

Administrative Unit Assessment Report

Assessment is a term commonly used to encompass the process of gathering and using evidence to guide improvements.

SACSCOC requires that "The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of seeking improvement based on analysis of the results".

Be sure to **SAVE** your progress as you work!

Administrative Unit

Student Affairs – Wellness and Holistic Support

Submission Year

2022-2023

Assessment Coordinator Name

Jalya Green

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Unit Goal

Goal

Goal 1

Unit Goals are broad statements that describe the overarching long-range intended outcomes of an administrative unit. They support the Institution's Mission/Goals.

Unit Goal

Students and faculty members will have improved access to information about disability services.

Pillar of Success Supported

Robust Student Experience

Outcomes

Outcome 1

Outcomes are specific, **measurable** statements that reflect the broader goals. They will primarily describe what the unit is going to do and what its impact will be on students and other key stakeholders (alumni, parents, employers, etc.).

Most administrative units measure **Operational Outcomes** which describe the level of performance of an operational aspect of a program or office (ex. number of services provided, timeliness of a process).

Some units may measure **Student Learning Outcomes** which describe knowledge, skills, and values that students are expected to gain as a result of their educational experiences (ex. Student Wellness Program may measure student knowledge of healthy habits.)

What type of Outcome would you like to add?

Operational Outcome

Enter Outcome

Students are familiar with the disability services available and know how to access them accordingly.

Timeframe for this Outcome

2021-2022 Academic Year

Performance Target for "Met"

Between 85% and 100% of responses indicate "familiar" or "somewhat familiar."

Performance Target for "Partially Met"

Between 70% and 84.9% of responses indicate "familiar" or "somewhat familiar."

Performance Target for "Not Met"

Less than 70% of responses indicate "familiar" or "somewhat familiar."

Assessment Measure Used

Student Survey

Frequency of Assessment

Student survey at the end of each semester.

Data Collected for this Timeframe (Results)

94% of students that utilized Disability Services reported being familiar or somewhat familiar with the services available and knew how to access them accordingly.

Score (Met=3, Partially Met=2, Not Met=1)

3

.03% were neutral or unfamiliar.

Comments/Narrative

The threshold for the outcome of "Students are familiar with the disability services available and know how to access them accordingly" was met (94%). Only .03% of participants indicated they were neutral or unfamiliar. It is noteworthy to mention that there were 178 established Disability Services cases for 2021-2022 and only 34 students (19% of disability clients) responded to the survey.

Compared to the data collated in 2020-2021 (87%), there was a notable increase in the percentage of students who responded that they were familiar with services. In 2019-2020, 78% of survey participants indicated that they were familiar or somewhat familiar with services. To summarize, consistent gains have been made in working toward the desired outcome.

In 2021-2022, monthly disability resources were provided to the students to help them better understand opportunities for support, rights, and responsibilities. Moving forward, to obtain more relevant data, the department intends to encourage increased survey participation. .

Lastly, the performance targets were adjusted upwardly of 10% to reflect greater expectations in meeting the desired outcome.

Resources Needed to Meet/Sustain Results

Continued professional development on the various areas of Disability Services (\$2000). Potentially host a Disability Services state institute at Lander (unable to estimate cost at this time).

Explanation of How Resources Will Be Used

Information about laws and best practices will ensure the department is providing students with all the necessary information to be successful. Additionally, professional staff would be better prepared to communicate with students about accommodations and promote overall better understanding.

An institute would better prepare faculty and staff in supporting Lander students. Also, an institute would

align with the goals of the retention committee (tasked with identifying opportunities to keep more students enrolled).

Outcome 2

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Some units may measure **Student Learning Outcomes** which describe knowledge, skills, and values that students are expected to gain as a result of their educational experiences (ex. Student Wellness Program may measure student knowledge of healthy habits.)

What type of Outcome would you like to add?

Operational Outcome

Enter Outcome

Faculty demonstrate an understanding of their role and the guidelines in place for student disability accommodations in the classroom.

Timeframe for this Outcome

2021-2022 Academic Year

Performance Target for "Met"

Between 85% and 100% of responses indicate "strongly agree" or "agree."

Performance Target for "Partially Met"

Between 70% and 84.9% of responses indicate "strongly agree" or "agree."

Performance Target for "Not Met"

Less than 70% of responses indicate "strongly agree" or "agree."

Assessment Measure Used

Faculty Survey

Frequency of Assessment

Annually

Data Collected for this Timeframe (Results)

92% of faculty strongly agreed or agreed that Disability Services assisted them in working with students.

Score (Met=3, Partially Met=2, Not Met=1)

3

Comments/Narrative

The threshold for the outcome of "Faculty demonstrate an understanding of their role and the guidelines in place for student disability accommodations in the classroom" was met (92%). There was a slight decrease in faculty that strongly agreed or agreed when compared to data collected in 2020-2021 (95%). It is also noteworthy to mention that there were less respondents in the 2021-2022 survey.

In previous years, the faculty knowledge of accommodations was gauged off student perception with regard to faculty providing their accommodations. For the past two years, faculty have been surveyed and asked for direct feedback. This allows the department to better understand and target faculty needs. In 2021-2022, faculty received monthly educational material regarding typical accommodations

and various diagnoses. The intention was to better educate faculty on current trends, while at the same time, adding tools to their toolbelt.

Lastly, the performance targets were adjusted upwardly of 10% to reflect greater expectations in meeting the desired outcome.

Resources Needed to Meet/Sustain Results

Informational pamphlets. Lunch N' Learn Sessions, Guest Speakers and continued access to monthly and requested information (\$1000+)

Explanation of How Resources Will Be Used

Pamphlets will provide faculty and staff with tangible information. The Lunch N' Learn Sessions will provide education and a safe-space environment for the faculty to meet with the Director of Disability Services. Guest speakers will allow faculty to gain additional insight from others (aside from their standard point of contact).

Goal Summary

Goal Summary/Comments

As indicated by the data, Disability Services has made great strides in providing increased information to students, faculty, and staff. However, it is noteworthy to mention that Disability Services is a one-staff department. Additional personnel would enhance the resources and education the department could feasibly provide.

Changes Made/Proposed Related to Goal

Restructure of Disability Services. As mentioned previously, Disability Services is becoming a taboo term; therefore, the department is still considering a rebranding to Accessibility Services. As applicable, the purpose and mission of the department would remain the same, but a change in terminology may reflect more inclusivity and promote enhanced understanding among stakeholders.

Upload Files (if needed)

Goal 2

Unit Goals are broad statements that describe the overarching long-range intended outcomes of an administrative unit. They support the Institution's Mission/Goals.

Unit Goal

Disability Services will provide students with the quality of support needed to graduate from Lander University.

Pillar of Success Supported

Selective, Competitive Recruitment and Enrollment of Ambitious and Talented Students

Outcomes

Outcome 1

Outcomes are specific, **measurable** statements that reflect the broader goals. They will primarily describe what the unit is going to do and what its impact will be on students and other key stakeholders (alumni, parents, employers, etc.).

Most administrative units measure **Operational Outcomes** which describe the level of performance of

an operational aspect of a program or office (ex. number of services provided, timeliness of a process).

Some units may measure **Student Learning Outcomes** which describe knowledge, skills, and values that students are expected to gain as a result of their educational experiences (ex. Student Wellness Program may measure student knowledge of healthy habits.)

What type of Outcome would you like to add?

Operational Outcome

Enter Outcome

Students are satisfied with the quality of accommodations provided by the Office of Disability Services.

Timeframe for this Outcome

2021-2022 Academic Year

Performance Target for "Met"

Between 85% and 100% of responses indicate "agree" or "strongly agree."

Performance Target for "Partially Met"

Between 70% and 84.9% of responses indicate "agree" or "strongly agree."

Performance Target for "Not Met"

Less than 70% of responses indicate "agree" or "strongly agree."

Assessment Measure Used

Student Survey

Frequency of Assessment

The conclusion of each semester.

Data Collected for this Timeframe (Results)

94% of students utilizing services in the Fall agreed that their accommodations were appropriate considering their disability and needs.

Score (Met=3, Partially Met=2, Not Met=1)

3

3% provided a neutral response

3% disagreed

95% of the students utilizing services in the Spring agreed that their accommodations were appropriate considering their disability and needs.

5% provided a neutral response

0% disagreed

Comments/Narrative

The threshold for the outcome of "Students are satisfied with the quality of accommodations provided by the Office of Disability Services" was met. Comparatively, in 2019-2020, 77% of survey participants that had access to services agreed they were satisfied with the quality of accommodations provided by the Office of Disability Services. In 2020-2021, there was significant progress made toward meeting this outcome and success was sustained in 2021-2022.

Noteworthy challenges faced were that the department lacked having necessary personnel for ASL (American Sign Language) Services and lab assistance. To mitigate these challenges, the department

contracted with three different ASL companies and VRI (Video Remote Interpreting) companies. The Director of Disability Services served as a notetaker (lab assistant) and testing coordinator to ensure that students received necessary accommodations.

Lastly, the performance targets were adjusted upwardly of 10% to reflect greater expectations in meeting the desired outcome.

Resources Needed to Meet/Sustain Results

N/A

Explanation of How Resources Will Be Used

N/A

Outcome 2

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What type of Outcome would you like to add?

Operational Outcome

Enter Outcome

Disability accommodations, as coordinated by the Office of Disability Services, contribute to students' academic success and positively impact the graduation rates of those served.

Timeframe for this Outcome

2021-2022 Academic Year

Performance Target for "Met"

Between 85% and 100% of responses specific to graduating Seniors indicate "agree" or "strongly agree."

Performance Target for "Partially Met"

Between 70% and 84.9% of responses specific to graduating Seniors indicate "agree" or "strongly agree."

Performance Target for "Not Met"

Less than 70% of responses specific to graduating Seniors indicate "agree" or "strongly agree."

Assessment Measure Used

Student Survey and Graduation Report

Frequency of Assessment

Annually

Data Collected for this Timeframe (Results)

89% of graduates agreed their accommodations allowed them to fully participate in courses.

Score (Met=3, Partially Met=2, Not Met=1)

3

11% provided a neutral response

0% disagreed

Comments/Narrative

The threshold for the outcome of “Disability accommodations as coordinated by the Office of Disability Services contribute to students' academic success and positively impact the graduation rates of those served” was met. In 2020-2021, 89% of the students agreed their accommodations allowed them to fully participate in courses. In 2019-2020, 80% of survey participants agreed that the disability accommodations provided contributed to their academic success.

As shared in the 2020-2021 Unit Goal Report, it is noteworthy to mention that the wording of this question was previously adjusted to better gauge whether the accommodations provided allowed them to fully participate in their respective courses. Additionally, to better gauge the desired outcome, in 2021-2022, data specific to graduating Seniors was accounted for in the performance targets. While comparative data has been included as a point of reference in this summary, the means of collecting applicable data has been adjusted, so comparative analysis is not pertinent. In 2022-2023, data collection and comparative analysis will allow the department to identify patterns of success related to the outcome.

The purpose of this outcome is to determine the matriculation of students according to graduation records and pinpoint whether the accommodations contributed to their success and graduation from Lander University. As added point of reference, the timeline in which they established services was also tracked. Specific data for 2021-2022 is referenced below.

There were 12 graduates from the May 2022 class that had established cases with Disability Services. None of these students entered in Fall of 2018 (4 years), two entered in Fall of 2017 (5 Years), and one entered in Fall 2019 as a SC technical college transfer student. 100% of all the graduates established a case in their first semester at Lander. Twenty nine percent (29%) of the students who established cases in their first semester at Lander graduated in four years. One hundred percent (100%) of the graduates agreed or strongly agreed that they were satisfied with their accommodations and that their their accommodations allowed them to fully participate in courses.at Lander.

Lastly, the performance targets were adjusted upwardly of 10% to reflect greater expectations in meeting the desired outcome.

Resources Needed to Meet/Sustain Results

N/A

Explanation of How Resources Will Be Used

N/A

Goal Summary

Goal Summary/Comments

Student accommodations directly impact graduation rates among the cohort. The option to be virtual during the COVID-19 pandemic may have contributed, whether negatively or positively, to graduation rates, so this is undoubtedly a factor to consider. For instance, the accommodations and amount of time students were away from classes due to medical concerns likely impacted their success. Additionally, some students may have struggled in an online environment whereas other may have excelled.

Also noteworthy, the testing center is quickly becoming full within the allotted hours of operation, which

could impact academic success. To mitigate any foreseeable obstacles, alternative hours/options will be explored. Lastly, many students submitted partial documentation, which led to a lag in receiving accommodations. The department intends to research remote documentation systems, which may help with ease of access and facilitate complete, timelier submission.

Changes Made/Proposed Related to Goal

N/A

Upload Files (if needed)

Goal 3

Unit Goals are broad statements that describe the overarching long-range intended outcomes of an administrative unit. They support the Institution's Mission/Goals.

Unit Goal

Health Services will provide students with quality, competent care.

Pillar of Success Supported

Selective, Competitive Recruitment and Enrollment of Ambitious and Talented Students

Outcomes

Outcome 1

Outcomes are specific, **measurable** statements that reflect the broader goals. They will primarily describe what the unit is going to do and what its impact will be on students and other key stakeholders (alumni, parents, employers, etc.).

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What type of Outcome would you like to add?

Operational Outcome

Enter Outcome

Students are satisfied with the quality of care received from the Office of Health Services.

Timeframe for this Outcome

2021-2022 Academic Year

Performance Target for "Met"

Between 75% and 100% of responses indicate "agree" or "strongly agree."

Performance Target for "Partially Met"

Between 60% and 74.9% of responses indicate "agree" or "strongly agree."

Performance Target for "Not Met"

Less than 60% of responses indicate "agree" or "strongly agree."

Assessment Measure Used

Health Services Survey

Frequency of Assessment

Following services rendered

Data Collected for this Timeframe (Results)

Health Services provides students with quality, competent care. 85% (39/46)

Score (Met=3, Partially Met=2, Not Met=1)

3

Comments/Narrative

Health Services reached the threshold "met" with 85% of students reporting satisfaction with the quality of care provided during the 2021-2022 academic year. Survey data was collected from tools administered after each student encounter to determine overall satisfaction with quality and competence of the services rendered. Previously, the outcome was assessed using a series of questions to gauge perception based on the quality of care provided. For reference, the questions used on 2020-2021 are detailed below.

1 "I felt like I was treated courteously and with respect."

2 "I felt as though the nursing staff was sympathetic and listened carefully to my concerns."

3 "I received a satisfactory assessment, and was given quality education and advice to address my condition/concerns."

In 2021-2022, 91.3% of students reported satisfaction with the quality of care provided. While the outcome was met in 2021-2022, the decrease in percent satisfaction could be attributed to a vacated nursing position and/or a change in the the direct measurement of the outcome. As stated previously, in 2020-2021, a series of questions were used to measure success criteria. In 2021-2022, the assessment survey included verbiage that was directly tied to the stated outcome of quality care.

Resources Needed to Meet/Sustain Results

Fiscal year budgeting to increase free-of-charge services offered to students, and to fund continuing education opportunities for professional staff to retain their credentials and remain current on best practice interventions. (\$6000)

Explanation of How Resources Will Be Used

Medical supplies, laboratory testing fees, training aids, professional conferences/development.

Outcome 2

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What type of Outcome would you like to add?

Operational Outcome

Enter Outcome

Students are confident in the knowledge, skills, and abilities of nursing staff.

Timeframe for this Outcome

2021-2022 Academic Year

Performance Target for "Met"

Between 75% and 100% of responses indicate "agree" or "strongly agree."

Performance Target for "Partially Met"

Between 60% and 74.9% of responses indicate "agree" or "strongly agree."

Performance Target for "Not Met"

Less than 60% of responses indicate "agree" or "strongly agree."

Assessment Measure Used

Health Services Survey

Frequency of Assessment

Following services rendered

Data Collected for this Timeframe (Results)

I am confident in the knowledge, skills, and abilities of nursing staff. 96% (44/46)

Score (Met=3, Partially Met=2, Not Met=1)

3

Comments/Narrative

Health Services reached the threshold "met" with 96% of students reporting satisfaction with the competence of the Health Services staff. Survey data was collected from tools administered after each student encounter to determine overall satisfaction with quality and competence of the services rendered. Competence data was extracted from one detailed question pertaining to how the student perceived the knowledge, skills, and abilities of professional nursing staff.

Comparatively, in 2020-2021, 89.3% of students reporting satisfaction with the Health Services staff. It is noteworthy to mention the question to gauge success criteria was adjusted in 2021-2022. The 2021-2022 assessment survey included verbiage that was directly tied to the stated outcome regarding the perceived knowledge, skills, and abilities of nursing staff. During the 2020-2021 reporting period, the following questions were used to gauge success in meeting the desired outcome.

1. "I felt as though the nursing staff was knowledgeable about my condition/concerns": 90.5% (38/42)
2. "I felt as though I could better manage my condition/address my concerns after visiting with the nurse": 88.1% (37/42)

Resources Needed to Meet/Sustain Results

Access to professional development for licensed staff to maintain competence with best practice interventions. (\$6000)

Explanation of How Resources Will Be Used

Educational material, professional conferences/courses.

Goal Summary

Goal Summary/Comments

At the beginning of the Spring 2022 semester, the previous Director of Health Services resigned, so the department was short staffed for an estimated six weeks into the Spring semester. Amanda Truwell assumed the Director of Health Services role in March 2022.

It should be noted that in addition to services rendered, perceived quality and competent care can also be influenced by programming and education. Sexual health is an area where additional focus is needed.

Since Health Services is often privy to student health records regarding pregnancy and STD testing, staff are consistently educating students, often by using models and pictures, about pregnancy, STDs, family planning, etc. Prior to the pandemic, there was a robust sexual health program that included Wellness Wednesdays. Additionally, staff also visited the residence halls and met with students using a fish bowl approach, which is a strategy for organizing medium to large group discussions. While the pandemic caused many of these programs to cease, the department desires to bring back, expand upon, and even reinvent such initiatives. The department is in the early stages of restarting/reinventing the Peer Educator Program. One of the main goals of this program is to offer sexual education, which presented by peers that have been trained to facilitate these type sessions. It is the department's goal to have this program in place by Spring 2023. The department's Graduate Assistant is currently compiling opinions on potential subject matter for related sessions.

Changes Made/Proposed Related to Goal

In 2020-2021, it was noted that in future academic years, professional staff, at the point of care, would communicate that a survey tool would be sent to the student to enhance participation. It is noteworthy to mention that participation in the survey remained fairly consistent in 2021-2022. Thus, staff will explore other creative means to incentivize participation moving forward.

Dependent upon the implementation of the Peer Educator Program, a new outcome related to sexual health education and programming may be established.

Upload Files (if needed)

Goal 4

Unit Goals are broad statements that describe the overarching long-range intended outcomes of an administrative unit. They support the Institution's Mission/Goals.

Unit Goal

Health Services will be perceived as a professional office that values and protects confidentiality.

Pillar of Success Supported

Robust Student Experience

Outcomes

Outcome 1

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What type of Outcome would you like to add?

Operational Outcome

Enter Outcome

Students reported their confidentiality was safeguarded during visits to Health Services.

Timeframe for this Outcome

2021-2022

Performance Target for "Met"

Between 75% and 100% of responses indicate "agree."

Performance Target for "Partially Met"

Between 60% and 74.9% of responses indicate indicate "agree."

Performance Target for "Not Met"

Less than 60% of responses indicate indicate "agree."

Assessment Measure Used

Health Services Survey

Frequency of Assessment

Following services rendered

Data Collected for this Timeframe (Results)

Health Services is
a professional office that values and protects
confidentiality. 87% (40/46)

Score (Met=3, Partially Met=2, Not Met=1)

3

Comments/Narrative

Health Services reached the threshold "met" with 87% of students reporting satisfaction with the level of confidentiality in Health Services. Survey data was collected from tools administered after each student encounter to determine overall satisfaction. This is the second year confidentiality was surveyed in this manner. In 2020-2021, the outcome was met with 95.3% of students reporting satisfaction with the level of confidentiality in Health Services. Although the outcome was met in 2021-2022, as indicated by the data, there was an 8% decrease in agreement. It is noteworthy to mention there was construction occurring directly beside the facility throughout much of the academic year, which may or may not have impacted the data collected. Ensuring patients are aware of confidentiality practices, and the protection of their health information is a critical component to providing healthcare. In order for patients to utilize available services, they must feel as though the details of their concern will be protected, regardless of characteristics and/or needs. The outcome will continue to be monitored to ensure progress is made in meeting/exceeding the outcome.

Resources Needed to Meet/Sustain Results

N/A

Explanation of How Resources Will Be Used

N/A

Goal Summary

Goal Summary/Comments

As stated previously, confidentiality will continue to be a goal for professional staff in Health Services. Professional staff will be encouraged to discuss confidentiality with their patients and address any related issues at the time of service. Based on the 8% decrease in agreement during the 2021-2022 reporting period, additional measures to reinforce the department's commitment to confidentiality will be explored. Lastly, the need to expand office space, due to increased counseling personnel, has resulted in the combining of the Health and Counseling Services waiting areas. Since more students will be in the one allotted waiting area, as opposed to being divided into two, it will be noteworthy to consider potential impacts on the desired outcome related to confidentiality.

Changes Made/Proposed Related to Goal

N/A

Upload Files (if needed)**Goal 5**

Unit Goals are broad statements that describe the overarching long-range intended outcomes of an administrative unit. They support the Institution's Mission/Goals.

Unit Goal

Counseling Services will provide a supportive, trusting environment in which student are comfortable seeking assistance.

Pillar of Success Supported

Robust Student Experience

Outcomes**Outcome 1**

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What type of Outcome would you like to add?

Operational Outcome

Enter Outcome

Students that have received services report a willingness to seek future support from counseling center staff.

Timeframe for this Outcome

2021-2022 Academic Year

Performance Target for "Met"

Between 85% and 100% of responses indicate "agree."

Performance Target for "Partially Met"

Between 70% and 84.9% of responses indicate indicate "agree."

Performance Target for "Not Met"

Less than 70% of responses indicate indicate "agree."

Assessment Measure Used

Electronic surveys (hosted on Microsoft Forms)

Frequency of Assessment

Following services rendered and at the end of each

sent only to students who received services

semester

Data Collected for this Timeframe (Results)

Question #6 of in-office electronic survey. "I would return to counseling in the future for help."

Score (Met=3, Partially Met=2, Not Met=1)

3

89% indicated "agree"

Comments/Narrative

The threshold for the outcome of "Students that have received services report a willingness to seek future support from counseling center staff" was met, with 86% of students indicating "agree". This outcome has been met for the third year in a row, with a slight improvement from the 2020-2021 score of 86% and the 2019-2020 score of 84.3%. This outcome provides a direct link to the larger goal and indicates that students trust and find benefit from the services received through Counseling Services.

Lastly, the performance targets were adjusted upwardly of 10% to reflect greater expectations in meeting the desired outcome.

Resources Needed to Meet/Sustain Results

N/A

Explanation of How Resources Will Be Used

N/A

Outcome 2

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What type of Outcome would you like to add?

Operational Outcome

Enter Outcome

Students feel comfortable in the Counseling Services waiting area.

Timeframe for this Outcome

2021-2022 Academic Year

Performance Target for "Met"

Between 75% and 100% of responses indicate "agree."

Performance Target for "Partially Met"

Between 60% and 74.9% of responses indicate "agree."

Performance Target for "Not Met"

Less than 60% of responses indicate "agree."

Assessment Measure Used

Electronic surveys (hosted on Microsoft Forms) sent only to students who received services

Frequency of Assessment

Following services rendered and at the end of each semester

Data Collected for this Timeframe (Results)

Question #10 of the in-office electronic survey.
"The counseling waiting area was comfortable."

Score (Met=3, Partially Met=2, Not Met=1)

3

82% indicated "agree"

Comments/Narrative

The threshold for the outcome of "Students will feel comfortable in the counseling services waiting area" was met, with 82% of students indicating "agree" on question #10 of the in-office electronic survey. This outcome has been met for the second year in a row but with a slight decrease from the 2020-2021 score of 86.9%. This is likely attributable to the relocation of the counseling waiting area to a multipurpose room to accommodate new office space for new personnel in the department. Further restructuring of office space due to safety, privacy, and logistical needs has resulted in the waiting areas for Health and Counseling Services being combined. As a result, this outcome measurement question on student surveys will be reworded to reflect the change and better gauge students' level of comfort with the new waiting area.

Resources Needed to Meet/Sustain Results

N/A

Explanation of How Resources Will Be Used

N/A

Goal Summary

Goal Summary/Comments

Thresholds were met for the third consecutive year for Outcome 1 and second consecutive year for Outcome 2. As student comfort with and willingness to access services is vital to the effectiveness of counseling services, the department will continue to prioritize this goal. Additionally, it is noteworthy to mention there was an increased demand for services while being short staffed throughout much of the 2021-2022 academic year. A new counseling/Assistant Director position was supported and created by the administration. Further, a previously vacated counselor position was also filled. As new staff become acclimated to the department, monitoring of this goal remains imperative.

Maintenance, upkeep, and updating of the waiting area will be a regular part of daily operations and efforts will be made in counseling sessions to build rapport and help students meet goals as a means of ensuring future use of departmental services.

Changes Made/Proposed Related to Goal

Continue to monitor and adjust outcomes as needed for future reporting and make adjustments to facility as necessary.

Upload Files (if needed)

Goal 6

Unit Goals are broad statements that describe the overarching long-range intended outcomes of an

administrative unit. They support the Institution's Mission/Goals.

Unit Goal

Counseling Services will provide students with the coping skills, strategies, and emotional support needed to achieve personal goals.

Pillar of Success Supported

Robust Student Experience

Outcomes

Outcome 1

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What type of Outcome would you like to add?

Operational Outcome

Enter Outcome

Students directly correlate attainment of personal goals with their counseling services experience.

Timeframe for this Outcome

2021-2022 Academic Year

Performance Target for "Met"

Between 75% and 100% of responses indicate "agree."

Performance Target for "Partially Met"

Between 60% and 74.9% of responses indicate "agree."

Performance Target for "Not Met"

Less than 60% of responses indicate "agree."

Assessment Measure Used

Electronic surveys (hosted on Microsoft Forms) sent only to students who received services

Frequency of Assessment

Following services rendered and at the end of each semester

Data Collected for this Timeframe (Results)

Question #4 from in-office electronic survey. "My counselor helped me to meet my goals."

Score (Met=3, Partially Met=2, Not Met=1)

3

82% indicated "agree"

Comments/Narrative

The threshold for the outcome of “Students directly correlate attainment of personal goals with their counseling services experience” was met, with 82% of students indicating “agree” to this question on in office surveys delivered. This score represents a 1% decrease from the 2020-2021 score of 83% for this outcome. There was intentional, continued focus within the department on helping students clearly identify and meet goals during the course of counseling sessions. Since increased demand for services and staffing shortages were contributing factors in 2020-2021, the amount of time and frequency in meeting with student clients likely impacted the feedback received.

In 2019-2020, the score for this outcome was partially met with 70.3% of students indicating “agree”. Although there was a slight decrease (1%) for this outcome in 2021-2022, comparatively, the data indicates improvement in meeting the desired outcome.

Since the department is operating fully staffed, data obtained in 2022-2023 will be reviewed and necessary changes may be made to outcomes and/or performance targets based on feedback received.

Resources Needed to Meet/Sustain Results

Continuing education funding for clinical staff (\$12,000)

Explanation of How Resources Will Be Used

\$12,000 (\$3,000 per clinician) in additional funding for continuing education will be used to provide clinical staff with the means to obtain mandatory continuing education through national and state level conferences. This will allow staff to effectively maintain licensure and stay up-to-date on best practices and effective skills/intervention strategies.

Goal Summary

Goal Summary/Comments

Counseling Services saw relatively little change in the score of the measured outcome for this goal. As demand for services continues to rise, Counseling Services will continue to focus on individualized treatment for each student. Relevant continuing education will remain a priority in order to ensure students are provided with treatment in accordance with best practice. With the continuation of the graduate intern program and a new counselor position allotted to the department, staff are better equipped to provide adequate case management and more intentional, individualized attention.

Additionally, it is also noteworthy to mention that in 2021-2022, a contract was signed for services with Therapy Assist Online (TAO). Outside of in-person clinical services, TAO is a suite of online tools that is designed to provide effective evidence-based resources. Users have complete anonymity and 24/7 free access. Available content includes areas such as basic life skills, coping strategies, persistence, goal setting, time management, etc. To increase awareness and utilization, Counseling Services assisted other departments in accessing and applying TAO services.

Changes Made/Proposed Related to Goal

N/A

Upload Files (if needed)