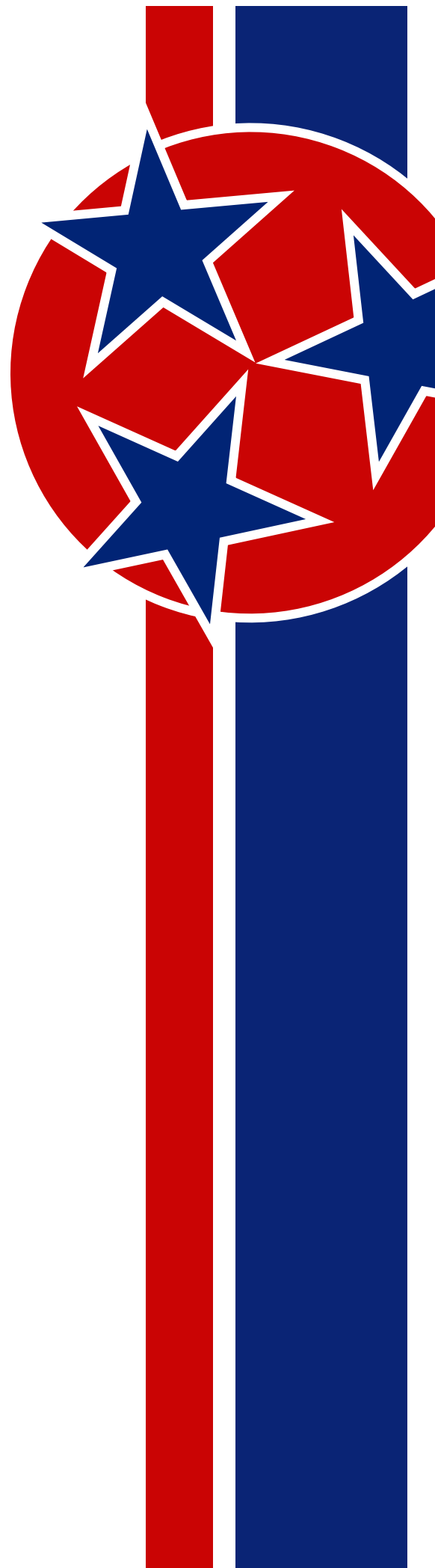


**Tennessee Higher
Education
Commission**

2010-2015
Performance
Funding
Quality Assurance

July 2010





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2010-15 Performance Funding Cycle *Overview*

The Performance Funding Program has been in place for over thirty years as an assessment incentive for all public colleges and universities to measure student learning and institutional effectiveness. Institutions have been able to earn up to an additional 5.45 percent of operations budgets based on performance on a number of measures common to all. These measures include program review and accreditation results, student scores on tests of general education and major field tests, licensure rates, and more. Until the development of the 2010 Outcomes-based Formula, Performance Funding also included measures of student retention and graduation. These productivity measures have been reassigned to the formula for the 2010-15 Performance Funding cycle. The new Performance Funding standards will focus entirely on quality assurance.

Usefulness of Performance Funding

Aside from being a highly public accountability annual report for each institution, the Program has required each institution to build mature institutional effectiveness operations, and the evidence of these operations holds them in good stead with their institutional and specialized accreditors. Complying with the statewide standards of the Performance Funding program has, therefore, resulted in institutions having fully operational institutional effectiveness programs and comfort with many assessment processes.

Defining Features of the 2010-15 Performance Funding Standards

- The next five years will closely ally Performance Funding with the Outcomes-based Formula and will also serve as the accountability piece for the Master Plan. These connections are more organic than in the past cycles.
- The 2010-15 standards greatly simplify the reporting obligations of campuses from previous cycles while focusing sharply on academic integrity and institutional quality.
- The measures of the standards draw on existing data and do not require institutions to collect and report additional information.
- The annual results of institutional performance will be made public and will be paired with formula results, thus serving as a unified accountability system.

The 2010-15 Performance Funding standards reflect the professional judgment of the Advisory Committee with representation from institutions and University of Tennessee and Tennessee Board of Regents system staff. The Scoring Sub-Committee has been responsible for developing metrics and scoring mechanisms and providing operational strategies in the development of the 2010-15 standards. The Commission staff expresses appreciation for the contributions of both committees.



2010-15 Performance Funding Cycle *Performance Funding Advisory Committee Scoring Sub-Committee*

Advisory Committee

- **Jack Armistead**, Tennessee Tech University, Vice President for Academic Affairs
- **Todd Diacon**, University of Tennessee, Executive Director Academic Assessment & Program Support
- **Susan E. Graybeal**, Northeast State Community College, Vice President Institutional Effectiveness
- **Katie High**, University of Tennessee, Interim Vice President for Academic Affairs and Student Success
- **Bill Kirkwood**, East Tennessee State University, Vice Provost for Undergraduate Education
- **Ken Looney**, Tennessee State University, Associate Vice President Academic Affairs
- **Susan D. Martin**, UT Knoxville, Provost & Senior Vice Chancellor for Academic Affairs
- **Dan Poje**, University of Memphis, Assistant Vice Provost Academic Programs
- **Tom Rakes**, University of Tennessee, Martin, Chancellor
- **Randy Schulte**, Tennessee Board of Regents, Assistant Vice Chancellor for Academic Affairs
- **Paula Myrick Short**, Tennessee Board of Regents Vice Chancellor for Academic Affairs
- **Janet Smith**, Columbia State Community College, President
- **Mary Tanner**, UT Chattanooga, Dean, College of Health, Education and Professional Studies
- **Ellen Weed**, Nashville State Community College, Vice President for Academic Affairs
- **Anthony Wise**, Pellissippi State Community College, Vice President, Learning Division
- **Bonnie Yegedis**, University of Tennessee, Vice President for Academic Affairs and Student Success

Scoring Sub-Committee

- **Karen Brunner**, Roane State Community College, Assistant VP for Institutional Effectiveness
- **Debra Scott McCarter**, Walters State Community College, Vice President for Planning, Research and Assessment
- **Michael McFall**, University of Tennessee, Knoxville, Assistant Director, Institutional. Research and Assessment
- **Patricia Mulkeen**, Austin Peay State University, Director of Institutional Research & Effectiveness
- **Mark Stephens**, Tennessee Tech University, Associate Vice President for Academic Affairs
- **Ellen Weed**, Nashville State Community College, Vice President for Academic Affairs

Commission Staff

- **Richard G. Rhoda**, Executive Director
- **Betty Dandridge Johnson**, Assistant Executive Director for Academic Affairs
- **Russ Deaton**, Director of Fiscal Policy and Facilities Analysis
- **Linda Doran**, Associate Executive Director for Academic Affairs
- **David Wright**, Associate Executive Director for Policy, Planning and Research



2010-15 Performance Funding Cycle
Overview of Standards by Sector

Standard One –Quality of Student Learning and Engagement (75%)

	Community Colleges	Universities
A. General Education Assessment	15	15
B. Major Field Assessment	15	15
C. Academic Programs: Accreditation and Evaluation	15	25
D. Satisfaction Studies	10	10
E. Job Placement	10	--
F. Assessment Implementation	10	10

Standard Two - Quality of Student Access and Student Success (25%)

	Community Colleges	Universities
Institutions focus on five sub-populations:		
1) Adult	25	25
2) Low-income		
3) African American,		
4) Hispanic		
5) Males		
6) High Need Geographical Area		
7) STEM		
8) Health		
9) High Need		
10) Institutional Selection		
11) CC Transfers with 24 SCH to Universities		
12) AA/AS/AST Transfers		
13) TN Community College Graduates who Complete Bachelor's degrees		



2010-15 Performance Funding Cycle *Institutions' Reporting Calendar*

Year 1: 2010-11

June 1, 2010	Submit General Education Assessment Selection for 2010-15 cycle
October 1, 2010	Submit Planning File for Academic Programs and Major Field Assessment
November 1, 2010	Identify student sub-populations
December 15, 2010	Submit 2010-15 calendar for Assessment Implementation
March 1, 2011	Submit Proposal for Alumni Satisfaction Project
Spring 2011	Conduct Student Engagement Survey (NSSE/CCSSE)
August 1, 2011	Submit Annual Performance Funding Report (year 1)

Year 2: 2011-12

2011-2012	Implement Alumni Satisfaction Project
March 1, 2012	Submit proposal for Employer Satisfaction Project
August 1, 2012	Submit Annual Performance Funding Report (year 2)

Year 3: 2012-13

2012-2013	Implement Employer Satisfaction Project
August 1, 2013	Submit Annual Performance Funding Report (year 3)

Year 4: 2013-14

Spring 2014	Conduct Student Engagement Survey (NSSE/CCSSE)
August 1, 2014	Submit Annual Performance Funding Report (year 4)

Year 5: 2014 -15

August 3, 2015	Submit Annual Performance Funding Report (year 5)
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Standard One – Quality of Student Learning Environment and Engagement

1A. General Education Assessment

Points: 15 points

Purpose: This standard is designed to provide incentives to institutions for improvements in the quality of their undergraduate general education program as measured by the performance of graduates on an approved standardized test of general education.

Evaluation: Foundation testing is measured by the overall performance (mean score) of an institution. National norms will be drawn from the same population as the institution, e.g., for two-year institutions, the national norm will be drawn from all two-year institutions utilizing the particular instrument chosen by the institution.

Processes:

1. Institutions must use the California Critical Thinking and Skills Test (CCTST), College Basic Academic Subjects Examination (College BASE), Collegiate Assessment of Academic Proficiency (CAAP), or ETS Proficiency Profile to measure performance for this indicator. Institutions which elect to use the College BASE, CAAP or ETS Proficiency Profile are permitted to select from either the long or short versions of each test. Institutions must notify the Commission and governing board staff of their general education test decision by June 1, 2010.
2. Testing for this standard will be applied to all undergraduate students who have applied for graduation (either at the associate or baccalaureate level). Students who are pursuing certificate degrees are excluded from testing. Four-year institutions should not test students in associate degree programs.
3. Students graduating in all terms of the academic year (summer, fall, and spring terms) are subject testing.
4. Institutions graduating more than 400 students in any year may apply to the Commission, through the governing boards, for permission to test a representative sample of graduates. At least 15% of the graduates must be tested if an institution chooses to sample, but in no case should fewer than 400 students be tested. Furthermore, documentation is required demonstrating that the sample is statistically representative of the institution's graduates.
5. Institutions may exclude students from testing for “good cause.” Good cause exemptions must be supported by documentation from the institution’s chief academic officer. Exceptions should not be approved for simple inconvenience. This material should be available for review by Commission staff if needed.
6. A copy of the score notification letter from the testing company must accompany the Performance Funding Reporting Template.

Scoring: Performance on general education assessment will be evaluated in two ways: (1) For years 1-3, comparison of the institutional average score for a given cycle year with the national average for that year and (2) For years 4-5, comparisons of the institutional average score for a given cycle year with the three-year moving average and the national average. For the national comparison, institutions must use the appropriate reference group based on the national average available for the general education assessment. (For example, if Austin Peay State University elects to use the ETS Proficiency Profile exam, their institutional average will be compared with the national norms for all other Master’s level institutions.)

Comparisons will be made by dividing the institutional average by its national average (or three-year average) for that cycle year (no percent attainment may exceed 100%). The overall percentages for the national norm and institutional trends will be rounded to the nearest whole percentage which will be compared with Table 1 to award points for the General Education standard. Table 1 will be used for the first three years of the 2010-15 cycle. Beginning in year 4, the general education assessment will be evaluated by both a national comparison (Table 2A) and institutional trend (Table 2B).

**Table 1: General Education Scoring Table
Scoring for Years 2010-11, 2011-12, and 2012-13**

% Institution to Nat'l Avg	Below 70%	70% to 71%	72% to 73%	74% to 75%	76% to 77%	78% to 79%	80% to 81%	82% to 83%	84% to 85%	86% to 88%	89% to 91%	92% to 93%	94% to 95%	96% to 97%	98% to 99%	100%
Points	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

**Table 2A: General Education Scoring Tables
Scoring for Years 2013-14 and 2014-15
National Norm Comparison**

General Education – National Norm Comparison (10 points)

% Institution to National Average	Below 70%	70% to 74%	75% to 78%	79% to 81%	82% to 84%	85% to 87%	88% to 90%	91% to 93%	94% to 96%	97% to 99%	100%
Points	0	1	2	3	4	5	6	7	8	9	10

**Table 2B: General Education Scoring Tables
Scoring for Years 2013-14 and 2014-15
Institutional Trend**

General Education – Institutional Trend (5 points)

% Institution to Trend	Below 74%	75% to 81%	82% to 87%	88% to 93%	94% to 99%	100%
Points	0	1	2	3	4	5

References:

- Appendix A – General Education Test Selection

Websites:

- California Critical Thinking Skills Test (CCTST) www.insightassessment.com
- ETS Proficiency Profile (formerly MAPP – Measure of Academic Proficiency and Progress) www.ets.org
- College BASE (College Basic Academic Subjects Examination) <http://arc.missouri.edu/>
- Collegiate Assessment of Academic Proficiency (CAAP) <http://www.act.org/caap>

Standard One – Quality of Student Learning Environment and Engagement

1B. Major Field Assessment

Points: 15 points

Purpose: This indicator is designed to provide incentives for institutions to improve the quality of major field programs as evaluated by the performance of graduates on approved examinations.

Evaluation: A major field will be considered successful if the test score is either at or above a recognized norm or shows improvement over the institution's most recent test score (or a baseline score for new tests). All programs will be reported once during the five-year cycle with the exception of licensure programs. All licensure programs will be reported annually.

Processes:

1. Prior to the beginning of the cycle, a list of approved major field tests will be developed by the Commission. During the cycle, tests may be submitted through the governing boards to the Commission for consideration for inclusion to the approved list. Refer to Appendix B for a listing of all approved major field tests.
2. In major areas in which national standardized tests are not available, or where faculty do not consider available tests appropriate, institutions may develop test instruments - either on a single campus or in concert with other institutions. If such assessments are developed, plans should be made for pilot testing to provide for evaluation and to develop scores for subsequent comparison for scoring purposes. The plan for test construction must include a schedule of activities, sampling procedures, and credentials of cooperating institutional staff or credentials of external consultants. These plans should be submitted to both the governing boards and Commission staff for prior approval. Please refer to Appendix C for additional information regarding test construction.
3. If an institution develops a local test instrument, no more than 20% of the test content may be modified between testing cycles. This ensures data continuity and comparability of results. A locally developed test that is changed by 20% or more will be treated as new test and must adhere to the same procedures as stated above.
4. Institutions must submit a testing schedule which ensures that approximately 20% of programs are tested each year. This schedule must be approved by the governing board and Commission staff. Each institution will notify the governing board and Commission of its testing schedule for all programs by October 1, 2010.
5. All scores for licensure programs at the associate and baccalaureate level will be reported annually. Licensure programs include engineering, health and teacher education.
6. Scoring will be cumulative and new scores will be added in each succeeding year of the cycle.
7. Test performance comparison will vary depending on the type of the test used to assess the academic program. All licensure programs will be compared with the appropriate national pass rate. Programs that use standardized tests (e.g., ETS, ACAT) will use the national comparison. All programs that use locally developed instruments will use their prior score as reported in the 2005-10 performance funding cycle. Test scores for programs that use newly locally developed tests will be excluded from the performance funding calculation.
8. When a program is assessed for this standard, students graduating in the fall and spring terms must be tested. Exceptions for individual students (for good cause) must be approved by the chief academic officer. Exceptions should not be approved for simple inconvenience.
9. For purposes of this standard, a major field is defined as all programming at one degree level bearing the same name. For example, a B.A. and B.S. in Psychology would be

considered as one field. Other closely related fields may be considered as one field at the request of the institution and the approval of the governing board and the Commission.

10. If both associate and baccalaureate degrees are offered in a field and if testing is appropriate to both levels (e.g., nursing), then all graduates at both levels must be tested and reported.
11. Programs will be exempt from the requirements of this standard if any of the following conditions exist:
 - Program is a certificate program.
 - Program is a performance-oriented program in the fine or performing arts.
 - Program is interdisciplinary, multidisciplinary, or self-designed to include several related fields.
 - Baccalaureate programs that have not generated an average of 10 students per year, or a minimum of 50 graduates during the time period 2004-05 to 2008-09. Associate programs that have not generated an average of 10 students per year or a minimum of 30 graduates during the time period 2006-07 to 2008-09.
 - Program is in phase-out or inactive status at the beginning of the cycle. If a program becomes inactive during the cycle, the scheduled program shall be exempt from the major field testing requirements.
 - New programs approved during the 2005-10 performance funding cycle that have not reached maturity will be exempt from the testing requirement. Program maturity for associate degree programs is a three-year period after implementation; program maturity for baccalaureate programs is a five year period after implementation. New associate degree programs approved by the Commission after the 2010-15 cycle begins, unless they are excluded due to one of the other exemptions and reach program maturity during the cycle must be scheduled for testing. Since baccalaureate programs require five years to reach maturity, new baccalaureate programs that were approved after July 2010 would not mature until 2015 and thus would be exempt from the major field testing requirement.
12. Institutions may submit other programs for exemption through their respective governing board for consideration by the Commission.
13. A copy of the results from the scoring template must be included with the Performance Funding Reporting Template for each reported program.

Scoring:

Performance for major field assessment will be evaluated by comparing the program's average score with an external norm or institution's average test score. Test performance comparison will vary depending on the type of test used to assess the academic program. All licensure programs will be compared with the appropriate national pass rate. Programs that used standardized tests (e.g., ETS, ACAT) will use the national comparison. All programs that use locally developed instruments will use their prior score as reported in the 2005-10 performance funding cycle. Test scores for programs that use newly locally developed tests will be excluded from the performance funding calculation.

This comparison is made by dividing the institutional average by its comparison score average for that cycle year (no attainment may exceed 100%). This overall percentage will be rounded to the nearest whole percentage point which will be compared with Table 3 to award points for the Major Field Assessment standard.

Table 3: Major Field Assessment Scoring Table

% Institution to Na'l or Prior Avg	Below 70%	70% to 71%	72% to 73%	74% to 75%	76% to 77%	78% to 79%	80% to 81%	82% to 83%	84% to 85%	86% to 88%	89% to 91%	92% to 93%	94% to 95%	96% to 97%	98% to 99%	100%
Points	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

References:

- Appendix B – Approved Major Field Tests
- Appendix C – Major Field Assessment Planning and Construction

Standard One – Quality of Student Learning and Engagement

1C: Academic Programs: Accreditation and Evaluation

Points: 15 points for community colleges and 25 points for universities

Purpose: This assessment indicator is designed to provide incentives for institutions to achieve and maintain program excellence and accreditation.

Evaluation: For those programs that are accreditable, evaluation will be based on the percentage of eligible programs which are accredited. For those programs that are non-accreditable, evaluation will be based on a set of objective standards. Institutions will have the flexibility to use either the traditional program review or Academic Audit to evaluate non-accreditable programs.

Accreditation:

1. Only programs which appear on the Tennessee Higher Education Commission's Academic Program Inventory are eligible under this standard. Options and concentrations are not covered under this standard, even if separately accredited.
2. A program is defined as eligible for the accreditation aspect of this indicator if there is a recognized agency which accredits programs for that field and degree level. Commission staff will maintain a list of approved accrediting agencies. The Commission reserves the right to determine if program accreditation is consonant with institutional mission and/or the state master plan for higher education.
3. Institutions or groups of institutions may petition the Commission through their respective governing boards to add or delete accrediting agencies from the approved list located in Appendix C. An agency may be added or deleted upon affirmation from a majority of the institutions affected by the nominated agency. If an accrediting agency is added to the approved list, current programs impacted by this decision will be exempt from achieving accreditation during the 2010-15 cycle. If an accrediting agency is removed from the list and the program accreditation expires before the 2010-15 cycle ends, the academic program will be subject to peer review during the 2010-15 cycle.
4. All academic programs should be considered for **accreditation**, unless they meet the following exceptions:
 - Have been approved by the Commission for fewer than three years for pre-baccalaureate programs and fewer than five years for baccalaureate and graduate programs;
 - Have been terminated or are being phased out by governing board action;
 - Have been placed on "inactive" status by the governing board;
 - Appropriate accrediting agency does not exist;
 - Have obstacles to accreditation because of program organization or curriculum.
5. Each institution will submit to the governing boards and Commission documentation in support of all accredited programs by October 1, 2010.
6. Proposals for changes in the eligibility of accredited programs must be submitted to Commission staff by January 1 of each year of the cycle.
7. If multiple programs are accredited by a single agency, each program counts separately for this indicator.

8. A program eligible for accreditation by more than one agency will be counted only once for this indicator, although all accreditation must be reported so that the Commission can maintain accurate accreditation information.

Scoring – Accreditation:

The number of accredited programs will be divided by the total number of accreditable programs to calculate the overall accreditation percentage. This percentage is used to generate points for this standard based on Table 4 Accreditation.

Table 4: Accreditation Scoring Table

% Accredited Programs	Below 74%	75% to 81%	82% to 87%	88% to 93%	94% to 99%	100%
Points	0	1	2	3	4	5

Processes – Program Review and Academic Audit

1. All non-accreditable certificate and degree programs must be evaluated through the traditional program review or Academic Audit. The only exception is for non-accreditable programs that are in phase-out or inactive status at the beginning of the cycle. If a program becomes become inactive during the cycle, the scheduled program will also be exempt. Institutions will have the flexibility in determining which evaluation method is most suitable for the program review process.
2. The traditional program review must be conducted by at least one qualified out-of-state external reviewer. Selection of reviewers is subject to review by governing boards and Commission staff. The Academic Audit process must be conducted by the guidelines established by the Tennessee Board of Regents.
3. All programs approved by THEC as of November 2009 are subject to review during the 2010-15 cycle. New programs approved after January 2010 and reaching program maturity during the 2010-15 cycle can be evaluated. Program maturity for certificate and associate degree programs is defined as a three-year period after implementation; program maturity for baccalaureate and graduate programs is a five-year period after implementation. Prior to program maturity, new programs are subject to the annual Post-Approval Monitoring guidelines as set forth in THEC Academic Policy A1.1 for Academic Proposals.
4. Each institution will notify the board and Commission of its schedule and evaluation type for all non-accreditable programs by October 1, 2010. All institutions must schedule non-accreditable certificate and degree programs within a five to seven year period. *The program review cycle will mirror the average accrediting cycle award of seven (7) years. Institutions may elect to review program on a five to seven-year period depending on their institutional effectiveness plans.*
5. Care must be taken in establishing the review schedule, for it is expected that the institution will strictly adhere to it. Requests for changes to the schedule must be approved by governing board and Commission staff by January 1 of the reporting year.
6. Scoring will be cumulative and new scores will be added in each succeeding year of the cycle.
7. For each non-accreditable program reviewed through the traditional peer review process, the completed summary evaluation sheet, narrative report and vitas of the external reviewer(s) must be included with the institution’s performance funding reporting template.

8. For each non-accreditable program reviewed using the Academic Audit process, the completed summary evaluation sheet, narrative report and list of audit team members must be included with the institution’s performance funding template. THEC reserves the right to request additional documentation related to accreditation and program review as needed.
9. If the program under review contains an embedded certificate, the review of this program will be completed as part of the associate degree program. An embedded certificate is defined as a technical certificate program with the following characteristics: (1) a technical certificate approved by the Tennessee Board of Regents (and THEC if applicable); (2) a technical certificate whose curriculum, content and requirements are contained within the greater requirements of a related associate degree program; and (3) a technical certificate for which the related degree program assumes responsibility for quality control and assurance.

Scoring for Non-Accreditable Undergraduate Programs:

For non-accreditable undergraduate programs, scoring is accomplished by dividing the total number of successful standards met by the total number of scored standards, excluding those judged “Not Applicable.” The resulting percentage will be applied to Table 5 to award points.

**Table 5: Non-Accreditable Undergraduate Programs
Program Review and Academic Audit**

% Successful Standards	Below 71%	72% to 74%	75% to 77%	78% to 80%	81% to 83%	84% to 86%	87% to 89%	90% to 92%	93% to 95%	96% to 98%	99% to 100%
Points	0	1	2	3	4	5	6	7	8	9	10

Scoring for Non-Accreditable Graduate Programs – Program Review:

For non-accreditable graduate programs using the traditional program review, scoring is done by averaging all criteria for the program being evaluated, excluding those items judged “not applicable.” The resulting value is compared to Table 6 to award points.

**Table 6: Non-Accreditable Graduate Programs
Traditional Program Review**

Average	0 - .2	.3 - .5	.6 - .8	.9 – 1.1	1.2 – 1.4	1.5 – 1.7	1.8 – 2.0	2.1 – 2.3	2.4 – 2.6	2.7 – 2.8	2.9 – 3.0
Points	0	1	2	3	4	5	6	7	8	9	10

Scoring for Non-Accreditable Graduate Programs – Academic Audit:

For non-accreditable graduate programs using the Academic Audit, scoring is accomplished by dividing the total number of successful standards met by the total number of scored standards, excluding those judged “Not Applicable.” The resulting percentage will be applied to Table 7 to award points.

**Table 7: Non-Accreditable Graduate Programs
Academic Audit**

% Successful Standards	Below 71%	72% to 74%	75% to 77%	78% to 80%	81% to 83%	84% to 86%	87% to 89%	90% to 92%	93% to 95%	96% to 98%	99% to 100%
Points	0	1	2	3	4	5	6	7	8	9	10

Scoring for Non-Accreditable Graduate Programs – Traditional Program Review and Academic Audit

For non-accreditable graduate programs using the traditional program review or Academic Audit, the scoring process recognizes each program as one incidence cumulatively. Each program is weighted equally in computing the overall points as reflected in Tables 6 and 7. An average is computed based on the resulting points from Tables 6 and 7, rounded to the nearest whole number.

References:

- Appendix D – Approved Accreditation Agencies
- Appendix E – Program Review Assessment: Certificate and Associate
- Appendix F – Program Review Assessment: Baccalaureate
- Appendix G – Program Review Assessment: Graduate Programs
- Appendix H – Academic Audit: Undergraduate Programs
- Appendix I – Academic Audit: Graduate Programs

Website:

- Tennessee Board of Regents - Academic Audit (<http://www.tbr.state.tn.us/>)

Standard One: Quality of Student Learning and Engagement

1D. Satisfaction Studies: Student, Alumni and Employer

Points: 10 points

Purpose: This indicator is designed to provide incentives for institutions to improve the quality of their undergraduate programs as evaluated by surveys of undergraduate students, recent graduates, and regional and/or national employers of recent graduates.

Evaluation: In the 1st and 4th year of the cycle, institutions will administer a national student engagement survey to a representative sample of undergraduate students. In the 2nd year of the cycle, institutions will implement the Alumni Satisfaction Project. In the 3rd year of the cycle, institutions must survey their local, regional, and national employers as applicable. For the final year, institutions will supply evidence of actions taken based on the results of the student, alumni, and employer satisfaction studies. The information gained from all three of these surveys will allow institutions to have a better gauge of internal and external perceptions of their various clientele groups.

Processes and Scoring:

Student Engagement Survey

1. Institutions will administer a national student engagement survey to a representative sample of their undergraduate students. Universities will administer the *National Survey of Student Engagement (NSSE)* and community colleges will administer the *Community College Survey of Student Engagement (CCSSE)*. Both versions explore the perceptions of students regarding the programs, services and environment of the institution.
2. Institutions will follow the most recent sampling procedures of NSSE and CCSSE, which will determine the number of surveys based on the institution's fall enrollment. Universities will administer the survey using one of the following NSSE methods: paper, web+, or web-only. Community colleges will administer the CCSSE survey to students in randomly selected classes. Class selection will be determined by CCSSE.
3. Institutions will be awarded points based on peer comparison and institutional improvements on the benchmark measures.

Universities (NSSE)

- Universities will receive up to two points for each of the five NSSE benchmarks if the institution is at or above the benchmark mean for the institution's selected peers (1 point for First Year students, 1 point for Senior Year students). Institutions are considered to be at the same level of the selected peers if there is not a statistically significant difference between the institution and the peers. Statistically significant differences are those with a P-value less than 0.05 and an effect size of 0.2 or higher.
- Universities not receiving the full 10 points in the above calculation may earn a smaller amount of points based on the improvement in a benchmark for which they measure below their peers. Institutions may receive up to 1 point for each benchmark mean (0.5 for first year students, 0.5 for senior year students) that increases by 0.5 or more between the current and previous administration.
- Institutions will select a peer group that includes six institutions that are from SREB universities within the same Carnegie classification as the institution.

Community Colleges (CCSSE)

- Community colleges will be measured based on their performance compared to their peers and to themselves on the 38 questions that make up the CCSSE benchmarks. The points are assigned based on where in a range from 0-57 an institution falls. Up to 38 points can be gained for each question on which an institution scores at or above the peer mean. Institutions are considered to be at the same level of the cohort peers if there is not a statistically significant difference between the institution and the peers. Statistically significant differences are those with a P-value less than 0.05 and an effect size of 0.2 or higher.
- An additional 19 points is possible through institutional improvement. One point can be earned for each question on which an institution improves by 0.5 or more points when compared to the previous survey administration. While there are 38 possible questions on which to gain points for improvement, the maximum number of points awarded for improvement will be limited to 19 points. Improvement on half or more questions will secure the maximum improvement points for the institution.

Table 8: Scoring Overview: NSSE and CSSEE Benchmarks

NSSE Benchmarks			CCSSE Benchmarks		
Level of Academic Challenge	Peer Mean	Institutional Improvement	Active & Collaborative Learning	Peer Mean	Institutional Improvement *
First Year Students	1	0.5	7 questions	7	7
Senior Year Students	1	0.5			
Active and Collaborative Learning			Student Effort		
First Year Students	1	0.5	8 questions	8	8
Senior Year Students	1	0.5			
Student-Faculty Interaction			Academic Challenge		
First Year Students	1	0.5	10 questions	10	10
Senior Year Students	1	0.5			
Enriching Educational Experiences			Student-Faculty Interaction		
First Year Students	1	0.5	6 questions	6	6
Senior Year Students	1	0.5			
Supportive Campus Environment			Support for Learners	7	7
First Year Students	1	0.5	6 questions	7	7
Senior Year Students	1	0.5			
Total Possible Points	10	5	Total Possible Points	38	19

* While there are 38 questions on which to gain improvement points, only 19 improvement points will be awarded. Each question with an improvement of 0.5 or higher in the benchmark mean will receive one point. If an institution improves on more than 19 questions, the maximum improvement points awarded will be 19. If an institution improves on less than 19 questions, the institution will receive one point for each question where improvement was significant.

Table 9: CCSSE Scoring Table for Community Colleges

No. of successful questions (peer and/or improvement)	0	under 11	11-15	16-20	21-26	27-31	32-36	37-41	42-47	48-52	53+
Points Awarded	0	1	2	3	4	5	6	7	8	9	10

Processes and Scoring:

Alumni Satisfaction Project

1. An outline of the proposed *Alumni Satisfaction Project* must be submitted to the governing board and the Commission for approval by March 1, 2011. Proposals will be reviewed by Commission staff and an ad hoc group of performance funding coordinators from both 2-year and 4-year institutions. Institutions may be asked to review proposals based on the review.

This proposal must include:

- Rationale: Identify the overall focus of the project and describe how the study will assess the opinions of the alumni. Alumni research falls primarily into three categories: Alumni Outcomes, Student Engagement/Competencies and Alumni Giving. More information on these categories can be found in Appendix J.
- Sampling Plan and Population: Describe the sampling procedures and population used to generate valid results. Institutions may conduct mail surveys, telephone surveys, focus groups, or interviews with alumni. Alumni population is limited to undergraduate alumni only. Alumni are defined as individuals who have successfully completed a certificate or associate degree program at a community college or associate or bachelor's level program at a four-year institution.
- Proposed Survey or Questions: Include a draft of the survey instrument or sample questions for focus or interview method.
- Proposal should not exceed three pages excluding appendices.

Institutions are permitted to use the Alumni Survey from the 2005-10 performance funding cycle. The survey can be used in its entirety or modified to align with the research objectives.

During the proposal development stage, institutions are reminded that results from the Alumni Satisfaction Project will be used in the Comprehensive Satisfaction Studies Report. Results from all groups (students, employers and alumni) should be valuable in identifying improvement areas and developing strategies related to these areas.

2. The Alumni Satisfaction Project is to be implemented during the 2nd year of the cycle (2011-12).
3. Full points for the Alumni Satisfaction Project will be awarded if institutions implement their proposals as approved and provide a preliminary analysis of the results in the 2011-12 Performance Funding Report.

Processes and Scoring:

Employer Satisfaction Project

1. An outline of the proposed *Employer Satisfaction Project* must be submitted to the governing board and the Commission for approval by March 1, 2012. Proposals will be reviewed by Commission staff and an ad hoc group of performance funding coordinators from both 2-year and 4-year institutions. Institutions may be asked to review proposals based on the review.

This proposal must include:

- Rationale: Describe how the survey will assess the needs/opinions of regional employers of recent alumni.
- Sampling Plan: Describe the sampling procedures used to generate valid results. Institutions may conduct mail surveys, telephone surveys, focus groups, or interviews with recognized employers of recent graduates.
- Proposed Survey or Questions: Include a draft of the survey instrument or sample questions for focus or interview method.
- Proposal should not exceed three pages excluding appendices.

During the proposal development stage, institutions are reminded that results from the Employer Satisfaction Project will be used in the Comprehensive Satisfaction Studies Report. Institutions may want to consider asking employers how institutions could better prepare future graduates. These improvement questions coupled with student and alumni survey results should be valuable in identifying improvement areas and developing strategies related to these areas.

2. If institutions choose to administer a survey, then the survey must include the following items (using the response categories: excellent, good, fair, needs improvement, poor):
 - Written communication skills
 - Oral communication skills
 - Ability to work with others
 - Potential to lead or guide others
 - Problem-solving skills
 - Ability to understand and use technical information
 - Work ethic
 - Adaptability/Flexibility

If institutions do not administer a survey, and instead conduct focus groups or interviews, then the institution is not required to ask these exact questions, but should incorporate these themes into the research design.

3. The Employer Satisfaction Project is to be implemented during the 3rd year of the cycle (2012-13)
4. Full points for the Employer Satisfaction Project will be awarded if institutions implement their proposals as approved and provide a preliminary analysis of the results in the 2012-13 Performance Funding Report.

***Satisfaction Studies: Comprehensive Satisfaction Studies Report
(Student, Alumni and Employer Studies)***

1. During the final year of the 2010-15 performance funding cycle, institutions will supply evidence of actions taken based on the results of the student, alumni, and employer satisfaction studies. The report will provide evidence of usage of these three satisfaction studies for institutional planning and improvement.
2. Institutions will submit a Comprehensive Satisfaction Studies Report that includes the following sections:
 - Overview of the institution's design and administration of the three satisfaction surveys and a brief introduction to the satisfaction study. (0-1 points)
 - Analysis of the results of the satisfaction surveys, identifying area(s) for improvement and objectives to be accomplished by the fifth year of the cycle. (0-3 points)
 - Description of the implementation plan to use the survey results to initiate improvements, including action items, timeline, and success indicators. (0-2 points)
 - Description of patterns of evidence for the extent to which the desired implementation plan outcomes/objectives have been accomplished. (0-3 points)
 - Conclusion in which lessons learned from the five-year satisfaction study project will be used for continuous improvement. (0-1 points)

The report should not exceed 10 pages, excluding appendices.

3. The report will be assigned points based on the Scoring Rubric as outlined in Appendix K. Reports will be evaluated by staff from the governing boards and the Commission.

Calendar:Year 1: 2010-11

Administer Student Engagement Survey (CCSSE/NSSE)
Submit Alumni Satisfaction Proposal by March 1, 2011

Year 2: 2011-12

Implement Alumni Satisfaction Proposal
Submit Employer Satisfaction Proposal by March 1, 2012

Year 3: 2012-13

Implement Employer Satisfaction Proposal

Year 4: 2013-14

Administer Student Engagement Survey (CCSSE/NSSE)

Years 1 – 4

In order to prepare for the Comprehensive Satisfaction Studies Report, institutions are encouraged to analyze results from each survey/project, identify improvement area(s) and develop an implementation plan (e.g. action items, timeline and success indicators). This *internal* annual reporting process will facilitate the preparation of the fifth year report.

Year 5: 2014-15

Submit Comprehensive Satisfaction Studies Report

References:

- Appendix J – Alumni Research
- Appendix K – Scoring Rubric for Comprehensive Satisfaction Studies Report

Websites:

- Community College Survey of Student Engagement (www.ccsse.org/)
- National Student Engagement Survey (www.indiana.edu/~nsse/)

Standard One: Quality of Student Learning Environment and Engagement

1E. Job Placement

Points: 10 points for community colleges only

Purpose: The job placement standard is designed to provide incentives for community colleges to continue to improve job placement of their career program graduates.

Evaluation: Each major field career program (technical certificate and A.A.S.) will be evaluated by the placement rate of its graduates.

- Processes:**
1. Institutions will conduct a survey of graduates each year to determine the number placed. Graduates from the spring, summer and fall terms within a calendar year will be surveyed through June 30 of the following year. For example, graduates from spring 2009, summer 2009 and fall 2009 will be surveyed through June 30, 2011 and the results will comprise the report for the first year of the 2010-15 cycle.
 2. All career programs (technical certificates, A.A.S, and A.S.T.) must be evaluated. University parallel, professional studies (RODP) and academic certificate programs are not subject to evaluation.
 3. Auditable records of survey results must be maintained for at least two years.
 4. Following are permissible waivers for program completers:
 - Pursuing Further Education;
 - Medical Condition Preventing Work in Field of Study;
 - Family/Home Responsibilities;
 - Military Service; and
 - Volunteer/Religious Service.

These waivers will be excluded from the total number of eligible program completers. Permissible waivers should be indicated on the job placement survey instrument. Institutions will provide a copy of the job placement survey instrument as part of the annual reporting requirement.
 5. Institutions will be permitted up to a 5% maximum for non-respondents for all programs.
 6. Institutions must report waivers and placement rates by program.

Scoring: The placement rate will be calculated by dividing the total number of students placed in fields related to training by the total number of eligible completers. Scoring will be based on the overall placement rate for an institution. This placement ratio will be compared to Table 10 to award points on this standard.

Table 10: Job Placement Standard

Placement Rate	Below 64%	64% to 65%	66% to 67%	68% to 69%	70% to 71%	72% to 75%	76% to 78%	79% to 82%	83% to 86%	87% to 91%	92% to 100%
Points	0	1	2	3	4	5	6	7	8	9	10

Standard One: Quality of Student Learning Environment and Engagement

1F. Assessment Implementation

Points: 10 points

Purpose: Standard 1F evaluates the maturity and effectiveness of an institution's assessment processes as they relate to one of two types of student learning quality initiatives: (1) an institution-defined Quality Enhancement Plan (QEP) in response to SACS reaffirmation processes or (2) an alternate Student Learning Initiative (SLI) focusing on student learning and/or the environment supporting student learning. Maturity and effectiveness of an institution's assessment processes is shown by the use of what is commonly understood as the assessment process or cycle. That is,

- Decide what the institution is trying to accomplish (goals and objectives).
- Decide what assessment methods to use and the rationale for selecting them.
- Conduct the assessments or gather the evidence.
- Interpret the evidence. What happened? What was learned?
- Decide what should be done with this information. How will the institution use the information to improve the program?

Evaluation: Evaluation training will be provided using the scoring rubric (refer to Appendix L) to ensure consistency in application of standard criteria to the review of annual reports. Training will occur prior to Year 1 evaluation by a pool of individuals nominated by their presidents and selected by their governing board staff.

The focus of this standard is to show that the institution is following a mature and sophisticated assessment process while implementing a QEP or SLI. The institution will provide an essay not to exceed 10 double-space pages and

- Address the essay to an audience of peer readers;
- Support claims with documented evidence;
- Use hyperlinks to send the reader from the text to supportive data and evidence;
- Provide a "bibliography" of hyperlinked documents, data, and evidence cited in the essay; and
- Submit 6 CD copies of the report (for distribution to the peer readers) that capture all linked documentation.

Scoring: Points for this standard will be awarded annually based on the evaluation of the Standard 1F report. Reports will be assigned from 0 to 10 points based on an evaluation conducted by trained peer readers. The readers will examine the reports for the following traits and will assign points according to the scoring criteria identified below. By December 15, 2010 institutions will submit their five-year plan to identify the stage in development of the QEP/SLI project or progress toward sustaining it. The appropriate Scoring Rubric will be used to evaluate the annual report.

Developing QEP/SLI

1. Describe the QEP/SLI and explain why the institution will undertake this initiative to improve student learning and/or the environment supporting student learning. [0-3 points]

2. Refine the activity by stating the goals and objectives (What is being attempted? What are the intended outcomes?) [0-3 points]
3. Describe the assessment design (What are the assessment tools? Why were they chosen? Are there challenges to the assessment design?) [0-4 points]

Sustaining QEP/SLI

1. (a) Present a short review of the QEP/SLI activity (Why was it undertaken including goals and objectives?); (b) describe the actions for the year that were taken to accomplish goals and objectives. [0-2 points]
2. Describe the assessments taken during the year, why the assessments were used, and the methodology. [0-1 points]
3. Present this year's major findings and add previous findings as they are available. [0-2 points]
4. Discuss how the institution is improving the QEP/SLI based on the assessment results. [0-3 points]
5. (a) Evaluate the QEP/SLI (What is working? What is not working?) (b) Outline steps for next year (program implementation and assessment related). [0-2 points]

References:

- *Principles of Accreditation*, Commission on Colleges of the Southern Association of Colleges and Schools

Standard Two: Quality of Student Access and Success

Points: 25 points

Purpose: The Student Access and Success standard is designed to provide incentives for institutions to increase the number of graduates from select subpopulations. An institution will select those subpopulations particularly important to the institution’s mission and will measure the quality of its services dedicated to those subpopulations. The measure of the institution’s commitment will be student subpopulation success – greater number enrolled, retained, and graduated.

Evaluation: The comprehensive list of student sub-populations includes those individually identified by institutions as very important to their institutional mission and service area. Data are already available on these populations and institutions will not be obligated to collect additional student information. Institutions will declare a total of five student sub-populations from the following list:

1. Adult
2. Low-income
3. African American
4. Hispanic
5. Males
6. High Need Geographical Area
7. Science, Technology, Engineering and Mathematics (STEM) Fields
8. Health Fields
9. High Need Fields (as defined from the July 2010 Supply/Demand Study)
10. Institutional Selection
11. Community College Transfers with 24 student credit hours to Universities (*community colleges only*)
12. Associate Degree Program (AA/AS/AST) Transfers (*community colleges only*)
13. Tennessee Community College Graduates who Complete Bachelor’s degrees (*universities only*)

The deadline for submission of selected student sub-populations is November 1, 2010. Sub-population selections must be approved by governing board and Commission staff. Definitions and data sources for student sub-populations can be found in Appendix M.

Scoring: Progress toward improving success of student sub-populations will be evaluated by comparing the three-year number of graduates rolling average with the attainment in that year. This ratio is derived by dividing the attainment figure by the three year average (no attainment may exceed 100%). The resulting percent attainment will be rounded to the nearest whole percentage and compared to Table 11 to award points for this indicator. Points will be summed for all five student sub-populations with 25 maximum points recommended.

**Table 11: Quality of Student Access and Success
Student Sub-Populations**

% Percent Attainment	Below 80%	80% to 84%	85% to 89%	90% to 94%	95% to 98%	99% to 100%
Points	0	1	2	3	4	5



2010-15 Performance Funding Cycle *Appendices*

- Appendix A – General Education Assessment
- Appendix B – Approved Major Field Tests
- Appendix C – Major Field Assessment: Planning and Construction
- Appendix D – Approved Accreditation Agency List
- Appendix E – Program Review: Certificate and Associate Programs
- Appendix F – Program Review: Baccalaureate Programs
- Appendix G – Program Review: Graduate Programs
- Appendix H – Academic Audit: Undergraduate Programs
- Appendix I – Academic Audit: Graduate Programs
- Appendix J – Alumni Research
- Appendix K – Scoring Rubric for Comprehensive Satisfaction Studies Report
- Appendix L – Scoring Rubric for Assessment Implementation
- Appendix M – Student Sub-Populations



2010-15 Performance Funding Cycle Appendix A - General Education Assessment

This form should be used to select the general education assessment for the 2010-15 cycle. Additionally, institutions will need to submit a sampling plan if all graduating seniors are not tested. Institutions graduating more than 400 students in any year may apply for permission to test a representative sample of graduates. At least 15% of the graduates must be tested if an institution chooses to sample, but in no case should fewer than 400 students be tested.

Institution:

Population or Sample Selection

- Test entire graduating student population (summer, fall and spring)
- Test representative sample of the graduating student population (*Submit plan that addresses sampling process, total population and sample size.*)

Test Selection

- California Critical Thinking Skills Test (CCTST)** www.insightassessment.com

Delivery Method

- On line
- Traditional paper and pencil

- ETS Proficiency Profile** (formerly MAPP – Measure of Academic Proficiency and Progress) www.ets.org

Delivery Method

- On line
- Traditional paper and pencil

Test Length

- Standard (2 hours)
- Abbreviated (40 minutes)

- College BASE** (College Basic Academic Subjects Examination) <http://arc.missouri.edu/>

- All 4 subjects (180 questions)
- Modular Format Options
 - English
 - Mathematics
 - Science
 - Social Studies
 - Short form (College BASE 1:1)
 - Essay

Select 1 – 4 subject areas
for College BASE

- Collegiate Assessment of Academic Proficiency (CAAP)** <http://www.act.org/caap>

- Reading
- Writing Skills
- Writing Essay
- Mathematics
- Science
- Critical Thinking

Select 1 – 6 test modules (each
module is 40 minutes)

Assessments Used for Various Academic Programs

THEC Code/Name/Website	
001	Local Test
002	Cooperative Test
004	Educational Testing Service – Major Field Tests (MFT) http://www.ets.org/mft/about (Subject tests in 15 disciplines: ¹ Biology, ² Business, ³ Chemistry, ⁴ Computer Science ⁵ Criminal Justice, ⁶ Economics, ⁷ Education, ⁸ History, ⁹ Literature in English, ¹⁰ Mathematics, ¹¹ Music Theory and History, ¹² Physics, ¹³ Political Science, ¹⁴ Psychology and ¹⁵ Sociology)
022	Graduate Record Examination (www.gre.org/ttindex.html) (Subject tests in eight disciplines: ¹ Biochemistry, Cell and Molecular Biology, ² Biology, ³ Chemistry, ⁴ Computer Science, ⁵ Literature in English, ⁶ Mathematics, ⁷ Physics and ⁸ Psychology)
052	Area Concentration Achievement Test (ACAT) (www.collegeoutcomes.com) (Subject tests in eight disciplines: ¹ Agriculture, ² Biology, ³ Criminal Justice, ⁴ Geology, ⁵ History, ⁶ Political Science, ⁷ Psychology, and ⁸ Social Work.)
071	Brainbench http://brainbench.com/xml/bb/homepage.xml

Major Field Assessments by Academic Program

Academic Program	THEC Code/Name/Website
Accounting	003 Accreditation Council for Accountancy and Taxation (ACAT) www.acatcredentials.org
Accounting	030 Achievement Test for Accounting Graduates (contact 1-800-211-8378)
Administrative Assistant and Secretarial Science	047 Office Proficiency Assessment Certification (OPAC) Exam (www.iowaworks.org/opac.htm)
Architecture	055 Architectural Registration Examination (www.ncarb.org/are/index.html)
Automotive Technology	057 ASE Certification of the National Automotive Technicians Education Foundation (NATEF) (www.natef.org/about/achieving_ase_cert.cfm)
Engineering	005 National Council of Examiners for Engineering and Surveying (NCEES)
Engineering	016 Fundamentals of Engineering Examination (www.ncees.org)
Engineering	039 Society of Manufacturing Engineering Certification Test (www.sme.org)
Engineering Technology	020 National Occupational Competency Testing Institute www.nocti.org)
Engineering Technology	032 National Institute for Certification in Engineering Technologies (www.nicet.org)
Chemistry	009 American Chemical Society Examination http://www3.uwm.edu/dept/chemexams/about/index.cfm
Computer and Information Sciences	048 Institute of Certification of Computer Professionals Examination (www.iccp.org)

Academic Program	THEC Code/Name/Website
Computing Technology	065 Computing Technology Industry Association Certification Exam www.comptia.org
Dental Hygiene	042 National Board Dental Hygiene Examination (www.ada.org/prof/ed/testing/natboardhyg/index.asp)
Dietetics	069 American Dietetics Exam (www.cdrnet.org)
Emergency Medicine	035 National Registry of Emergency Medicine Technicians Examination (www.nremt.org/about/about_exams.asp)
Environmental Health	051 Tennessee Registry Credentialing Examination www.ja.state.tn.us/personnel/JobSearch/TestInfo.jsp?cde=72921
Health Information	037 Registered Health Information Administrator (baccalaureate programs) and Registered Health Information Technicians Exam (associate programs) (www.ahima.org)
Industrial Technology	064 Association of Technology, Management and Applied Engineering (www.atmae.org)
Legal Assistant	056 Certified Legal Assistant (www.nala.org/cert.htm)
Medical Laboratory Technology	041 Medical Laboratory Technologist Certification (www.amt1.com/site/epage/15319_315.htm)
Medical Laboratory Technology	066 American Society for Clinical Pathology (www.ascp.org)
Nursing	029 National Council Licensure Examination for Registered Nurses and National Council Licensure Examination for Practical Nurses (www.ncsbn.org/testing/index.asp)
Occupational Therapy	033 Certified Occupational Therapy Assistant (COTA) Exam (www.nbcot.org)
Occupational Therapy	044 Occupational Therapists Registered (OTR) Exam www.nbcot.org)
Office Administration	019 Certified Professional Secretary Examination (www.iaap-hq.org)
Ophthalmic Technician	070 Certified Ophthalmic Technician (www.jcahpo.org/certification/)
Opticianry	062 National Opticianry Competency Examination (NOCE) (www.abo-ncle.org)
Physical Therapy	034 National Physical Therapy Examination (www.fsbpt.org)
Radiology	036 American Registry of Radiologic Technologist Examination (www.asrt.org)
Respiratory Care	038 Entry Level CRT (Certified Respiratory Therapist) Examination (www.nbrc.org/ExamsCRT.htm)
Respiratory Care	046 National Board for Respiratory Care Certification and Registry Examination (www.nbrc.org)
Soil Science	067 Soil Science Society of America (Fundamentals of Soil Science) (www.soils.org/certifications/)
Sports Medicine	068 American College of Sports Medicine (www.acsm.org)
Teacher Education	031 Praxis Series: Professional Assessment for Beginning Teachers (www.ets.org/praxis) Refer to the following website for licensure requirements for Tennessee: www.ets.org/praxis/prxtn.html#testreq
Veterinary Technology	053 Veterinary Technician National Examination (www.aavsb.org/DLR/vetreqtech.asp)

Test Codes Added

070 – Ophthalmic Technician added September 16, 2010

071 – Brainbench added December 21, 2010



Types of Assessments


There are several tools that a department can use when choosing an assessment for Major Field Assessment Standard 1B. Basically it comes down to what works best for each department. Below are some examples of the types of assessments that can be used.

Standardized Tests

Many majors have utilized a variety of available standardized instruments. Often these tests can serve a dual purpose. For example, Nursing and Architecture both use a national licensing exam as their major field assessment test. Additionally, Education and Engineering use a national exam for their assessment. These national tests are centrally scheduled, and it is the department’s responsibility to inform students of registration dates.

For other areas, specialty tests are available through organizations such as Educational Testing Service. Given that they can be ordered and administered locally, such instruments offer departments the advantages of minimal time commitment with regard to development and planning in addition to greater flexibility in scheduling.

While there are few details to consider when using a standardized test, there are still important factors that should be addressed. Below is a general timeline for those using a standardized instrument.

Timeline	Action	
<p>During the Planning Year... <i>Summer/Fall Semesters</i></p> <p style="text-align: center;"><i>Spring Semester</i></p>	<p style="text-align: center;"><u>Using a previously used test</u></p> <ul style="list-style-type: none"> • Confirm with PF Coordinator that the same test will be used <div style="text-align: center;">  </div> <ul style="list-style-type: none"> • Test all graduating seniors from fall and spring terms 	<p style="text-align: center;"><u>Using a test for the first time</u></p> <ul style="list-style-type: none"> • Research available tests • Baseline administration <i>(note: while optional, this will provide two opportunities to maximize scoring.)</i> • Test all graduating seniors from fall and spring terms

Locally Developed Assessment

Another option available to departments, and one that many prefer, is to develop their own assessment tools. One option is for departments to create their own test. Using such a test allows for the major field assessment instrument to relate directly to current curricula. However, departments must invest time into maintaining such an instrument between test administrations. In addition, there are considerable time commitments and planning that must occur if a department is developing a new local test.

Similar to a locally developed test, departments may choose to use a capstone course or a culminating project as an assessment of the major. Though this enables a department to use a pre-established measure, it still requires a time commitment in development and maintenance.

If a department chooses to use a locally developed assessment tool to assess the major, then there are some guidelines that must be followed. When reusing an existing assessment, departments are permitted to alter approximately 20% of the assessment without penalty. In fact, such revisions are encouraged and recommended. This small change ensures continuity and comparability of results while allowing for changes in curriculum that may occur between administrations.

If the changes to an existing assessment exceed 20% or if a department has decided to develop a new local assessment, there are additional rules and deadlines that must be followed:

1. First and foremost, planning for a new locally developed assessment should ideally begin in the summer or early fall semester of the Planning Year (or one year prior to the Testing Year).
2. During the Planning Year, the *Plan for Creating a Locally Developed Major Field Assessment* is completed. This plan needs to be submitted to THEC for prior approval.
3. THEC requires that all new, locally developed assessments are reviewed by two consultants from outside of the institution. Therefore, while the plan is being reviewed, the department should find two faculty members from other Tennessee institutions and/or from out-of-state to review the plan and assessment.
4. After completing the reviews and all updates/changes have been made, the department needs to forward copies of the following to the campus performance funding coordinator for filing and for forwarding to THEC:
 - A copy of each consultant's vita,
 - Copies of all correspondence to and from the consultants related to the review,
 - Copies of both the completed planning form and the assessment.
5. In the spring semester of the Planning Year, the department must establish a baseline by piloting the assessment. This will provide a basis for comparison during the Testing Year.
6. Following the pilot administration, the scores should also be forwarded to the campus performance funding coordinator.

**Tennessee Higher Education Commission
Plan for Creating a Locally-Developed Major Field Assessment
2010-15 Performance Funding Cycle**

Institution: _____

Academic Program: _____

Check one box to note 2 year process (planning year and testing year)

- Planning Year 2010-11 and Testing Year 2011-12
- Planning Year 2011-12 and Testing Year 2012-13
- Planning Year 2012-13 and Testing Year 2013-14
- Planning Year 2013-14 and Testing Year 2014-15
- Planning Year 2014-15 and Testing Year 2015-16

Responsible Parties (i.e., Department Head, Faculty Contact(s), etc.)

Name	Status (e.g., department head, main contact, cc only, etc.)

What type of assessment is going to suit our needs?

- Multiple choice exam (scoring example: percentage of correct responses)
- Essay/short answer (scoring example: define a rubric and secure evaluators)
- Capstone experience (scoring example: final course/project percentage)
- Other (explain test type and scoring):

What Student Learning Outcomes will this assessment address?

What steps need to be taken to construct this assessment?

Timeline	Action

Who will review this assessment?

Name	Credentials

What is the plan for piloting this assessment? *(proposed test dates, how to use results, who will be given the pilot test, etc.)*

Timeline	Action

(add additional sheets as necessary)



2010-15 Performance Funding Cycle
Appendix D: Approved Accreditation Agency List

Discipline	THEC Code/Accrediting Agency/Website
Allied Health ¹	23 Commission on Accreditation of Allied Health Education Programs www.caahep.org
Architecture	39 National Architectural Accrediting Board, Inc. www.naab.org
Art and Design	41 National Association of Schools of Art and Design www.arts-accredit.org
Athletic Training	53 Commission on Accreditation of Athletic Training Education www.caate.net
Audiology/Speech-Language Pathology	17 American Speech-Language-Hearing Association – Council on Academic Accreditation in Audiology and Speech-Language Pathology http://www.asha.org/
Aviation	31 Aviation Accreditation Board International http://www.aabi.aero
Business	1 AACSB International - The Association to Advance Collegiate Schools of Business www.aacsb.edu/accreditation
Business (2 year)	20 Association of Collegiate Business Schools and Programs www.acbsp.org
Chemistry	9 American Chemical Society http://portal.acs.org/portal/acs/corg/content
Clinical Laboratory Sciences	38 National Accrediting Agency for Clinical Laboratory Sciences www.naacls.org
Clinical Pastoral Education	19 Association for Clinical Pastoral Education, Inc. – Accreditation Commission www.acpe.edu
Counseling	28 American Counseling Association - Council for Accreditation of Counseling and Related Educational Programs www.counseling.org
Culinary	4 American Culinary Federation, Inc. Accrediting Commission www.acfchefs.org
Dentistry	11 American Dental Association - Commission on Dental Accreditation www.ada.org
Dietetics	12 American Dietetic Association - Commission on Accreditation for Dietetics Education www.eatright.org/cade
Engineering (Applied Science, Computing and Technology)	3 Accrediting Board for Engineering and Technology (ABET) www.abet.org
Environmental Health Science	45 National Environmental Health Science and Protection Accreditation Council www.neha.org
Family and Consumer Sciences	7 American Association of Family and Consumer Sciences - Council for Accreditation http://www.aafcs.org/education/index.html
Forestry	48 Society of American Foresters www.safnet.org
Health Administration	22 Association of University Programs in Health Administration www.aupha.org

Discipline	THEC Code/Accrediting Agency/Website
Health Information	30 Commission on Accreditation for Health Informatics and Information Management Education www.cahiim.org
Industrial Technology	40 Association of Technology, Management and Applied Technology www.atmae.org (formerly National Association of Industrial Technology)
Interior Design	35 Council for Interior Design Accreditation (<i>formerly Foundation for Interior Design Education Research</i>) http://accredit-id.org/
Journalism and Mass Communication	6 Accrediting Council on Education in Journalism and Mass Communications www.ku.edu/~acejmc
Landscape Architecture	16 American Society of Landscape Architects www.asla.org
Law and Legal Studies	8 American Bar Association http://www.abanet.org/legaled/accreditation/abarole.html
Library and Information Studies	13 American Library Association - Committee on Accreditation http://www.ala.org/ala/aboutala/offices/accreditation/index.cfm
Massage Therapy	25 Commission on Massage Therapy Accreditation www.comta.org
Medical Education	37 Liaison Committee on Medical Education www.lcme.org
Music	42 National Association of Schools of Music- Commission on Accreditation www.arts-accredit.org
Nurse Anesthetists	29 American Association of Nurse Anesthetists - Council on Accreditation of Nurse Anesthesia Educational Programs www.aana.com
Nursing ²	46 National League for Nursing Accrediting Commission, Inc. www.nlnac.org
Nursing ³	49 Commission on Collegiate Nursing Education www.aacn.nche.edu/Accreditation/
Occupational Therapy	2 American Occupational Therapy Association - Accreditation Council for Occupational Therapy Education www.aota.org
Ophthalmic	50 Committee on Accreditation for Ophthalmic Medical Personnel http://www.jcahpo.org/
Optician	26 Commission on Opticianry Accreditation www.coaccreditation.com
Pharmacy	10 American Council for Pharmacy Education www.acpe-accredit.org
Pharmacy Technician	15 American Society of Healthy - System Pharmacists www.ashp.org
Physical Therapy	24 American Physical Therapy Association - Commission on Accreditation in Physical Therapy Education www.apta.org
Planning	21 Association of Collegiate Schools of Planning – Planning Accreditation Board www.acsp.org
Psychology	14 American Psychological Association – Committee on Accreditation www.apa.org
Public Affairs and Administration	43 National Association of Schools of Public Affairs and Administration Commission on Peer Review and Accreditation www.naspaa.org
Public Health	32 Council on Education for Public Health www.ceph.org
Radiologic Technology	36 Joint Review Committee on Education in Radiologic Technology www.jrcert.org

Discipline	THEC Code/Accrediting Agency/Website
Recreation and Parks	47 National Recreation and Park Administration/American Association for Leisure and Recreation – Council on Accreditation www.nrpa.org/coa
Rehabilitation Counseling	33 Council on Rehabilitation Education – Commission on Standards and Accreditation www.core-rehab.org
Respiratory Care	55 Committee on Accreditation for Respiratory Care http://www.coarc.com/
Social Work Education	34 Council on Social Work Education – Division of Standards and Accreditation Commission on Accreditation www.cswe.org/
Teacher Education	44 National Council for Accreditation of Teacher Education www.ncate.org
Teacher Education Early Childhood	52 National Association for the Education of the Young Child www.naeyc.org
Theatre	54 National Association of Schools of Theatre http://nast.arts-accredit.org/
Veterinary Medicine	18 American Veterinary Medical Association – Council on Education www.avma.org

Footnotes:

1. CAAHEP has 18 Committees on Accreditation. These committees review programs in their specific professional areas and formulate accreditation recommendations which are considered by CAAHEP.

Anesthesiologist Assistant	Emergency Medical Services	Orthotics and Prosthetics
Blood Banking	Exercise Physiology	Perfusion
Cardiovascular Technology	Exercise Science	Personal Fitness Trainer
Cytotechnology	Kinesiotherapy	Polysomnography
Diagnostic Medical Sonography	Medical Assistant	Surgical Assistant
Electroneurodiagnostic Technology	Medical Illustrator	Surgical Technology

2. NLNAC - accredits Nursing programs at the following levels: master's, baccalaureate, associate, diploma, and practical.
3. CCNE – accredits Nursing programs at the baccalaureate and graduate levels

2005-10 Performance Funding Cycle: Updates

- Teacher Education: Early Childhood Education - Code 52 added June 19, 2008
- Athletic Training – Code 53 added July 24, 2009
- Theatre – Code 54 added March 18, 2010

2010-15 Performance Funding Cycle: Updates

- Code 51 deleted due to duplicate agency code #2 (Occupational Therapy)
- Code 27 deleted since accreditation for Computer Science programs are part of ABET (code 3)
- Code 35 Name change -- Council for Interior Design Accreditation (*formerly Foundation for Interior Design Education Research*)
- Code 55 added for the Committee on Accreditation for Respiratory Care (separation from the Commission on Accreditation of Allied Health Education Programs)

Updated February 8, 2011



2010-15 Performance Funding Cycle
Appendix E: Program Review
Certificate and Associate Programs

Institution:		
Program Title:		
CIP Code:		
Embedded Certificates:		
Embedded Certificates:		
Embedded Certificates:		
Academic Audit Status	___ First Academic Audit	___ Second Academic Audit

Instructions for External Reviewer(s):

In accordance with the 2010-15 Performance Funding guidelines of the Tennessee Higher Education Commission (THEC), each non-accreditable certificate and associate program undergoes either an academic audit or external peer review according to a pre-approved review cycle. If the program under review contains embedded Technical Certificates, the names of each certificate should be included on the “Program” line above. The review of embedded certificates must be included as part of the review of the program in which they are embedded. Embedded certificates do not require a separate Summary Sheet

The criteria used to evaluate a program appear in the following “Program Review Summary Sheet for Certificate and Associate Programs.” The Summary Sheet lists 30 criteria grouped into six categories. THEC will use the criteria to assess standards in the certificate and associate programs. All criteria noted with an asterisk are excluded from the performance funding point calculation. The Support category will be used by the institution, but will not be included in the overall assessment reported to THEC.

For each criterion within a standard, the responsible program has provided evidence in the form of a self study document. Supporting documents will be available as specified in the self study. As the external reviewer, you should evaluate this evidence and any other evidence observed during the site visit to determine whether each criterion within a standard has been met. A checkmark should be placed in the appropriate box to indicate whether you believe that a program has “met” or “not met” each criterion in the checklist. If a particular criterion should be inappropriate or not applicable to the program under review, the item should be marked “NA”.

This evaluation becomes a part of the record of the academic program review. The checklist will be shared with the department, the college and central administration, as well as the Tennessee Higher Education Commission. When combined with the written report, prepared by the entire program review committee, the Program Review Summary Sheet will facilitate development of a program action plan to ensure continuous quality improvement.

Your judgment of the criteria will be used in allocating state funds for the community college's budget.

Name, Title, and Institutional Affiliation of Reviewer(s):

Name	Name
Title	Title
Institution	Institution
Signature	Signature
Date	Date

Program Review Summary Sheet for Certificate and Associate Programs

Institution:			
Program Title:			
CIP Code:			
Embedded Certificates:			
Embedded Certificates:			
Embedded Certificates:			
Academic Audit Status:	____ First Academic Audit	____ Second Academic Audit	

1. LEARNING OBJECTIVES		Met	Not Met
1.1	Intended program and learning outcomes are clearly identified.		
1.2	The program uses appropriate indicators to evaluate appropriate and sufficient achievement of program outcomes.		
1.3	The unit makes use of information from its evaluation of program outcome attainment; student, alumni, and employer surveys; and university research to strengthen the program's effectiveness.		
2. CURRICULUM		Met	Not Met
2.1	The curriculum is appropriate to the level and purpose of the program.		
2.2	The curriculum content and organization is reviewed regularly.		
2.3	Program requirements include a strong general education component.		
2.4	The curriculum includes a required core of appropriate courses in the discipline.		
2.5	Curricular content reflects current standards, practices, and issues in the discipline.		
2.6	The curriculum encourages the development of critical thinking.		
2.7	Students have opportunities to apply what they have learned to situations outside the classroom.		
2.8	Students are exposed to professional and career opportunities appropriate to the field.		
2.9	Courses are offered regularly to ensure that students can make timely progress.		
3. TEACHING AND LEARNING ENVIRONMENT		Met	Not Met
3.1	The program's instructional practices are consistent with the standards of the discipline.		
3.2	As appropriate to the discipline, the program provides students with the opportunity for interaction with one another, faculty, and professionals in the field.		
3.3	Effective advising is provided by well-informed faculty and/or professional staff.		
3.4	Library holdings are current and adequate to meet students' needs.		
3.5	Students have the opportunity to regularly evaluate faculty relative to the quality of their teaching effectiveness.		

4. FACULTY		Met	Not Met
4.1	The faculty is adequate in number to meet the needs of the program with efficient teaching loads.		
4.2 *	As appropriate to the demographics of the discipline, the faculty are diverse with respect to gender, ethnicity, and academic background.		
4.3	Faculty are appropriately prepared for the level of the program, at least meeting SACS requirements for faculty preparation.		
4.4	Each faculty member has a professional development plan designed to enhance his or her role as a faculty member and there is evidence of successful achievements within the plan.		
4.5 *	Adjunct faculty meet the high standards set by the program and expected SACS qualifications and credentials.		
4.6	The unit uses a faculty evaluation system to improve teaching, scholarly and creative activities, and service.		
5. ECONOMIC DEVELOPMENT		Met	Not Met
5.1	For transfer programs: There are good articulation opportunities for graduates.		
5.2	For transfer programs: Graduates who transfer to baccalaureate programs in a related area are successful.		
5.3	For career programs: The program identifies applicable workforce trends and uses the information to improve the program.		
5.4	For career programs: The program has an effective Advisory Committee.		
6. SUPPORT (Note: The Support category is NOT included in the Performance Funding calculation. If the Program Review process did not address these criteria, they should be marked "NA.")		Met	Not Met
6.1 *	The unit regularly evaluates its equipment and facilities, encouraging necessary improvements within the context of overall college resources.		
6.2 *	The program's operating budget is consistent with the needs of the program.		
6.3 *	The program has a history of enrollment and graduation rates sufficient to sustain high quality and cost-effectiveness.		
SUMMARY EVALUATION		Yes	No
The program meets or exceeds the minimum standards of good practice.			

* Criterion not included in the performance funding calculation.
Revised March 17, 2011



2010-15 Performance Funding Cycle
Appendix F: Program Review
Baccalaureate Programs

Institution: _____

Program Title: _____

CIP Code: _____

Instructions for External Reviewer(s):

In accordance with the 2010-15 Performance Funding guidelines of the Tennessee Higher Education Commission (THEC), each non-accreditable baccalaureate program undergoes either an academic audit or external peer review according to a pre-approved review cycle.

The criteria used to evaluate a program appear in the following "Program Review Summary Sheet for Baccalaureate Programs." The Summary Sheet lists 30 criteria grouped into five categories. THEC will use the criteria to assess standards in the baccalaureate programs. All criteria noted with an asterisk are excluded from the performance funding point calculation. The Support category will be used by the institution, but will not be included in the overall assessment reported to THEC.

For each criterion within a standard, the responsible program has provided evidence in the form of a self study document. Supporting documents will be available as specified in the self study. As the external reviewer, you should evaluate this evidence and any other evidence observed during the site visit to determine whether each criterion within a standard has been met. A checkmark should be placed in the appropriate box to indicate whether you believe that a program has "met" or "not met" each criterion in the checklist. If a particular criterion should be inappropriate or not applicable to the program under review, the item should be marked "NA".

This evaluation becomes a part of the record of the academic program review. The summary sheet will be shared with the department, the college and central administration, as well as the Tennessee Higher Education Commission. When combined with the written report, prepared by the entire program review committee, the Program Review Summary Sheet will facilitate development of a program action plan to ensure continuous quality improvement.

Your judgment of the criteria will be used in allocating state funds for the university's budget.

Name, Title, and Institutional Affiliation of Reviewer(s):

Name

Name

Title

Title

Institution

Institution

Signature Date

Signature Date

Program Review Summary Sheet for Baccalaureate Programs

Institution:		Evaluation Results	
Program Title:			
CIP Code:			
1. LEARNING OBJECTIVES		Met	Not Met
1.1	Intended program and learning outcomes are clearly identified.		
1.2	The program uses appropriate indicators to evaluate appropriate and sufficient achievement of program outcomes.		
1.3	The unit makes use of information from its evaluation of program outcome attainment; student, alumni, and employer surveys; and university research to strengthen the program's effectiveness.		
2. CURRICULUM		Met	Not Met
2.1	The curriculum is appropriate to the level and purpose of the program.		
2.2	The curriculum content and organization is reviewed regularly.		
2.3	Program requirements include a strong general education component.		
2.4	The curriculum includes a required core of appropriate courses in the discipline.		
2.5 *	An appropriate balance is maintained between courses inside the major and outside the major.		
2.6	Curricular content reflects current standards, practices, and issues in the discipline.		
2.7	The curriculum encourages the development of critical thinking.		
2.8	The curriculum exposes students to appropriate research strategies from the program area and students have the opportunity to participate in research.		
2.9	Students have opportunities to apply what they have learned to situations outside the classroom.		
2.10	Students are exposed to professional and career opportunities appropriate to the field.		
2.11	The program uses appropriate indicators to evaluate appropriate and sufficient achievement in service courses.		
2.12	Courses are offered regularly to ensure that students can make timely progress.		
3. TEACHING AND LEARNING ENVIRONMENT		Met	Not Met
3.1	The program's instructional practices are consistent with the standards of the discipline.		
3.2	As appropriate to the discipline, the program provides students with the opportunity for interaction with one another, faculty, and professionals in the field.		
3.3	Effective advising is provided by well-informed faculty and/or professional staff.		
3.4	Library holdings are current and adequate to meet students' needs.		
3.5	The program seeks to include the perspectives and experiences of underrepresented groups through curricular and extracurricular activities.		
3.6	Students have the opportunity to regularly evaluate faculty relative to the quality of their teaching effectiveness.		

4. FACULTY		Met	Not Met
4.1	The faculty is adequate in number to meet the needs of the program with appropriate teaching loads.		
4.2*	As appropriate to the demographics of the discipline, the faculty are diverse with respect to gender, ethnicity, and academic background.		
4.3	Faculty are appropriately prepared for the level of the program, at least meeting SACS requirements for faculty preparation.		
4.4	Faculty are engaged in scholarly, creative, professional association, and service activities that enhance instructional expertise in their areas of specialty.		
4.5*	Adjunct faculty meet the high standards set by the program and expected SACS qualifications and credentials.		
4.6	The unit uses a faculty evaluation system to improve teaching, scholarly and creative activities, and service.		
5. SUPPORT (Note: The Support category is NOT included in the Performance Funding calculation. If the Program Review process did not address these criteria, they should be marked "NA.")		Met	Not Met
5.1 *	The unit regularly evaluates its equipment and facilities, encouraging necessary improvements within the context of overall college resources.		
5.2 *	The program's operating budget is consistent with the needs of the program.		
5.3 *	The program has a history of enrollment and graduation rates sufficient to sustain high quality and cost-effectiveness.		
SUMMARY EVALUATION		Yes	No
The program meets or exceeds the minimum standards of good practice.			

* Criterion not included in the performance funding calculation.



2010-15 Performance Funding Cycle Appendix G: Program Review Graduate Programs

Instructions for External Reviewers:

In accordance with the 2010-15 Performance Funding guidelines of the Tennessee Higher Education Commission (THEC), each non-accreditable graduate program undergoes either an external peer review or academic audit according to a pre-approved review cycle.

The criteria used to evaluate a program appear in the following “*Program Review Summary Sheet for Graduate Programs.*” The Summary Sheet consists of 20 criteria grouped into four categories. THEC will use the criteria to assess standards for graduate programs. All criteria noted with an asterisk are excluded from the performance funding point calculation

For each criterion within a standard, the responsible program has provided evidence in the form of a Self Study document. Supporting documents will be available as specified in the self study. As the external reviewer, you should evaluate this evidence and any other evidence observed during the site visit to complete the checklist and prepare the narrative report. Items on the summary sheet should be rated on a four-point scale ranging from “*poor*” to “*excellent*” (or N/A for items which are not applicable to the program).

This evaluation becomes a part of the record of the academic program review. The summary sheet will be shared with the department, the college and central administration, as well as the Tennessee Higher Education Commission. When combined with the written report, prepared by the entire program review committee, the Program Review Summary Sheet will facilitate development of a program action plan to ensure continuous quality improvement.

Your judgment of the criteria will be used in allocating state funds for the university's budget.

Name, Title, and Institutional Affiliation of Reviewer(s):

_____	_____
Name	Name
_____	_____
Title	Title
_____	_____
Institution	Institution
_____	_____
Signature	Signature
_____	_____
Date	Date

Program Review Summary Sheet for Graduate Programs

Institution:

Program Title(s):

Degree Designation(s) and CIP Code:

A. Student Experience		N/A	Poor	Minimally Acceptable	Good	Excellent
1	There is a critical mass of students to ensure an appropriate group of peers.					
2	Prudence is exercised in the number and type of short courses accepted toward the degree.					
3	Programs offered entirely through distance education technologies are evaluated regularly to assure outcomes at least equivalent to on-campus programs.					
4	There are adequate enrichment opportunities, such as lecture series, to promote a scholarly environment.					
5	There are adequate professional development opportunities, such as encouraging membership in professional associations, participation in conferences and workshops, and opportunities for publication.					
B. Graduate Faculty Quality		N/A	Poor	Minimally Acceptable	Good	Excellent
1	Faculty hold terminal degrees in the appropriate discipline.					
2	Faculty academic credentials correspond to the concentrations in which they teach.					
3	Faculty scholarly activity is sufficient to serve as effective mentors for graduate students					
4	Faculty have sufficient practical/professional/academic experience to serve as effective mentors for graduate students.					
5	Faculty have regular opportunities for professional development, including travel and participation in professional organizations, workshops and other learning activities.					
6	Faculty teaching loads are consonant with the highly individualized nature of graduate instruction, especially the direction of theses or dissertations.					
C. Teaching/Learning Environment		N/A	Poor	Minimally Acceptable	Good	Excellent
1	There are ample materials and secretarial support to encourage research and publication.					
2	There is adequate library support.					
3	There is adequate and accessible computer support.					
4*	There are adequate lab facilities.					
5*	There is adequate office space.					
D. Program Evaluation		N/A	Poor	Minimally Acceptable	Good	Excellent
1	Follow-up data on graduating students are regularly and systematically collected					
2	The curriculum is evaluated periodically.					
3	Evaluation of placement of graduates is regular and systematic.					
4	Completion rates are at an acceptable level.					

* Criterion not included in the performance funding calculation.



2010-15 Performance Funding Cycle
Appendix H: Academic Audit
Undergraduate Programs

Institution:		
Program Title:		
CIP Code:		
Embedded Certificates:		
Embedded Certificates:		
Embedded Certificates:		
Academic Audit Status:	___ First Academic Audit	___ Second Academic Audit

Instructions for Academic Audit Team:

In accordance with the 2010-15 Performance Funding guidelines of the Tennessee Higher Education Commission (THEC), each non-accreditible undergraduate program undergoes either an academic audit or external peer review according to a pre-approved review cycle. If the program under review contains embedded Technical Certificates, the names of each certificate should be included on the “Program Title” line above. The review of embedded certificates must be included as part of the review of the program in which they are embedded. Embedded certificates do not require a separate Summary Sheet.

The criteria used to evaluate a program appear in the following "*Academic Audit Summary Sheet*." The Summary Sheet lists 26 criteria grouped into eight categories. THEC will use the criteria in categories 1-6 to assess Performance Funding Standard 1C when the Academic Audit process is used for programs undergoing the Academic Audit process for the first time. For programs undergoing the Academic Audit for the second time, criteria 7 (follow-up) will also be used to assess Standard 1C. The criteria in the eighth category, Support, may be used by the institution and submitted as part of the Performance Funding report. If the Academic Audit process did not include information about criteria 8.1 - 8.3, they should be marked N/A. These criteria will not be included in the THEC Performance Funding point calculation.

These criteria have been selected based on the Academic Audit Focal Areas to be consistent with the spirit and process of the Academic Audit. The program faculty has provided a self-study document that includes information for each criterion within the Focal Areas. Supporting documents will be available as specified in the self study. As the Academic Audit Team Leader, you should assess this and other evidence observed during the site visit to determine whether the process has met each criterion within a category. A checkmark should be placed in the appropriate box to indicate whether you believe that a program has “met” or “not met” each criterion in the table.

The Academic Audit Summary Sheet will be sent to the appropriate campus official for inclusion in the Annual Performance Funding Report. When combined with the self study and the written report prepared by the visiting team, the Summary Sheet will facilitate institutional development of a program action plan to ensure continuous quality improvement.

Your judgment of the criteria will be used in allocating state funds for the community college or university's budget.

Name, Title, and Institutional Affiliation of Academic Audit Team Leader (s):

Name	Name
Title	Title
Institution	Institution
Signature	Signature
Date	Date

Academic Audit Summary Sheet

Institution:			
Program Title:			
CIP Code:			
Embedded Certificates:			
Embedded Certificates:			
Embedded Certificates:			
Academic Audit Status		<u> </u> First Academic Audit	<u> </u> Second Academic Audit
1. LEARNING OBJECTIVES			Met
1.1	The faculty completed a thorough and candid analysis of their process for developing learning objectives for the program, considering measurability, clarity and what students need to know.		Not Met
1.2	The faculty documented or proposed a process for developing learning objectives that are based on realistic and appropriate evidence.		
1.3	The faculty documented or proposed specific plans to take best practices and appropriate benchmarks into account in the analysis of learning objectives.		
2. CURRICULUM AND CO-CURRICULUM			Met
2.1	The faculty completed a thorough and candid analysis of the extent to which they collaborate effectively on the design of curriculum and planned improvements.		Not Met
2.2	The faculty documented or proposed a plan for analyzing the content and sequencing of courses in terms of achieving program learning objectives.		
2.3	The faculty documented or proposed a plan for the ongoing review of curriculum and co-curriculum based on appropriate evidence including comparison with best practices where appropriate.		
3. TEACHING AND LEARNING PROCESSES			Met
3.1	The faculty completed a thorough and candid analysis of their process for guiding and improving teaching and learning throughout the program.		Not Met
3.2	The faculty documented or proposed a plan that promotes the effective use of instructional methods and materials for achieving student mastery of learning objectives.		
3.3	The faculty analyzed the extent to which there is true, ongoing collaboration in the design and delivery of the teaching and learning processes of the program.		
4. STUDENT LEARNING ASSESSMENT			Met
4.1	The faculty documented or proposed indicators of student learning success that are keyed to the learning objectives of the program.		Not Met
4.2	The faculty documented or proposed assessments of student learning that are grounded in best practices and appropriate comparisons.		
4.3	The faculty documented or proposed a plan for using student learning assessments that leads to continuous improvements in the program.		
4.4	The faculty documented or proposed a continuous improvement plan that incorporates multiple measures to assess student learning and program effectiveness.		

5. QUALITY ASSURANCE		Met	Not Met
5.1	There is an evident commitment to making continuous quality improvements in the program a top priority.		
5.2	The faculty documented or proposed a continuous improvement plan that incorporates multiple measures to assess student learning and program effectiveness.		
6. OVERALL ASSESSMENT		Met	Not Met
6.1	The Academic Audit process was faculty driven.		
6.2	The Academic Audit process (self-study and visit) included descriptions of the program's quality processes including all five focal areas.		
6.3	The process resulted in a candid description of weaknesses in program processes and suggestions for improvements.		
6.4	Overall, the visiting team affirms the openness and thoroughness of the program faculty in completing the academic audit of this program.		
6.5	The Academic Audit process included involvement of and inputs from stakeholder groups identified by the program's faculty.		
7. FOLLOW-UP OF PREVIOUS AUDIT *		Met	Not Met
7.1	An action plan was developed as a result of the previous Academic Audit.		
7.2	There is documented evidence that recommendations made by the Academic Audit Team have been considered and, when feasible and appropriate, implemented and tracked.		
7.3	There is documented evidence that the program has implemented and tracked the progress of and use of results from improvement initiatives cited by the faculty its self study.		
8. SUPPORT (Note: The Support category is NOT included in the Performance Funding calculation. If the Academic Audit process did not address these criteria, they should be marked "NA.")		Met	Not Met
8.1	The program regularly evaluates its library, equipment and facilities, encouraging necessary improvements within the context of overall college resources.		
8.2	The program's operating budget is consistent with the needs of the program.		
8.3	The program has a history of enrollment and graduation rates sufficient to sustain high quality and cost-effectiveness.		

* Criterion only included in the performance funding calculation for programs undergoing the Academic Audit during the 2010-2015 cycle that also used the Academic Audit in the 2005-10 cycle. Note: please be sure that the "Second Academic Audit" is checked on page 1.

Revised March 17, 2011



2010-15 Performance Funding Cycle
Appendix I: Academic Audit
Graduate Programs

Institution:
Program Title(s):
Degree Level(s):
CIP Code(s):
Academic Audit Status: First Academic Audit Second Academic Audit

Instructions for Academic Audit Team:

In accordance with the 2010-15 Performance Funding guidelines of the Tennessee Higher Education Commission (THEC), each non-accreditable graduate program undergoes either an academic audit or external peer review according to a pre-approved review cycle.

The criteria used to evaluate a program appear in the following "Academic Audit Summary Sheet." The Summary Sheet lists 55 items grouped into 14 categories. THEC will use the criteria in categories 1 – 13 to assess Performance Funding Standard 1C when the Academic Audit process is used for programs undergoing the Academic Audit process for the first time. For programs undergoing the Academic Audit for the second time, criteria in category 14 will also be used to assess Standard 1C.

These criteria have been selected based on the Academic Audit Focal Areas to be consistent with the spirit and process of the Academic Audit. The program faculty has provided a self-study document that includes information for each criterion within the Focal Areas. Supporting documents will be available as specified in the self study. As the Academic Audit Team Leader, you should assess this and other evidence observed during the site visit to determine whether the process has met each criterion within a category. A checkmark should be placed in the appropriate box to indicate whether you believe that a program has "met" or "not met" each criterion in the table. If a particular criterion is inappropriate or not applicable to the program, the criterion should be marked "NA".

The Academic Audit Summary Sheet will be sent to the appropriate campus official for inclusion in the Annual Performance Funding Report. When combined with the self-study and the written report prepared by the visiting team, the Summary Sheet will facilitate institutional development of a program action plan to ensure continuous quality improvement.

Name, Title, and Institutional Affiliation of Academic Audit Team Leader(s):

Name
Title
Institution
Signature Date

Name
Title
Institution
Signature Date

Academic Audit Summary Sheet

Institution: _____ Program Title(s): _____ Degree Level(s): _____ CIP Code(s): _____		Evaluation Results	
Academic Audit Status: _____ First Academic Audit _____ Second Academic Audit			
1. LEARNING OBJECTIVES		Met	Not Met
1.1	The faculty completed a thorough and candid analysis of their process for developing learning objectives for the program, considering measurability, clarity and what students need to know.		
1.2	The faculty documented or proposed a process for developing learning objectives that are based on realistic and appropriate evidence.		
1.3	The faculty documented or proposed specific plans to take best practices and appropriate benchmarks into account in the analysis of learning objectives.		
1.4	The faculty clearly communicates program objectives to current and potential students, employers or other stakeholders.		
2. CURRICULUM AND CO-CURRICULUM		Met	Not Met
2.1	The faculty completed a thorough and candid analysis of the extent to which they collaborate effectively on the design of curriculum and planned improvements which will reflect attained competencies in the outcome data.		
2.2	The faculty documented or proposed a plan for analyzing the content, format and sequencing of courses in terms of achieving program learning objectives with appropriate breadth and depth for the degree offered which allows for attainment of the degree in a timely manner.		
2.3	The faculty documented or proposed a plan for determining the soundness of and rationale for curriculum and co-curriculum based on appropriate evidence, including comparison with best practices where appropriate, and communicate these views to the student body.		
3. TEACHING AND LEARNING PROCESSES		Met	Not Met
3.1	The faculty examined the extent to which there is focus on and periodic, systematic review of the actual process of teaching and learning throughout the program.		
3.2	The faculty documented or proposed a plan that promotes the effective use of instructional methods and materials for achieving student mastery of learning objectives.		
3.3	The faculty analyzed the extent to which there is true, ongoing collaboration in the design and delivery of the teaching and learning processes of the program with reliance on best practices and resources beyond the confines of the program or department.		
3.4	There is a critical mass of faculty and students to promote a scholarly community and assure an appropriate group of peers.		
3.5	Faculty /graduate student ratio, average course load, average thesis/dissertation load per faculty and distribution across department, and teaching evaluations evidence support of graduate teaching and learning processes.		

3.6	The faculty documented or proposed a plan to inform students of course offerings and the provision of professional development activities and relevant courses to supplement departmental offerings in a timely fashion.		
3.7	The faculty documented or proposed a plan to ensure that all students are adequately oriented, advised, mentored and socialized within the discipline and the larger graduate community.		
4. STUDENT LEARNING ASSESSMENT		Met	Not Met
4.1	The faculty documented or proposed indicators of student learning success that are keyed to the learning objectives of the program.		
4.2	The faculty documented or proposed assessments of student learning that are grounded in best practices and appropriate comparisons.		
4.3	The faculty documented or proposed a periodically and systematically reviewed plan for using student learning assessments that leads to continuous improvements in the program.		
4.4	The faculty documented or proposed a continuous improvement plan that incorporates multiple measures to assess student learning and program effectiveness.		
5. QUALITY ASSURANCE		Met	Not Met
5.1	There is an evident commitment to making continuous quality improvements in the program (e.g., student advisement and mentoring, use of best practices, recognition of faculty performance, regular and systematic evaluation of student performance) a top priority.		
5.2	The faculty documented or proposed ways to ensure that quality assurance will be a systematic and regular process for program improvement.		
5.3	The coursework offers sufficient breadth and depth appropriate for the degree offered.		
5.4	The faculty are documented to hold terminal degrees in the discipline in which they teach and have experience sufficient to serve as effective mentors for graduate students.		
5.5	Data on current students and follow-up data on graduating students including placement data are regularly and systematically collected.		
6. RESEARCH OUTCOMES		Met	Not Met
6.1	The faculty documented or proposed a plan to ensure that there is a commitment to matching or exceeding comparable institutions in research activities.		
6.2	The faculty documented or proposed a plan to assure sufficient depth and breadth in faculty research expertise to enable competitiveness in the external funding arena while allowing for collaboration when desired.		
7. RESEARCH ENVIRONMENT		Met	Not Met
7.1	The faculty documented or proposed a plan to ensure a commitment to communicate the program's research environment, research values and priorities.		
7.2	The faculty candidly and thoroughly examined the extent to which the department describes itself accurately and completely to current and prospective students and other "publics".		
7.3	The department takes active steps to support both junior and senior faculty in remaining vital in their respective research areas.		

7.4	The faculty documented or proposed a plan to ensure that departmental processes, policies and procedures positively influence faculty research activities and program competitiveness.		
7.5	The faculty documented or proposed a plan that engages graduate students in inquiry and research in collaboration with faculty.		
8. SYNERGY WITH EDUCATION		Met	Not Met
8.1	The faculty documented or proposed a plan that honestly evaluates departmental resource demands in light of departmental research and scholarship's contribution to its educational programs and the mission of the department, college and university.		
8.2	There is a commitment to activities designed to keep the faculty and students informed on contemporary issues related to research (e.g., lecture series, responsible conduct of research workshops, professional development activities).		
8.3	The program demonstrates best practices in integrating the science with the practice of the discipline.		
8.4	The faculty candidly and thoroughly evaluated the extent to which they incorporate research into the educational programs in support of best practices.		
8.5	The program demonstrates best practices in addressing workload demands of theses and dissertations supervision.		
9. SPONSORED PROGRAMS		Met	Not Met
9.1	The faculty documented and proposed a plan to strive for sponsored research funding at comparable levels with other comparable departments within the institution and across peer institutions.		
9.2	The faculty documented or proposed a plan to assure that faculty are consistently informed of external funding opportunities as well as the availability of assistance in areas such as proposal writing and project management.		
10. QUALITY AND PRODUCTIVITY INDICATORS		Met	Not Met
10.1	There are appropriate indices endorsed by the program faculty as means to gauge faculty quality and productivity.		
10.2	The faculty documented or proposed ways to ensure that quality research and productivity will be systematically and regularly examined across the faculty lifespan.		
10.3	The culminating experience required by the program both in terms of comprehensive examination and/or research allows the student to demonstrate the breadth, depth and integration of the disciplinary coursework and experiences with the demonstration of communication skills and the ability to apply knowledge independently.		
11. CONTRIBUTIONS TO PROGRAM, DEPARTMENTAL AND UNIVERSITY GOALS		Met	Not Met
11.1	There is a process in place which is communicated to other levels of the institution that evaluates the sufficiency of resources in place to meet the teaching responsibilities while actively engaging in research with graduate students and undergraduates.		
11.2	The faculty documented and proposed a plan to encourage and support research outcomes congruent with the department's purpose and the university mission.		
11.3	The faculty clearly state and embrace appropriate admission standards, completion standards and graduation rates which are readily available to prospective and current students.		

12. OVERALL ASSESSMENT		Met	Not Met
12.1	The Academic Audit process was faculty driven.		
12.2	The Academic Audit process (self-study and visit) included descriptions of the program's quality processes.		
12.3	The process resulted in a candid description of weaknesses in program processes and suggestions for improvements.		
12.4	Overall, the visiting team affirms the openness and thoroughness of the program faculty in completing the academic audit of this program.		
13. SUPPORT		Met	Not Met
13.1	The program regularly evaluates its library, equipment and facilities, encouraging necessary improvements within the context of overall college resources.		
13.2	The program's operating budget is consistent with the needs of the program.		
13.3	The operating budget is sufficient to attract quality students and provides adequate support without substantially delaying progress toward the degree.		
13.4	The program has a history of enrollment and graduation rates sufficient to sustain high quality and cost-effectiveness.		
13.5	The operating budget is sufficient to allow faculty regular opportunities for professional development including travel and presentation of research findings, participation in professional organizations, workshops and other learning activities.		
14. FOLLOW-UP OF PREVIOUS ACADEMIC AUDIT		Met	Not Met
14.1	An action plan was developed as a result of the previous Academic Audit.		
14.2	There is documented evidence that Recommendations made by the Academic Auditor Team have been considered and, when feasible and appropriate, implemented and tracked.		
14.3	There is documented evidence that the program has implemented and tracked the progress of and use of results from Improvement Initiatives cited by the faculty in its self study.		



2010-15 Performance Funding Cycle

Appendix J: Alumni Research

According to Cabrera, Weerts and Zulick (2003), there are three broad categories of research on alumni. These categories are: Alumni Outcomes, Student Engagement/Competencies and Alumni Giving.

- **Alumni Outcomes** – institutional quality and effectiveness can be appraised on what alumni have accomplished in the years following graduation. Job satisfaction, income, occupational attainment, engagement in civic and political activities, and tolerance for diversity are the primary domains of this approach. The Alumni Outcomes approach to assessment seeks to answer the following three policy questions:
 - How satisfied are graduates with their employment?
 - How satisfied are the graduates with the degree granting institution?
 - To what extent are graduates fully participating in civic activities?

- **Student Engagement and Competencies** – This research approach assesses institutional quality by what students and graduates know and do with such knowledge as a result of their collegiate experience. The Student Engagement and Competencies approach to assessment seeks to answer these policy questions:
 - What are the competencies (i.e., outcomes, abilities and values) that college education should foster?
 - What extent were alumni engaged with faculty/staff/peers while attending college?
 - What extent do colleges and universities engage students on those learning activities more prone to produce critical competencies?
 - What extent do graduates apply those competencies in the job or in graduate school?

- **Alumni Giving** – This research perspective attempts to understand what factors predispose alumni to support their alma mater as an indicator of institutional quality. Research on Alumni Giving typically focuses on these indicators:
 - Quality of educational experience
 - Extent to which the institution prepared for a career
 - Degree to which faculty members exerted a positive influence
 - Extent to which the alumni maintains contact with faculty and former classmates
 - Current impressions of the institution
 - History of involvement with the institution
 - Willingness to use influence on behalf of the institution
 - Willingness to consider specific assignments or gifts
 - Ways in which the alumni would consider volunteering

Source: Cabrera, A., Weerts, D.J., and Zulick, B.J. (2003) Alumni survey: Three conceptualizations to alumni research.

http://www.education.umd.edu/Depts/EDHI/about/faculty_pages/cabrera/Three%20conceptualizations%20to%20alumni%20survey-v2.pdf



2010-15 Performance Funding Cycle
Appendix K: Scoring Rubric
Comprehensive Satisfaction Studies Report

During the final year of the 2010-15 performance funding cycle, institutions will supply evidence of actions taken based on the results of the student, alumni, and employer satisfaction studies. The comprehensive report will provide evidence of usage of these three satisfaction studies for institutional planning and improvement. Report should not exceed 10 pages, excluding appendices and will be evaluated using the Scoring Rubric below:

Reports will be assigned from 0 to 10 points based on an evaluation conducted by staff from the governing boards and Commission. The readers will examine the reports for the following traits and will assign points according to the scoring criteria identified below.

Scoring Rubric for Comprehensive Satisfaction Studies Report

1. Overview of the institution’s design and administration of the three satisfaction surveys and a brief introduction to the satisfaction study. **[0-1 points]**

[] 1 point	Institution provides an overview of its design and administration of the three satisfaction studies and a brief introduction to each satisfaction study that is concise, yet thorough and moves the report forward
[] 0 point	Institution’s overview of its design and administration of the three satisfaction surveys and/or introduction is insufficient to move the report forward.

2. Analysis of the results of the satisfaction surveys, identifying area(s) for improvement and objectives to be accomplished by the fifth year of the cycle. **[0-3 points]**

[] 3 points	Institution provides a concise, yet thorough analysis of the results of the satisfaction surveys and identifies area(s) for improvement. Based upon the data, objectives for institutional improvement are clearly stated. The narrative includes ⁽¹⁾ a discussion of factors included in the analysis of survey results (for example, response rates, respondent demographics, trends from previous survey administrations, etc.); ⁽²⁾ a clear rationale for the identification of area(s) for improvement; ⁽³⁾ and clearly stated, measurable objectives for the improvement implementation plan.
[] 2 points	Institution provides a satisfactory analysis of the results of the satisfaction surveys and identifies area(s) for improvement. Of the three evidentiary elements of this section of the report, the institution provides a clear and comprehensive narrative description of at least two of the elements
[] 1 point	Institution provides an analysis of the results of the satisfaction surveys and identifies area(s) for improvement. Of the three evidentiary elements of this section of the report, the institution provides a clear and comprehensive narrative description of at least one of the elements.
[] 0 point	Institution provides an analysis of the results of the satisfaction surveys that is inadequate to provide a rationale for identification of area(s) for improvement. The desired objectives are not clearly stated and/or not sufficiently measurable.

3. Description of the implementation plan to use the survey results to initiate improvements, including action items, timeline, and success indicators. [0-2 points]

[] 2 points	Institution provides a concise, yet thorough description of its improvement implementation plan. The plan description includes clearly stated action items, timelines, and success indicators. The success indicators have been used by the institution to gauge progress during the course of the project and to facilitate plan adjustments/revisions as needed.
[] 1 point	Institution provides a mostly satisfactory description of its improvement implementation plan. Plan action items, timelines, and/or success indicators may not be clearly stated. Likewise, the institution may not provide satisfactory evidence that the success indicators have been used to gauge progress of the plan.
[] 0 point	Institution provides a weak description of its improvement implementation plan. Weakness may be evident in the description of action items, timelines, and/or success indicators and evidence of use of the success indicators is lacking.

4. Description of patterns of evidence for the extent to which the desired implementation plan outcomes or objectives have been accomplished. [0-3 points]

[] 3 points	Institution provides a concise, yet thorough description, based upon patterns of evidence, of the extent to which the desired implementation plan outcomes/objectives have been accomplished. The narrative ⁽¹⁾ clearly describes the relationship between the action plans and the desired objectives. The narrative also ⁽²⁾ clearly and comprehensively explains the rationale for assessment measures that have been utilized to determine the accomplishment of the objectives and ⁽³⁾ provides an insightful analysis of the results of the assessment.
[] 2 points	Institution provides a mostly satisfactory description, based upon patterns of evidence, of the extent to which the desired implementation plan outcomes/objectives have been accomplished. Of the three evidentiary elements of this section of the report, the institution provides a clear and comprehensive narrative description of at least two of the elements.
[] 1 point	Institution provides a mostly satisfactory description, based upon patterns of evidence, of the extent to which the desired implementation plan outcomes/objectives have been accomplished. Of the three evidentiary elements of this section of the report, the institution provides a clear and comprehensive narrative description of at least one of the elements.
[] 0 point	Institution provides a weak description of the patterns of evidence that could lead to conclusions regarding the extent to which the desired implementation plan outcomes/objectives have been accomplished. None of the three evidentiary elements is adequately addressed by the narrative.

5. Conclusion explaining how lessons learned from the five-year satisfaction survey project will be used for continuous improvement. [0-1 points]

[] 1 point	Institution provides a concise, yet thorough description of the ways in which assessment results from the satisfaction survey project may be carried forward to promote continuous improvement. The narrative includes specific data that will be monitored as well as any ongoing institutional improvement initiatives.
[] 0 point	Institution's description of the ways in which assessment results from the satisfaction survey project may be used lacks the clarity and/or specificity to demonstrate how the project may be carried forward to promote continuous improvement.



2010-15 Performance Funding Cycle
Appendix L: Scoring Rubric
Assessment Implementation

The focus of the Assessment Implementation standard is to show that the institution is following a mature and sophisticated assessment process while implementing a Quality Enhancement Plan (QEP) or Student Learning Initiative (SLI). The institution will provide an essay not to exceed 10 double-space pages and

- Address the essay to an audience of peer readers;
- Support claims with documented evidence;
- Use hyperlinks to send the reader from the text to supportive data and evidence;
- Provide a “bibliography” of hyperlinked documents, data, and evidence cited in the essay; and
- Submit 6 CD copies of the report (for distribution to the peer readers) that capture all linked documentation.

Points for this standard will be awarded annually based on the evaluation of this report. Reports will be assigned from 0 to 10 points based on an evaluation conducted by trained peer readers. The readers will examine the reports for the following traits and will assign points according to the scoring criteria identified below. The appropriate Scoring Rubric will be used to evaluate the annual report.

Scoring Rubric for Assessment Implementation: *Developing QEP/SLI*

1. Describe the QEP/SLI and explain why your institution will undertake this activity to improve student learning and/or the environment for student learning. [0-3 points]

[] 3 points	The report provides a clear description and rationale for the QEP/SLI, and the rationale draws upon previous assessment findings at the institution.
[] 2 points	The report provides a clear description and rationale for the QEP/SLI.
[] 1 point	The report describes a description and rationale for the QEP/SLI, but the description or the rational, or both, are vague or hard to follow.
[] 0 point	The report (a) does not describe the QEP/SLI (b) does not provide a rationale for it, or (c) lacks both a description and a rationale.

2. Refine the activity by stating the goals and objectives (What is to be accomplished? What are the intended outcomes?) [0-3 points]

[] 3 points	The report provides a reasonable number of goals, the broad concepts for the QEP/SLI. For each goal, related objectives (outcomes) are written using specific action words for observable behaviors that can be measured. Goals and objectives are connected to student learning and/or the environment for student learning.
[] 2 points	The report provides a reasonable number of goals, the broad concepts for the QEP/SLI. For each goal, related objectives (outcomes) are written. Goals and objectives are connected to student learning and/or the environment for student learning.
[] 1 point	The report provides goals and objectives for the QEP/SLI, but the objectives are not clearly related to the goals or student learning and/or the environment for student learning, are weakly stated, or cannot be easily measured.
[] 0 point	The report does not provide goals and objectives for the QEP/SLI.

3. Describe the assessment design for the QEP/SLI. Describe the assessment tools that were chosen and the reason for selecting them. [0 – 4 points]

[] 4 points	The report provides a well-crafted assessment design, describes the assessment tools, and why they were chosen. Baseline data is provided.
[] 3 points	The report provides the assessment design, describes the assessment tools, and why they were chosen.
[] 2 points	The report provides the assessment design and the assessment tools, but does not give an adequate explanation for their choice.
[] 1 point	The report presents minimal information about the assessment design and the tools for the QEP/SLI.
[] 0 point	The report does not contain an assessment design nor includes the assessment tools for the QEP/SLI.

Scoring Rubric for Assessment Implementation: *Sustaining QEP/SLI*

1. Present a short review of the QEP/SLI activity (Why it was undertaken including goals and objectives?) AND describe the actions for the year that were taken to accomplish goals and objectives. [0-2 points]

[] 2 points	The report provides a concise, yet thorough review of the activity to date and its rationale. The actions for this year are moving the project forward toward its goals and objectives.
[] 1 point	The report provides an adequate review of the activity and the actions for this year.
[] 0 point	The report gives a weak review of the activity or describes limited actions moving the activity forward, or both.

2. Describe the assessments taken during the year, (What were they and why were they used? What was the methodology?). [0-1 points]

[] 1 point	The report describes a clear link between the assessments conducted and the stated objectives and goals of the QEP/SLI. The methodology used is appropriate to the measurement of stated goals and objectives.
[] 0 point	The report shows a weak link between the assessments conducted and aspects of student learning they measure, or the methodology used is not appropriate to the measurement of stated goals and objectives, or both.

3. Present this year’s major assessment results with the addition of previous results, as they are available. [0-2 points]

[] 2 points	The report clearly presents the major results from this year’s assessments and, if applicable, incorporates these with the previous results so that the reader can follow the assessments over time.
[] 1 point	The report presents the major findings and, if applicable, incorporates these with previous findings. Information provided could be improved with a greater clarity of presentation.
[] 0 point	The assessment findings are lacking detail, difficult to understand, vague, or are minimally presented.

4. Discuss how the institution is improving the QEP/SLI based on the assessment results. [0-3 points]

<input type="checkbox"/> 3 points	The report clearly describes how the institution plans to improve its QEP/SLI in response to a thoughtful analysis of assessment results. Or, based on an analysis of assessment results, the report justifies that no improvement actions are required at this time.
<input type="checkbox"/> 2 points	The report describes how the institution plans to improve its QEP/SLI and gives a general indication of how those improvements are related to assessments results.
<input type="checkbox"/> 1 point	The report describes planned improvements to the QEP/SLI, but the improvements are difficult to understand or vague; or the report does not linked to improvements to assessment findings; or both.
<input type="checkbox"/> 0 point	The report does not describe any planned improvements to the QEP/SLI, nor does it justify that improvement actions are not required at this time.

5. Evaluate the QEP/SLI itself (what is working, what is not working) AND outline steps for next year (program implementation and assessment related). [0-2 points]

<input type="checkbox"/> 2 points	The report provides a thoughtful analysis of its QEP/SLI with observations about what is effective and what is not going as planned. The activities for next year are clearly described.
<input type="checkbox"/> 1 point	The report shows some reflection on the QEP/SLI at this stage. The activities for next year are listed.
<input type="checkbox"/> 0 point	The report shows a lack of reflection or a weak reflection of the QEP/SLI at this stage. The activities for the next year are not adequately identified.



2010-15 Performance Funding Cycle Appendix M: Student Sub-Populations

Student success is defined as credential completion (certificates, Associate and Bachelor’s degrees) which is the unifying goal of the Public Agenda, the Outcomes-based formula and the Performance Funding incentive program. Institutions will select 5 of the 13 student sub-populations to focus on student success from the following list:

Sub-population	Definition	Data Source
1. Adult	Year of Birth Field: Age 25 and over at time degree was earned	Annual Report of Graduates
2. Low Income	Pell Eligible	Annual Report of Graduates linked with TSAC FAFSA data
3. African American	Ethnicity field: African American	Annual Report of Graduates
4. Hispanic	Ethnicity field: Hispanic	Annual Report of Graduates
5. Males	Gender field: Male	Annual Report of Graduates
6. High Need Geographical Area	County of Permanent Residence Field	Annual Report of Graduates and Educational Needs Index http://educationalneedsindex.com/ to support geographical focus
7. Science, Technology, Engineering and Mathematics (STEM)	Student Major Field -- STEM Disciplines	Annual Report of Graduates
	-- CIP Code 01 Agriculture	
	-- CIP Code 03 Natural Resources	
	-- CIP Code 11 Computer and Information Sciences	
	-- CIP Code 14 Engineering	
	-- CIP Code 15 Engineering Technologies	
	-- CIP Code 26 Biological and Biomedical Sciences	
	-- CIP Code 27 Mathematics and Statistics	
8. Health	Student Major Field -- Health Discipline	Annual Report of Graduates
	-- CIP Code 32 Health Professions	
9. High-Need Fields	Programs identified as high need from the Supply/Demand Study	Annual Report of Graduates
10. Institutional Selection	Sub-population to be defined by institution but no duplication of other sub-populations	Annual Report of Graduates and Institutional Data
11. CC Transfers with 24 SCH to Universities *	Student transfers with 24+ SCH	Enrollment Report
12. AA/AS/AST Transfers *	Community college graduates (AA/AS/AST) who enroll at a university the following fall term	Match Report of Graduates for Community Colleges with University Enrollment Report
13. TN Community Graduates who complete Bachelor's Degree **	Bachelor's graduates who previously earned associate degree	Match Report of Graduates for Universities with previous Graduate Reports for Community Colleges
* Community college subpopulation only		
** University subpopulation only		