

Program Name (Degree)

Annual Program Improvement Plan

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Section I: Program Information

1. Program Faculty

| Year in Review | Program | Chair | Faculty Member(s) |
|-------------------|---------|-------|-------------------|
| 2023 - 2024 | | | |

2. Professional Advisory Group

Report members below:

| Mee | Meeting Date(s): | | | | |
|-----|------------------|--------------|-------|--|--|
| # | Members | Organization | Title | | |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |
| 8 | | | | | |
| 9 | | | | | |
| 10 | | | | | |

2 | P a g e



Section II: Closing the Loop

1. Summary of "Closing the Loop" on Last Year's Annual Program Improvement Plan

- a. In the following table, copy in last year's planned program improvements
- b. Informed by data, evaluate the effect of the change (use KPA data from the Continuous Improvement & Assessment SharePoint, observations, etc. as appropriate)
- c. Use this rating scale to score each action in the "Concern Addressed" column

| 5 | 4 | 3 | 2 | 1 |
|-----------------------------|--------------------------|----------------------|--|---------------|
| Change was addressed | Change was addressed | Change was addressed | Change was addressed | Not addressed |
| Data was collected | Data was collected | • Data was collected | No additional data was | |
| Changes were effective and | Additional monitoring is | • No evidence of | collected to determine if | |
| no further action is needed | needed | effectiveness | the change was successful | |

| Last Year's Annual Program Improvements | | | | | |
|---|---|-------------|---------------------|--------------------------------|--------------------------------------|
| # | Action (i.e. curriculum or instructional strategy change at the course level) | Data Source | Person Reporting | Timeline for Implementation | Concern Addressed (Rate 1 – 5) |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |

^{*}Actions that receive a score of 1-4 in "Concern Addressed" are required to be included on this year's improvement plan



2. "Closing the Loop" | Detailed Description

Please provide one or two detailed descriptions of how you have "Closed the Loop". These examples are used for department/school, college, professional accreditation, and Higher Learning Commission accreditation reports.

Describe in detail:

- a. The initial issue to be addressed reference data
- b. The changes made
- c. The effect of these changes both positive and negative reference data

Example of using data to "Close the Loop" (view more examples in Section VI):

In the College of Education, Elementary Education (B.Ed.), students scored a **220.59** average on the written constructed response in the Oklahoma Subject Area Test compared with a **221.1** state average. In response, the faculty began integrating in-depth writing tasks aligned with professional examinations in several core courses. In addition, the faculty provided students with exemplary examples of written assignments, encouraged them to have non-education majors read their papers, required them to submit work to the on-campus writing lab, and provided them with test preparation through the Teacher Candidate Leadership Association. Scores on the section improved to a **234.5** average.

| 1 | |
|---|--|
| 2 | |

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3. Strengthening University Outcomes

How did you develop curriculum and instruction to strengthen **one** of the following University outcomes: Spiritual Integrity, Personal Resilience, Intellectual Pursuit, Global Engagement and Bold Vision?

| University Outcome | Improvement |
|--------------------|-------------|
| | |
| | |
| | |

5 | P a g e

Section III: Academic Data Review

1. Professional Advisory Group Recommendations

Report recommendations below:

| 1 | |
|---|--|
| 2 | |
| 3 | |

2. Key Program Assessment Data

Review the Continuous Improvement & Assessment SharePoint and note any significant KPA data results:

| | KPA Data (Outcome/Criterion) | Score | Recommendations for Continuous Improvement |
|---|------------------------------|-------|--|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |



3. Other Data

Other significant data sources (see Section VI: Appendices for examples):

| | Data (Department meeting minutes, research, assessment day activities, accreditation reports, student surveys, alumni surveys, market reports, etc.) | Recommendations for Continuous Improvement |
|---|--|--|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |

Section IV: New Annual Improvement Plan

List your improvement plan for this year.

- If Key Program Assessment (KPA) scores are low please address these in your plan
- Include all actions that received a score of 1-4 under "Concerns Addressed" in Section II Summary of "Closing the Loop"

| # | Action (i.e. curriculum or instructional strategy change at the course level) | Data Source | Person Reporting | Timeline for Implementation |
|---|---|-------------|---------------------|-----------------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |

You may have several items that rolled over from last year's plan, were identified using the Key Program Assessment data, or need addressing but are not a priority. Please list them here for monitoring.

| # | Monitoring | Data Source |
|---|------------|-------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |



Section V: New Program & Teach-Out

If this is the <u>first or last year the program will be listed in the academic catalog</u>, please complete this section.

- Please provide the rationale and data that describe why this program is opening or closing
- Please upload any documentation or reports regarding the program change

| # | Rationale | Data | Documentation (include as attachment) |
|---|-----------|------|---------------------------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |

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Section VI: Appendices

Possible appendices addressing continuous improvement of the program may include:

- Academic Research
- Professional Accreditation Self-Study & Response
- Meeting Minutes
 - Assessment meeting
 - o Department meeting (containing program specific references)
 - o Professional Advisory group meeting
- Survey Results
 - Alumni survey
 - Student opinion survey
 - Senior exit
- Reports
 - o Market research
 - News releases/articles
- Professional Exam Results

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Section VII: "Closing the Loop" Examples

- In the College of Arts and Cultural Studies, the assessment indicated a low score (2.98/4.00) for the Dance (B.A.) program's outcome #1, which evaluates students' ability to create and defend choreographic works. To improve this area, faculty members added a more comprehensive study in the element of time and gave music restrictions to choreography projects. They also added three self-assessments where students reflected on their accomplishments. By 2020, the score for this outcome increased to 3.80/4.00.
- In the College of Business, the Management (B.S.) program draws data from the Strategic Management (MGT 431) course for program outcomes three, four, and six. In the course, students demonstrate an understanding of firms' operations within industries from a macro perspective and the implementation of strategic planning. In fall 2018, scores were below the target of 3.5. Faculty recognized the need to improve the course by requiring teams to focus on one case (instead of the multiple cases used previously) to focus on continuous improvement quality rather than quantity. Professors also split up the teams into small working groups rather than using only large teams. Scores improved over the following years:

| Management (B.S.) Program | Fall 2018 | Spring 2021 |
|---------------------------|---------------|---------------|
| Outcome | (out of 4.00) | (out of 4.00) |
| #3 | 3.37 | 3.79 |
| #4 | 3.29 | 3.81 |
| #6 | 3.13 | 4.00 |

- In the College of Health Sciences, graduates from the Nursing (B.S.) program in 2017 had an NCLEX-RN licensure pass rate of 79.55 percent, below the national average of 87.12 percent. Faculty members began (1) using instant feedback devices (clickers) in the classroom to increase engagement, (2) integrating Assessment Technology Institute (ATI) modules to focus on NCLEX-RN test preparation, and (3) increasing the number of individual faculty-student meetings to review study habits. By 2018, the average NCLEX-RN pass rate rose to 94 percent and remains above the national average.
- In the College of Science and Engineering, upper-division students in the Engineering (B.S.) program (2017) earned scores of 2.68/4.00 for Engineering outcome (a), the ability "to apply knowledge of mathematics, science, and engineering" due to a persistent struggle with vectors and free-body diagrams. The Engineering faculty members refocused the entry-level Physics course homework assignments to reinforce applied problem-solving, specifically with vectors. Primarily based on the changes, the Physics final exam scores increased from 66.8 percent in 2017 to 91.0 percent in 2022.
- In the College of Theology and Ministry, the Undergraduate Department faculty have been tracking persistently low scores for "Style and Format," with 2.88/4.00 in 2018-19, 3.29 in 2019-20, and 2.93 in 2020-21. Following an assessment of the problem from an overall program point-of-view, faculty members have identified that using multiple format styles (e.g., Turabian, SBL, and APA) in different courses may lead to student confusion. In 2022, the faculty-initiated a thorough revision of the Undergraduate Style manual and are implementing it in Spring 2023. Results of these changes are forthcoming.

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