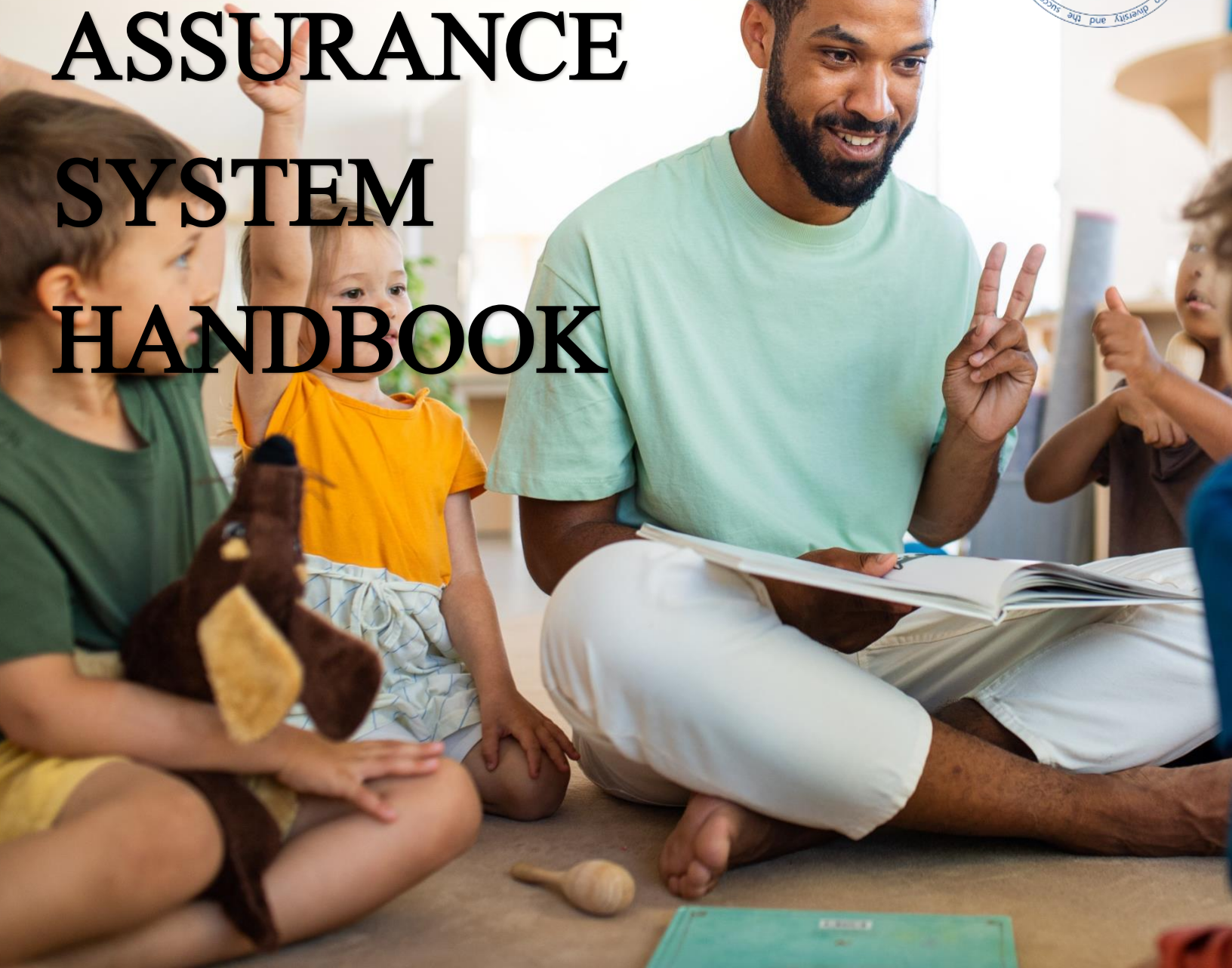


# QUALITY ASSURANCE SYSTEM HANDBOOK



College of Education  
Tennessee State University  
2022-2023 Pilot

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## INTRODUCTION

Tennessee State University (TSU) engaged in a program external audit to examine the overall quality assurance system (QAS) for continuous improvement. This report includes recommendations for data collection, validation, analysis, storage and retrieval, unit processes and procedures, a QAS format for program courses, course rubrics, key assessments, and internship experience. The purpose of this program audit is to encourage the unit to evaluate its quality processes – the key faculty functions and activities required to improve the quality regularly.

A QAS comprises valid data to support continuous improvement that is sustained and evidence-based and that evaluates the effectiveness of its completers. The organization uses inquiry and data collection results to establish priorities, enhance program elements and capacity, and test innovations to improve completers' impact on P-12 student learning and development. Each bucket below has variables that measure effectiveness in the complete system.

- Admissions
- Advising
- Centralized Hub
- College of Education
- Professional Development
- Student Support

The review found room for growth and the utilization of current systems, improved organization and representation of the QAS, clarification of data and its usage, a need for a central timeline for important dates, clearer alignment to state leadership standards and CAEP, and the need for a clearer focus of the program.

## APPROACH

In conjunction with the Office of Assessment and Accreditation, the audit obtained procedures, policies, documents, and data to determine the overall needs for a QAS. That includes defining the purpose and needs of the QAS for TSU's programs.

### Objectives

- Define quality assurance in terms of outcomes
- Verifying the current capabilities of the QAS and determining improvements
- Identifying and reporting actions that may improve or change the system or process
- Provide a summative assessment of findings and a framework with the further design of the QAS

The Team used the CAEP Standard for initial and advanced programs as the framework to review the program.

## CONTEXT AND UNIQUE CHARACTERISTICS

Tennessee State University (TSU), a Historically Black College/University (HBCU) and an 1890 land-grant institution, is Nashville's only urban and comprehensive public University. Founded in June 1912, TSU fosters scholarly inquiry and research, and lifelong learning. TSU's unique characteristics differentiate it from other institutions in the state and is inextricably linked to the University's motto: Think, Work, Serve and the University's charge: Enter to learn, go forth to serve. Its location in the state capital, a major hub for healthcare, music, banking, publishing, and transportation industries, offers unparalleled research and service opportunities to students, scholars, and business partners from around the globe. Through its academic programs, TSU has been a major producer of teachers and educational administrators in the state.

The nursing and health profession programs have significantly contributed to the area's healthcare industry. Our agricultural research and services have positively influenced industry worldwide. TSU has received national program recognition and approval from various nationally recognized accrediting agencies, including but not limited to, the Southern Association of Colleges and Schools; the American Chemical Society, the American Psychological Association, the Accreditation Board of Engineering and Technology, the National Association of Schools of Music, the Association to Advance Collegiate Schools of Business, and the Council for the Accreditation of Educator Preparation (CAEP) along with the Tennessee Department of Education (TDOE). In 2009, TSU became Tennessee's first public Carnegie Doctoral/Research II institution. Tennessee State University has many strong academic programs and enrollment is sufficient to support a relatively broad array of these programs.

## COLLEGE OF EDUCATION

The College of Education (CoED) at TSU enjoys a rich history of teaching, research, and service. The programs are characterized by outstanding faculty who provide stellar educational experiences that propel students into successful careers. The programs also reflect our conceptual underpinning as we prepare "competent, caring, innovative, and culturally responsive professionals." The College of Education is comprised of three departments: Teaching and Learning, Educational Leadership, and Psychology. Each department offers a variety of programs and concentrations that prepare students for professions in the fields of Education, psychology, and other related areas.

There are currently 18 initial licensure programs offered and two advanced licensure programs. The programs within the CoED include Educational Leadership, Psychology, Elementary Education (post-baccalaureate), and Early Childhood. The CoED coordinates with the secondary programs at the University. Table 1 indicates the programs currently approved. The table provides the endorsement, program level (undergraduate and post-baccalaureate), and clinical type, which refers to student teaching and job-embedded.

Similar to the alternative route programs, the job-embedded practitioner license is issued to candidates who have obtained a job in a school before completing the residency semester. Job embedded supports potential educators with a bachelor's degree who have not completed a traditional preparation program to be hired on a Practitioner's License for three years. Candidates must complete the requirements within three years to advance to Professional Licensure.

# Quality Assurance System

## What is the Quality Assurance System (QAS)?

The QAS is not software. QAS is the development of structures, responsibilities, processes, procedures, and resources for implementing data quality management for targeted continuous improvement.

## Who manages the QAS?

The structures, responsibilities, processes, procedures, and resources are managed at various levels. That includes the College and program levels.

The system consists of goals, objectives, activities, measurement of strategies and activities, the person(s) responsible, due dates, timelines, and required resources needed to implement and achieve intended outcomes while also understanding the contributing causes of undesirable results (Bernhardt, 2015). The process includes:

1. Defining Project Scope and Planning;
2. Specifying the Baseline System;
3. Building the product for testing and development; and
4. Delivery and Support.

## How could it help my team?

The QAS is a detailed action plan framework outlining how to achieve the teams' chosen goals. The system helps to provide structure and outlines the steps and resources necessary for the team to continuously improve on reaching its identified goal(s). **Each program unit shall have a plan for structures, responsibilities, processes, procedures, and resources.**

## How does the QAS work?

While developing a good QAS may sound intimidating, the components of all good plans are the same and may consist of the types of in-depth planning done in day-to-day life. This document provides context for the components of the QAS.

Like all good plans, the first step in creating the system is identifying the most important goals and objectives. It is important to clarify the goal or objective, especially when working collectively with a team to accomplish a goal(s), as various team members may have different ideas about the goal(s).

## How does the College plan?

To begin planning a QAS, the baseline must be identified before implementing thoughts of change. Baseline refers to the current trends identified in the data analysis. This concept is sometimes referred to as inventory. Current data is used to identify any issues or improvements needed or to understand the goals and objectives needed for improvement. The baseline should



correspond to the specific organizational goal(s) targeted and include but are not limited to, interviewing or collecting surveys from students, staff members, community stakeholders, demographics, student success data, and resource allocation.

Second, specific action steps that will lead to the chosen goal(s) should be identified. Teams must also use careful planning to select the steps most likely to lead to their specific goal(s). Remember, data measures must align with the goals and objectives to determine if they are being achieved. The steps must be detailed in planning. The detailed planning should include the goals, objectives, specific individuals who will complete the specific tasks in implementation, deadlines for completing each task, and specific resources required. Resources may include, but not limited to, funding, helpful websites or books, or physical materials.

The final component of creating a good QAS is determining how to measure the success or failure of the system. The organization's success or failure at adhering to the system and achieving the chosen goals should be reviewed during the implementation of the plan. Consider these as checkpoints or taking a snapshot of outcomes. The checkpoints typically occur semi-annually and annually. Similarly, the frequency with which an organization's success at meeting goals can be measured will depend both on the type of goal chosen and the cost, both financially and in staff time, associated with measuring progress.

In either instance, it is important to understand the contributing causes of the plan's success or failure, which is where the data informs the plan. With teams, it may be clear that logistic problems exist in reaching a goal or that additional resources or staffing hours are necessary to accomplish a task within the desired timeframe.

### **What are the phases of creating a QAS?**

1. Quality Assurance Facilitation- This system gathers information to create the best plan.
  - a. For teams or organizations, this process includes examining the previous steps taken to reach goals, previous rules or procedures for staff members, existing data, and reviewing policy documents. Sometimes, this phase may also entail collecting new data by talking to or sending surveys to students, instructors, administrators, community members, or other stakeholders to understand better what kind of things they see as problems and what type of solutions they think should be implemented.
2. Quality Assurance Management Process- Evaluate adherence to the system and its impact on the entire education system.
  - a. An organization can benefit by reviewing its adherence to the plan outlined in the system and its impact on the entire educational system, including the staff members, students, parents, administrators, and other stakeholders.
3. Quality Assurance Process Review- The final phase requires organizations or teams to manage the QAS system successfully. Organizations should be able to review their activities by conducting internal audits to ensure their adherence to the standards they previously set out in the plan, and they should aim for and take steps to achieve continuous improvement. The internal audit should include the following components:

- a. A description of the quality assurance system or plan;
- b. A description of how the internal audit was conducted (i.e., procedures or processes used);
- c. A section describing how successful the organization or team was in achieving each of the goals in the system or plan;
- d. A section documenting input from staff members regarding how successful the team was at meeting its goals, as well as what factors helped or hindered the accomplishment of the goals; and
- e. A section discussing the implications for the outcomes. For instance, an organization or team may report that progress is going faster or slower than anticipated and that the timeline should be adjusted, or this section may identify changes to procedures or additional resources that may help achieve the identified goals. Likewise, based on staff input, it may be decided that certain steps were extremely helpful and should be kept in future planning or could have been more helpful and discarded in future planning.

## **Data Collection and Analysis – QAS Facilitation**

This section includes the data collected to initiate the revised QAS. The previous system was not fully implemented or utilized across the CoED. The COED collected the various data but ensured there were some questions in mind.

1. What are the characteristics of students in the program?
  - a. Ethnicity composition by major (undergrad and graduate)
  - b. Gender composition by major (undergrad and graduate)
  - c. Proportion of students by graduate major
  - d. ADD comparison of university demographics to program
2. Framework for academic success and its measurements (based on York et al., 2015)
  - a. Persistence
    - i. Undergraduate enrollment by semester
    - ii. Graduates by term and degree level
  - b. Academic Achievement
    - i. Grade point average
  - c. Attainment of Learning Outcomes + Acquisition of Skills & Competencies
    - i. Praxis pass rates I
    - ii. Praxis pass rates II
  - d. Satisfaction
    - i. Surveys
  - e. Career Success
    - i. EPP data
3. Where do the students overlap between the data sets? What can we say about the full portrait of student success in the program?

Data for the initial development of the revised QAS is located in the **Appendix**.

## **QUALITY ASSURANCE SYSTEM Design - PILOT**

The Quality Assurance System (QAS) hinges upon the conceptual underpinning of competent and caring facilitators of learning, committed to diversity and the success of all (Lessinger, 1976). The University possesses an Annual Cycle for Continuous Improvement (ACCI) and the process provides a platform for the University leaders to build synergy and work in unison to advance the shared vision for students and the community. More specifically, the policy (No. 02.04) describes how TSU schedules, conducts, reviews, and approves assessment activities to ensure data are collected and used for improvement (Tennessee State University, n.d.). The outcomes assessment activities are expected to be informative and not punitive and are conducted to enhance student achievement and improve programs and services.

The EPP created a QAS with a solid foundation. Unfortunately, the data indicates:

1. There was no implementation with fidelity;
2. Misalignment of practices;
3. Gaps in processes and procedures; and
4. Silos.

The EPP lost traction in some areas of the committee work, stakeholder engagement, and participation from faculty.

The audit found further improvements that are imperative to greater strength and consistency. In the spirit of continuous improvement or PLAN, DO, CHECK, ACT (Bernhardt, 2015), this allowed for enhancements to the system that will shape the EPP, which has prompted broad support from faculty and staff. For improvement, the QAS is now integrally linked to TSU's annual cycles for Continuous Improvement and Program Learning Outcomes. The process considers the iterative steps of the assessment cycle, intended to provide helpful feedback about what and how well students are learning. The intent is to develop a relevant curriculum, intentional program learning outcomes, assessment methods, criteria for success, collection of outcome information, analysis of results, use of results, and evidence of improvement. The process also embodies processes and procedures, with roles and functions to ensure a systematic approach to continuous improvement.

### **Context**

The College revised the QAS system based on the audit and proceeding accreditation visits. After some updates, the OAS catalyzes to systematically manage data validation, reliability, collection, analysis, and reporting efforts implemented in Fall 2022. The overall audit purpose was to discover the needed improvement and to:

- Inventory all resources and align them to the areas in the framework;



- Develop and refine the accountability system; and
- Facilitate the organization of all resources.

The findings centered on four themes: Accountability, Culture and Climate, Data Collection, and Communication. Those themes indicated a need for revising the QAS to promote the improved program and course learning outcomes, appropriate measures to determine the intended outcomes, centralized data collection for all reporting, validation, reliability, analysis, storage, and access to data, detailed processes and procedures, and a schedule of activities with functions and responsibilities.

The process for revisions of the QAS includes QAS Facilitation or the focus on examining the range of processes, procedures, existing data analysis, new data collection and analysis, faculty feedback and engagement, and optimal storage. The process inventories all relevant information used to formulate the focus. This includes establishing various stakeholders in the process. This facilitation concludes the QAS functionality or "checks the temperature" of functionality. The EPP created the QAS Management Process Review based on the facilitation, which operates independently. It must regularly perform quality review activities (internal audits) to ensure compliance with standards and practices (Manghani, 2011). The updated QAS internal audit reviews practices bi-annually and produces an internal audit report shared with an overall committee comprising various units. The initial report will take place in the 2023-2024 reporting year. The report includes the following:

- Description of the quality assurance system;
- Description of the procedure followed in conducting the internal audit;
- Presentation of the findings;
- Conclusions that staff draws from the findings; and
- Discussion of the implications for the outcomes.

The revised QAS process fosters an assessment environment of continuous sustained and evidence-based improvement (Bucki, 2020). The system is comprised of multiple measures intended to monitor progress, the effectiveness of the system's outcomes, and operational effectiveness (Manghani, 2011; CAEP, n.d.). The system seeks relevant, representative, and cumulative data that are actionable.

### Revised QAS Focus Areas

The focus areas were created in 2019 and were a solid foundation for revision. Those areas included Systemic Assessment of Candidate Performance, Data Collection, Unit and Program Review, and the Validation and Reliability of Data Collection. The revised areas (2022) of the QAS include six (6) areas: Students, *Process and Procedures*, Faculty, Curriculum, Support, and Partnerships for forward progression (Quality Assurance Task Force, 2010; OAA, 2021). The audit discovered improvements needed to align and support the consistency of processes across the programs within the College using the predefined areas. Figure 1 is the revised diagram of the QAS. All data is disaggregated at the College level to ensure themes are identified (e.g., race, gender, program, year, etc.).

**1. Students**

- a. The data areas are a mix of what is currently available and created during this pilot phase of the QAS.
- b. This area consists of Advising, Support, Exit, and Two-Year Post Grad Surveys, Performance Evaluations, PRAXIS \* TEAM \* EdTPA, COMPS, Dispositions, Course Level Standard Performance Evaluations, Recruitment \* Retention, and Graduation Rates.

**2. Processes and Procedures**

- a. The data represents the implementation of the various processes and the various scores received as a result of the submission of reports and the outcome of those reports during this pilot phase.
- b. College of Education and Unit Manuals, Program Assessment, University Reporting, QAS Reporting

**3. Faculty**

- a. The data represented includes student feedback and evaluations during this pilot phase.
- b. Professional Development, Surveys, Course Evaluations, Performance Evaluations

**4. Curriculum**

- a. Review of Syllabi, Curriculum Maps, Course Evaluations, Performance Evaluations

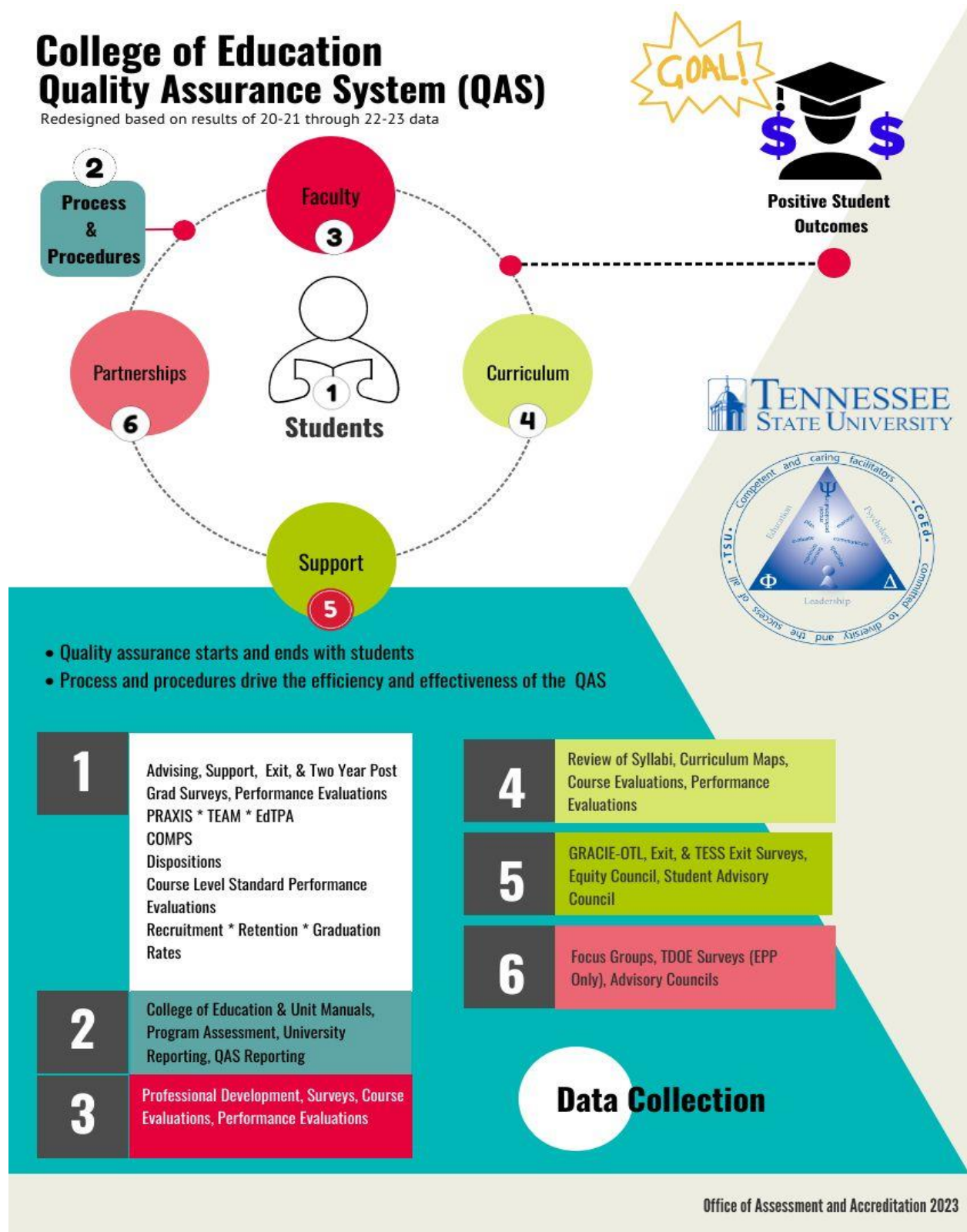
**5. Support**

- a. GRACIE-OTL, Exit, & TESS Exit Surveys, Equity Council, Student Advisory Council

**6. Partnerships**

- a. Focus Groups, TDOE Surveys (EPP Only), Advisory Councils

Figure 1. Quality Assurance Diagram



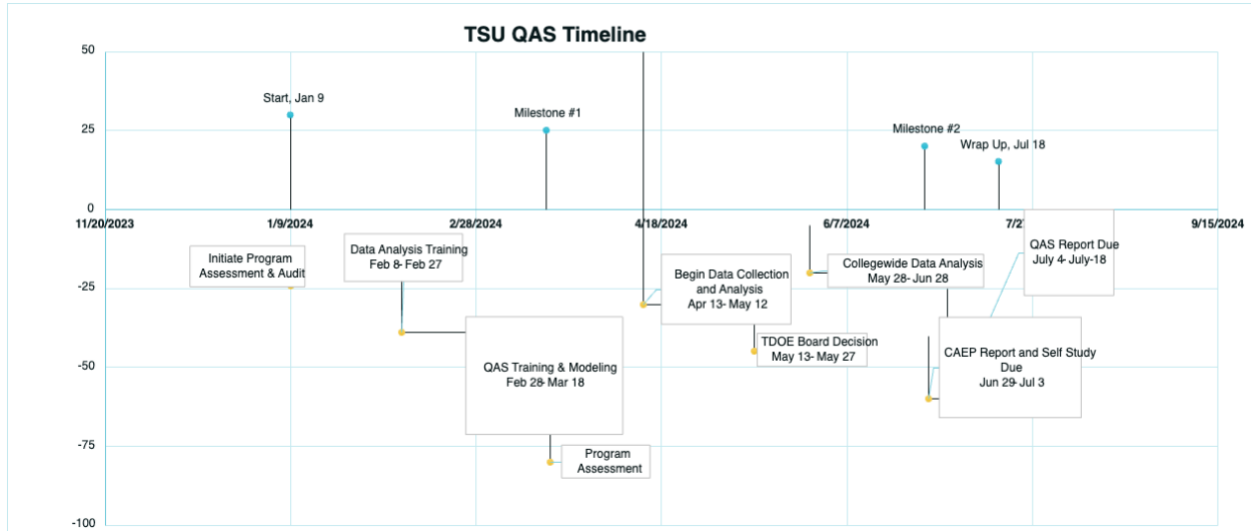
## QAS Calendar

The QAS is guided by specific data collection and analysis. These dates are imperative to successfully analyzing all data relevant to the reporting cycle. Table 1 provides a breakdown of the data, due date, person responsible, and storage location.

**Table 1. Data Management**

<i>Data Management Schedule</i>	<i>Monthly</i>	<i>Semester</i>	<i>Date Due</i>	<i>Product Support</i>	<i>Who</i>	<i>Storage</i>
<i>TEAM Data</i>		X	May	Form	Asst Dean/Data Analyst	Central Storage
<i>Course Performance Assessments (ALL)</i>		X	Dec & May	eLearn	All Faculty	Central Storage
<i>Praxis Core</i>		X	Dec & May	ETS	Data Analyst	Central Storage
<i>Praxis Content Test</i>		X	Dec & May	ETS	Data Analyst	Central Storage
<i>TVAAS</i>		X	May	TVAAS	Data Analyst	Central Storage
<i>edTPA</i>		X	May	Pearson	Data Analyst	Central Storage
<i>Enrollment</i>		X	May & Aug	Argos	Data Analyst	Central Storage
<i>Graduation</i>		X	May	Argos	Data Analyst	Central Storage
<i>Student Completion Survey</i>		X	April	Qualtrics	Data Analyst	Qualtrics
<i>Employer Survey</i>		X	May	Qualtrics	Data Analyst	Qualtrics
<i>Disposition Survey</i>	X	X	April	Qualtrics	Faculty	Qualtrics
<i>Alumni Survey</i>		X	January	Qualtrics	Data Analyst	Qualtrics
<i>TESS Survey</i>		X	May	MS Form	Data Analyst	Central Storage
<i>Meeting Minutes</i>	X				Faculty/Leadership	All Units
<i>EPP Council</i>	X			Agenda & Notes	Asst Dean	Central Storage
<i>Focus Group</i>	X			Agenda & Notes	Fair	Central Storage
<i>Cabinet</i>	X			Agenda & Notes	Gordon	Central Storage
<i>Equity Council (data)</i>	X		January	Data	Coordinator	Central Storage
<i>Equity Council (coordinating)</i>			January	Notes	Coordinator	

Figure 2 provides a mapped timeline of all activities and Table 2 includes the Tasks and Milestones that accompany the dates.



**Figure 2.** *QAS Product Timeline*

**Table 2.** *Tasks and Milestones*

Start	End	Duration	Label	Vert. Position	Vert. Line
1/9/2024	2/7/2024	30	<b>Initiate Program Assessment &amp; Audit Jan 9 - Feb 7</b>	-24	-24
2/8/2024	2/27/2024	20	<b>Data Analysis Training Feb 8 - Feb 27</b>	-39	-15
2/28/2024	3/18/2024	20	<b>QAS Training &amp; Modeling Feb 28 - Mar 18</b>	-54	-15
3/19/2024	4/12/2024	25	<b>Program Assessment Workshop Mar 19 - Apr 12</b>	-80	-80
4/13/2024	5/12/2024	30	<b>Begin Data Collection and Analysis Apr 13 - May 12</b>	-30	-30
5/13/2024	5/27/2024	15	<b>TDOE Board Decision May 13 - May 27</b>	-45	-15
5/28/2024	6/28/2024	32	<b>Collegewide Data Analysis May 28 - Jun 28</b>	-20	-20
6/29/2024	7/3/2024	5	<b>CAEP Report and Self Study Due Jun 29 - Jul 3</b>	-60	-40
7/4/2024	7/18/2024	15	<b>QAS Report Due July 4 - July -18</b>	-65	-5

# Processes for Data Collection

## Admissions

1. Candidates (undergraduates) are typically accepted into the College of Ed for teaching in the Spring Semester
2. Graduate, transfer, or job-embedded may be added during the Fall semester; however, the number can be small.
3. Candidate applications are accepted through the TESS office and due at the end of October.

## TEAM Observation

**Purpose:** Collection of TEAM data to analyze patterns and themes in observation.

1. Clinicians submit Residency 1 and Residency 2 data to the TESS office
2. The data must include the candidate's name, race, gender, program, and R1 and R2 scores
3. Data must be cleaned to ensure the candidates received all R1 observations (total of three) and R2 observations (total of 4) by the end of the respective semester.
4. Fall semester is R1 (3 observations)
  - a. Elementary are with the clinicians year-round
  - b. Clinicians, initially, are only seeking Designing and Planning Instructions and Learning Environment
5. Spring Semester is R2 (4 observations)
  - a. Clinicians support the secondary content expert who then takes over the observation.
6. \*Ensure demographic information is added to the TEAM collection to discover patterns
7. \*Rationale: a review of 19/20, 20/21, and 21/22 data showed that not all candidate's observations were recorded, the programs were not included, and demographic data were not included.

### Notes:

- Traditional students receive the year-long residency.
  - Elementary are with clinicians year-round
  - Secondary content experts conduct the observations for secondary areas with support from clinicians.
- Job-embedded receive only three (3) observations and the full observation because they are the teacher of record.
  - They can opt not to be observed that first year because they have three years to pass the Praxis
- Grow Your Own (GYO) receives only three (3) observations and the full observation because they are the teacher of record.



## Surveys

1. Employer Survey to active school administrators - January live date
  2. Student Exit Interview (initial program only)- administered a week before the end of the Spring semesters
  3. Student Exit Survey (all programs) - completer survey administered a week before the end of the semester
  4. Partner survey - distributed in May (second week)
  5. Two Year Out - distributed in May (second week)
- All surveys are live and ready for distribution in the CoED Central Storage.
  - The CoED Central Storage calendar has the dates of distribution with reminders.

## Data Retrieval Dates

The three cycles of data are collected from the Fall and Spring semesters. The rationale is due to when the bulk of the data is available. The Spring semester is when all data is available and analyzed.

- Spring - MAY
- Fall - DECEMBER

**The data collection window is September 1 – August 31 and is aligned with the Title II schedule.**

## Data Management Schedule

The management schedule is set up to capture the monthly actions needed for the College to collect the necessary data. The schedule captures the following:

- Topic
- Frequency
- Semester
- Due
- Report Used
- Responsibility/Function
- Storage Location

## Systems Data Retrieval

### edTPA – Pearson

<https://edreports.nesinc.com/TN/Home/SignIn/?ReturnUrl=%2FTN>

**Purpose:** Examine how completers are performing in teaching only.

1. Log into Ed Reports

2. Choose "Access Results Analyzer"
3. Choose "edTPA Examinee Data" and choose the data box to the right
4. Choose "Rubric Scores Constructed" for a report

**Notes:**

- The report provides the edTPA results for the traditional candidates only.
- Job-embedded candidates are not required to take the edTPA.

**Praxis**

<https://tlcs.ets.org/sign-in?appid=tlcs&appid=tlcs&appid=tlcs>

**Purpose:** Review Praxis scores for initial and advanced programs.

1. Log into ETS Client Portal
2. Choose "Quick and Custom Analytical Reports"
3. Under Select a Report, choose "5"
4. Under Select a Report, choose "5-yr performance" and "Attending Performance Institution Data"
5. All tests should be included, with the current test year
6. The report will appear in the "My Quick Downloads" section
7. Run the analysis to support demographic analysis
8. Ensure candidates match the Title II match list

**Notes:**

- Must have access to the "actual" candidates enrolled in the program to retrieve them from the system.
- The export from the system will include candidates who may not attend the institution.

**TVAAS**

<https://tvaas.sas.com/?as=a&aj=i>

**Purpose:** Examine how completers are performing in teaching only.

1. Log into TVAAS Portal
2. Choose "Reports"
3. On the drop-down, choose "Teacher List by EPP" if not showing already below
4. Data must be copied and pasted into an Excel doc as the site does not allow for download
5. Note: Charts can be created on the site and copied for reports

**Notes:**

- The data does not disaggregate to race and gender.
- Can provide an overall of candidate performance.

**TN Compass**

<https://tdoe.tncompass.org/Account/Login?ReturnUrl=%2f>

**Purpose:** Retrieve completers and job-embedded candidates (initial and advanced programs).

1. Log into TN Compass
2. Choose "Reports" on the menu
3. Under Select a Report, choose "EPP Enrollment"
4. Choose "Excel" vs. CSV file (will not save all data).
5. Choose "Generate"
6. The file will download to computer
7. Remember to analyze by calendar year

**Notes:**

- The file contains all completers with race, gender, enrollment and completion dates, certificate type, active certification, etc.

**Nuventive**

<https://solutions.nuventive.com/>

**Purpose:** Nuventive supports, collects, and analyzes assessment data and promotes its use in developing action plans for continuous improvement. All programs must submit goals, data, and action plans based on the outcomes to show continuous growth and improvement.

1. Log into Nuventive
2. Choose the program of interest from the drop-down menu
3. Choose the menu to the left and scroll to Program Assessment Plan to view Student Learning Outcomes and measures
4. To review results, choose Program Assessment Results

**Process for Review**

1. The process begins in January or Spring of each year
2. The Office of Institutional Effectiveness emails each month to remind faculty program coordinators of the due date, typically at the end of May.
3. The calendar is also included on the IE [website](#).
4. Training is provided and located on the [Assessment Resources](#) page.
5. The reports must be completed, and data should be represented to analyze to include student demographics.

**Assessment Rubric Example**

Demographics	Examinees	Area 1	Area 2	Area 3	Area 4	Area 5	AVG Score
Black Male	2	3.5	2.5	3.5	3.5	3.5	3.3
Black Female	4	4.2	1	4.5	3.5	4	3.4
White Male	1	4	4	4	4	4	4.0
White Female	10	5	2.8	5	4.5	4.5	4.4

Asian Female	1	5	2.5	5	4	5	4.3
Hispanic Female	1	5	3.5	5	5	5	4.7
TOTAL	19	4.5	2.7	4.5	4	4.3	

**Analysis:** This example provides context on the number of examinees, areas of the rubrics, and average scores in each area. The data indicates the students by race comprising the course, their performance in each rubric area, and averages--100% of students demonstrated knowledge, skills, and dispositions. Area 2 of the rubric indicates the need to review this course content or the assessment to determine issues.

**Continuous Improvement Theme.** Area 2 of the rubric indicates the need to review this course content or the assessment to determine issues. Black male and female students are performing lower than other students. The way this information is currently presented in Nuventive is that 100% passed, which doesn't capture equity concerns.

### Proprietary Assessment Example

Subject Area	Examinees	White Male	White Female	Black Male	Black Female	AVG Score
Agricultural Ed	2		2			47
Elementary Math	4	1	1		2	45
Elementary Literacy	10		9		1	45
Early Childhood	1		1			40
K-12 Performing Arts	1				1	33
Secondary Math	1		1			39
Health Education	1		1			48
TOTAL	20	1	15	0	4	

**Analysis.** This example provides context for the number of examinees, the program areas how those areas perform, and more. Because the numbers are so small, this example does not compare results by race to avoid the ability to identify candidates.

### Definitions

**Completers** - Individuals who have completed all coursework, required licensure assessments, including those prescribed by the Board of Education, and supervised student teaching or the required internship.

**Continuous improvement** – the cyclical process of reviewing data for ongoing improvement.

**Grow Your Own** - exists to end teacher shortages in Tennessee by strengthening the educator pipeline. TSU has a GYO for special education.

**Job-embedded** - These programs allow candidates to work—and get paid—as the teacher of record while completing the department's requirements for teacher licensure.

**Program Assessment** – process where all program units in the College must report outcomes and continuous improvement efforts.

**Quality Assurance** - Supports the development of structures, responsibilities, processes, procedures, and resources for implementing data quality management for targeted continuous improvement.

## Continuous Improvement: What did the data indicate? — PILOT

This section provides context for the collegewide components needed to support the improvements. **Full installation of the OAS will not be until 2023-2024.** Program assessment, accreditation visits, and the TDoE site visit provided some themes of program data, stakeholder engagement, and the alignment of documents that represent each respective program. More specifically, the areas of continuous improvement are:

### ***I. Curriculum***

- a. Curriculum-related refers to curriculum maps, syllabi review and updates, program matrices, programs of study, sequences and descriptions, and Nuventive reporting standards that the EPP Council coordinates.

### ***II. Data Collection and Analysis***

- a. The College is working collectively with Institutional Effectiveness (IE), the Teacher Education and Support Services (TESS), Assessment and Accreditation (CoEDOAA) offices during the 2022-2023 program year to update data collection efforts to ensure a more rigorous analysis of program data.

### ***III. Stakeholder and Field Investment.*** The College has been implementing various updates to support the improvement in each area.

- a. The College is working collectively through the EPP Equity Advisor during the 2022-2023 program year to support bridging all programs so there is representation during focus groups and advisory meetings. These meetings are data points needed specifically for the advanced programs. The EPP Advisor coordinates these meetings to ensure all program stakeholders can address the program data and offer feedback for program improvements.

## Continuous Improvement Tracking

The CoED had to invest in foundational structures to ensure full data collection. The College uses a spreadsheet to track the progress of the goals. Thus, continuous improvement (CI) goals were prioritized for this collection cycle to begin greater improvement. Table 3 summarizes the tasks, start and end dates, completion percentage, status, roadblocks goals, outcomes, CI goal, and CI outcome for this reporting period. The actual file is too large to include; however, the review areas are included for a general idea. The QAS was developed, and all activities/tasks originate from the baseline data and independent consultant audit.

**Table 3.** *Continuous Improvement Tracking*

Task	Goal	Outcome	CI Goal	CI Outcome
<b>Residency Orientations</b>	1. Conduct the residency with candidates to provide information for their transition into clinical teaching. 2. Survey teacher candidates to determine of the residency was helpful and how it can be improved.	Fourteen (14) or 74% of the candidates successfully completed the survey through the online Qualtrics survey tool. The survey was composed of nine (9) questions. The responses range from strongly agree to strongly disagree on a Likert scale. A majority of the candidates saw value in the orientation. Minimally, 86% of the candidates responded positively on average. Engagement, length, modeling practice better, on-site versus visual, and aids to support the discussion were drawbacks.	1. To improve engagement, the scheduled Residency II orientation will be conducted on-site of the TSU Avon Williams campus on Tuesday, January 17, 2023. 2. The sessions will encompass activities that will engage teacher education candidates through demonstrations, group activities, and informed sessions with their master clinicians.	Orientation data for 22-23 indicates 100% attendance and 95% of participants strongly valued the orientations. The process will continue as redesigned [maintain practice]
<b>Surveys</b>	1. Develop a shared process for survey creation, review, and distribution. 2. Review previous surveys to determine the low responses. 3. Review feedback from previous surveys related to partners.	1. The process was completed and the CoED is utilizing the process with fidelity. 2. Surveys (3) have been validated since and distributed. 3. The Exit Survey was revised and distributed with 100% return. 4. Advanced programs did not supply candidates to send the Exit Survey, so the process must be revised. 5. All surveys have been generated and are prepped for distribution each semester.	1. Develop a process where all the graduates are provided to the assessment office to distribute the surveys and distribute to determine success.	Process completed [maintain practice]
<b>Disposition Survey</b>	1. Develop a shared process for the collection of disposition data.	1. The survey was generated and has been used as of Spring 23. 2. The data is incomplete as answers were not completed by staff that included the course and the role of person completing the survey 3. <b>The race and gender component was added.</b>	1. Make areas required on the survey and send directions on how to complete the survey.	A survey was implemented. Issues were found in the collection of the data in terms of the inconsistent entry of data points. Survey has been updated.
<b>Student Drop Rate</b>	1. To understand why students choose to drop from the education program 2. To identify ways to improve student's educational/engagement	1. The outcomes showed that the Praxis and faculty are the top issues for students causing them to drop.	1. Develop a process related to the findings of the survey results.	22-23, the survey was created, and it was found that the reason was faculty and Praxis. [review and create solution]



	<p>experience</p> <p>3. To explore the likelihood that dropped students will return to the education program</p>			
<b>Recruitment Plan and Measures</b>	<p>1. Attract, prepare, and graduate scholars to change the world</p> <p>2. Cultivate an organizational climate that promotes collaboration, continuous improvement, and high performance</p> <p>3. Create a transformative educational environment that impacts middle Tennessee and beyond</p> <p>4. Generate revenue and capacity to reinvest in strategic priorities</p> <p>5. Promote, strengthen, and sustain academic excellence in teaching and learning</p>	<p>1. None reported as the person responsible for the work resigned. 2. Restructuring approach to simply use the University plan</p>	<p>1. Utilize the University strategic as the action plan and matrix to monitor progress. 2. Develop measure for the College to report to the overall university and use for CI purposes.</p>	<p>A college recruitment plan was created in conjunction with various units. 75% submission rate. For programs that did not submit, the OAA will mark them as null and utilize numbers reported in the system to make programmatic decisions. Begin monitoring for goals 1-5.</p>
<b>Equity Driven Decisions Process</b>	<p>1. Develop a policy across all programs that provide candidates an opportunity to prosper when unable to meet the clearly inequitable practices some students face. 2. Implement the policy in Fall of 2023 but pilot for Spring of 2023 to determine needed revisions. 3. Dedicate person to spearhead the process of interviewing students and developing plan. 4. Develop an inclusive tracking system so that the CoED may retrieve records of support for all students.</p>	<p>The policy has been developed and activated to support the work in the college. All systems have been developed to support the work.</p>	<p>1. Track the progress of the council and the selection of the members. 2. Track all processes connected to the equity policy. 3. Discuss any challenges the council determines and develop action plans to move the work further.</p>	<p>The Council was created and held its initial meeting during 22-23. The data indicates one (1) student submission where the student could show that a policy was inequitable. Thus, the policy has to be documented and clear for all students.</p>
<b>Process Driven</b>	<p>1. Develop processes for the various procedures within the CoED. 2. Create a manual for where all processes are included for retrieval.</p>			
<b>Focus Group Coordination</b>	<p>1. Create a central role to organize partnership meetings to collect feedback for all educator programs, implement changes, and monitor changes. 2. Identify all focus groups needed for students, staff, faculty, partners, etc.</p>	<p>1. The committee put together the process and procedures for the focus groups and will have at least one meeting before the CAEP visit. The outcomes will determine the next steps</p>	<p>The focus group shall conduct meetings that utilize the cycle data and make recommendations to program improvement.</p>	<p>Up-to date, the group has had two meetings where the student support. Revisions of program documents and improved data analysis were feedback points.</p>

				All feedback has been incorporated.
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**Continuous Improvement Result**

Themes and goals will change with each cycle review. Based on the data for each year, the result of the CI goal is monitored to determine if there are improvements. The outcomes of all goals are communicated in the QAS report. Thus, all approval, program review, and accreditation efforts align with the overall QAS. No process or product should be revised or completed outside the QAS.

**Reporting**

The QAS report is completed in April-May of each reporting year. The data is not cumulative until May. Thus, the report is completed once the data is available. The report is a synthesis of data. The OAA collected relative information related to the QAS that highlights areas of need and develops measurable outcomes for continuous improvement. The information collected and synthesized in this document is also provided in an annual QAS Retreat to share and discuss the data. The product at the conclusion is the CI goals for the College and the respective programs.