### University of Central Florida Institutional Effectiveness Assessment Plan Rubric

<table>
<thead>
<tr>
<th>Beginning (1)</th>
<th>Emerging (2)</th>
<th>Maturing (3)</th>
<th>Accomplished (4)</th>
<th>Exemplary (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>One, two, or three of the Maturing indicators are met.</td>
<td>Four or five of the Maturing indicators are met.</td>
<td>ALL of the indicators below (1-6) are met.</td>
<td>ALL of the Maturing indicators plus at least one of the Accomplished indicators (7 &amp; 8) are met.</td>
<td>ALL nine indicators are met.</td>
</tr>
</tbody>
</table>

1. **Mission statement** describes the primary purpose, functions, and stakeholders of the program/unit.

2. **Assessment process** describes the program or unit’s assessment strategy; how that strategy is translated into outcomes and measures; and the process for reviewing, analyzing, and applying assessment data for program/unit improvement.

3. **Number of outcomes:**
   - **Administrative units:** minimum of three outcomes
   - **Graduate academic programs:** minimum of three student learning outcomes
   - **Undergraduate academic programs:** minimum of eight student learning outcomes that incorporates academic learning compacts

4. **Number and type of measures:** For the required outcomes per indicator #3 above, a minimum of two appropriate, quantitative measures, at least one of which is a direct measure.

5. **Measures for the outcomes** that meet the minimum requirements listed in indicator #3 establish specific performance targets.

6. **Specific assessment instruments** are made available (e.g., via URL, as attachments, etc.), if not proprietary.

7. **The plan explicitly links one or more outcomes or measures to strategic planning.**

8. **The plan clearly focuses on formative assessment to promote continuous quality improvement** (e.g., establishes baseline data, sets stretch targets based on past performance, etc.).

9. **The plan builds on previous assessment by including at least one measure to assess the impact of an implemented strategy or initiative demonstrating a “closed loop” IE Assessment process.**

**NOTE:** If none of the indicators are met or if a program or unit fails to submit a plan, a rating of “No effort (0)” will be assigned.

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# UCF Institutional Effectiveness Assessment Plan Rubric

## Supporting Narrative

1. **The mission statement should be specific to the program or unit.**

2. **The assessment process statement should paint a clear picture of all major aspects of the program or unit’s Institutional Effectiveness Assessment process.** This may include a description of how the plan evolves over time and how it produces continuous quality improvement for the program or unit. This narrative should be written for “external” reviewers so that someone not familiar with the program or unit will, after reading this statement, have a good understanding of how the program or unit pursues data-driven continuous quality improvement.

3. **IMPORTANT: For academic programs, course grades and/or GPA may NOT be used as the metric for a measure.**

4. **Indicator 4: What constitutes a “direct measure” is contextually dependent.** For academic program plans, a “direct measure” is typically assessment of student learning, while a survey of students’ self-perceived efficacy would be considered an indirect measure. For an administrative unit measuring customer satisfaction, a survey instrument could be a direct measure.

5. **For those outcomes and measures that satisfy the minimum requirements (per Indicators 3 and 4) each measure should identify a quantitative variable and establish a specific performance target.** This requirement does not apply to any additional outcomes/measures (beyond the minimum requirements) that a program or unit includes in its plan.

6. **Assessment instruments (unless proprietary) should be submitted along with the plan either as attachments or links to online instruments.** In the event an instrument is still in development when the plan is submitted, a brief description of the planned instrument along with a timeline for implementation may be attached. When this occurs, the program or unit should attach the final instrument to the subsequent Results Report.

7. **Administrative units and academic programs should align one or more elements of an IE Assessment plan with the promises or metrics of the UCF Collective Impact Strategic Plan (i.e., please see sections that identify granular metrics and supporting strategies).** In addition, you may link to supporting strategic plans at any subordinate level.

8. **IE Assessment is a formative process.** The primary purpose is to collect data that will help identify opportunities for continuous quality improvement. This is best evidenced when baseline data reveal an opportunity for improvement and a “stretch” target is set accordingly. In general, when a target for a measure is 100% or when a measure is written to “maintain” a particular level of performance, it is unlikely that the measure has strong formative potential.

9. **Collecting data that will be used to evaluate the impact of an implemented strategy* or initiative is central to the IE Assessment process.** Measures designed for this purpose are the means to close the IE Assessment loop. **Definition of closed loop:** Based on assessment results, the program or unit implemented strategies that attempted to bring about improvement and subsequently collected data (should have at least two years of data) to measure the impact of the implemented strategies/initiatives on student learning or operations.

*Definition of strategy: an initiative, plan of action or way of proceeding forward.
## University of Central Florida Institutional Effectiveness Assessment Results Rubric

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<td><strong>ALL</strong> eight indicators are met.</td>
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1. Complete and relevant data are provided for all measures and an explanation is provided for how representative samples are determined, if applicable. If data are incomplete or missing, provide an explanation of the extenuating circumstances.

2. Data reporting is accurate and thorough (see supporting narrative).

3. Results for each measure indicate whether the target for that measure has been met.

4. Reflective statements are provided either for each outcome or aggregated for multiple outcomes.

5. Report includes one or more implemented and/or planned strategies or initiatives linked to assessment data and designed to improve student learning, program quality, or unit operations. If no such changes are indicated, an explanation is provided including a strategy to improve IE assessment data collection.

6. Assessment instruments associated with the report and not previously submitted with the plan are provided via attachment or URL if not proprietary.

7. Data collection and analysis are used to assess the impact of implemented strategies or initiatives demonstrating a fully “closed-loop” process.

8. Follow-up data collected to assess the impact of implemented strategies or initiatives show improved outcomes.

**NOTE:** If none of the indicators are met or if a program or unit fails to submit a plan, a rating of “No effort (0)” will be assigned.

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UCF Institutional Effectiveness Assessment Results Rubric

Supporting Narrative

1. Justification for incomplete or missing data due to extenuating circumstances will not be permitted for two or more consecutive reports. Representative samples should include data from students at a distance (regional campuses or online/video) if courses are offered at these locations/through these modalities.

2. Accurate and thorough data reporting means:
   a. Reported data match data requirements established by a measure.
   b. Sampling methodology and response rates are provided for survey data.
   c. The underlying “n” and “N” are provided for all percentage statistics.

3. This may be done explicitly (e.g., “target met” or “target not met”) or implicitly (i.e., the reported data clearly indicate whether the target was or was not met).

4. Whether individual or aggregated reflective statements are provided, all outcomes must be addressed. Reflect on, analyze, and discuss your results compared to previous years (two to three years, if possible). What do they mean? Why do you think you observed these results?

5. Implemented and planned strategies* or initiatives designed to improve student learning, program quality, or unit performance may be referenced in reflective statements, but should be thoroughly documented in the strategies sections of this report. NOTE: the IE Assessment Plan should be revised to include one or more measures to assess the impact/effectiveness of such strategies or initiatives. If no such strategies are reported, the IE Assessment Plan itself should be carefully reviewed and revised as needed. Implemented or planned strategies or initiatives that are based on factors other than IE assessment data may be reported in the results report. New measures may also be established in the plan to evaluate the impact of those strategies or initiatives as well, regardless of the reason for them.

6. Copies of assessment instruments should normally have been submitted with the plan during the prior IE Assessment cycle. If that previously submitted plan identified an instrument in development or if another new assessment instrument was developed and used in association with the current results report, that instrument should be attached to this report.

7. When an outcome and/or measure(s) evaluates the impact of a previously reported strategy or initiative the reflective statement for that outcome should include a determination of whether the strategy resulted in an improvement. Definition of closed loop: Based on assessment results, the program or unit implemented strategies that attempted to bring about improvement and subsequently collected data (should have at least two years of data) to measure the impact of the implemented strategies/initiatives on student learning or operations.

8. Meeting this final criterion for one or more measures is the ultimate goal of IE Assessment. When data confirm improvement(s) in student learning outcomes, program quality, or unit operations, the improvement(s) should be well documented in the applicable reflective statement(s). In addition, the success story section should provide a brief narrative that describes the entire “closed loop” process that resulted in the improvement(s). Definition of closed loop with evidence of improvement: Based on assessment results, the program or unit implemented strategies that attempted to bring about improvement and subsequently collected data (should have at least two years of data) to measure the impact of the implemented strategies/initiatives which yielded evidence of improvement in student learning or operations.

*Definition of strategy: an initiative, plan of action or way of proceeding forward.