existing data or feasibly collected new data as evidence of effectiveness is an essential consideration. Whenever possible, the units should use centrally maintained data sources (e.g. Campus Solutions, Slate, or Oracle Business Intelligence databases, Institutional Research dashboards, reports provided to supervisory or accrediting organizations) to ensure consistency and efficiency in reporting efforts. However, in many cases, units develop internal surveys (to track customer satisfaction, for example) or use internal data documentation methods to assess their outcomes.

D. Program Outcome Alignment

1. *Alignment with the Strategic Plan*

All POs should be clearly connected to the institutional goals as they are outlined in the 2023-2027 FSU Strategic Plan. These are:

Goal #	Objectives/Initiatives
I	**RESEARCH AND ACADEMIC EXCELLENCE** **Expanding Research and Academic Excellence**
I.1	Increase the recruitment, development, and retention of high-impact faculty
I.2	Catalyze Translational Scholarship, Arts, and Research
I.3	Expand and Promote the Arts, Performance, Humanities, and Creative Activities
I.4	Build upon and Create Graduate Opportunities
II	**STUDENT SUCCESS** **Ensuring Student Success on Campus and Beyond**
II.1	Enhance Curricular Practices for Engaged Learning and Robust Outcomes
II.2	Create an Environment That Encourages Healthy Behaviors and Wellness
II.3	Expand and Strengthen Academic Advising and Student Support Services
II.4	Bolster Students' Co-Curricular and Career Development Opportunities
III	**ENTREPRENEURIAL SPIRIT** **Nurturing and Inspiring FSU's Entrepreneurial Spirit**
III.1	Cultivate a Creative, Innovative, and Entrepreneurial Ecosystem

III.2	Commercialize Creative, Innovative, and Entrepreneurial Endeavors
IV	**INCLUSIVE EXCELLENCE** **Committing to Inclusive Excellence and Civil Discourse**
IV.1	Create Rich Experiences and Opportunities for All Populations
IV.2	Increase International Engagement and Cultural Competencies for Students, Faculty and Staff
V	**INSTITUTIONAL BRAND EXCELLENCE** **Enhancing Our Brand to Reflect Institutional Excellence**
V.1	Focus the FSU Brand to Bolster Our Reputation
V.2	Leverage Diversified Financial Resources to Invest in Institutional Excellence
V.3	Become a National Leader in Operational Excellence
	STRATEGIC OPPORTUNITIES
	Positioning ourselves for membership in the Association of American Universities (AAU)
	FSU Health will improve health outcomes and change lives

POs should be aligned with 1-3 Strategic Plan Initiatives. This process is known as 'institutional back mapping'; it allows for a visual representation of the link between the goals of individual university units and strategic priorities of the institution (pp. 62-66 in Nichols & Nichols, 2005). This alignment must be documented in the IE Portal (for instructions, see pages 12-13 in the IE Portal User Guide). Below are several examples of different units' POs' alignment with the Initiatives of the FSU Strategic Plan.

	I.1	I.4	II.1	II.2	II.3	II.4	III.2	IV.2	V.1	V.2	V.3
PO – Departmental participation in InternFSU program will increase			Y			Y					
PO – Improve tenured and tenure-track faculty retention	Y										Y
PO – Establish and maintain strong and positive social media presence									Y		
PO – More faculty will engage in cross-institutional academic leadership programs	Y										
PO – Promote student course load adequate for timely graduation		Y	Y								
PO – Attract a more diverse pool of college applicants											
PO – Expand departmental participation in the Proactive Referral and Engagement program				Y	Y						
PO – Promote student participation in FSU's Study Abroad program								Y			

PO – Increase number of commercialized FSU technologies							Y				
PO – Develop and offer sustainability-related co-curricular opportunities											Y
PO – Foster interdisciplinary contract and grant proposal writing										Y	Y
PO – Implement the Classroom Space Optimization recommendations											Y

2. ***Alignment with Unit-Controlled Budget Request and Allocation***

   POs should be aligned with unit-level budgetary decisions and resource allocation. Outcomes and their level of achievement may even by directly referenced in the annual unit- and division-level budget requests; however, the university's IE process is not the primary mechanism for requesting funding.

3. ***Alignment with the University's Mission, Core Values, or Vision***

   Finally, all planning, assessment, and implementation activities should relate to, and advance, the University's mission, core values, or vision. The system of relationships between these elements is illustrated in the figure below (adapted from Hoefer, 2019).

E. Stating Program Outcomes (in the IE Portal)

Below and in subsequent sections, all assessment report components (as they are requested in the IE portal) are illustrated using an example PO from the Academic Center for Excellence.

Provide a succinct name for the PO:

Outcome Name: PO - Academic advising services.

Identify the outcome that the unit will strive to achieve:

Outcome Statement: The quality of academic advising sessions provided by Advising First advisors to students will be high.

F. Retiring Program Outcomes

It is unusual to have a PO pursued for only one year; the typical 'lifespan' of an outcome is 3-6 years. A longer implementation period allows for more thoughtful planning, consistent, multi-year assessment, and data-based, sustained, enhancement efforts.

Reasons for 'retiring' a PO may include:

1. the outcome that the unit wanted to attain has been achieved and that achievement appears to be sustainable,

2. the outcome is no longer a priority for the unit,

3. the outcome is no longer under the purview of the unit,

4. the outcome needs significant modification.

A&SSS units may contact the Office of IPA to consult on "sunsetting" existing POs and/or selecting new POs. When assistance with outcome selection is necessary, units are advised to contact IPA at least one month prior to the reporting due date.

G. Designing the Assessment Plan

Assessment methodology for a PO should be focused on accurately measuring the extent to which the desired results were achieved. It is important to evaluate outcomes with appropriate assessment instruments, within the context of a unit's functions, and in a methodologically consistent fashion to allow for year-over-year assessment.

1. The following questions may be useful when designing the assessment plan:

    - Why is this PO important? Briefly describe the service, program, activity, etc. that is the focus of your unit's PO. How does it benefit FSU students, faculty, staff, or others?

    - What data/information will be used in assessment? Regardless of whether you already collect this data or information for another purpose or if you plan to develop a new data collection tool (such as a survey, a third-party analytics report, or an attendance tracker), describe the process of collecting and aggregating data/information for reporting.

    - Which groups of students, faculty, and/or staff will be included or excluded? Will you collect information about various characteristics of your population of interest (e.g., home department/college, race/ethnicity, job codes and titles, year in college)?

    - What will be counted, tallied, multiplied, divided, etc.? What is the best method of summarizing the data: unique headcount, duplicated totals, average satisfaction rate, percentages, ratios, etc.? What breakout (disaggregation by various characteristics) will be necessary to provide a comprehensive picture of important trends and patterns?

    - What is the assessment timeframe? Will you use academic, fiscal, calendar, or some other type of year? What is the exact start and end date for the tracked activity on which you will be reporting?

    - Who in your unit will be responsible for pulling the data/information every year for assessment and reporting? Will aggregated results be shared and discussed with unit staff and leadership? When and where (e.g., at a staff retreat every August)?

2. Below is an example assessment plan description as it may be documented in the IE Portal:

    Description of the Assessment Process: Quality and quantity of academic advising is one of the strongest predictors of student second- and third-year retention and timely graduation. The quality of provided advising services by the Advising First academic advisors will be measured via a post-advising session survey, the link to which will be sent to students through email. Student responses will be aggregated per academic year defined as Fall and Spring terms. The survey was created internally several years ago and is being used to measure various aspects of advising meetings. It contains multiple questions. The question that will be used to measure this PO asks students to rate on a 4-point Likert scale the following statement: "How satisfied were you with this particular advising session?"

H. Changing the Assessment Plan

Assuming the overarching outcome remains a priority of the unit, the questions below may be considered in determining whether the assessment plan for an existing outcome requires revision. Instructions for 'inactivating' an old assessment plan and adding a new one are in the IE Portal User Guide.

- Does the data collection process yield information that is needed and that is clear, consistent, and accurate? If not, how can the assessment process be improved (e.g., changing a survey question wording to make it clearer to respondents, expanding the dataset to include more columns with specific calculations, using deduplicated attendance counts)?

- Is the collected data sufficiently detailed? If not, how might the data collection process to be modified (e.g., by adding biodemographics questions, by switching from anonymous to identifiable program participation, by adding questions that allow for open-ended responses)?

- Is the data collection system efficient in terms of cost and required effort? If not, is there a better way to collect the data (e.g., reusing data that is already available from another source, combining two separate surveys into one survey with duplicate questions removed)?

- Does the frequency and timing of data collection meet the unit's needs? If not, can it be reasonably adjusted (e.g., administering the survey at the end of the training rather than in a follow-up email post-training, collecting data quarterly rather than annually, requiring that all attendance rosters be submitted within one week after the event)?

I. Setting Numeric Targets

The preferred approach to ascertaining whether a PO is achieved is setting multi-year quantitative targets using data that can be expressed using numbers. A unit can choose to set a goal for a PO, a benchmark, or both.

1. *Goals*

For the purposes of IE assessment, a **goal** denotes a desired numeric change between two values. For example, increasing program participation by 50 students every year, or improving reported satisfaction rate by 5% annually, or boosting students' study skills by 5 points from pre- to post-test.

It is important to distinguish between a "percent" increase or a "percentage point" increase. For example, a 5 percent increase means growing the number of students who attended an event from 20 to 21. Alternatively, a 5 percentage point increase means growing the headcount of attendees from

70% to 75% of the total invitees. (Here is more information about the difference between a percent and a percentage point.)

2. ***Benchmarks***

   A **benchmark** denotes a minimum or a maximum numeric threshold that the unit will strive to meet. For example, having at least 90% of invitees attend an event, or having at least 98% of service requests being completed within two weeks, or fundraising at least $1M by the end of the annual campaign.

3. ***Timetables***

   Qualitative (non-numeric, descriptive, text) information may also be used to measure POs, but this approach to setting targets is less precise and is open to subjectivity. As mentioned above in sub-section C Measurability, in rare cases, when a unit has strong preference to focus on operational processes and tasks, the assessment plan for such PO must include a detailed **timetable** with description of specific steps and deliverables, and their due dates. Microsoft Planner is available to all FSU employees. It may be used to create electronic project management plans, including timelines. In addition, several stand-alone customizable project timeline templates are available to download here.

4. ***Standards for Comparison***

   When units decide how high they should set the numeric target, they may study relevant industry standards, performance of similar units at peer institutions, and/or review the unit's own past levels of performance if this data exists. The numeric target should be set at a level that is ambitious, yet achievable with some effort. If none of the standards referenced are accessible, the first year of a new PO may be used to collect data and determine the baseline.

   Importantly, "[w]ithin institutional effectiveness, departments (academic and nonacademic) are free to stretch themselves to the limit and to attempt innovative approaches to provide services without fear of failure. Within institutional effectiveness, departments are not held accountable for failure or success, only for having in place a process for stating outcomes, measuring accomplishments, and using the results to improve programming." (Nichols, 1995).

5. ***Documentation***

   Below is an example of a specific, measurable numeric target that defines successful achievement of the outcome, as documented in the IE Portal:

Numeric Target: According to the most recent available data (2016-2017 year), 88.1% of students who were surveyed and responded indicated that they were satisfied or very satisfied with their academic advising session. Over the next five years (with 2021-2022 being the last), we want to increase this number to at least 93% of respondents, at the rate of 1 percentage point increase annually.

Units can upload any documents relevant to the assessment plan and/or the numeric target (e.g., copies of survey questions, unit's current or historical annual reports, program flyers, data tables and graphs) to the IE Portal. Instructions for uploading files are in the IE Portal User Guide.

6. ***Changing or Appending the Numeric Target***

Over the years, the numeric target(s) for the same PO may evolve.

Sometimes units decide to decrease or increase their PO goal or benchmark. In this case, historical numeric targets must be preserved in the IE Portal, and any new information must be appended onto the existing language in the 'Numeric Target' field, with the timeframe to which the new target applies specified (e.g., "Beginning in the 2021-2022 fiscal year, the benchmark will be increased from 300 training attendees per year to at least 350 attendees.").

If in addition to a change in the numeric target, an existing outcome also needs a new or significantly modified assessment plan, the unit should preserve all historical assessment plans and numeric targets and enter all new information under a separate, new assessment plan. Instructions for 'inactivating' an old assessment plan and numeric target and adding a new assessment plan and numeric target are in the IE Portal User Guide.

J. Providing the Results Statement

During the academic/fiscal year, A&SSS units continue to operate programs and provide services to students, faculty, staff, and community members. At the end of each assessment cycle, units aggregate necessary information/data and report results according to the assessment plan documented at the beginning of the year. A proper results statement is usually brief and mostly quantitative (i.e., includes counts, percentages, totals, as appropriate.)

In cases when data/information necessary for reporting of results is missing or is incomplete, units should provide the results statement using the best available data/information. In addition, the units should explain the reasons for missing data/information and describe steps that will be taken in the new assessment cycle to ensure the issue does not reoccur.

Below is an example of presenting information regarding the levels at which the PO target was achieved:

Results Statement: In 2018-2019 academic year (Fall 2018 and Spring 2019), 1,014 students responded to the survey. Out of them, 724 self-reported that they were 'very satisfied' and 184 self-reported that they were 'satisfied' with their academic advising session. In summary, 89.5% of students who were surveyed and responded indicated that they were satisfied. We achieved the numeric target to increase the satisfaction level by one percentage point compared to last year (88.1%).

K. Analyzing Results

The culmination of the assessment process is the analysis of why the outcome was achieved at the level that it was. Units should identify any noticeable data trends or patterns and determine the reason(s) why the PO was attained at this level. Most reasons will include specific factors, decisions, actions, and events that negatively and/or positively influenced the results.

1. *"Closing the Loop"*

Units need to 'close the loop' on the prior year'(s') improvement action(s) by explicitly stating whether those changes were implemented as planned and whether they had the intended positive effect. This is a significant part of the analysis that is becoming increasingly important to institutional accreditors.

2. *A Strong Analysis of Results*

- Compares most recent PO results to past year:
  - Did the numbers go up, go down, by how much, or did they stay the same? Why?

- Identifies any important data trends (across time) or patterns (within single year):
  - Have the numbers been consistently trending down or up for a while? Why?
  - Did some groups of students/faculty/staff behave differently than other groups? For example, did faculty from one college participate in outreach events at higher rates than faculty from another college? Why do you think this happened?
  - If survey data is reported, what is the breakdown of results by the response type? For example, what was the percent of "Strongly Agree" responses vs. "Agree" vs. "Disagree" vs. "Strongly Disagree"? Why do you think people responded in this pattern?
  - Did specific groups' values change over time? For example, did utilization of services by transfer students decrease in the past few

years while utilization of the same services by student athletes increased? Why do you think this happened?

- Identifies specific and significant factors that (may have) negatively and/or positively influenced the results:
  - Did any decisions, actions, or events directly affect the numbers? For example, did any legislative changes lead to cessation or significant modification of the program? Did hiring two new staff members allow for program expansion? Was a project placed on hiatus because an interim director assigned priority to other work?

- If applicable, addresses the representativeness of results:
  - If survey data is reported, provide percent and/or number of responded out of total number who were asked/received survey. If the response rate is below 20%, why do you think this happened?
  - If partial data is reported, explicitly state what data is missing and explain why. For example, a third-party vendor only provided software utilization rates for the first and second quarters due to major technical issues in the second half of the fiscal year.
  - Identifies any potential bias in results. For example, only those with extreme opinions responded to a survey, which affected representativeness and generalizability of results.

- If applicable, includes an explanation of why the PO assessment process and/or instrument needs to be changed:
  - If a survey is used, are any changes needed to specific questions, response options, number of items, administration protocol, data collection and cleaning process, etc.?
  - Will any changes be made to the data source, like switching from locally collected and generated reports to reports from a consultant or new technology provider?

- Includes takeaways from internal discussions regarding the data:
  - Have the results been discussed internally (at a staff meeting/retreat, with select individuals inside or outside your department, with leadership)? What is their opinion about the results? Did they notice any data trends or patterns and identify possible causes?

- Highlights areas of success in addition to areas needing enhancements:
  - Explicitly state what is working well and why and give credit to individuals responsible for the outcome's success.
  - Explicitly state what is not working well and why but refrain from identifying individual individuals.

- Forms the link between the data and the new improvement action(s):
  - Does the analysis logically connect the data/results and any changes to improve the outcome?

3. ***Documentation***

An analysis of results section may have a similar structure but cannot contain verbatim copies of the narratives from past years. It is expected that specific elements of the analyses will vary year over year due to differences in influencing factors, data, leadership, depth and focus of the analysis, etc.

In the IE Portal, the file bank associated with each outcome allows users to upload any relevant supporting documents, such as data tables, charts and graphs, minutes/notes from meeting(s) where results were discussed. These kinds of records provide documented evidence of assessment and improvement efforts and should be included when available. Instructions for uploading supporting documentation are in the IE Portal User Guide. Below is an example of the results analysis section, as documented in the IE Portal:

Closing the Loop: We believe that the increase in student satisfaction was due to the enhancements to the training protocol in the Advising First program. Specifically, before the start of the 2018-2019 academic year, every continuing advisor participated in the refresher training and every new advisor participated in an enhanced training that included a new module explaining how best to address frequently occurring issues.

Analysis of Results: We believe the student satisfaction goal was achieved due to better sharing of student feedback with advisors. For the past 3-4 years, not all advisors received full student feedback from the surveys. This past year, we made a change and had all advisors receive copies of student survey responses. Advisors were able to review the feedback and make changes that aligned with the needs of the students. Advisors who received several 'unsatisfied' or 'very unsatisfied' ratings had a meeting with Advising First leadership to discuss student concerns. Depending on the feedback, advisors were instructed to attend general advisor training, had a meeting with Advising First leadership and their site supervisor, and/or discussed best practices when working with complex student situations.

In Fall 2018 and Spring 2019, Advising First hired several new advisors. Their satisfaction scores were lower than the satisfaction scores given by the students to more experienced advisors: 82.3% vs. 91.4%. In addition, we noticed another data trend – students who reported being 'unsatisfied' or 'very unsatisfied' with their advising session shared that their advisors needed more convenient drop-in hours and needed to be more knowledge about the requirements of their majors and academic programs.

L. Formulating Improvement Action(s)

The most important component of the annual assessment process is devising and implementing changes to enhance unit's services and operations based on the results and their analysis. Formulating sound improvement plans requires the participation of unit staff, of any relevant external partners and data providers, and of representatives/groups receiving unit's services. Whether PO targets have been met or not, it is the responsibility of the department/office leadership and assessment coordinators to determine a plan of action for the next year.

1. *When Targets Are Not Met*

When an outcome does not reach the desired numeric target, the unit should use the insights from the analysis to identify areas where changes are needed and develop a plan to implement them in the new year. These plans should be deliberate, detailed, and should describe specific, new and/or different changes, ranging from small-scale enhancements to significant modifications in a unit's operations. Improvement actions may also focus on adjusting the assessment plans and/or the numeric targets.

2. *When Targets Are Consistently Met*

In cases when the existing numeric target for the PO is being achieved over several years and the assessment process is considered reliable and consistent, IPA recommends:

- Increasing the numeric target to a more ambitious goal/benchmark,
- Modifying the assessment plan to focus on a different aspect of the same PO (e.g., focus on demonstrated application of skills following a training rather than number of trainees),
- Creating a new PO that would address other important aspects of the unit's work (e.g., retire' an outcome on increasing appointment availability and select a new outcome on better supporting graduate students),
- If these changes are not feasible, the units should consider how they expect to ensure that numeric targets continue to be met.

3. *A Strong Improvement Plan*

- Describes specific actions aimed at improving or sustaining performance that will be implemented in the next reporting year,

- Directly addresses any shortcomings identified in the analysis of data/results,

- Provides exact timelines for implementation and people/positions responsible for each part of the plan,

- Does not contain verbatim copies of improvement actions from past years,

- May include actions that are outside of unit's control (e.g., receiving approval for new recurring expense or a new position) and must include actions that are within unit's control (e.g., improved communication or outreach, closer monitoring of internal timelines),

- If applicable, states the intention to change the outcome's assessment plan, numeric target, or assessment instrument, along with the reasoning for the change. If the entire outcome is being 'sunset,' the reason for archiving the PO is provided, along with a brief description of the new outcome that will replace it.

4. ***Documentation***

Below is an example of the improvement actions as it might be documented in the IE Portal:

Improvement Action(s): To continue improving student satisfaction levels with their academic advising services, the Assistant Director of Advising First program will redesign the training for new advisors and the Director will work on identifying a better scheduling approach and on developing resources focused on most important advising topics.

We are attaching the draft of the training protocol designed by the Assistant Director for our first-year advisors. The document contains description of the new one-on-one peer mentoring program and outlines specific conversation topics to be covered during weekly meetings with supervisor. We anticipate that this enhancement will help our new advisors provide comparable level of advising as our more experienced advisors.

To help address students' minor dissatisfaction with drop-in hours and advisors' knowledge about the requirements of specific majors and academic programs, the Director is reviewing advisors' proposed schedules and making recommendations on how to best align them with the most popular times for drop-in appointments. The Director is also working on a more detailed guide for departments that have most complicated and/or recently changed requirements.

Appendix A:
IE Assessment Report Components
FSU Office of Undergraduate Studies Example

- **Mission Statement**: It is the mission of the Office of Undergraduate Studies to serve as a welcoming and supportive academic dean's office for all students who have not yet been formally admitted to their majors. By providing academic advising, program development and coordination, our Office strives to increase student retention and ensure that students are making timely progress toward the degree.

- **PO Name**: PO - Second Fall Reenrollment of First-Time-in-College (FTIC) Students.

- **PO Statement**: First fall-to-second fall reenrollment of full-time FTIC students will increase or will remain at a level comparable to the last cohort's reenrollment rate.

- **Description of the Assessment Process**: The fall cohort consists of full-time FTIC students from the fall semester and the preceding summer semester who continued into the following fall. The reenrolled count is the number of students from the original summer/fall cohort that were enrolled in the fall of the next year. Student reenrollment is obtained on the first day after the drop/add period every Fall term. Students who are enrolled in course(s) are considered to be reenrolled. This PO is tracked using an enrollment OBI query maintained by the IR Office.

  The reenrollment methodology is very similar to how fall-to-fall retention is calculated. The main difference is that the reenrollment rate is based on enrollment at the end of the first week of fall classes, whereas the retention rate is based on student enrollment in mid-October. Additional methodology information is provided at https://ir.fsu.edu/graduation_retention_secure.aspx and at https://ir.fsu.edu/indicators/students/ftic_retention_rates.aspx. The Fall-to-Fall retention is a metric that contributes to the Preeminent University funding model.

- **Numeric Target**: Beginning with the 2017 full-time FTIC cohort, every subsequent cohort's fall-to-fall reenrollment will be at least as high as the reenrollment rate of the preceding cohort. The baseline is the 2017 cohort rate of 92.7% (5,902 reenrolled students out of the original cohort of 6,365). The benchmark for the 2018 full-time FTIC cohort is at least 92.7% second fall reenrollment rate.

  [Added next year] As the actual reenrollment rate of the 2018 cohort was 92.9% (5,815 reenrolled students out of the original cohort of 6,259), the goal for the 2019 cohort reenrollment rate is 92.9% or higher.

- **2019-20 Results Statement**: The reenrollment rate of the 2019 cohort is 94.5%. Out of 7,056 full-time FTIC students from the Summer/Fall 2019 cohort, 6,670 were enrolled in at least one credit hour the day after the Fall 2020 drop/add period. The goal/benchmark to have an at least 92.9% reenrollment rate was achieved.

- **Analysis of Results**: For the fall 2019 FTIC cohort, we exceeded the PO goal, even with a record-breaking freshmen class size. The reenrollment rate is a reflection of expanding initiatives to engage students through increased academic and co-curricular offerings designed to ease students transition to the university and support their academic success skills.

  The Demand Analysis Numbers Group (DANG) collaborated with colleges to ensure that course availability for fall 2019 and spring 2020 was expanded so that ample seats were offered for the increased FTIC cohort who entered the University.

  The spring 2020 term was out of the ordinary as we moved to 100% remote/online instruction due to the COVID-19 pandemic. We increased student outreach to encourage future course enrollment during the spring term and enhanced our efforts to help students enroll prior to the start of the fall 2020 term. We also utilized the texting feature in the EAB Campus Connect platform to communicate with students who were not enrolled for fall and to offer them one-on-one assistance.

  It is possible that part of our success is related to the increased flexibility of course delivery in the summer and fall 2020 terms. With more online/remote offerings, students who may have transferred to an institution closer to home after their first year were able to stay home and continue their studies at FSU.

- **Improvement Actions**: Moving into the 2020-21 academic year, FSU will be focusing on continuing success in fall-to-fall student reenrollment through continued expansion of Engage 100 courses. These courses are designed to ease students transition to the university, help them build peer connections, and to provide them with academic success skills/resources. To best serve students studying remotely during the pandemic, the Division of Undergraduate Studies launched the Nole2Nole peer mentoring program available to all new FTIC students not already enrolled in an Engage 100 course to provide peer mentorship opportunities to all students in their first term. Additionally, Florida State Anywhere was launched in the fall 2020 term to connect students studying remotely with peers and resources in the virtual environment.

  The EAB platform will continue being utilized to develop outreach campaigns to increase advisor-student communication and support. An advanced certificate for platform use will be launched in fall 2020 to increase the use of targeted outreach campaigns. Course registration help sessions will be offered to assist students in navigating enrollment and holds preventing registration.

  The Gateway Success Course Committee has convened to address success in high D/F/W gateway courses often taken in the first year to improve teaching and support for academic success in these courses. Our Office will be using information about which courses have high rates of academic failure to increase co-curricular support provided to students enrolled in these courses.

Appendix B:
2024 IE Assessment Calendar for Academic/Student Support Services

General Timeframe	Due Date in 2024	Step	Component
1) By second Friday in July	July 12th, 2024	Collect Data and Study Results	Unit gathers necessary information/data from Fall 2023 and Spring 2024 (and the Summer session(s) if applicable), reviews, analyzes and discusses 2023-2024 results, and formulates improvement actions for 2024-2025 year
2) By third Friday in July	July 19th, 2024	Formulate Plans	Unit continues existing and/or determines new Program Outcomes, assessment methodology and numeric targets for Fall 2024 and Spring 2025 (and Summer session(s) if applicable)
3) By fourth Friday in July	July 26th, 2024	Document	Unit submits POs 2023-2024 Results and 2024-2025 Plans in the IE Portal
4) By second Friday in August	August 9th, 2024	Provide Feedback	IPA reviews unit's Program Outcomes 2023-2024 Results and 2024-2025 Plans and if necessary, requests revisions
5) By fourth Friday in August	August 23rd, 2024	Revise	If requested, the unit revises and resubmits POs 2023-2024 Results and/or 2024-2025 Plans
6) By second Friday in September	September 13th, 2024	Head/ Director Review & Approval	Unit's Director/Head reviews and approves revised POs 2023-2024 Results and/or 2024-2025 Plans
7) By fourth Friday in September	September 27th, 2024	Division VP-Level Review & Approval	Division VP (or designee) reviews and approves final POs 2023-2024 Results and/or 2024-2025 Plans

Appendix C:
Frequently Requested IE Report Changes

1. ***Add a numeric target to the Assessment Plan.*** Each active reporting year should have a numeric target. If the prior year's target specified an effective and expiration date (e.g., FY 22-23), a new numeric target should be defined, or the existing numeric target should be continued.

2. ***If a new Assessment Plan is created, provide a more detailed description.*** Include specifics of the data collection and aggregation plan as outlined above, in the section VII G Designing the Assessment Plan.

3. ***Revise the Results Statement to be consistent with the Assessment Plan and Numeric Target***. Results Statements should obviously correlate with the planned assessment approach and achievement targets. Unrelated information, even if positive performance indicators for the unit, should not be included here.

4. ***If multiple Numeric Targets exist for the same PO and reporting year, split up Results Statements using a list format or separate paragraphs, each corresponding to a specific target.*** Preferably, targets and matching results should be numbered.

5. ***If surveys were used in data collection, include the response rate in the Analysis of Results.*** If the response rate was low (below 20%), discuss why you think it happened and whether the results are representative of the population.

6. ***Discuss data trends (over time) and patterns (within single year) in the Analysis of Results.*** If results are different over years or between different groups, discuss the reasons that this may be so and whether the trends and patterns hold over time or across all groups.

7. ***Provide evidentiary support for conclusions made in the Analysis of Results***. Anecdotal data or information on similar trends elsewhere in higher education may be used as evidentiary support.

8. ***Include in the Analysis of Results a description of any significant events or factors (internal or external) that may have influenced the results.*** The coronavirus pandemic is a good example of an influencing factor, as it impacted operations significantly throughout the University and worldwide.

9. ***Make sure the changes to be made in the Improvement Actions in the next reporting year are directly connected to the Analysis of Results.*** Unrelated changes should not be included unless issues identified in the Analysis of Results cannot be addressed before the seemingly unrelated changes are implemented (for example, changes to a software system cannot be implemented because the unit's technicians are focused on another project).