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# Assessment Plan Summary Report

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2016-2017

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Department of Institutional  
Effectiveness

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# Fall 2016 Assessment Plan Summary Report

The 2015-2016 Institutional Assessment Plan comprehensively assessed all areas of the institution covering the categories of Administration, Academic and Student Learning, Student Services, Finances, Facilities and Equipment, and Institutional Research and Planning. The following outline indicates the areas reviewed, evaluated, and reported. This annual summary ensures an on-going, integrative process that comprehensively evaluates institutional effectiveness.

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# I. Learning Outcomes Assessment

The following section outlines the annual review and revision of the institution's course, program, and institution learning outcomes. This annual review provides a structure for identifying, suggesting, and implementing revisions based on an organized evaluation process.

## A. Initial Review Orientation

1. The Director of Institutional Effectiveness organizes and administers indirect and direct student learning outcomes assessment. The assessment of learning outcomes at all levels and with triangular methods assures that data is gathered to enable administrators and faculty to complete the assessment cycle of utilizing classroom and student input for improving courses, programs, and ultimately the institution.
2. Planning for learning outcomes assessment
  - a. Conducting core inventories
  - b. Direct assessment of course, program and institution learning outcomes
  - c. Indirect assessment of courses through student course evaluations at the end of each semester
3. Review and Compilation of outcomes data

## B. Determine Review Schedule and timeline

1. Course outcomes
  - a. Content Specialists review and polish outcomes and textbook selections for each Master Course Syllabus (October 2015 and May 2016)
  - b. Using the Master Course Syllabus for their course, faculty develop their spring 2016 semester courses (November 2015) and fall 2016 courses (June 2016)
  - c. Indirect assessment of course work-Course evaluations in December, May, and Summer 2016
  - d. Direct assessment of course work-July 2016 Assessment Day
  - e. Aggregation and summary report writing-August 2016
2. Core Inventories
  - a. Entering Student Inventory (ESI) – February 2016
  - b. Student Experience Inventory (SEI) – March 2016
  - c. Faculty Satisfaction Inventory (FSI) – April 2016
  - d. Graduate Inventory (GI)-May 2016
  - e. Alumni Inventory (AI) – Spring 2015
3. Aggregation and summary report writing for direct and indirect assessments -August 2016

## C. Significant findings:

1. New course evaluation process in CourseEval is efficient, more accessible to faculty, produces a higher response rate, and provides an opportunity for faculty to review and report on the results.

2. Pilot program of embedded assignments into the new Master Course Syllabi for the Core Biblical courses for broader direct assessment produced these results: more effective direct assessment process, improved rubrics, and better collegial participation.
3. The composite assessment of program institutional learning outcomes based on both direct and indirect measures of student learning outcomes indicated an aggregate score of 4.3 on a 5-point scale indicating successful performance.
4. The composite assessment of core curriculum learning outcomes based on assignments of selected core courses indicated an aggregate score of 4.3 on a 5-point scale indicating successful performance.
5. "Evidence a commitment to the biblical mandate of evangelism and the ability to share their faith" scored lowest on the institutional learning outcomes composite assessment and should be reviewed for suggestions of curricular revisions to increase performance.

## II. Program Review-Doctor of Ministry, Practicums, and Messianic Jewish Ministries

The following section outlines the scheduled program review for the Doctor of Ministry, Practicums, and Messianic Jewish Ministries programs. This review, as described in the TKU Assessment Plan, provides the structure for comparing, reviewing learning outcomes, assessing outcomes, assessing library holdings, assessing IE data, and conducting a SWOT Analysis for programs under review.

### A. Review of the Doctor of Ministry degree

1. The program review committee was made up of the following members:
  - Dr. Jon Huntzinger          Program Director
  - Dr. David Moore
  - Dr. Bobbi Stringer
  - Dr. Frank Markow
2. Timeline:
  - a. Review process – spring-summer 2016
  - b. Recommendations for suggested revisions – fall 2016
  - c. First cohort of newly updated curriculum-March 2017
3. Recommendations from the program review
  - a. New updated course titles
  - b. Additional research course component
  - c. Development of two tracks: Leadership and Messianic Jewish Studies

### B. Review of the Practicum program

1. The program review committee was made up of the following members:
  - Dr. Bobbi Stringer- Program Review Supervisor
  - Ms. Marilyn Weiher
  - Ms. Linda Rinn
2. Timeline
  - a. Review Process – March 2016
  - b. Report to the Academic Committee- April 2016
  - c. Restructuring of the program administration and faculty-Summer 2016
  - d. Revisiting the recommendations of the Review-Fall 2017
  - e. Implementation of changes-Fall 2017
3. Significant findings of the program review
  - a. Comparability study revealed a much larger Practicum emphasis than other schools.
  - b. Assessments indicate student need for more flexibility within the program.
  - c. SWOT analysis and assessment instruments reveal a need to revisit the structure of the program in order to develop more sequence to student experiences, a consistent template for ministry coordinator lesson plans, and updating assessment tools for both students and ministry coordinators.

C. Review of the Messianic Jewish Ministry program

1. The program review committee was made up of the following members:

Dr. David Rudolph- Program Director

Dr. John Huntzinger

2. Timeline

a. Review Process-Fall 2015

b. Recommendations and approval-Fall 2015

c. Implementation of course changes-Spring 2016 and Fall 2016

d. Approval of the Union of Messianic Jewish Congregations (UMJC) –Spring 2016

4. Significant findings of the review and subsequent changes

a. Need to redesign the curriculum in order to apply for approval of the UMJC for training rabbis and teachers in the Messianic Community

b. Need to align more closely with the common core of the MPT and MDiv programs

### III. Assessment of Publications and Policies

The following section outlines the annual review and revision of the institutions Publications and Policies. This annual review provides a structure for identifying, suggesting, and implementing revisions based on an organized evaluation process.

#### A. Initial Review Orientation

1. This year, because of the ABHE Self Study, the Annual Review Committee was comprised of selected executive leadership and administrative staff that needed to be involved in developing policies for meeting ABHE Self-Study standards:

Ms. Linda Rinn  
Tiffany Sanderson  
Bobbi Stringer  
Jovan Overshown  
Tyler Maxey  
Sharon Humphries  
Robert Buckheit

2. Determine the review committee schedule and timeline for review, and administrate the assigned publications and policies documents to the review committee.

- a. Initial overview of ABHE Standards relative to Policies and Procedures
- b. Departmental Administrative Input: March-July 2016
- c. Review and Compilation: July-August 2016
- d. Submission to Board for Review and Approval: August 2016

#### B. Review of the Publications and Policies

1. Reviewed related standards on Publications and Policies as published in the ABHE COA Manual and additional current institutional requirements and practices.
2. Identified, updated, and developed appropriate policies as needed for compliance.
3. Received approval from appropriate parties, including the Board of Trustees.

#### C. Final Steps in the process

1. Updated Employee Handbook to reflect newly adopted policies.
2. Uploaded Employee Handbook on the internal institution server (P Drive) and in ADP.
3. Implementation of Compliance Bridge for future review and communication process.

## IV. Assessment of Admissions, Student Services, Success and Retention

The following section outlines the annual evaluation process for assessing student success and retention. This annual evaluation provides a structure for determining necessary data both for annual reporting and for implementing improvements for increased effectiveness based on data-driven decision-making.

- A. Initial Review Orientation- The Director of Institutional Effectiveness and Director of Information Management organize and administrate an annual Student Success and Retention Review.
- B. Compilation of Institutional Effectiveness Data by Degree Program. The following data shall be collected for each degree program.
  - 1. Enrollment
  - 2. Retention Rates (unique student, Fall-to-Fall enrollment)
  - 3. Completion/Graduation Rates (100% of degree length, 150% of degree length, and over 150%; see Performance Fact Sheet)

### Institutional Effectiveness Data by Degree Program (Enrollment Analysis Summary based on ABHE criteria)

Degree Program	Enrollment FALL 2016	Retention Rate Fall 15-Fall 16	Average Retention Rate	Degrees Conferred
Certificate Programs	18	50%	50%	7
Associates Programs				
Christian Ministries	31	0%	63%	6
Worship Leadership	61	75%		6
Bachelors Programs				
Biblical & Theological Studies	91	50%	75%	13
Biblical Counseling	101	100%		8
Christian Ministries	84	86%		15
Cross-Cultural Ministry	29	100%		2
General Christian Studies	45	0%***		9
Graduate Programs				
Master of Practical Theology	76	100%	88%	11
Master of Divinity	128	75%%		16
Master of Marriage & Family Therapy	42	*		*
Post-Graduate Programs				
Doctor of Ministry	8	**		
<b>TOTAL</b>	717		69%	93

\* Indicates new program as of Spring 2016. There have not been any graduates yet from this program.

\*\* The Doctor of Ministry program is in the process of reassessment; no new cohorts have been added within the past year.

\*\*\*The General Christian Studies degree is primarily a transfer-in degree rather than first-time students.



➤ Trends

PERIOD	STUDENTS	CREDIT HOURS
Fall 2012	545	2,937
Winter 2013	558	3,452
Spring 2013	554	3,006
Summer 2013	213	860
Fall 2013	601	3,565
Winter 2014*	610	3,749
Spring 2014	592	3,390
Summer 2014	255	1,046
Fall 2014**	691	6,192
Spring 2015	709	6,285
Summer 2015	173	886
Fall 2015	767	6,894
Spring 2016	752	6860
Summer 2016	177	814
Fall 2016***	717	6557

\*Effective Winter 2014, TKU Main Campus operations moved to Southlake, Texas.

\*\*Effective Fall 2014, TKU instituted a change from quarter to semester hours.

➤ Fall 2015 enrollment represents a +41% increase in enrollment since Fall 2012.

\*\*\*Fall 2016 enrollment reflects the closing of Modesto branch campus and two teaching sites.

**Review of Core Assessment findings:**

C. Identified areas of improvement this year:

1. Helpfulness of administrative/staff support.
2. I am able to track my degree effectively

D. Identified areas for needed improvement

1. Library resources enable me to effectively complete assignments
2. Career counseling and placement services provide helpful assistance
4. Clear channels are in place to communicate student complaints and concerns

D. Summary Review and Recommendations

1. Create an annual report of student placement services in order to facilitate and track graduate employment, and potential continuing education and support services for alumni.
2. Implement pilot intake model advising process.
3. Implement Phase I of Retention Plan and continue to develop pilot for First Year Experience.

## V. Evaluation of Financial Condition and Management

The following section outlines the annual evaluation of the financial condition and management. This annual evaluation provides a structure for determining necessary data both for annual reporting and for implementing improvements for increased effectiveness based on data-driven decision-making.

### A. Annual Financial Review

1. Accurate and timely financial reports were provided to the President, governing board, and other designated persons.
2. On-going financial management and oversight was maintained through the CFO and Financial Controller which included Board review of quarterly financial statements.
3. A certified external audit of the financial statements along with management letter is prepared each year, in conformity with generally accepted accounting principles (GAAP) and federal guidelines.
4. External Audits are annually conducted.
  - a. The last fiscal year-end audit demonstrated a recent history of financial stability.
  - b. Audit is prepared using the “net asset” model of accounting consistent with the policies and procedures provided by the American Institute of Certified Public Accountants (AICPA) in its document, Audit and Accounting Guide: Not-for-Profit Organizations: June 1, 1996, or any later enacted version.
  - c. The audit demonstrates adequate finances to support the institutional mission and programs.
5. Current and long-range financial plans reflect positive cash flows and positive budget outcomes, and are realistic.
5. The institution has a segregated contingency line of credit equal to at least 10% of operational budget.
7. Training for and implement of new budgeting process that ties departmental budgets to goals and initiatives and requires monthly reviews with oversights

## VI. Evaluation of Facilities and Equipment

The following section outlines the annual review and evaluation process for assessing facilities and equipment. This annual evaluation provides a structure for determining necessary data both for annual reporting and for implementing improvements for increased effectiveness based on data-driven decision-making. The review was conducted by the Technology Committee.

### A. Annual Documentation Review and Revision (separate documents)

1. 2015 Campus Safety and Security Report Reviewed, Updated, and Completed.
2. 2015 Emergency Action Plan Reviewed, Updated, and Completed.

### B. Identified Areas of completion in the review of the 2015-16 Institutional Assessment Findings:.

1. Implementation of Office 365 to all TKU staff and faculty.
2. Implementation of Blackboard Community, Blackboard Collaborate and Content.
3. Purchase and implementation of Top Hat in select classrooms.
4. Purchase and implement new phone numbers for all TKU staff for consistency.

### C. Identified Areas for completion in the review of the 2014-15 Core Institutional Assessment Findings:.

1. Develop and implement a Student Information System for Blackboard that pulls student information from CAMS into Blackboard.
2. Implement Compliance Bridge.
3. Attendance tracker for all classrooms.

## VII. Review and Sustainability of Assessment Plan

The following section outlines the sustainability process for the annual review and revision of the Assessment Plan as well as the continual Implementation and Effectiveness of the Assessment Processes. The Plan provides a structure for positively navigating changes in institutional resources and priorities.

### A. Annual Review of the Assessment Plan

#### 1. Assessment Instruments

- All current instruments or processes are used to measure specific outcomes, institutional goals, or key performance indicators.
- No additional instruments or processes needed to improve data collection, analysis, or implementation at this time.
- There are currently no areas of unnecessary or un-aligned data collection.
- The schedule for program reviews was adjusted.

#### 3. Application, Analysis and Reporting

- The assessment data was adequate for addressing the requirements of external accreditors, auditors and agencies. TKU did well on the assessment areas of the TRACS Self-Study.
- Summary reporting included recommendations based on the analysis of collected data that reflect accepted best practices.
- Assessment findings were presented in an understandable and clear way to primary stakeholders through meetings and on the web site.
- Findings were reviewed by the department heads with regard to performance evaluation based on current strategic planning objectives, metrics, and timelines.

### B. Annual Review and Implementation of Assessment

1. Assessment findings and recommendations were reviewed by key administrators and faculty.
2. Recommendations for modifications, adjustments, revisions, and other changes in programs and curriculum formulated were based on assessment findings.
3. Identified changes were summarized, implemented, and documented.
4. Assessment findings and implemented changes were linked to Strategic Planning and Budgeting categories and objectives.
5. On-going support was provided for the participants and consumers of the institutional assessment process through the department of Institutional Effectiveness.

### C. Sustainability of Institutional Assessment

- The annual institutional Assessment Plan along with instrumentation is in place to insure the continuity, management, implementation, and on-going effectiveness of the Assessment evaluation and reporting process.
- The administration and faculty are engaged in the assessment process.

## VII. Review of Annual Strategic Planning Review Process

The following outline indicates the process for the annual review and revision of the Strategic Plan. This annual review ensures an on-going, data-driven process that comprehensively evaluates institutional effectiveness and integrates institutional assessment and benchmarking data for effective decision-making.

- A. In January 2016 the Financial Department and Executive Director of Strategic Planning began the process of implementing the newly designed strategic planning process.
  - 1. The schedule was developed for the following: presentation to the Executive team of new budget materials and process, departmental training sessions, individual mentoring sessions with departmental leadership, review of budgets by oversight VP, budgets due, approval by Executive Team, approval by Board.
  - 2. Executive Team SWOT Analysis producing institutional initiatives.
  - 3. Summer schedule introduced Executive Team initiatives, followed by fall 2016 departmental meetings to assess, benchmark, and reestablish departmental goals, conduct departmental SWOT analysis, and tie new departmental objectives to institutional initiatives in order to repeat the cycle of budget assessment and planning that begins again in January for the next year's budget.
  - 4. These results are then submitted, documenting assessment findings with supporting data, stated goals, estimated costs, and time-lines for budget costing and updated strategic plan considerations.
- B. In fall 2017 the cycle begins again for the 2018 budget and strategic plan update.