

TTU  HSC

# Weave Wednesdays

## Phase Two: Reporting Findings

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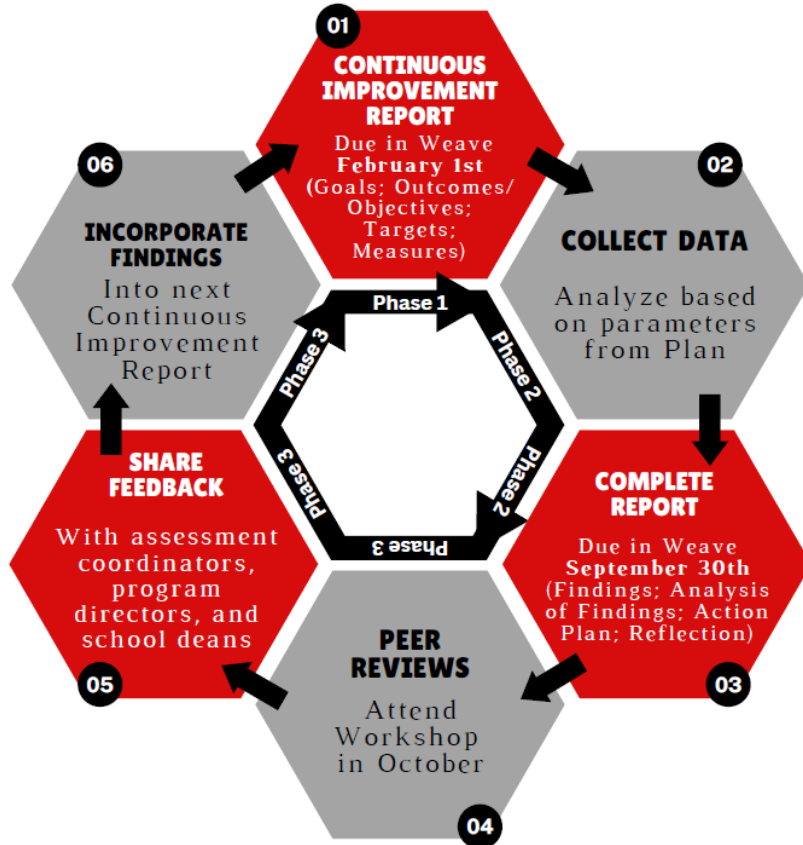
# Training Agenda

- Part I:** Assessment Plan Cycle
- Part II:** Reporting Findings and Action Plans
- Part III:** Progress on Planned Improvements

“Continuous improvement is better than delayed perfection.”

-Mark Twain

# The Cycle of Continuous Improvement



## Timeframe and Deadlines



- Weave plans are completed on an ANNUAL basis
- The reporting cycle is **September 1 – August 31**
- **Phase One:** Planning should be completed by **February 1**
- The deadline for **Phase Two:** Reporting is always **September 30**
- **Phase Three:** Review occurs in **October**

# Elements

## Phase I: Planning

Mission Statement

TTUHSC Goals

Outcomes/Objectives

Measures and its Description

Targets

## Phase II: Reporting

Findings and Explanation of Findings

Action Plan/Items Project Attachments

Progress on Planned Improvements

See [TTUHSC Weave Cheat Sheet](#) for definitions

- Educational Programs
- Student Support Programs

# Findings

Answers the questions:

- *What were your 2023-2024 results for each Measure?*
- *Did you meet your Targets?*

## TARGET

100% of students in the graduating cohort will successfully participate in at least one TTUHSC IPE learning activity prior to graduation.

## FINDINGS

Prior to graduating, all students (n = 55) successfully participated in at least one registered TTUHSC IPE learning activity. Students participated in activities connected to class, as well as through the TTUHSC IPE Office.

## EXPLANATION OF FINDINGS (OPTIONAL)

Enter text



## Targets (1)



### 2.1.1.1



#### DESCRIPTION

All (=100%) second-year Biotechnology students will score 89.5%, or above (i.e., A) on the final report grading rubric.

#### STATUS

Met

#### TARGET

89.5% or above

#### FINDINGS

Of the 9 second-year Biotechnology students, 9 students (=100%) scored at least 89.5% on the final report.

#### EXPLANATION OF FINDINGS (OPTIONAL)

Refer to 2.1.1.1\_Rubric\_Final\_Report\_REDACTED in the project attachments for a redacted rubric example.

# Findings

## Explanation of Findings:

- *How could we provide context to these findings?*
- *Anything else relevant or helpful?*



### TARGET

100% of students in the graduating cohort will successfully participate in at least one TTUHSC IPE learning activity prior to graduation.

### FINDINGS

Prior to graduating, all students (n = 55) successfully participated in at least one registered TTUHSC IPE learning activity. Students participated in activities connected to class, as well as through the TTUHSC IPE Office.

### EXPLANATION OF FINDINGS (OPTIONAL)

Enter text

# Findings

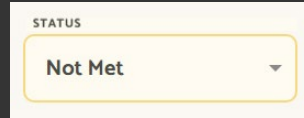
How can we disaggregate data at TTUHSC?

- Location or campus/site
  - Distance Education or F2F
  - School or Program
  - Concentrations or Tracks
- 
- Gender, First Generation, Language, Race



# Action Plan

- Provide a detailed description of the actions you plan to take for the Targets marked as *Partially Met or Not Met*.





A screenshot of a web form element. It features a light gray rectangular box with the word "STATUS" in small, uppercase letters at the top left. Below this is a rounded rectangular dropdown menu with a thin gray border. The menu is currently open, showing the text "Not Met" in a dark gray font. To the right of the text is a small, dark gray downward-pointing triangle icon, indicating that the menu can be expanded to show other options.

- If your department does not have anything additional to add, please indicate *“Target(s) was met. No action needed at this time.”*

## DESCRIPTION

2.2.1.1-Committee Meeting Form: Only 79% of the targeted students documented an annual committee meeting in 2021-2022. This increased to 95% in 2022-2023. While this finding increased noticeably, it did not meet the intended target of 100% and was marked Not Met. To help ensure that all students schedule and document their annual committee meetings, the Student Affairs Advocate (SAA) will continue to improve communication with students regarding the committee meeting requirement. She also plans to develop a new meeting minute template for students to document those meetings more effectively. Finally, the SAA will schedule annual advisory meetings with each student, in which she reminds them about the committee meeting requirement and expectations to publish a first-author paper prior to scheduling the dissertation defense.

2.2.2.1-Approval to Schedule Defense Form: In 2022-2023, 8 of 11 graduates (=72.7%) published at least one (=1) first-author publication in a peer-reviewed journal. This finding was marked Not Met because the target was 100%. As noted above, the SAA will schedule annual advisory meetings with each student, in which she reminds the student and research mentor about the expectations to publish a first-author paper prior to scheduling the dissertation defense. In addition, the Dean intends to strengthen the criteria for granting related waivers. 

BUDGET SOURCE		AMOUNT	DUE DATE	STATUS
Not applicable		\$0.00	8/31/2024	Planned 

 ADD ACTION ITEM

ACTION ITEMS (0)

CREATED

DUE

STATUS

# Progress on Planned Improvements

*It's one thing to establish Outcomes/Objectives and measure progress, **but it's how you use those results to promote improvement that really matters!***

- Review the Action Plans for the Targets marked as *Partially Met* or *Not Met* from the 2022-2023 cycle.
- Elaborate on the actions you took during the current 2023-2024 cycle to address those issues (previous Actions Plans).
- If you marked *Met* on all Targets in the previous year, please give a brief summary of program/unit successes or improvements that happened during the last year.

## Progress on Planned Improvements



### DESCRIPTION

In the 2021-2022 cycle, two targets were marked Not Met: (1) Every student (=100%) will have at least one advisory committee meeting per academic year; and (2) on an annual basis, every Ph.D. student (=100%) will participate in a poster and/or podium presentation in a professional setting. During the 2022-2023 cycle, a new Student Affairs Advocate (SAA) was hired in October 2022 to work with students in the Ph.D. in Biomedical Sciences degree program. The new SAA worked diligently to identify priorities for improvement. This included increased communication with students regarding: (1) committee meetings, and (2) publication/presentation expectations using multiple methods of communication, including email and in-person discussions. See, for example, Progress\_Planned\_Improvement\_Annual\_Advising\_REDACTED for an example of a student's annual advisory meeting notes, in which the SAA reminded the student of related requirements. The SAA also worked more closely with the departmental coordinators to help encourage students to schedule committee meetings, complete appropriate documentation of such meetings, and understand the publication/presentation requirements. In addition, the target related to poster presentations was decreased from 100% to 90% since it is not a program requirement. Combined, these efforts resulted in improved compliance in 2022-2023.

## Progress on Planned Improvements

### DESCRIPTION

The Office of Interprofessional Education met all targets for AY 2022-2023. The following includes a brief summary of improvements that occurred during the past year.

1.1 Customer Outcome(s)/Process Objective(s): Interprofessional Education and Collaborative Practice - Knowledge - Students. Updates to the FICP modules included a major update to the Communication Module and minor content updates to all modules.

2.1 Customer Outcome(s)/Process Objective(s): Interprofessional Education and Collaborative Practice - Self-Efficacy/Confidence - Students. Updates to the FICP modules included additional student self-reflections to improve confidence and self-efficacy.

3.1 Customer Outcome(s)/Process Objective(s): Exposure-Level IPE Experiences - Attitudes and Perceptions - Students. Over the past year, there has been significant growth in the number and diversity of IPE activities offered by the Office of Interprofessional Education. There was a 14% growth in participation and all 6 TTUHSC schools actively participated in exposure-level IPE experiences. Improvements were made to each activity based on quality improvement feedback from the previous year including topics, logistics, and pre-work.

4.1 Customer Outcome(s)/Process Objective(s): Immersion and Competence Level IPE Experiences - Behavior Change - Students. Over the past year, there was significant growth in the number of immersion and competence-level IPE experiences offered by the Office of Interprofessional Education. Disaster Day was launched and Amarillo and the Interprofessional Toy Fair & Expo returned following a hiatus during COVID. Improvements were made in Disaster Day Lubbock and Shatter the Stigma based on quality improvement feedback from the previous year including case scenarios, logistics, and simulation station rotations.



## Progress on Planned Improvements



### DESCRIPTION

For 2021-2022, the Office of Academic Planning & Compliance (APC) had two action plans: (1) one for a Partially Met state authorization compliance target (1.3.2.1) and (2) one for a Not Reportable target on General Education Assessment (1.4.1.1). In 2022-2023, both of the action plans were addressed.

For the first action plan on state authorization, APC personnel reviewed the deadline for professional licensure annual submissions based on other deadlines within the office and for the schools. A summer deadline can bring complications (with travel and schedule changes, etc.); however, given that NC-SARA also requires a summer deadline for their annual report, we felt it was best to keep it in the summer. We still struggle with getting the professional licensure reviews submitted on time. APC personnel will continue to work collaboratively with the schools to improve compliance. One of the ways we will do this is through repeated reminders, a scheduled training meeting each year, and potentially an HSC Operating Policy for the process.

For the second action plan on General Education Assessment, APC personnel noted improvement opportunities in the annual reporting process. In the summer of 2023, APC personnel converted the PDF annual reporting template to a Qualtrics survey to improve the data-gathering process. In addition, the Personal and Social Responsibility exam, already in Qualtrics, was moved behind eRaider authentication to eliminate duplicate submissions. The annual reports for 2022-2023 won't be completed until October 9, 2023, so this improvement piece will also be included in next year's continuous improvement plan.

Further notable improvements for APC, not related to the action plans, in 2022-2023 are as follows:

- (1) Working collaboratively with Academic Affairs, re-developed HSC OP 60.11 on the new program and modifications process;
- (2) Faculty Success system configuration overhaul that required collaboration from each school;
- (3) Successful transition of new General Education Assessment platform for the Proficiency Profile exam; and
- (4) Development planning for the SACSCOC Fifth-Year Interim Report due in March 2025. The planning included the development of project timelines, confirmation of Institutional Effectiveness Advisory Committee (IEAC) members, review of all Standards, and a half-day training retreat with the IEAC members.

# Attachments

- Upload any key documents that provide evidence of the progress you've made toward achieving your Outcomes/Objectives.

Rubrics

Assignments

De-identified Student Examples

De-identified Course/exam de-aggregated spreadsheets

- **Reference** the attachment in the narrative

...ation expectations using multiple methods of communication, including email and in  
s. See, for example, Progress\_Planned\_Improvement\_Annual\_Advising\_REDACTED for  
ent's annual advisory meeting notes, in which the SAA reminded the student of related

- Save your file with a **distinct and descriptive name** (i.e., Annual Report for Targets 1.1.1.1 Findings).

# Contact



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