



AMERICAN UNIVERSITY
OF HEALTH SCIENCES
SYSTEMATIC
EVALUATION AND
ASSESSMENT PLAN

Office of Institutional Research and Assessment – September 2024-
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SYSTEMATIC EVALUATION AND ASSESSMENT PLAN

1. Introduction

This Systematic Evaluation and Assessment Plan (SEAP) ensures continuous improvement in academic programs, co-curricular activities, and administrative units across AUHS. The university has adopted the definition of *institutional effectiveness* as, “the purposeful coordination and integration of functions that foster student success and support institutional performance, quality, and efficiency...” (Seymour, 2018). At AUHS, our learner-centered approach to institutional effectiveness begins with an examination of our mission.

The **Mission** of the American University of Health Sciences, a private Christian-based minority-serving university of higher education, is to *welcome students of diverse backgrounds and to prepare them to make a positive impact on society through the provision of exceptional quality patient-centered care within the context of a global perspective of the human condition*. This mission is accomplished through the creation of a strong and caring academic environment where excellence, diversity, and the development of the entire person—mind, body, and spirit—is addressed and where teaching/learning, research, service, and scholarship is valued and supported.

AUHS recognizes its critical role in community development and social health service through our Christian Values. As a university, we acknowledge that institutional success is defined in large part by what students give back to society, and how students make a difference beyond the four walls of the classroom. As a University, we impress upon all graduates the need for a higher mission based on our Christian Values that encompass the noble privilege of community service and the need for improving the quality of healthcare in our society through both provision of care and scholarly study of the impact of that care. An important feature of AUHS is its high-quality, learner-centered education based on the comparatively small community we serve.

2. Institutional Effectiveness Framework

AUHS’ Institutional Effectiveness framework is centered upon quality assurance and continuous improvement in areas of educational effectiveness, co-curricular effectiveness, and administrative effectiveness. This framework establishes the guiding principles that form the foundation for assessment processes throughout the university.

2.1 Quality Assurance

AUHS is committed to ongoing quality assurance policies and processes to accomplish its mission and objectives. AUHS’ quality assurance processes are multi-layered, sustained, learner-centered, data-driven, and inclusive of internal and external stakeholders. The QA process follows a triangular model to ensure closing the loop.

Figure 2.1 AUHS 2020 Quality Assurance Model

AUHS Quality Standards:

- Intended learning outcomes (ILOs, PLOs, CLOs)
 - Administrative outcomes
 - Co-Curricular outcomes



Quality Assessment:

- Learning Outcomes Assessment
- Analytics of student success
- Administrative effectiveness
- Co-Curricular effectiveness

Quality Improvement:

- AUHS Improvement Plans
 - Strategic Plans
- Annual Institutional Assessment Planning & Reporting

As shown in Figure 2.1 above, AUHS' quality standards are comprised of: achievement of the intended learning outcomes at the institutional level, the program level, and the course level. Additionally, co-curricular learning outcomes have been formulated in alignment with the university mission, and to meet regional and specialized accreditation standards. AUHS also maintains quality standards for administrative outcomes.

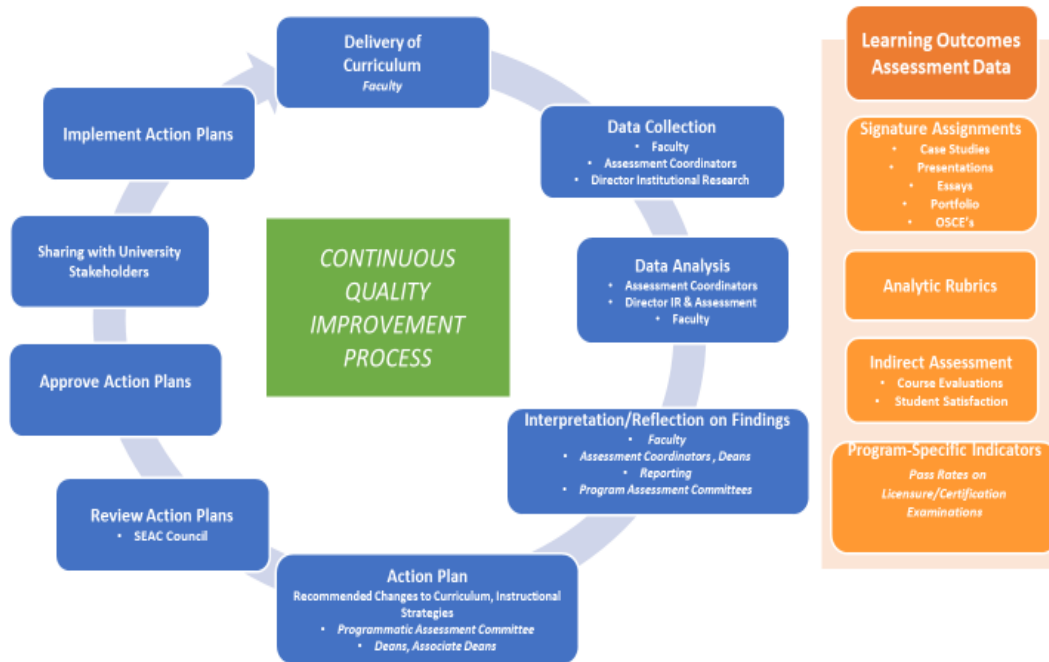
AUHS' quality assessment process is based upon a faculty-driven, outcomes-based process for assessing student learning in its academic programs. AUHS gathers analytics of student success as part of the quality assessment process. The effectiveness of co-curricular achievement and administrative unit effectiveness of the university are also measured. Based on assessment findings, AUHS creates plans for quality improvement which are documented in strategic plans, as well as annual reports.

2.2 Continuous Improvement

Continuous improvement processes are designed to ensure that assessment is a collective responsibility of faculty. For example, based on how students are performing, faculty, in collaboration with leadership, can tailor their assessment strategies and revise assignments to appropriately measure the achievement of course learning outcomes. As another example, faculty who have diverse disciplinary expertise can participate in teams to collaboratively develop key signature assignments, and to calibrate assessment rubrics.

AUHS' continuous quality improvement in academic programs is displayed below.

Figure 2.2: Continuous Quality Improvement in Academic Programs



The institutional effectiveness framework is based on *who* are involved and their relative capacity to undertake related responsibilities, *what* is to be accomplished, *when* will reviews take place, *why* analysis and reviews will be conducted, and *how* information will be used to make decisions that impact the success of the students.

2.3 Roles and Responsibilities / Committees

AUHS maintains a culture of analytical self-reflection and betterment embraced by the entire university. Therefore, staff and faculty across the university participate in the assessment processes described in this plan. Specifically, the following roles support assessment:

AUHS Roles and Responsibilities in Quality Assurance and Assessment

Role	Responsibility
Faculty	<p>In support of assessment, the role of the faculty is to:</p> <ul style="list-style-type: none"> • Provide a learner-centered experience for students. • Assess student learning outcomes in courses. • Utilize a variety of direct and indirect assessment tools to collect valid evidence of learning. • Reflect on assessment data to make improvements to teaching strategies. • Participate in activities to ensure reliability of assessment tools (e.g. rubrics) at the program-level. • Contribute to academic program review process.
Provost	<p>In support of assessment, the role of the provost is to:</p> <ul style="list-style-type: none"> • Guide deans in the use of assessment results and findings for program improvement and increased student learning. • Approve program review reports from all academic programs. • Incorporate recommendations into planning and budgeting processes. • Oversee implementation of all recommended improvements to academic programs.
Office of Institutional Research & Assessment	<p>In support of assessment, the role of the Office of Institutional Research and Assessment is to:</p> <ul style="list-style-type: none"> • Lead institutional-level assessment and reporting processes. • Provide administrative oversight for all assessment efforts. • Develop timelines for assessment of learning outcomes. • Complete a quality review of program reviews prior to final submission. • Conduct professional development for faculty in outcomes assessment and program review. • Support faculty in analysis of assessment data. • Communicate assessment findings and continuous improvement efforts to the university community at large. • Support all departments by providing data and related analyses. • Prepare official institutional reports summarizing assessment data and findings. • Facilitate the integration of assessment results into institutional planning and budgeting processes. • Maintain the SEAP. • Develop reports on assessment of ILOs across programs. • Collaborate with the Information Technology department to create and manage systems, protocols, and architecture to store and manage key data elements for the university.

Role	Responsibility
Assessment Coordinator	<p>In support of assessment, each school at AUHS appoints an assessment coordinator. The role of the assessment coordinator is to:</p> <ul style="list-style-type: none"> • Collaborate with program faculty to ensure that course learning outcomes are appropriately assessed. • Support program leadership in selecting appropriate methods of assessing learning. • Serve as a member of the program-assessment committee. • Communicate assessment results to the program-assessment committees. • Help to ensure that selected program assessment methods meet specialty accreditation standards. • Work with course-coordinators to prepare action plans for the refinement of curriculum and instruction.
The Systematic Evaluation and Assessment Committee (SEAC)	<p>In support of assessment, the role of the SEAC is to:</p> <ul style="list-style-type: none"> • Review and monitor institutional level assessment plans and reports. • Review program assessment plans and make recommendations for improvement. • Advise faculty, departments, and schools on assessment procedures and methods. • Review and implement policies for reporting assessment data. • Develop and implement policies for disseminating assessment data. • Recommend improvements to assessment processes based on data analysis and best practices. • Collaboratively prepare annual Institutional Effectiveness Report. • Recommend methods for assessing co-curricular learning outcomes. • Support the implementation of assessment technology and review proposals. • Review and provide substantive feedback on Comprehensive Program Review (CPR) self-study reports.
Faculty Senate	<p>In support of assessment, the role of the faculty senate is to:</p> <ul style="list-style-type: none"> • Aid in the development and modification of curricula based on available data. • Provide feedback and recommendations for curricular improvement as appropriate.
Program Deans	<p>In support of assessment, the role of the deans is to:</p> <ul style="list-style-type: none"> • Lead assessment activities within their respective programs. • Use assessment results and findings for program improvement and increased student learning. • Assist Faculty with understanding and using learning assessment tools and data.

Role	Responsibility
Department Heads	<ul style="list-style-type: none"> • Lead assessment activities within the respective department and units. • Support ongoing and campus-wide data collection processes and assessment activities. • Use assessment results and findings for improved practices and services. • Identify appropriate assessment data to analyze.
Student Services	<ul style="list-style-type: none"> • Provide systematic and sustained academic interventions (e.g., writing workshops, study skills management, and exam prep tracking/review) • Offer interventions with varying levels of intensity based on academic performance. • Track data on student academic achievement from time of entry until graduation to evaluate needed interventions. • Provide data for periodic comprehensive and systematic Center for Academic Success Intervention and Assessment Program (CAS IAP)

2.4 Assessment Methods

AUHS uses a variety of direct and indirect assessment tools to measure achievement of learning outcomes. Triangulation of data, when possible, allows for more valid results. Data is both quantitative and qualitative.

Direct Academic Assessment

- API test scores
- ATI practice exams
- Exams
- Case studies
- Signature Assignments
- Senior projects
- Senior presentations
- Communication SBAR
- Portfolios
- External Standardized Exams (CPJE, MPJE, NCLEX, NAPLEX, PCOA, Kaplan, Medical Surgery Review)
- In-class assignments
- Peer teaching activities
- OSCEs
- Endpoint evaluations of students by preceptors in IPPEs and APPEs
- Clinical lab exams/assignments

Direct Co-Curricular Assessment

- Signature Assignments
- Pre and Post Tests

Direct Department Assessment

- Key Performance Indicators
- Departmental Performance Indicators

Indirect Assessment

- Institutional Surveys
- Exit Surveys
- Mid-term Evaluations
- End of Course Evaluations
- Focus Groups
- Student Reflections

3. Educational Effectiveness

3.1 Assessment of Institutional Learning Outcomes

At the institutional level, AUHS has established a set of five institutional learning outcomes (ILOs) which specify what all students should know and be able to do upon graduation from the university, regardless of degree program. AUHS' ILOs also specify the values and dispositions that all AUHS graduates are expected to hold and embody.

To achieve our mission, American University of Health Sciences is dedicated to five **Institutional learning outcomes (ILOs)**:

1. **Academic Excellence/ Research/ Scholarship:** Graduates will demonstrate social, philosophical knowledge of their profession/career pathway.
2. **Cultural Competence:** Graduates will deliver culturally competent, sensitive caring that is evidence-based in the appropriate health career service area.
3. **Social Responsibility (Service):** Graduates will develop social and personal responsibility for ongoing professional growth and development including higher education in the appropriate health career profession.
4. **Christian Values:** Students should be able to effect positive client-patient outcomes by sharing their Christian Values of love, caring, justice and respect, as an advocate client-patient needs and rights.
5. **Critical Thinking:** Graduates will apply critical thinking as the theoretical and scientific underpinnings to the appropriate health career occupation to build a solid foundation to drive the profession forward.

The PharmD program has historically used a variety of assignments and activities to assess the achievement of ILOs. These include SOAP notes (Critical Thinking), OSCE (Cultural Competence), City Council Presentations on Health and Wellness (Social Responsibility) and Reflective Essays (Christian Values).

The Nursing program has used the alignment of ILOs, PLOs and CLOs to determine the achievement of ILOs. Essentially, the achievement of CLOs and PLOs aligned with ILOs was used to determine the achievement of the aligned ILO.

After careful analysis of these practices, the Office of Institutional Research and Assessment and the SEAC proposed a more systematic and accepted practice for assessing Institutional Learning Outcomes. Effective in 2023, a new approach to assessing ILOs will be used. To understand the level of achievement of the institutional learning outcomes within coursework across all AUHS programs, a mixed-method approach to assessment is used. Evidence of student learning is systematically collected for assessment by faculty using a rubric. Results are compiled into a report and shared with stakeholders. After thoughtful reflection on the assessment results, intentional actions are then planned to improve programs to increase student achievement as needed.

The schedule below describes the assessment timetable of AUHS’ five university learning outcomes over five years. Each year, one institutional learning outcome is systematically assessed by faculty.

Schedule of Institutional Learning Outcome Assessment

Institutional Learning Outcome	Assessment Tools	Assessment Timeline
Christian Values	Signature Assignment	2026
Critical Thinking	Signature Assignment	2023
Cultural Competence	Signature Assignment	2025
Social Responsibility (Service)	Signature Assignment	2026
Academic Excellence/Research/Scholarship	Signature Assignment	2024

3.2 Assessment of Program Learning Outcomes

Program learning outcomes (PLOs) describe what graduates of a program should know and be able to do upon completion of a program of study. PLOs are often prescribed by outside accrediting agencies as a condition of accreditation. The Commission on Collegiate Nursing Education (CCNE) and the Bureau of Registered Nursing (BRN) inform the program outcomes for the School of Nursing in both the Bachelor and Master of Nursing degrees. The Accreditation Council for Pharmacy Education (ACPE) directs the School of Pharmacy’s program learning outcomes. The WASC Senior College and University Commission (WSCUC) directs the five core competencies expected of graduates of all undergraduate programs. Program Learning Outcomes are aligned with the ILOs and the Course Learning Outcomes (CLOs). Program Learning Outcomes are published on the public website and in the University Catalog.

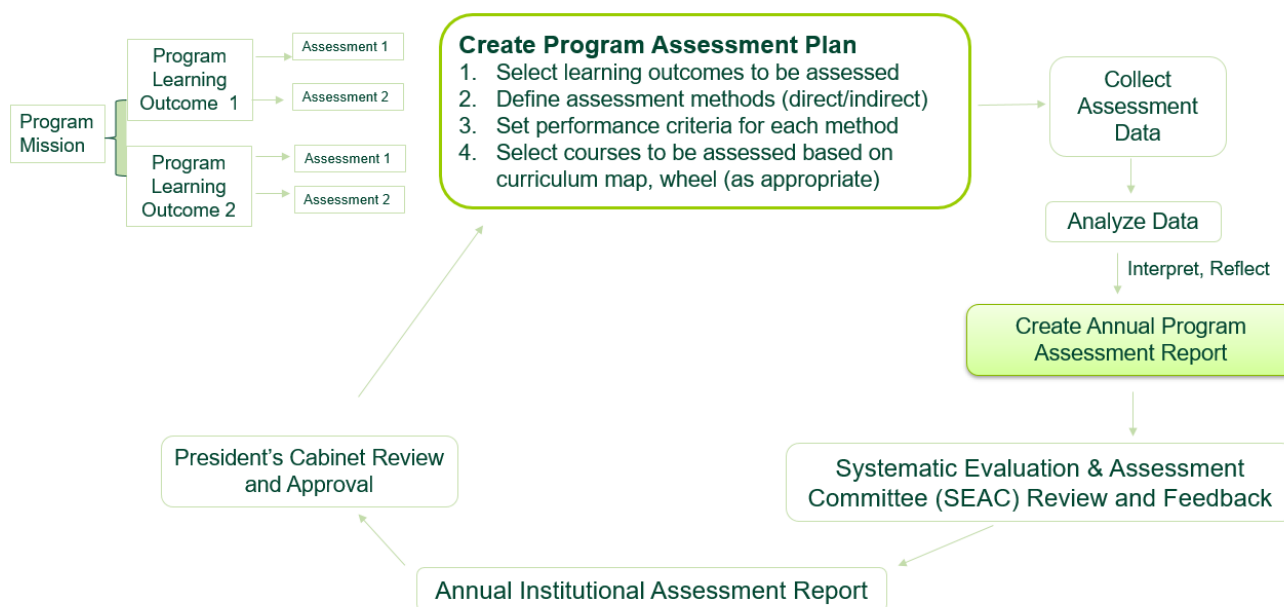
Note: Throughout 2024, the SON took on the revision of all Program Learning Outcome with the addition of prescribed Domains and competencies from the AACNE and CCNE. These new standards dictated an entire curriculum review, mapping and realignment.

Each academic program is required to assess 1-2 Program Learning Outcomes each year leading up the Comprehensive Program Review. Each incremental annual assessment feeds into the long-term program review which is on a five-year cycle. Incrementally assessing program level outcomes provides programs time to make decisions based on the annual assessment findings. A program assessment plan that

identifies the program learning outcomes (PLOs) to be assessed is updated annually. For each learning outcome, the appropriate methods of assessment are identified, along with the courses in which they will be assessed at heightened levels of mastery. According to the School structure, the associate dean communicates with the assessment coordinator to create and update the program assessment plans. [Program Assessment Plans](#) should be sent to the Office of Institutional Research and Assessment by September 15th of the calendar year. An [Assessment Report](#) describing the results of these assessment is submitted to the Office of Institutional Research and Assessment annually by the End of Summer Quarter.

A schematic of the program assessment planning process is shown below.

Assessment of Program Learning Outcomes



3.3 Assessment of General Education/Five Core Competencies

There are five general education learning outcomes which are also the core competencies for undergraduate programs (updated April 2023).

WRITTEN COMMUNICATION AUHS graduates will be able to clearly communicate in writing considering audience, purpose, content, and evidence.

ORAL COMMUNICATION AUHS graduates will be able to deliver clear, coherent oral presentations effectively communicating an understanding of a given topic.

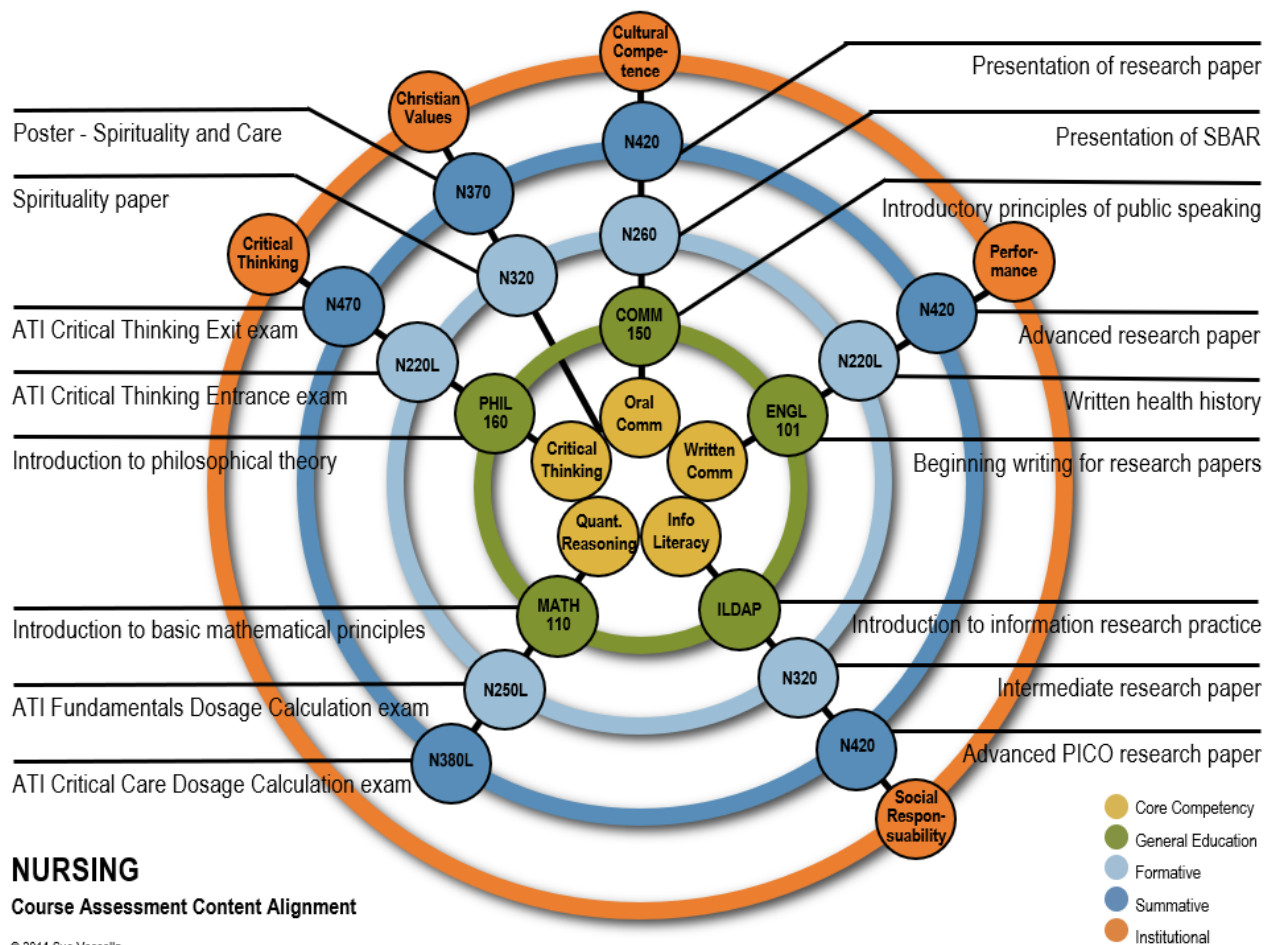
CRITICAL THINKING AUHS graduates will be able to analyze and evaluate information, being aware of possible bias, infer and draw conclusions, conceptualize possible resolutions, and effectively communicate possible outcomes with others.

INFORMATION LITERACY AUHS graduates will be able to determine the amount and type of information needed, access it, evaluate it and its sources, use the information effectively, and do so ethically and legally.

QUANTITATIVE REASONING AUHS graduates will be able to interpret, represent and analyze quantitative data to make informed judgments, draw conclusions and solve problems.

These competencies apply to all undergraduate students. Assessment is completed by General Education faculty and the Librarian. AAC&U's VALUE rubrics have been modified and adapted to assess student progress towards achievement of general education/five core competency learning outcomes.

AUHS uses a "Wheel" model as part of its university assessment program to visually display how selected courses and assessments are aligned with curricular content and learning outcomes. The sample wheel below displays general education courses as the foundation upon which outcomes in undergraduate nursing courses are threaded from beginning to advanced levels, in alignment with ILOs, PLOs, and the five WASC core competencies.



Assessment of these learning outcomes is completed on a five-year schedule as shown below. However, assessment may be done earlier if the results warrant a need for re-assessment.

OUTCOME REVIEW TIMELINE	Cycle	Scheduled Review
Written Communication	5 years	2016; 2022; 2025
Oral Communication	5 years	2015; 2022; 2025
Critical Thinking	5 years	2017; 2022; 2023, 2028
Information Literacy	5 years	2015; 2020; 2022, 2023, 2028
Quantitative Reasoning	5 years	2022, 2026, 2031

3.4 Assessment of Interprofessional Education

The University’s curriculum prepares students to provide patient-centered care in a variety of practice settings as contributing members of an interprofessional team. To support this part of the curriculum, students are actively engaged in different interprofessional education (IPE) settings. Faculty collaborate

to set expectations for learning in interprofessional settings, providing opportunities for all students to learn with, from, and about each other to improve collaboration and quality of care.

AUHS has a five-year IPE longitudinal strategic plan that incorporates four phases: exposure, immersion, experience, and competence. As an example, The Strategic Goal 2: “Provide the highest quality education to our students by fostering an integrated IPE curriculum that inculcates the interprofessional proficiencies that are needed for collaborative practice” serves as the framework for IPE curriculum. The University incorporates IPE into didactic, co-curricular, and experiential components of the curriculum. The IPE curriculum is taught by interprofessional teams comprised of faculty from AUHS Schools of Nursing (SON) and Pharmacy (SOP) in addition to faculty from our developing AUHS School of Medicine (SOM), along with faculty from the Charles Drew University School of Medicine and Science and community physician affiliates.

In partnership with Charles Drew University of Medicine and Science, IPE simulation experiences are offered to AUHS’ pharmacy students. A series of patient cases covering diverse disease conditions are used. Cases are designed to allow students to demonstrate their competence in interprofessional team dynamics, including articulating the values and ethics that underpin interprofessional practice, engaging in effective interprofessional communication, and honoring interprofessional roles and responsibilities. Students are assessed on their performance to communicate in an interprofessional team to deliver safe and high-quality care. A non-technical clinical skills (NTCS) rubric is used to assess communication, teamwork, and safety.

As part of the IPE Curricular Plan and Assessment Strategies for the didactic curriculum, AUHS’ PharmD students are administered knowledge-based assessments to demonstrate their knowledge of various health professionals’ roles and responsibilities. We have developed a portfolio of IPE scenarios that are validated by Pharmacists, Nurses, and Providers. We have a developed schedule of IPE Events that occur on campus with our students. The IPE curriculum is developed, reassessed, and evaluated monthly by an IPE Committee of AUHS representatives from SOP, SON, SOM, and other partners. Students are expected to maintain a climate of mutual respect and shared values when working within interprofessional teams.

AUHS students are assessed in the didactic curriculum using the RIPLS: Readiness for Interprofessional Learning Scale (RIPLS) by Curran et al. (2008), as well as the results of peer-evaluations, and knowledge tests. Additionally, the Students Perceptions of Interprofessional Clinical Education Revised (SPICE-R) evaluation tool is used in conjunction with other methods of debriefing.

3.5 Assessment of Course Learning Outcomes

Course learning outcomes describe what a student should know and be able to do upon completion of an individual course. CLOs are designed to support the PLOs and ILOs. Each CLO contributes to the students’ acquisition of knowledge and skills needed to attain the PLOs. Each AUHS course syllabus specifies the course learning outcomes and methods of assessment for each outcome. These CLOs are mapped to PLOs and ILOs in each program. To assess CLOs, a faculty may create a rubric and score

signature assignments with an analytic rubric within Canvas. BSN faculty may also use Claire, the first AI-powered aide designed specifically for Nurse Educators. Now available in Custom Assessment Builder, Claire generates multiple-response and multiple-choice questions in less than half the time faculty now spend. Custom Assessment Builder enables educators to create and maintain exams quickly and easily by pulling from an expansive ATI question bank or by creating their own custom questions. Data from these assessments can be disaggregated and used for curriculum improvement and as part of the academic program reviews. Course learning outcomes are assessed each quarter and curriculum changes are discussed in the end of quarter Curriculum Committee meetings.

3.6 Comprehensive Academic Program Review

Academic program review is a thorough, systematic, and recurring process of analyzing academic programs through self-assessment and critical reflection for the purpose of strengthening the program. Building on AUHS’ ongoing process for assessing learning outcomes, the Comprehensive Program Review (CPR) process ensures that all the program learning outcomes, and goals for each program will be assessed within a five-year period. The findings of academic program review drive budgeting and resource allocation decisions for strategic planning and continuous improvement. Refer to the *Program Review Handbook* for details about the program review process.

PROGRAM REVIEW TIMELINE	Cycle	Scheduled Review
Bachelor of Science in Nursing (BSN)	5 years	2016; 2021; 2026
Bachelor of Science in Pharmaceutical Sciences (BSPS)	5 years	2015; 2020; 2025
General Education (GE)/Five Core Competencies	5 years	2017; 2022; 2027
Master Science Clinical Research (MSCR)	5 years	2015; 2020; 2025
Master of Science in Nursing (MSN)	5 years	2022, 2027, 2032
Doctor of Pharmacy (PharmD)	Yearly for 4 years then 3-year cycle	2020; 2021; 2022; 2023; 2026, 2029

3.7 Co-Curricular Assessment

Co-curricular learning outcomes (CCLOs) are created to enhance and support the student experience at AUHS. They are used to support/accomplish the ILOs and the Core competencies, and support students in the achievement of academic outcomes and program outcomes. Assessment of co-curricular outcomes measure how well the department meets the stated goals and outcomes within the student services department, and how well the co-curricular activities support ILOs and other learning outcomes. Refer to the *Guide for Co-Curricular Assessment* for details about the review process.

3.8 Faculty Assessment

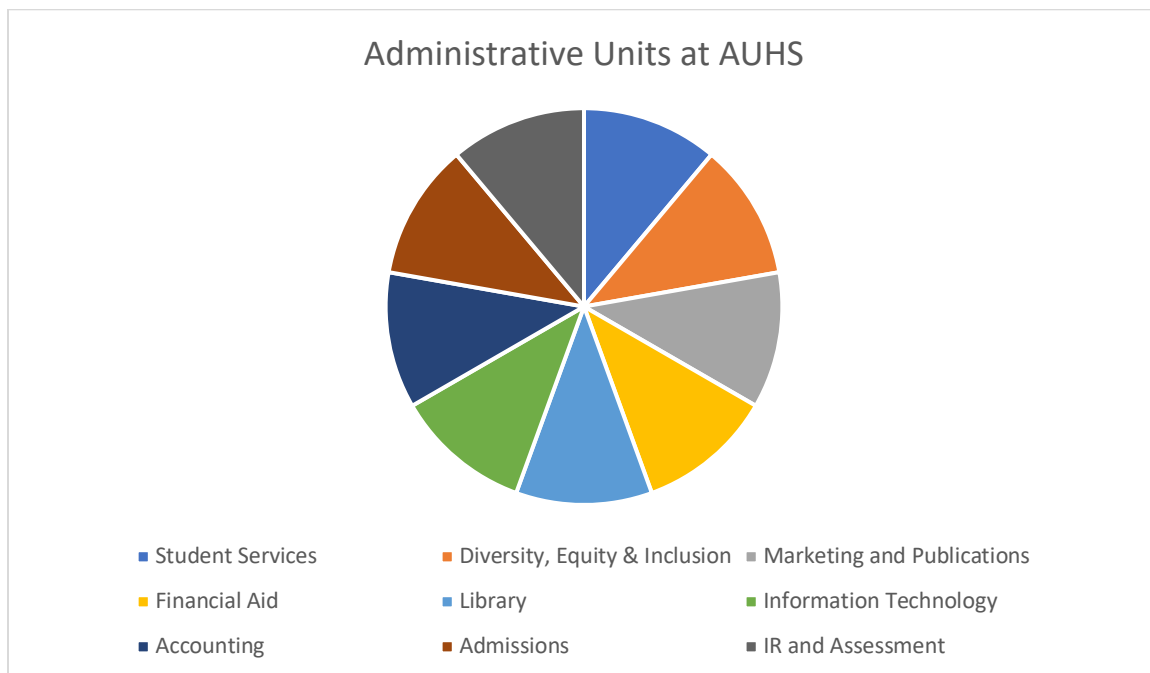
High faculty performance contributes to the overall achievement of AUHS’ institutional effectiveness goals. All full-time faculty are evaluated on four dimensions: *teaching, research/scholarship, service, and practice*. Performance for full-time faculty is reviewed annually. AUHS meets internal performance criteria as well as various professional credentialing and regulatory bodies to which AUHS reports. For continued employment at AUHS, faculty must meet the quadripartite outcomes for “extended contract” after three years of continuous employment.

For quadripartite outcomes at AUHS, **teaching** is measured according to course and instructor evaluations, as well as other surveys (i.e., preceptor effectiveness, faculty clinical performance, peer evaluations, and Dean Evaluations). The dimensions of **Research/Scholarship** are manuscripts published, grants written and submitted, and conference presentations. **Service** includes national professional organization membership, on-campus involvement, community service, and committee service at the program and university level. **Practice** includes currency in faculty specialty or subject matter expertise. Faculty maintain clinical practice through a variety of pathways pursued individually.

Faculty are evaluated on the quadripartite outcomes annually by the dean of the program in which they primarily teach.

4. Assessment of Administrative Effectiveness

Each main administrative unit is guided by a mission that is aligned with the AUHS mission, identifies measurable outcomes and unit goals to define performance, and specifies methods of assessing effectiveness. Evidence of achievement of outcomes is analyzed and reflected upon to ensure continuous quality improvement. Administrative department assessment is designed to determine how well key institutional departments operate in alignment with the University’s strategic goals. The strategic plan objectives help guide the departmental action plans. Departmental plans and individual goals are assessed annually during the performance evaluation process. Progress on strategic planning is reported at quarterly board of trustee’s meetings.



4.1 Key Performance Indicators

Administrative units assess the effectiveness of their department annually using Key Performance Indicators (KPIs) and other available data unique to each department. Academic Key Performance

Indicators are provided below. Key performance indicators for the administrative departments are housed in each department and reported on annually to the provost.

Key Indicator 1: Student Enrollment

Key Indicator	Assessment Instrument	Benchmark	Accountability for Data Collection	Collection Timeline			
				Winter	Spring	Summer	Fall
Student Enrollment	Student Information Database	Multicultural, Minority-Serving	Registrar	x	x	x	x

Key Indicator 2: Race & Ethnicity

In alignment with the University mission to serve a multicultural and minority student population, race and ethnicity is tracked and reported annually. This data is also disaggregated and shared with the deans of each program annually.

Key Indicator 3: Retention Rate

Key Indicator	Assessment Instrument	Benchmark	Accountability for Data Collection	Collection Timeline			
				Winter	Spring	Summer	Fall
Retention Rate	Student Information Database	80%	Registrar	x	x	x	x

Student retention rates are reported annually by fiscal year. The university measures retention rate using the ACICS CAR formula: $Retention\ Percentage\ Rate = (A-B)/A$, where $A = the\ Beginning\ Enrollment + Reentries + New\ Starts$; and $B = Withdrawals$. A benchmark of 75% selected initially to keep up with national standards. However, given our history of success in achieving this rate, a new benchmark of 80% is now used.

Key Indicator 4: Graduation Rate

Key Indicator	Assessment Instrument	Benchmark	Accountability for Data Collection	Collection Timeline			
				Winter	Spring	Summer	Fall
Graduation Rate	Student Information Database	75%	Registrar	x		x	

Graduation Rate is calculated based on the number of students who graduated within the required program length / sum of graduates and withdrawals.

The BSN program is a unique program that enrolls students by cohort. After fulfilling the general education curriculum students transition into nursing curriculum by cohort based on the time they are transitioned. Thus, BSN program also tracks cohort graduation rates, by which cohort refers to students who transition into the program by the same time. The benchmark is set as 75%.

Graduation Rate = students who graduated within 150% program length after transition from general education into the BSN program / the sum of students who were supposed to graduate within the 150% program length in the reporting year.

Key Indicator 5: Licensure Exam Pass Rates

Key Indicator	Assessment Instrument	Benchmark	Accountability for Data Collection	Collection Timeline			
				Winter	Spring	Summer	Fall
NCLEX RN Pass Rate	Student information database	75%	Deans	X	X	X	X
ATI RN Comp Predictor	ATI Web database	76%	Deans	X		X	
APRN Pass Rate	Student information database	75%	Deans	X	X	X	X
NAPLEX	Student information database	75%	Deans	X	X	X	X

Students who complete AUHS programs are eligible to take licensure exams to continue towards their career. Therefore, exam pass rates are critical to the success of the institution and the students.

Key Indicator 6: Employment Rate

Key Indicator	Assessment Instrument	Benchmark	Accountability for Data Collection	Collection Timeline			
				Winter	Spring	Summer	Fall
Employment Rate	Student Information Database	80%	Placement Officer & IT	x		x	

The mission of AUHS is to prepare students of diverse backgrounds to provide exceptional quality patient-centered care to positively impact society. Thus, employment of students in the healthcare environment is an important avenue for them to serve the community and benefit society.

Employment trends are monitored through the Employer Satisfaction survey as part of the follow-up process with graduates. These surveys are designed to collect data enabling the university to keep abreast of industry trends to best meet the needs of its graduates. The employer survey is comprised of eleven questions which elicit employers' perceived level of AUHS graduate preparedness in terms of knowledge, skills and abilities acquired. Items include respondent satisfaction with know-how,

application of technical knowledge and skill, and ability to use job site equipment. The survey instrument also measures whether the employer would hire more AUHS graduates. Employer surveys are conducted at the first, third, and fifth year after students' graduation.

The program measures employment/placement using the following formula:

Placement Percentage Rate = (Placed by job title + Placed by skills + Placed by benefit of training) / [(Completers + Graduates) – (Exemption*)], where the Exemptions are those that are unavailable for placement, including those that are in the military, medical reasons, continuing their education, death, foreign student or who did not intend to be placed for employment.

Key Indicator 7: Alumni Satisfaction

Key Indicator	Assessment Instrument	Benchmark	Accountability for Data Collection	Collection Timeline			
				Winter	Spring	Summer	Fall
Alumni Satisfaction	Alumni Survey	M=3.5	Student Services Office	x		x	

AUHS uses an Alumni Survey (also referred to as Graduates Survey Report) to track and monitor graduates to continuously improve overall programmatic operations.

Alumni Surveys are scheduled to be conducted at the first, third and fifth year after graduation. The placement officer conducts alumni surveys through a series of procedures under the auspices of the provost. These surveys are sent through the US mail, email, and are followed by a phone call then through a face-to-face interview (as set by appointment).

There is a total of ten questions on the Alumni Survey. On questions 1 through 9, graduates are asked to rate on a 5-point Likert-type scale (0=Not satisfied to 5= Very satisfied) regarding the overall knowledge, skills, and ability the university has prepared them for the current job. Exampled questions include: "How are you satisfied with your overall preparedness for job responsibilities?", "How are you satisfied with the training you received to prepare you for your current job?" The final question is a Yes or No question asking whether the AUHS alumnus would recommend the university to a family member or friend.

Key Indicator 8: Employer Satisfaction

Key Indicator	Assessment Instrument	Benchmark	Accountability for Data Collection	Collection Timeline			
				Winter	Spring	Summer	Fall
Employer Satisfaction	Employer Survey	M=3.5	Student Services				x

AUHS conducts various surveys to keep us abreast of the needs of the industry and trends with graduates. The University solicits employer input. The Director of Clinical Facilities conducts regular site

audits that further assist in the evaluation of employer work sites. These site visits help the university better understand employer’s needs that eventually translate into program content changes.

There are a total of eleven questions on the Employer questionnaire. On questions 1 through 10, employers are asked to rate on a 5-point Likert-type scale (0=*Not satisfied* to 5= *Very satisfied*) AUHS graduates’ level of preparation as reflected in employees’ overall knowledge, skills, and abilities. Sample questions on the Employer Survey include, “How satisfied are you with the employee’s job know how, application of technical knowledge & skill?”, “How satisfied are you with the employee’s ability to use job site equipment?” The final question is a Yes or No question asking whether the employer would hire any more AUHS graduates? Like the Alumni survey, Employer Surveys are scheduled to be conducted at the first, third and fifth year after students’ graduation. Employers cite privacy and confidentiality issues with their employees (AUHS alumni) as reasons for not responding to the survey. Some of our graduates have also expressed their reluctance at having AUHS contact their employers.

Key Indicator 9: Current Student Satisfaction

Key Indicator	Assessment Instrument	Benchmark	Accountability for Data Collection	Collection Timeline			
				Winter	Spring	Summer	Fall
Current Student Satisfaction	Student Satisfaction Inventory	M=3.5	Student Services & IT	x	x	x	x

Student satisfaction with the university and its services is measured quarterly through a survey called Student Satisfaction Inventory (SSI). The Student Satisfaction Inventory (SSI) elicits feedback from students indicating their overall satisfaction with university policies, procedures, and services provided. Respondents indicate their level of agreement with statements such as “*I am satisfied with my overall experience at AUHS*”, “*The university provides adequate community service/volunteering opportunities/activities related to health care*”, and “*I am satisfied with the services provided by student services office*”. Response options are set to a Likert-like scale from 1 to 5 lowest to highest, with 1 being “strongly disagree”, and 5 being “strongly agree”.

The student satisfaction survey is administered in EvaluationKIT. A report is generated by the office of Institutional Research and Assessment annually.

Key Indicator 10: Student Exit Satisfaction

Key Indicator	Assessment Instrument	Benchmark	Accountability for Data Collection	Timeline			
				Winter	Spring	Summer	Fall
Student Exit Satisfaction	Student Exit Survey	M=3.0	Placement Officer & IT	x		x	

Data on student satisfaction upon graduation are collected via electronic survey at the end of quarters in which graduation occurs (i.e., Winter and Summer). The Student Exit Satisfaction instrument measures self-reported level of learning to apply best practices when caring for patients/clients. Also, it measures how well the program prepared the student to understand the importance of spirituality in

patients'/clients' lives and its impact on illness/wellness; to be committed to the values and ethics of the profession. The instrument measures students' perceived ability to read/review and research the literature, contribute new knowledge in their field, and whether their education has enhanced their intellectual, analytical, and critical thinking abilities. Additionally, the survey measures whether the student would recommend AUHS to others interested in health sciences education.

There are a total of sixteen items on the Student Exit Satisfaction Survey. Responses for level of agreement are set on a Likert-like scale from lowest to highest on a scale of 1-5 where 1 is "strongly disagree", and 5 is "strongly agree". Staff administer the survey in classrooms with a link posted. Students are sent an e-mail invitation to participate in the survey.

Key Indicator 11: Course and Instructor Effectiveness

Key Indicator	Assessment Instrument	Benchmark	Accountability for Data Collection	Timeline			
				Winter	Spring	Summer	Fall
Course & Instructor Effectiveness	Course and Instructor Evaluation Survey	M=3.5	Student Services & IT	x	x	x	x

Data on student evaluation of course and instructor effectiveness are collected twice each quarter each course, at midterm and at final. Of fourteen total questions on the Course and Instructor Evaluation form, the first eight items measure students' perceptions of course effectiveness. Students rate their level agreement with the following statements about the course:

1. Overall this course contributed to my knowledge
2. Overall the learning resources (textbook, references, materials, library) were adequate to support my learning needs.
3. Overall I would recommend this course to another student.
4. The course objectives helped me understand what I was expected to learn in this course.
5. The audiovisuals used by the faculty helped me learn the content (Power Points slides, videos, etc.)
6. The syllabus clearly specifies the work required of me in this course.
7. Exams, quizzes, and other evaluation activities (papers, projects, presentations) met the learning objectives of this class.
8. The assignments in this course were relevant to meeting the course objectives.

The final six items focus on student evaluation of the instructor's effectiveness.

Responses are set to a Likert-like scale of from 1 to 5, where a 1 is strongly disagree, and 5 is strongly agree.

9. Overall the instructor demonstrated current knowledge in the course content.
10. Overall the instructor member was prepared to teach, organized, and utilized teaching techniques appropriate for meeting the course objectives.
11. I would recommend this instructor to other students.
12. The instructor demonstrated a professional rapport with students and encouraged students to ask questions in order to facilitate active learning.

13. The instructor was available during posted office hours or other agreed upon times.
14. The instructor made the classes interesting and understandable.

5. Assessment Reporting/Data Sharing

The table below provides a summary of reporting across the university:

Report	Timeline	Prepared By	Shared with
Program Assessment Plans	Annually Sept. 15	Deans/Assessment Coordinators	SEAC
Program/Course Learning Outcomes Assessment Reports	Annually End of Summer Quarter	Associate Deans	Faculty/SEAC/IRAD (adds to Institutional Effectiveness Report)
Comprehensive Program Reviews (CPRs)	Every Five years on schedule	Assigned Team	SEAC/Faculty Senate/Provost
Course Evaluations	Middle and End of each quarter	Executive Director, Student Services	Deans and Faculty
Quadripartite	Annually in fall quarter	Deans	Provost
Administrative Unit Outcomes Reports	Annually Sept. 15	Department Leads	IRAD (adds to Institutional Effectiveness Report)
Co-Curricular Assessment Reports	Every five years on schedule	Activity Leader	IRAD (adds to Institutional Effectiveness Report)
Institutional Effectiveness Report	Annually December 1st	IRAD	PAC/Senate/BOT
Core Competency Reports	Every five years on schedule	IRAD	Undergraduate faculty/Leadership
ILO Assessment Reports	Every five years on schedule	IRAD	SEAC/Faculty Senate/Provost
Strategic Plan	Annual Update	Strategic Planning Committee	BOT
Academic Key Performance Indicators	Annually December 1st	IRAD	Deans

5.1 Academic Effectiveness Reporting

Assessment findings are communicated to the relevant stakeholders in various ways. At the end of each quarter, faculty are provided with the overall course evaluation. The overall achievement of the PLOs based on the aggregate outcomes data from all the courses is also communicated to the faculty at the annual summer faculty retreats. Achievement of CLOs and PLOs is processed by the Institutional Research and Assessment Department and is presented to course coordinators by the Assessment Coordinator as the courses progress. Instructors benefit from formative feedback within courses to

adjust for observed weaknesses in student learning outcomes. Formative assessments within courses also allow for immediate intervention and course correction when faculty (and students) are not satisfied with the results. At the end of the quarter, the course coordinators, and Deans review course summary reports to evaluate overall teaching effectiveness related to each CLO and PLO. For courses that do not achieve CLO or PLO expectations, Action Plans are enacted to address course improvement areas. The Action Plans are created by the course coordinator in collaboration with the Department Dean and reviewed by the Curriculum and Assessment Committee (CAC). If changes to the syllabus are needed, the revised course syllabus will be reviewed by the CAC. The CAC chair will communicate with course coordinator.

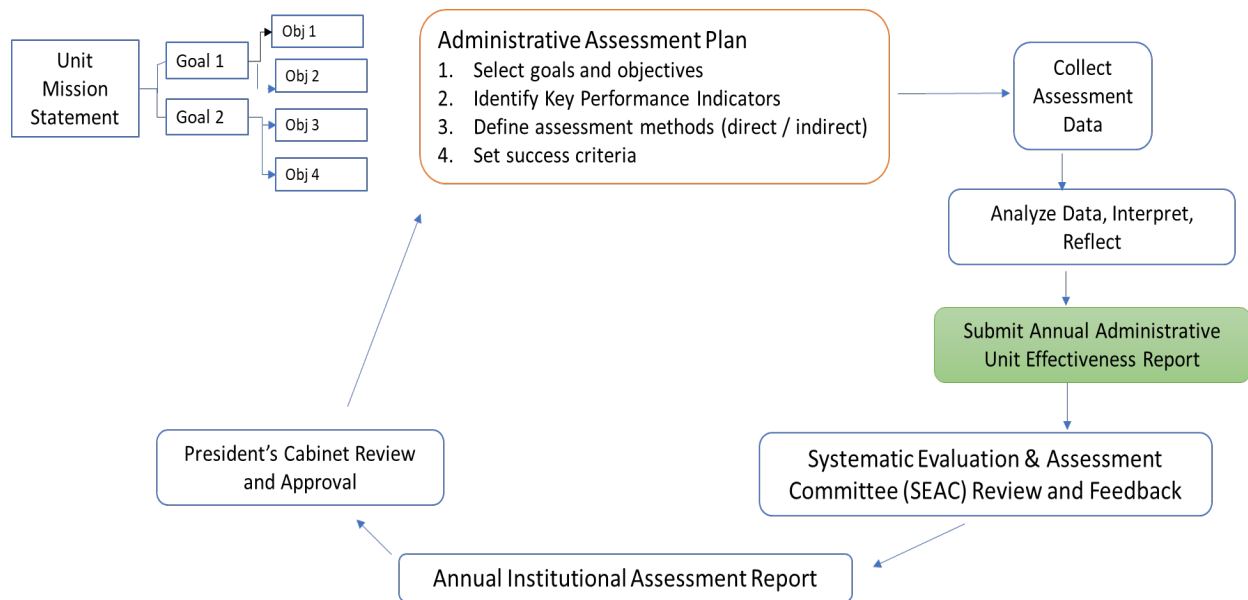
The Associate Dean works closely with faculty to prepare an annual Program Learning Outcomes Assessment report at the end of the summer quarter. This report reflects overall achievement of program learning outcomes compared to expectations. The annual Program Learning Outcomes Assessment report provides succinct documentation of the assessment activities and associated results, and actions for improvement that will be made in the next assessment cycle.

5.2 Co-Curricular Effectiveness Reporting

Co-curricular learning is learning that takes place in activities and programs that are not part of the prescribed sequence of courses in an academic program. Co-curricular activities are activities that support learning but fall outside of the prescribed sequence of courses in an academic program. Co-curricular assessment examines activities and services to ensure achievement of outcomes and continuous quality improvement. The goal is to maintain academic achievement and to ensure activities and services are effectively administered and that they align with the university mission and values. Co-curricular assessment includes the systematic collection of data and other evidence to support continuous quality improvement. Refer to the Co-Curricular Assessment Guide for details regarding these assessments.

5.3 Administrative Effectiveness

Administrative Units at AUHS generate administrative unit outcomes reports annually. The results of administrative effectiveness reports specify progress towards achievement of the administrative mission in alignment with the university mission. Assessment results are compiled and analyzed as part of the overall institutional effectiveness report.



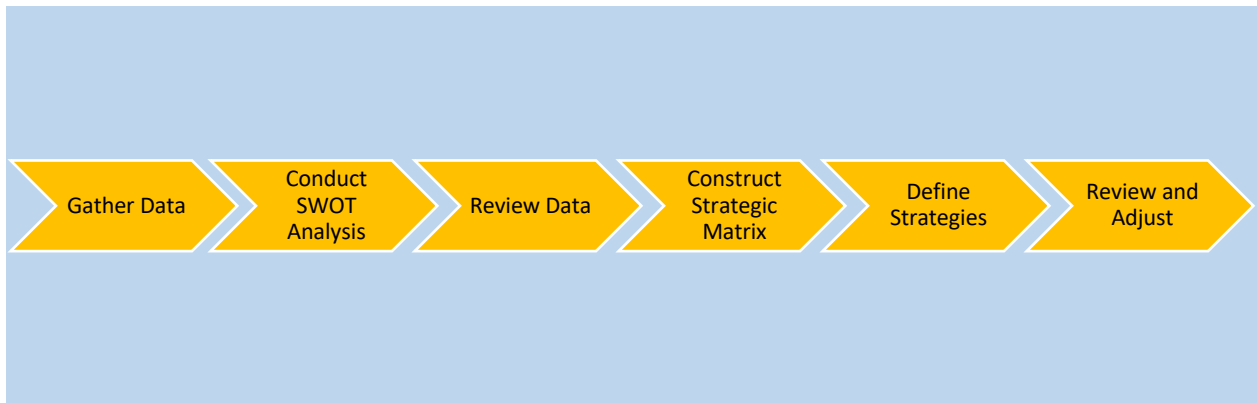
5.4 Annual Institutional Effectiveness Report

The VP of institutional effectiveness in collaboration with the SEAC committee prepares an annual institutional effectiveness report on the achievement of intended outcomes. The annual institutional effectiveness report contains appropriate statistics and data on assessment findings, summarizes the SEAC's activities during the calendar year, and outlines assessment planning for the following year. The report is reviewed by the membership of the SEAC committee. The SEAC chairperson then provides the institutional assessment report to the President's Council and the Faculty Senate by December 1 of each year. The SEAC chairperson contacts the provost to schedule a presentation to the President's Council and to the Board of Directors.

6. Strategic Planning

Assessing institutional effectiveness yields key data revealing the extent to which AUHS' academic programs and its administrative departments are operating in alignment with the university's strategic goals. AUHS maintains a four-year strategic plan that brings to life the mission and vision of AUHS as a university. The strategic planning process (shown in Figure 6.1 below) begins with gathering facts, conducting a SWOT analysis, reviewing input, creating a strategic matrix, defining strategies, and then reviewing and adjusting the plan.

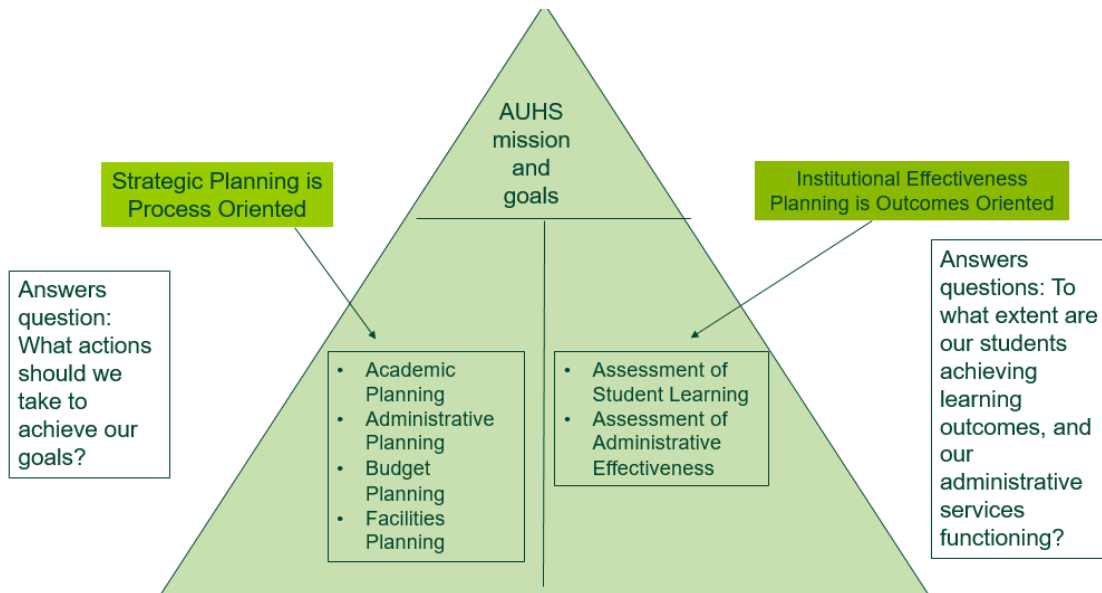
Figure 6.1 Strategic Planning



AUHS' culture of assessment and strategic planning facilitates effective decision making, selection of tactical options, and a higher probability of achieving its goals and missions. Oversight of AUHS' planning and budgeting processes is accomplished through the Strategic Planning Council comprised of key institutional leaders. The strategic council meets monthly and has the responsibility for building the strategic plan with input from the Board of Trustees, President's Cabinet, Faculty, Program Advisory Boards, Community of Interest, Students, Alumni, Administration, and Staff. Analyses of outcomes are utilized for the planning of academic, strategic, and fiscal operations which is a university-wide supported process with participation by several stakeholders.

The annual report by each unit is the main way that the plan's effectiveness is documented. Action plans include mission-related accomplishments as well as progress in achieving strategic plan goals, assessment and institutional effectiveness practices and the results of those efforts. Action plans also identify issues and goals upon which activity will be focused during the upcoming year. The relationship between strategic planning and institutional effectiveness planning at AUHS is shown below.

Figure 6.1.2 Strategic Planning and Institutional Effectiveness Planning at AUHS



7. University Assessment Management Systems and Tools

Based on an assessment of assessment practices, effective July of 2024, AUHS transitioned from using educational software solutions by Watermark Insights to using outcomes assessment within the Canvas Learning Management System. This change was piloted in July of 2024 and will be implemented in SON assessment beginning in 2025. The SOP will follow in Summer 2025.

7.1 Canvas

The Canvas LMS structure includes assessment of student learning capabilities. Faculty can assess course, program and institutional level outcomes using a rubric directly in their Canvas course shell. Assessment data can be collected within Canvas and downloaded for analysis. Data is downloaded by the VP of IE at the end of each quarter and shared with program deans for analysis. Based on this analysis, assessment data is used to create course specific action plans to address any deficiencies or to improve student achievement.

7.2 ATI

ATI has created Claire, the first AI-powered aide designed specifically for Nurse Educators. Now available in Custom Assessment Builder, Claire generates multiple-response and multiple-choice questions in less than half the time faculty now spend. Custom Assessment Builder enables educators to create and maintain exams quickly and easily by pulling from an expansive ATI question bank or by creating their own custom questions.

Custom Assessment Builder is packed with features that help educators accurately assess and report on student knowledge and progress.

The robust analytical test-authoring features of Custom Assessment Builder include:

- Ability to author questions
- Enhanced scoring options
- Ability to build case studies
- Score adjustments to full credit

Concept-based curriculums” (<https://www.atitesting.com/educator/solutions/custom-assessment-builder/>)

ATI is used for assessment of Course Learning Outcomes within the BSN program.

7.3 EvaluationKIT

EvaluationKIT by Watermark Insights is the software tool through which the office of institutional research and assessment, in collaboration with marketing, administers its surveys and course evaluations, and furnishes reports. Through EvaluationKIT, surveys are administered to indirectly assess student learning, as well as to measure the perceived effectiveness of policies and processes, and departments. EvaluationKIT has built in features to capture quantitative data, qualitative feedback, and comments from respondents. The analytical features produce summary results of both quantitative and qualitative data, thus facilitating reports. Examples of surveys that are administered through EvaluationKIT include: AUHS Course and Instructor Evaluations, student satisfaction inventory (SSI), leadership effectiveness, preceptor surveys, and Readiness for Interprofessional Learning Survey.

8. Assessment of Assessment Practices

To ensure continuous improvement of assessment processes and tools, the SEAC participates in a reflective review every five years. The review includes an examination of sustainability to provide a structure for positively navigating changes in institutional personnel, resources, and priorities. This review includes the following.

Assessment Instruments and Processes

- Review of instruments or processes used to measure specific outcomes, institutional goals, or key performance indicators.
- Consider additional instruments or processes needed to improve data collection, analysis, or implementation.
- Identify areas of unnecessary or un-aligned data collection.
- Adjust the assessment schedule as needed.

Application, Analysis and Reporting

- Ensure the institution’s processes and academic programs follow best practices in higher education to address requirements of external accreditors, auditors, and agencies.
- Create a summary of recommendations for review and consideration based on the analysis of collected data that reflect accepted best practices.

- Make refinements to ensure that assessment findings are presented clearly and understandably to primary stakeholders.

Review and Implementation of Assessment

- Ensure assessment findings and recommendations are actively reviewed by key administrators and faculty. The administration ensures that IR and Assessment functions are included in the university strategic planning process, and that data is presented by IR at university updates.
- Ensure both Faculty and key administrators are involved in recommendations for modifications, adjustments, revisions, and other changes in programs and curriculum based on assessment findings as reflected in committee meetings.

Schedule of Assessment of Assessment Practices
2024
2029
2034

9. GLOSSARY

Academic Program Review – a systematic and recurring process of analyzing academic programs through self-assessment and critical reflection for the purpose of strengthening them. The findings of program review are closely connected to strategic planning, budgeting, and resource allocation decisions.

Action Plan –Based upon evidence collected, an AUHS action plan identifies specific changes that will be made to refine curriculum, instructional strategies, or improvements to the functioning of non-academic administrative units.

Administrative unit outcomes (AUOs) –a set of concise statements specifying goals to be achieved for the effective functioning of each administrative department of the university.

Annual Program Assessment Report – stemming from its programmatic mission, each school produces an annual program assessment report summarizing overall achievement of program learning outcomes relative to established performance standards or benchmarks.

Assessment: A systematic process of inquiry through which evidence is collected, reviewed, and reflected upon for the purpose of improving student learning and development. Assessment is focused on the learner.

Academic Program Assessment Report - a document produced annually which summarizes findings on achievement of student learning outcomes and containing meaningful reflection on those findings. The report documents the changes that will be made to improve curriculum and instruction as a result of findings.

Co-Curricular– An activity or program sponsored by an academic program, or by the university which typically takes place outside of the classroom and contributes meaningfully to the student learning experience and development. Aligned with the mission of the university, co-curricular activities include volunteer service, community service, advocacy, research, leadership roles in student organizations.

Course Learning Outcomes (CLOs) – a set of written statements specifying what the student should know and be able to do upon successful completion of the course.

Course Objectives – a set of statements describing the expected goals, subject matter or content covered in a course. For BSN, the term “objectives” is used on syllabi to specify learning outcomes.

Curriculum Map – A visual representation of an academic program specifying the sequence of courses in which program learning outcomes are met at heightened levels of expected student mastery.

Direct Assessment: Methods through which a professional observer examines evidence to determine achievement of an outcome.

Grading –judging the quality of student work or course performance; intentionally communicated to an audience as a single numeric score, or letter.

Indirect Assessment: Methods of gauging achievement which rely upon inference (e.g. surveys completed by students, course evaluations, interviews, and focus groups).

Interprofessional Education (IPE) - education involving educators and learners from two or more health professions and their foundational disciplines who jointly create and foster a collaborative learning environment. The goal of these efforts is to develop knowledge, skills and attitudes that result in interprofessional team behaviors and competence.

Institutional Learning Outcomes (ILOs) – a set of statements specifying what all graduates of the university, regardless of degree program should know and be able to do upon graduation. Also specify the values, dispositions, and habits of mind that our students should develop over time.

Institutional Effectiveness Report comprised of assessment reports from academic programs, administrative and academic support units, ILO achievement and academic program review activities.

Outcomes-Based Assessment – A purposefully planned process of inquiry designed to gauge success on a defined set of performance criteria with the intention of effecting continuous improvement.

Program Learning Outcomes (PLOs) – a set of statements describing what each graduate of the program should know and be able to do upon successful completion of the program. Program Learning Outcomes also identify the habits of mind, or dispositions that our students should develop over time and embody (e.g. respect, leadership competencies, professionalism)

Rubric –A scoring guide or grid that establishes performance criteria in qualitatively defined terms, and clearly communicates expectations and standards.

References


Seymour, D., and Bourgeois, M. (2018). *Institutional Effectiveness Fieldbook: Creating Coherence in Colleges and Universities*. Olive Press.

Appendices

Appendix 1 Assessment Plan Template Sample

Assessment and Review Schedule			
Outcome #	Program or Course Learning Outcome	Signature Assignment or measurement tool	Date Assessed
1.			
2.			
3.			
4.			

Appendix 2 Action Plan Template - Sample

		<h1>Action Plan</h1>			
Office/Department		School of Nursing – BSN			
Date		03/10/24			
Data Assessed	Goal	Improvement Plan	Person Responsible	Due Date	Result
Assessment of Critical Thinking Data from N420	Increase to a min of 70% of students at a 3 or 4 and an overall minimum score of 3	Create targeted instruction and opportunities for practice in <i>Interpretation</i>	BSN and General Education Department	Winter 2025	
Assessment of Critical Thinking Data from N420	Automate collection of data and identify ways to increase faculty compliance	Systematically collect more data	SON	Winter 2025	Based on an assessment of the assessment processes, AUHS is switching to Canvas for all assessments. Testing: Summer 2024; Full launch Winter 2025
Assessment of Critical Thinking Data from N420	Evaluate possibility of using ATI Scores for next assessment	Triangulate data with industry standards	SON	Fall 2024	Faculty training was offered throughout July. Faculty will now have the option to assess CLOs using the ATI AI Claire
Assessment of Critical Thinking Data from N420	Re-evaluate Critical thinking mapping	Ensure accuracy	SON	Winter 2025	

Approvals

SEAC: 07/18/2024

Faculty Senate: 09/13/24

PAC: 09/26/24