

## PET FORM

### Planning and Evaluation Tracking (2012-2013 Assessment Period)

Division of: [Planning and Advancement](#)

Person Responsible for this Division: [Danita McAnally](#)

Department of: [Office of Outcomes Assessment](#)

Primary Person Responsible for this Form: [Kristin McDonald-Willey](#)

Purpose Statement (With Last Updated Date):

[Outcomes Assessment](#): The Department of Outcomes Assessment ensures that AC's assessment practices support the mission of Amarillo College and maintain SACSCOC accreditation requirements (fall 2012).

#### Goal Statement #1:

[Adjust instruction and services based on institutional assessment data \(AC Strategic Plan through 2015-Version 2.0: Strategy 1.1\)](#). Note: The Outcome Statement and Data from Goal 1, Outcome 1A (instructional focus) and Goal 2, Outcome 2a (non-instructional focus) from the 2011-2012 PET form was combined into the 2012-2013 form's Goal 1.

#### Outcome/Objective Statement #1A

**(Be sure to include audience, behavior, conditions, degree/benchmark, and evaluation method):**

Upon receiving institutional evidence from administration in charge of general education competency reports, CCSSE data, and Achieving the Dream data, each AC department chair/director responsible for a PET form will annually/semi-annually identify at least one improvement or action plan that was made based on institutional evidence on an institutionally-approved questionnaire ([AC Strategic Plan through 2015: Task 1.1.1](#)).

- Results (If Applicable, Provide Numbers and Percentages for Quantitative Data)

#### [2012 Results – 2012 Was the First Year Data Was Collected](#)

[Information Provided by Administration to Staff, Faculty, and Administrators](#)

<a href="#">Campus</a>	<a href="#">Location</a>	<a href="#">Date/Time</a>	<a href="#">Signed Attendance Record</a>	<a href="#">Submitted Form</a>
<b>West Campus</b>	AH 107	4/6/12; 3:30-4:30 p.m.	13	9
<b>East Campus</b>	SAC 152	4/20/12; 1-2 p.m.	22	13
<b>Washington Campus</b>	LIB 113	4/20/12; 3-5 p.m.	2	2
<b>Moore County Campus</b>	Rm. 147	5/15/12; 10 a.m.-12 p.m.	7	5

#### [Audience Information](#)

For the first year, the Director of Institutional Research and Institutional Effectiveness (IR & IE) and the Assessments Coordinator did not require mandatory department chair/director participation in the Chats and Stats sessions. Similarly, the requirement of a completed questionnaire by all department chairs and directors was likewise not required. The purpose of the first year sessions was to gauge how those who are likely among the most engaged at AC (e.g. those who would opt to attend a session that was not required) view and use institutional data).

#### [Attendance Breakdown](#)

<b>Total Recorded Attendance:</b>	44
<b>Total Submitted Institutional Questionnaire Form:</b>	29 or 64%
<b>Total Recorded Faculty in Attendance:</b>	35 or 80%
<b>Total Recorded Administration/Staff in Attendance:</b>	9 or 20%

### Number and Percentage Breakdown of Individuals Who Use Institutional Evidence to Make Improvements

4 out of 29 people (14%) of session attendees said that they have used institutional data to make improvements.

The responders who do not currently use institutional data provided the following reasons:

- Data does not apply to my area – 8 of 29 (28%)
- Unsure how to use data – 7 of 29 (24%)
- Unaware data existed – 9 of 29 (31%)
- Other Reasons – 4 of 29 (14%)

### Data Attendees said they would Find Useful

The 29 people who submitted a form provided 31 total responses. However, the only responses where 4 or more people gave the same response\* were as follows:

- Program-Specific Data and CE Class Information 12 out of 29 (41%)
- Survey-Related Data (Program Specific, Graduating Students, and Accreditation Supporting) – 8 out of 29 (28%)
- CE Class Information - 4 out of 29 (14%)

\*Note: There was some overlap between some of the categories.

More data breakdown information (overall and by campus) and specific data request information is provided via the **Chats and Stats Report 2012**.

- Analysis

- Provide Previous Data/Result Analysis

(Include if benchmark was met and how results relate to outcome statement):

Even within the small data group, the benchmark was not met. Based on the preliminary findings it appears that few individuals at AC are currently using institutional data to make improvements. Also, despite Planning & Advancement's efforts to advertise the session through the **Planning and Advancement Newsletter** and through mass e-mail communications sent out by the Center for Teaching and Learning, the attendance (particularly for staff/administration) was low and every department chair/director was not in attendance and was therefore not surveyed.

The information provided by the attendees seems to suggest that the data they are currently provided is too broad and they need more specific data or they do not feel that they know enough about the current available data to know what may be useful.

The initial plan was to use the first rounds of Chats and Stats as a way to make revisions to the form (if needed) before mass distribution. However, based on the poor responses, the Division of Planning and Advancement may first wish to revisit how it collects/distributes data before instituting a requirement that the data be used.

- Improvements

- List any Improvements Made in the **2011-2012** (Last Academic) Year:

A questionnaire was created by the Instructional Assessment Committee (**10-24-12**) and revised by the Non-Instructional Assessment Committee (**10-26-11**). Next, Planning and Advancement provided the first ever Chats and Stats sessions related to data usage.

- Evaluate Why Improvements Were Successful/Were Not Successful:

The improvements were successful in the sense of helping Planning and Advancement make preliminary assumptions on where the institution currently stands in regard to the institution's buy-in to using institutional data to make improvements.

However, the improvements were not successful in the sense of helping Planning and Advancement meet the intended benchmark. Based on the information provided by the attendees, institutional research will either have to find a way to get the department chairs/directors new information that would be more useful to them AND/OR institutional research and/or the assessment's coordinator will need to assist the department chairs/directors in brainstorming ways to more effectively use the data that is currently available to them to make improvements. Based on the preliminary findings, there is no way that the benchmark (as is) will be met in the near future. Based on the current available data, it does not appear that the benchmark or intended outcome was realistic and may need to be revisited.

- What Budget Implications Were Involved with this Improvement? (Please Provide Cost Estimate/Details):  
The primary budget implication was the mileage reimbursement cost for the day of travel to the Moore County Campus. At around 48 cent per mile, the reimbursement rate to the Director of IR and IE was roughly \$44 for a one-time, round-trip visit to the Moore County Campus. The Moore County Campus was deemed necessary because almost all of the directors were scheduled to be in attendance and the directors specifically requested a hands-on (as opposed to ITV) session. Other minor costs involved with the visit were the printing costs for the handouts, which would have amounted to around \$6 at an estimate of 6 cents per hand out.

- **Recommendations/Actions for 2012-2013**

- Person Responsible (Who will complete the action?):  
The Vice President of Academic Affairs, the Assessments Coordinator, and TBD. This action plan cannot be fully developed because the Director of IR and IE announced in November that she will be leaving in the spring and anything related to this outcome requires IR support; the Chief of Planning and Advancement has temporarily given the Assessments Coordinator control of the surveys, but has not yet decided if this addition of duties will be short or long term.
  - Action Plan: The Vice President of Academic Affairs initiated the designation of Instructional Data Specialists. As a result, each department will select one faculty member to serve as a Data Specialist. Training of Data Specialists will begin 11/30/12. Data Specialists will be trained on IR data first, but will also be trained on outcome related-data including use of survey results. In addition, the Assessments Coordinator will set appointments to work with the appropriate party or parties to view the types of data that AC currently collects and weigh the cost/time/use benefit for each data type. Next, a representative from IR and the Assessments Coordinator will view the requests provided through the institutionally approved questionnaire (IQ) form to determine whether or not the requests are feasible and will notify the appropriate parties as to whether or not the requested data can be provided.
  - Expected Time Frame Needed to Implement Action Plan (Please provide specific deadline date):  
Estimate Based on Unknown Variables – Game Plan Developed by Summer 2013
  - What Budget Implications Are Involved with this Action? (Please Provide Cost Estimate/Details):  
Some data sources being used (surveys) and requested data sources (informative dashboards) easily cost thousands of dollars. However, some costs are associated with proving institutional effectiveness by comparing AC to other institutions (e.g. CCSSE) or in providing the means for survey delivery (e.g. Class Climate) so much discussion will need to go into weighing costs, seeking other viable options, and fulfilling the institution's wants and needs to the highest degree possible.
-

## Goal Statement #2:

Adjust instruction and services based on General Education Competency assessment data *(Based on AC Strategic Plan through 2015-Version 2.0: Strategy 1.1).*

### Outcome/Objective Statement #2A

**(Be sure to include audience, behavior, conditions, degree/benchmark, and evaluation method):**

After attending a General Education Competency assessment training and assessing 100 student artifacts, General Education Competency Committee team members will identify at least one area of student strength and one area of student weakness/area for improvement on the committee's general education assessment finding's document by the conclusion of the spring semester *(AC Strategic Plan through 2015: Task 1.1.1).*

- Results (If Applicable, Provide Numbers and Percentages for Quantitative Data)

- **2010-2011 Data:**

- Communication Skills Committee – Initially did not provided comments. Assessments coordinator followed up and the group somewhat cited a student strength (debatable), but did not cite a student weakness. The student strength cited was “Strength – following instructions.”
    - Critical Thinking Skills Committee – Cited strength and cited area for improvement.
    - Mathematics Committee – Initially did not provide comments. Assessments coordinator followed up and the group cited a strength, but did not cite any areas for improvement.
    - Findings: Out of the 6 comment requirements (1 strength and 1 weakness requested per group) given to the 3 competency groups, 4 of 6 (67%) of the findings requests were fulfilled. NOTE: This number/percentage counts the Communication Skills comment.

- **2011-2012 Data:**

- Communication Skills Committee – On individual artifact evaluations, some team members cited strengths and areas for improvement in their notes, but no summative evaluation for how the artifacts performed as a whole was provided.
    - Critical Thinking Skills Committee – On individual artifact evaluations, some team members cited strengths and areas for improvement in their notes, but no summative evaluation for how the artifacts performed as a whole was provided.
    - Empirical and Quantitative Skills Committee – Initially did not provide student-centered comments. After follow-up, there were no cited student strengths, but areas for improvement were cited.
    - Teamwork Committee – Cited strength and area for improvement (Note: The rubric was being tested during this year so only 10 total artifacts were assessed.)
    - Findings: Out of 8 comment requirements (1 strength and 1 weakness requested per group) given to the 4 competencies, 7 of 8 (88%) of the findings requests were fulfilled.

- Analysis

- Provide Previous Data/Result Analysis

(Include if benchmark was met and how results relate to outcome statement):

Initially, the General Education Competency Committees only evaluated (scored) the artifacts. Since the committee started providing comments, many of the comments have been geared toward instructors (e.g. request to clarify instructions.) However, in order to actually use the results for institutional improvements, the committees need to be further encouraged to provide more insight as to how the students are truly performing in the various competencies and how the college can use the committee members' analysis to improve. AC has not met the 100% benchmark as of yet, but most of the committees are providing comments that should prove helpful to the institution. This outcome will be tracked until all of the competencies have been implemented and evaluated for 1 year (2 more years).

- Improvements
    - List any Improvements Made in the **2011-2012** (Last Academic) Year:  
For the fall, a “Findings Template” was included in each committee’s folder in an attempt to encourage committee members to answer questions that should aid the Institution.
    - Evaluate Why Improvements Were Successful/Were Not Successful:  
The final verdict will be out on the success of the findings template until spring 2013 (collection of 2012-2013 artifact results,) but it is expected that the template should prove successful because it reinforces the request for information provided in the training PowerPoints. The template is in an easy-to-locate place in the committee members’ folders on the J drive.
    - What Budget Implications Were Involved with this Improvement? (Please Provide Cost Estimate/Details):  
Not Applicable – There were no budget implications.
  - Recommendations/Actions for **2012-2013**
    - Person Responsible (Who will complete the action?): [Assessments Coordinator](#)
    - Action Plan:
      1. Send monthly reminders of expectations and deadlines to committee members.
      2. Collect all artifact results (scores and comments) by the end of May 2013.
      3. Follow up with committees, if needed (post May “due date”), to finalize report.
    - Expected Time Frame Needed to Implement Action Plan (Please provide specific deadline date):  
[To be completed by July 1, 2013](#)
    - What Budget Implications Are Involved with this Action? (Please Provide Cost Estimate/Details):  
[Not Applicable – There are no budget implications.](#)
- 

## **Outcome/Objective Statement #2B**

**(Be sure to include audience, behavior, conditions, degree/benchmark, and evaluation method):**

[Evaluate the degree to which AC completion of courses with a “C” or better, student persistence rates from “term to term” and/or “year to year,” and/or attainment of credentials align with successful \(score of 3 or higher\) General Education Competency artifact scores \(No Excuses Goal 1 and Goal 4/Goal 5\).](#)

- Results (If Applicable, Provide Numbers and Percentages for Quantitative Data)  
[Not Applicable – This is a new objective.](#)
- Analysis
  - Provide Previous Data/Result Analysis  
(Include if benchmark was met and how results relate to outcome statement):  
[Not Applicable – This is a new objective. However, the purpose of creating this objective is to see whether or not the level of student “success” for AC competencies \(critical thinking, communication skills, empirical and quantitative skills, teamwork, personal responsibility, and social responsibility\) correlates to the course grade and contributes to increased student persistence and/or attainment of credentials.](#)
- Improvements  
[Not Applicable – This is a new outcome](#)

- **Recommendations/Actions for 2012-2013**

- Person Responsible (Who will complete the action?): Assessments Coordinator and TBD (Institutional Research Representative – Planning and Advancement will undergo staffing changes by February 2012)
  - Action Plan: All artifacts have student and class identifiers removed before they are presented to the appropriate committees toward the beginning of the fall semester. However, the original database that is viewed by the Assessments Coordinator maintains student information (name and class), but could also be made to retain the student ID number when the Excel file is exported into ACCESS. Therefore, starting in spring 2013, all student identifiers (including the ID number) will be exported into the access database.
    - The information for the artifact number that each artifact is assigned will be entered into the ACCESS database before the artifacts are given to the committees in fall 2013.
    - When the artifact evaluations (scores and comments) are received from the committees by the end of spring 2014, the scores given by the committee for each artifact will be entered into the access database.
    - Next, SPSS will be used to evaluate how students who scored a 3 (competent) or better on each competency performed (in terms of grades and persistence and attainment of credentials) versus those who did not score a 3 or better.
  - Expected Time Frame Needed to Implement Action Plan (Please provide specific deadline date):  
Because the assessment of artifacts runs one year behind and the fall 2012 artifacts have already been prepared, the earliest possible correlation or comparison results would be available by fall 2015.
    - By May 2014 the committees should have submitted their scores for the artifacts they assessed in 2013-2014. Once the scores are received, the scores will be entered into the database and a SPSS file will be used to determine if there is a correlation between the student's "competence" with a certain competency and their grade in the class.
    - By May 2014, at least 1 year will have passed since the students completed the coursework. Therefore, SPSS could likewise be used to determine student success in terms of persistence or attainment of credentials in relation to the student's "competence" with a certain competency.
  - What Budget Implications Are Involved with this Action? (Please Provide Cost Estimate/Details):  
Not Applicable – There are no budget implications.
- 

### **Goal Statement #3:**

*Certify quality instructional and academic support services (Based on AC Strategic Plan through 2015-Version 2.0: Strategy 1.3).* Note: The Outcome Statement and Data from Goal 1, Outcome 1C (instructional focus) and Goal 2, Outcome 2b (non-instructional focus) from the 2011-2012 PET form was combined into this form's Goal 3.

### **Outcome/Objective Statement #3A**

**(Be sure to include audience, behavior, conditions, degree/benchmark, and evaluation method):**

After receiving Planning, Evaluation, and Tracking (PET) form training and/or training materials, faculty/administrators/staff in each department will identify at least one direct outcome, one goal/outcome linked to the Strategic Plan, one goal/outcome linked to No Excuses, one result, one improvement, and one action plan on their submitted PET form by the conclusion of the academic year (*Revision of 2010-2011 Outcome 1.a. – Based on AC Strategic Plan through 2015: Task 1.3.1*).

- Results (If Applicable, Provide Numbers and Percentages for Quantitative Data)

#### 2010-2011 and 2011-2012 RESULTS INSTRUCTIONAL AREAS

2010-2011 Instructional Results: PET Forms: 57 of 62 Submitted (92%)

PET REQUIREMENTS MET	NUMBER	PERCENTAGE
At Least 1 Direct Outcome	56	90%
1 Goal/Outcome Linked to Strategic Plan	N/A – Not Required on 2010-2011 Form	
1 Goal/Outcome Linked to No Excuses	N/A – Not Requested on 2010-2011 Form	
At Least 1 Result	54	87%
At Least 1 Improvement	26	42%
At Least 1 Plan of Action	45	73%

2011-2012 Instructional Results: PET Forms: 59 of 61 Submitted (97%)

PET REQUIREMENTS MET	NUMBER	PERCENTAGE
At Least 1 Direct Outcome	55	90%
1 Goal/Outcome Linked to Strategic Plan	59	97%
1 Goal/Outcome Linked to No Excuses	N/A – Not Requested on 2011-2012 Form	
At Least 1 Result	56	92%
At Least 1 Improvement	51	84%
At Least 1 Plan of Action	57	93%

#### 2010-2011 and 2011-2012 RESULTS NON-INSTRUCTIONAL AREAS

2010-2011 Non-Instructional Results: PET Forms: 37 of 41 Submitted (90%)

PET REQUIREMENTS MET	NUMBER	PERCENTAGE
At Least 1 Direct Outcome	37	90%
1 Goal/Outcome Linked to Strategic Plan	N/A – Not Required on 2010-2011 Form	
1 Goal/Outcome Linked to No Excuses	N/A – Not Requested on 2010-2011 Form	
At Least 1 Result	33	80%
At Least 1 Improvement	31	76%
At Least 1 Plan of Action	34	83%

2011-2012 Non-Instructional Results: PET Forms: 26 of 29 Submitted (90%)

PET REQUIREMENTS MET	NUMBER	PERCENTAGE
At Least 1 Direct Outcome	23	79%
1 Goal/Outcome Linked to Strategic Plan	26	90%
1 Goal/Outcome Linked to No Excuses	N/A – Not Requested on 2011-2012 Form	
At Least 1 Result	22	76%
At Least 1 Improvement	21	72%
At Least 1 Plan of Action	26	90%

- Analysis

- Provide Previous Data/Result Analysis

(Include if benchmark was met and how results relate to outcome statement):

The benchmark was not met for instructional or non-instructional areas. Areas that are noteworthy between the annual comparisons are that the instructional areas greatly improved in making improvements and plans of action. However, the non-instructional areas did not show improvement in most areas and actually performed significantly (more than 10%) worse in the area of providing direct outcomes.



The reason for the increased scores in the instructional area can likely be attributed to the fact that “Use of Results” was divided into two separate sections “Improvements” and “Actions. The attempt to clarify the template terminology “may” have contributed to higher percentages.

The reason for the dip in the non-instructional scores could be attributed to a variety of factors. More departments chose to combine their areas into one form (e.g. all of the previously standalone departments in the CTL, Business Office, and Planning and Advancement areas are now lumped together within their division). Therefore, it’s possible some areas did not realize that each area, within that division, must still meet all of the PET requirements. Other contributing factors may have been due to personnel changes or the fact that more requirements were requested; therefore, more requirements were not fulfilled.

- **Improvements**

- List any Improvements Made in the **2011-2012** (Last Academic) Year:
  - Based on recommendations by the non-instructional assessment committee, the template was changed so that it was more user friendly.
  - A link to the Strategic Plan was required for PET Forms
  - The instructional and non-instructional assessment committees also provided edits and improvements to a training PowerPoint developed by the Assessments Coordinator that will be delivered in the fall 2012 semester.
- Evaluate Why Improvements Were Successful/Were Not Successful:
  - Based on the percentages of meeting expectations, it appears that the improvement to the template was successful for the instructional side of the college, but not the non-instructional side.
  - Both instructional and non-instructional performed very well (above 90%) in meeting the Strategic Plan link requirement.
  - Based on the feedback from the committees, it can be deemed that the PowerPoint should prove helpful to those individuals who choose to reference the examples. However, the full extent of the PowerPoints usefulness cannot be fully evaluated until the 2012-2013 forms are evaluated.
- What Budget Implications Were Involved with this Improvement? (Please Provide Cost Estimate/Details):  
Not Applicable – There were no budget implications.

- **Recommendations/Actions for 2012-2013**

- Person Responsible (Who will complete the action?):  
Assessments Coordinator, Instructional Assessment Committee, and Non-Instructional Assessment Committee
- Action Plan: Instead of the 2011-2012 PET form’s proposed 2 training sessions, the Assessments Coordinator will deliver multiple (at least 6 instructional and 3 non-instructional) PET trainings/workshops to those responsible for a PET form. The trainings will be divided by “like” groups and each group will be sent an Outlook Calendar appointment.
- Expected Time Frame Needed to Implement Action Plan (Please provide specific deadline date): Fall 2012

What Budget Implications Are Involved with this Action? (Please Provide Cost Estimate/Details): Not Applicable – There are no budget implications.

---