Developing a Selected Improvement Plan (SIP) for the COEPD

"A Work in Progress"

January, 20, 2017

Trends and Practices in Accreditation**

- Context
  - Accountability
  - Student outcomes
  - Data quality
- Standards
  - Prescriptive
  - Aspirational
  - Integrative
  - Format
- Culture of Evidence
- Evidence of learning
  - Graduate performance
  - Stakeholder ratings

- Review Cycle
  - Interim visits
  - Focused visits
  - Statistical monitoring
  - Virtual monitoring
- Conduct of the Review
  - Peer review
  - Off-site reviews
  - Risk-based models
  - Audit
  - Cohort
- Results of Accreditation
  - Graded
  - Tailored reporting

The Standards*

NCATE STANDARDS	CAEP STANDARDS*
1: Candidate Knowledge, Skills, and Professional Dispositions	1: Content and Pedagogical Knowledge
2: Assessment System and Unit Evaluation	2: Clinical Partnerships and Practice
3: Field Experiences and Clinical Practices	3: Candidate Quality, Recruitment, and Selectivity
4: Diversity	4: Program Impact
5: Faculty Qualifications, Performance, and Development	5: Provider Quality Assurance and Continuous Improvement
6: Unit Governance and Resources	*Diversity and Technology as cross-cutting themes"

Major Differences: NCATE/CAEP Standards*

- Transition to "Culture of Evidence" (CoE) vs a "Culture of Compliance".
- Increased **transparency**.
- **Professional dispositions** re-envisioned.
- **Diversity/Technology** as cross-cutting themes.
- Emphasis on *partnerships* in clinical practice.
- Enhanced **stakeholder involvement.**
- Increased emphasis on *impact* on P-12 learning.
- Expectation of **external benchmarking**.
- New **accountability metrics** and **annual reporting requirements**.
- Heightened expectations for the **quality of evidence**
- **InTASC standards** incorporated.
- Reference to **"rigorous college – and career-ready (P-12) standards."**
- Progressive, phased **increase in admission requirements**.

Culture of Evidence

A habit of using evidence in assessment, decision making, planning, resource allocation, and other processes that is **embedded in and characteristic of an EPP's actions and practices** (adapted from the Western Association of Schools and Colleges glossary).*

Evidence is <u>not</u> something an EPP collects for the accreditor, a compliance mechanism, or the end product; rather, it provides the basis for beginning the conversation**

 *CAEP Accreditation Manual (Draft version 2 – February, 2015)

**CAEP Evidence Guide (January, 2015)

A Culture of Evidence: Standard 5

(5.1) EPPs use multiple measures, monitor candidate progress, completer achievements and operations, demonstrate satisfaction of all CAEP standards.

(5.2) EPPs provide empirical evidence that data interpretations are valid and reliable.

(5.3) EPPs assess performance against goals, track results, test innovations, and use results to improve program elements/processes.

(5.4) EPPs summarize, externally benchmark and share measures of completer impact, and use these data in decision-making.

(5.5) EPPs involve appropriate stakeholders in program evaluation and improvement.

Characteristics of Evidence in an Effective Cultural of Evidence*

- Intentional and purposeful.
- Involves interpretation and reflection.
- Integrated and holistic.
- Quantitative and qualitative.
- Direct or indirect

*CAEP Evidence Guide (January, 2015)

EPP Role(s) in Developing a Culture of Evidence*

- **Maintain a QAS** comprised of valid data and multiple measures.
- Collect data on **candidate and completer impact** on P-12 learning.
- Support and sustain **evidence-based CI.**
- Evaluate **completer effectiveness**.
- **Test innovations** directed at improving completer P-12 impact.
- Use data to **set priorities, enhance programs, and improve capacity**.
- **Build an infrastructure** that supports data collection and monitoring.
- Provide for **stakeholder participation and feedback**.
- Utilize **qualitative and quantitative measures**
- **Selectively use available evidence** to support case for meeting standards
- Ensure available **evidence reflects minimum ME**

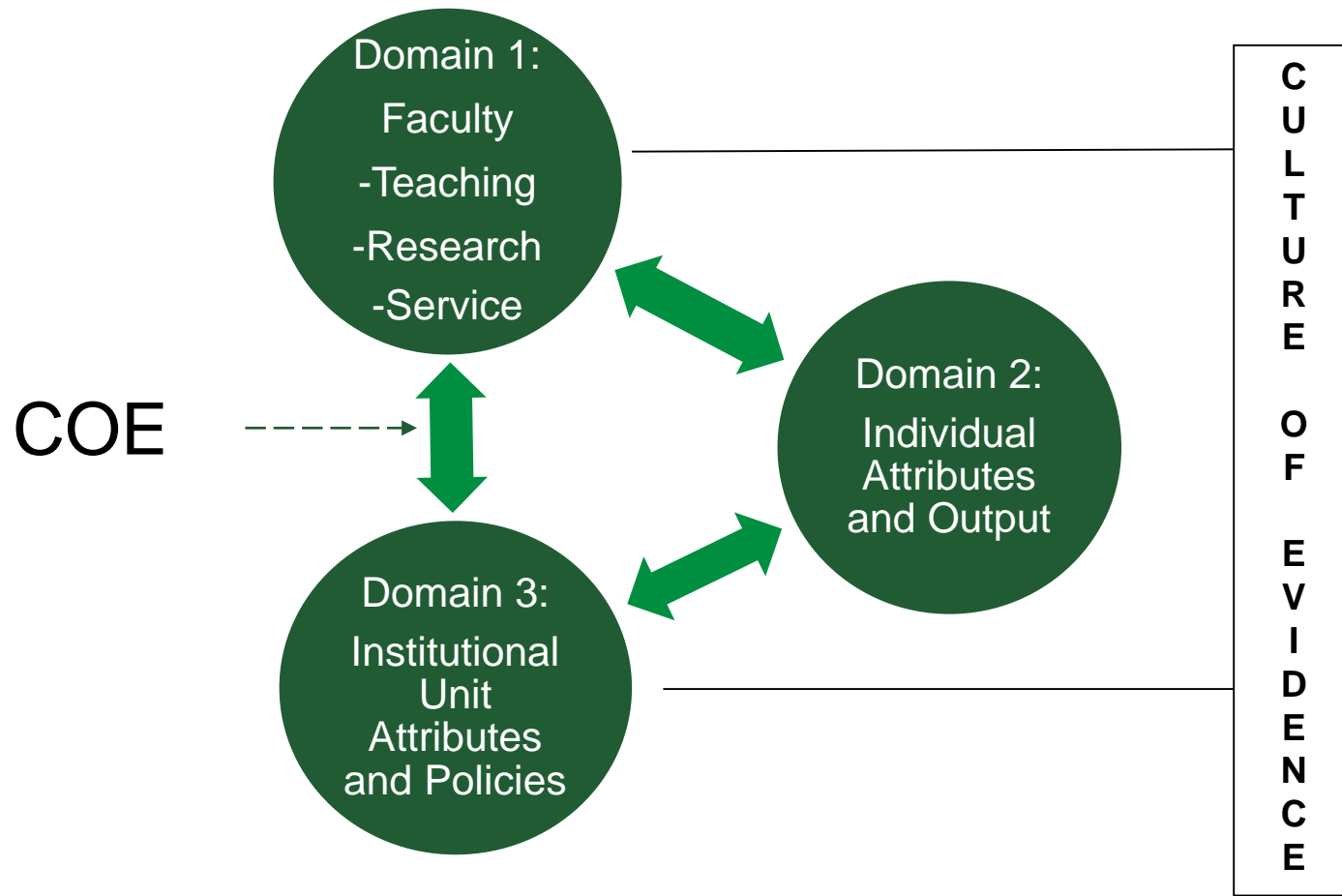*CAEP Evidence Guide (January, 2015) and CAEP Accreditation Manual (February, 2015)

Creating a CoE: Basic Assumptions/Commitments

- All are expected to contribute.
- Acknowledge that individuals have different starting points.
- Publicly embrace a CoE.
- Developing a CoE requires financial commitment.
- Balance organizational and individual needs.
- Planned change; encourage thinking about cultural change and capacity building.
- Continuously communicate and share data.
- Anticipate resistance.
- Involve key stakeholders often and early.
- Coordinate transition to a CoE with other projects.
- Evidence must be accessible, actionable, and meaningful.
- Provide data to/for faculty—faculty do less.

Framework for Understanding a Culture of Evidence*

Domain 1:

Faculty

-Teaching

-Research

-Service

COE

Domain 2:

Individual Attributes and Output

Domain 3:

Institutional Unit Attributes and Policies

CULTURE OF EVIDENCE

*Adapted from Keeves, 1999

The Selected Improvement Plan (SIP)

- A data-driven "Selected Improvement Plan" is the distinctive section of the self-study for the provider seeking accreditation under the Selected Improvement (SI) Pathway. Providers that choose the SI Pathway should demonstrate progress in achieving a higher level of excellence in educator preparation by identifying a CAEP standard(s) or several components across more than one standard **as an area selected for improvement**.

- The provider furnishes a rationale for selecting the focal area, presents its current level of performance as baseline data, and sets goals with measurable yearly objectives to show data-driven improvements over time. The emphasis of the plan is in the collection and analysis of data, and interventions that demonstrate substantive improvements. (CAEP Accreditation Handbook)

Reporting SIP Progress

Progress on the SIP will be reported annually by the provider and evaluated during the subsequent accreditation visit to determine if Components 5.3 and 5.4 of Standard 5 are satisfied . . . **a provider's performance under Component 5.3 must be satisfied in order to receive full accreditation.**

The CAEP Standards also state throughout that candidates and completers must demonstrate a positive impact on student learning. In this way, any SIP should provide a direct link to improving program impact as described in Standard 4 as well." (CAEP Accreditation Handbook)

SIP Review Guidelines

- The SIP must be of sufficient scope to have a positive impact on the provider and the performance of its candidates.

- The goals, objectives, and timelines must be appropriate to the selected area of improvement.

- The provider must show progress on the SIP in the Annual Reports.

- The provider should make changes to the SIP when data indicate.

- The provider can begin a SIP and related interventions at any time during the accreditation cycle. (CAEP Accreditation Manual)

COEPD Focus and Rationale

The focus of Marshall's SIP is **"Improving the Quality of the Evidence Available to Support Continuous Improvement."** An initial assessment by the AACC of EPP function and capacity to ensure that quality evidence was available to support CI efforts concluded there was **no systematic plan for doing so.** Additionally, the AACC determined there was **little organizational and personnel capacity for ensuring evidence quality**. Given these factors, the AACC recommended to the Dean that **"Improving the Quality of Evidence Available to Support Continuous Improvement"** be the focus of our SIP. The Dean concurred and the focus was supported by the COEPD Cabinet and Program Directors.

Purpose of MU SIP

The purpose of the MU Selected Improvement Plan is to transition from a "culture of compliance" to a "culture of evidence". The expected outcomes resulting from this transition include:

1. Improvements in the quality of evidence available to support decision making for continuous improvement;

2. An organizational structure to support the provision of quality evidence; and,

3. Enhanced faculty and staff capacity to implement evidence based decision making.

Relationship of SIP to Standards

Standard 1: Content and Pedagogical Knowledge. (1.1, 1.2, 1.3, 1.4, 1.5) (A.1.1, A.1.2)

Standard 2:   Clinical Partnerships and Providers. (2.2, 2.3) (A.2.2)

Standard 3: Candidate Quality, Recruitment, and Selectivity. (3.1, 3.2, 3.3, 3.4, 3.5, 3.6) (A.3.1, A.3.2, A.3.3, A.3.4)

Standard 4: Program Impact. (4.1, 4.2, 4.3, 4.4) (A.4.1, A.4.2)

Standard 5: Provider Quality Assurance and CI. (5.1, 5.2, 5.3, 5.4, 5.5) (A.5.1, A.5.2, A.5.3, A.5.4, A.5.5)

Key Elements in Developing a Culture of Evidence
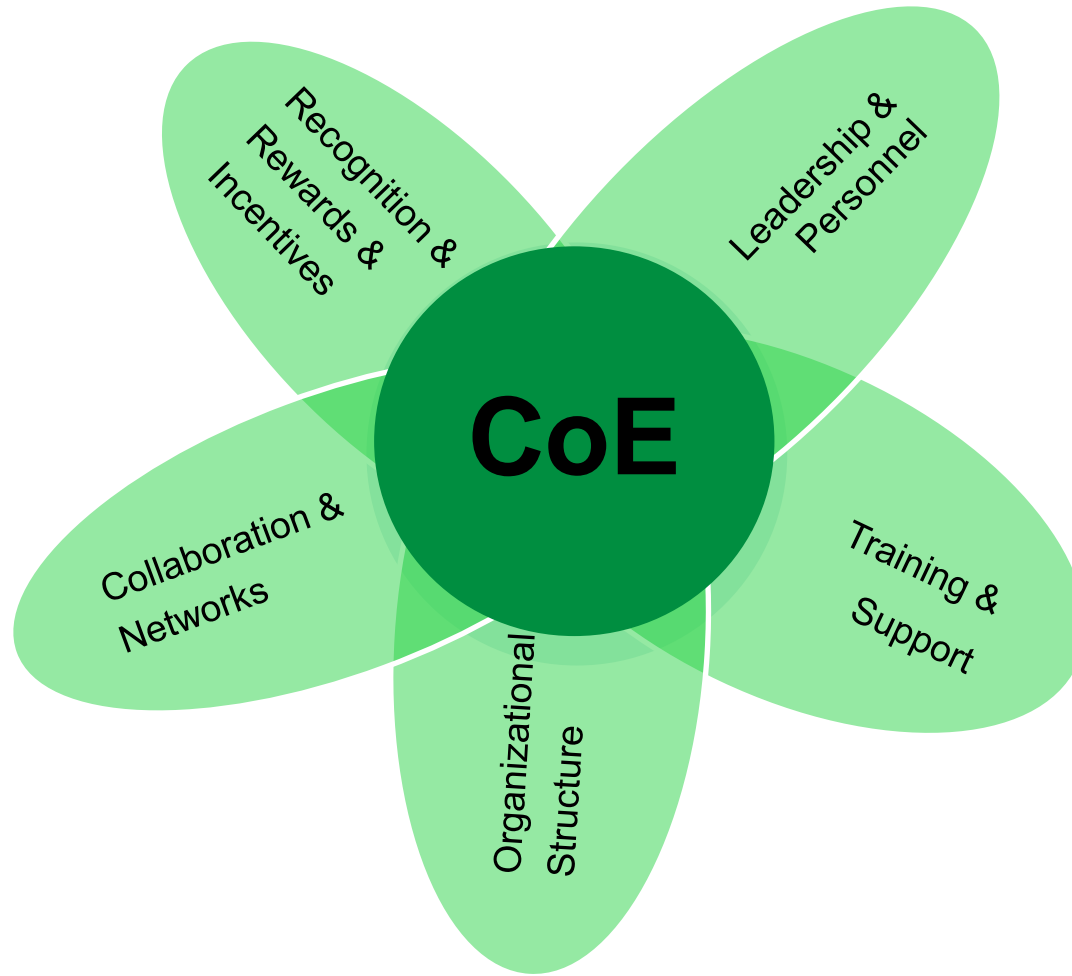
Goals of the MU SIP

1. **Goal Area: Leadership and Personnel**: Develop a leadership/personnel environment and structure that supports and encourages the transition to a "culture of evidence".

2. **Goal Area: Training and Support**: Develop faculty and staff capacity (knowledge and skills) needed to support the transition to a "culture of evidence".

3. **Goal Area: Collaboration and Networking**: Develop and actively support networking and collaborative arrangements that support the development and maintenance of a "culture of evidence".

4. **Goal Area: Organizational Support**: Develop and maintain an organizational structure necessary to support a "culture of evidence".

5. **Goal Area: Recognition, Rewards, and Incentives**: Develop and implement a recognition, rewards, and incentive system for supporting the development and maintenance of a "culture of evidence".

Strategies for Developing a CoE: (Leadership/Personnel)

- Provide strategic direction/alignment.
- Develop/communicate clear CoE goals; integrate into mission.
- Make developing a CoE visible; participative leadership.
- Provide technical support and easy data access.
- Relate CoE to other academic activities.
- Formally plan for socializing new faculty/staff.
- Provide an organizational structure with a "Go To" person(s).
- Integrate CoE expectations into recruiting, annual review, and merit systems.
- Evaluate/benchmark evolution of CoE; think sustainability from the outset.
- Provide/allocate resources; educate institutional administration.
- Communicate frequently; engage key stakeholders (early/often).

Strategies for Developing a CoE: (Training and Support)

- Training; webinars, data retreats, CE, seminars..
- Utilize CoE products/outputs for presentation/publication.
- Mentoring.
- Reassigned time/sabbaticals
- Provide GA support.
- Research/assessment funding.
- Use external consultants.
- Support/encourage conference and workshop attendance.
- Develop a "Data Users Group".
- Support CoE related research projects.

Strategies for Developing a CoE: Organizational Structure (Infrastructure)

- Creation of assessment/research centers.
- Determine participation/involvement model (holistic/egalitarian vs. elitist/natural talent).
- Top-down vs. bottom-up model.
- Create pool of CoE leaders.
- Identify "research only" faculty.
- Develop/provide integrated data systems.

Strategies for Developing a CoE: (Collaboration and Networking)

- Establish/support internal PLCs/networks.
- Develop partnerships with other IHE.
- Mentorships.
- PLCs/networks – external.
- Partnerships (expert-novice) and exchanges.
- Establish CoE interest/topic groups.
- Facilitate student involvement in CoE.

Strategies for Developing a CoE: (Recognition)

- Create events highlighting CoE elements/outcomes.
- Promote CoE outcomes/successes internally and externally.
- Create an accessible resource website.
- Initiate a newsletter highlighting successes/initiatives.
- Create a faculty rewards structure.
- Recognize/support "early adopters".

Challenges and Barriers

- Competing priorities (teaching, advisory, service, etc.).
- Institutional missions focused on teaching.
- Inadequate resources.
- Building sustainability.
- Organizational structure.
- Capacity building (knowledge/skill) (sophistication).
- Need for local relevance/application.
- Personnel motivation, ability and resistance.
- Effectively documenting/measuring CoE development/evolution.
- Impact of shifts in resources from teaching to CoE initiatives.
- Educating institutional administrators about goals/needs.
- Managing multiple transitions concurrently.
- Providing quality, meaningful and actionable evidence.

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