Section 1. EPP Profile
After reviewing and/or updating the Educator Preparation Provider's (EPP's) profile in AIMS, check the box to indicate that the information available is accurate.

1.1 In AIMS, the following information is current and accurate...

<table>
<thead>
<tr>
<th>Agree</th>
<th>Disagree</th>
</tr>
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<tbody>
<tr>
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</table>

1.1.1 Contact person
1.1.2 EPP characteristics
1.1.3 Program listings

1.2 [For EPP seeking Continuing CAEP Accreditation—applies to CAEP eligible EPPs] Please provide a link to your webpage that demonstrates accurate representation of your Initial Licensure and/or Advanced Level programs as reviewed and accredited by CAEP (NCATE or TEAC).

Section 2. Program Completers
2.1 How many candidates completed programs that prepared them to work in preschool through grade 12 settings during Academic Year 2018-2019?

Enter a numeric value for each textbox.

2.1.1 Number of completers in programs leading to initial teacher certification or licensure

2.1.2 Number of completers in advanced programs or programs leading to a degree, endorsement, or some other credential that prepares the holder to serve in P-12 schools (Do not include those completers counted above.)

Total number of program completers 232

1 For a description of the scope for Initial-Licensure Programs, see Policy 3.01 in the Accreditation Policy Manual
2 For a description of the scope for Advanced-Level Programs, see Policy 3.02 in the Accreditation Policy Manual

Section 3. Substantive Changes
Have any of the following substantive changes occurred at your educator preparation provider or institution/organization during the 2018-2019 academic year?

3.1 Changes in the established mission or objectives of the institution/organization or the EPP

3.2 Any change in the legal status, form of control, or ownership of the EPP.

3.3 The addition of programs of study at a degree or credential level different from those that were offered when most recently accredited

3.4 The addition of courses or programs that represent a significant departure, in terms of either content or delivery, from those that were offered when most recently accredited

3.5 A contract with other providers for direct instructional services, including any teach-out agreements
Any change that means the EPP no longer satisfies accreditation standards or requirements:

3.6 Change in regional accreditation status

3.7 Change in state program approval

Section 4. Display of Annual Reporting Measures.

<table>
<thead>
<tr>
<th>Annual Reporting Measures (CAEP Component 5.4</th>
<th>A.5.4)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Impact Measures (CAEP Standard 4)</strong></td>
<td><strong>Outcome Measures</strong></td>
</tr>
<tr>
<td>1. Impact on P-12 learning and development (Component 4.1)</td>
<td>5. Graduation Rates (initial &amp; advanced levels)</td>
</tr>
<tr>
<td>2. Indicators of teaching effectiveness (Component 4.2)</td>
<td>6. Ability of completers to meet licensing (certification) and any additional state requirements; Title II (initial &amp; advanced levels)</td>
</tr>
<tr>
<td>3. Satisfaction of employers and employment milestones (Component 4.3</td>
<td>A.4.1)</td>
</tr>
<tr>
<td>4. Satisfaction of completers (Component 4.4</td>
<td>A.4.2)</td>
</tr>
</tbody>
</table>

4.1 Provide a link or links that demonstrate data relevant to each of the Annual Reporting Measures are public-friendly and prominently displayed on the educator preparation provider's website.

**Link:** [http://www.ship.edu/coehs/nicate/nicate_caep_accreditation/](http://www.ship.edu/coehs/nicate/nicate_caep_accreditation/)

**Description of data accessible via link:** Title II report, Unit Assessment System Plan and Data Analysis

Tag the Annual Reporting Measure(s) represented in the link above to the appropriate preparation level(s) (initial and/or advanced, as offered by the EPP) and corresponding measure number:

<table>
<thead>
<tr>
<th>Level \ Annual Reporting Measure</th>
<th>1.</th>
<th>2.</th>
<th>3.</th>
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<tbody>
<tr>
<td>Initial-Licensure Programs</td>
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</tr>
<tr>
<td>Advanced-Level Programs</td>
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</tr>
</tbody>
</table>

4.2 Summarize data and trends from the data linked above, reflecting on the prompts below.

What has the provider learned from reviewing its Annual Reporting Measures over the past three years?

* Discuss any emerging, long-term, expected, or unexpected trends? Discuss any programmatic/provider-wide changes being planned as a result of these data?
* Are benchmarks available for comparison?
* Are measures widely shared? How? With whom?

Comparison and Analysis of Goals between the 2017-18 AY and the 2018-19 AY:

Evidence from monthly Teacher Education Council (TEC) agendas, minutes and semester retreats revealed ongoing attention to meeting AY goals over the last two years since our NCATE review. Goals in the development phase are recorded below. Goals with limited growth from the 2017-18 AY to the 2018-19 AY are summarized with justifications and potential action plans for TEC to address in the 2019-20 AY.

Goal A. Key Assessments Summary: In order to prepare candidates to respond to district needs as new teachers in PK-12 classrooms, candidates at both the undergraduate and graduate levels will continue to analyze student learning outcome assessment data in their courses and field experiences, including data analysis for three assessments: Professional Dispositions (PD), Capstone/Practicum/Internship Assessment (PDE 430) and the Impact on Student Learning (ISL) assessment during student teaching or professional practicum. Evaluating candidates’ diversity awareness is included in criteria outlined in assessments. For example, the ISL assignment addresses differentiated instruction, including honoring PK-12 learners with disabilities, students learning English, and students from economically and culturally diverse backgrounds.

Action Plan: Results will continue to contextualize candidates’ levels of mastery and allow each Program and also the Unit to determine possible alterations to courses assignments and field experience outcomes to better align with the conceptual framework as they relate to school districts’ practices.
Goal B. Diversity Awareness Summary: As part of the Unit’s focus on diversity awareness (cultural, cognitive, linguistic, regional and socio-economic), faculty teaching methods courses will continue to assign activities that will equip candidates to understand and use a variety of instructional methods to encourage PK-12 learners’ critical thinking, problem solving and performance skills, especially as they relate to diverse students’ needs. As a result of course assignments, candidates’ knowledge, skills and dispositions will be analyzed in a more robust format.

Action Plan: The creation of a new Unit level diversity awareness key assessment has been positioned within the Gates and Status Levels for both Initial, as we are working on Advanced Program incorporation. The TEC Diversity Subcommittee will analyze results from the Quality Assurance and Diversity Awareness. During the 2018-19 AY, results yielded explicit evidence of candidates’ interactions with diverse candidates, learners and professionals.

Status: Goal met, but the Unit must enact a strategic enrollment committee to work within the SU Student Success Division to examine both recruitment and retention, especially for diverse and underrepresented candidates. The Unit Enrollment Task Force will delineate specific strategies to increase enrollment of diverse candidates and strengthen retention for all candidates, not only for First Time In College students, but also for inter-transfer students from our exploratory (undeclared) student population.

Goal C. Conceptual Framework Alignment with Curricular Design Summary: Using both the Conceptual Framework (CF) and the Program Assessment Rubric (PAR), faculty teaching a course associated with a field experience and clinical practice will continue to assign candidates data driven instructional activities that reflect identified practices in public schools. Each semester and over the academic year, each Program must continue to review course level (CAR) and program level (PAR) data to determine Programs level compliance with the CF.

Action Plan: As part of TEC, the Unit Wide Assessment Committee must continue to provide training for all faculty on how to report Programmatic data. The Unit Wide Assessment Committee will continue to assess the PARs currently submitted and identify inconsistencies. The committee chairs will meet with specific department chairs to streamline the use of the PAR.

Status: Goal met, but greater attention is needed to provide time for the Unit faculty to come together to review data for SPA reports due in the upcoming academic year.

Goal D. Advising Candidates Summary: While the current assessment instruments for dispositions indicate excellent results, the Unit must collect data according to the newly established Gates and Status Levels to document candidates’ dispositions growth across the enrollment status levels.

Action Plan: The Unit must ensure that all graduate and undergraduate Programs collect, analyze and report dispositions data from faculty, cooperating teachers, school administrators, or school supervisors. Faculty assessing candidates’ dispositions send the forms to the candidates’ advisors. Advisors collect the data and keep forms in the candidates’ files on the Student Success Collaborative. Advisors (and other institutional members) bring to department chairs any special cases. Department chairs send special cases to TEC.

Status: Goal met, continue practices for Gates and Status Levels communication and the identification and remediation of Red Flag candidates at all levels.

Data generated from TEC Unit assessments include: Impact on Student Learning, Candidates’ Quality Assurance and Diversity Awareness, Clinical Evaluation (PDE 430) and Professional Dispositions. We are in the process of creating an Alumni Feedback Survey, so we currently do not have documentation of results in that area. We analyze our pass rates within each program and as a Unit. Raw data and summary results are available on our accreditation webpage, and are provided in section 5 of this report.

Generally, data are gathered through Program to reflect SPA competencies, and as a Unit to align with CAEP standards. During the 2018-19 AY, all Programs were in the self-study phase for SPA approvals, with English submitting their self-study in March of 2019, and all other programs submitting reports in fall 2019. As a result, much of our Unit level accreditation work for this AY was managed as part of the Teacher Education Council (TEC). TEC held monthly meetings for both advanced and initial programs to discuss accreditation alignment, assessment protocols, and outcomes. For example, at one TEC meeting, we mapped CAEP competencies within each Program and aligned SPA key assessments and other multiple assessments as indicators of our CAEP assessment results. Also, members from the Dean’s Office met with each Program to review assessments and discuss Program and Unit goals. We continue to work to disaggregate results across Programs for the purpose of contextualizing Programmatic changes. As a Unit, we rely on Programs to identify their changes at the course level, and we review our CAEP key assessment data for the purpose of Unit level changes. In the 2018-19 AY, we strengthened our delivery of key assessments and were able to review those results with our clinical status candidates as part of a data analyzing workshop held at the end of each semester.

Specifically, we examined data from each of the Unit key assessments; candidates were grouped in Program areas and were able to respond to the overall Unit results from their Programmatic perspective. We used a four question survey that recorded candidates’ data interpretations. Our candidates’ analysis and perceptions were shared with TEC members. We continue to reach out to school districts to share our assessment results and respond to our goals. We partner with districts at regional and local meetings and events. The Director of the Office of Partnerships, Professional Experiences and Outreach collects and shares information at monthly TEC meetings. As part of the 2018-19 AY, we identified two area school district partners, one rural and one suburban, to formally examine our Unit outcomes. Meetings with these districts were at the Dean level and also included faculty representation from each Program. We gathered evidence from these districts that indicated that candidates had limitations at the initial level. For example, the suburban district recommended a stronger link between our early literacy preparation for candidates, specifically to align with methods incorporated at the district level. To that end, we adjusted course work in two literacy classes to better meet the needs of this district partner. It is important to note that we also incorporated a school district survey to help inform faculty as to the use of technology tools in our area/region. Information from that survey was shared at a TEC retreat, and two retreats in the AY included professional development for faculty. We continue to build a more comprehensive approach for systematic touchpoints with a wide variety of school districts. As part of our Unit Assessment System, data are reviewed from the fall semester in January of the following semester, and the spring data is reviewed at the Teacher Education Retreat in August of the next semester. As a result of these data analysis retreats, improvement goals are established at the course and Program levels, and are reviewed by the TEC Unit. In the data summary sections of this report, we acknowledge evidence from four instruments that has yielded robust data that triangulates candidates' learning outcomes to justify our assertions that candidates
Section 5. Areas for Improvement, Weaknesses, and/or Stipulations

Summarize EPP activities and the outcomes of those activities as they relate to correcting the areas cited in the last Accreditation Action/Decision Report.

NCATE: Areas for Improvement related to Standard 1 cited as a result of the last CAEP review:

1. The unit has not provided clear evidence that advanced candidates have the professional dispositions to help all students learn (Advanced).

2. The unit lacks sufficient evidence that candidates at the advanced level create positive learning environments for student learning in the Special Education and the Curriculum and Instruction programs (Advanced).

Standard 1 Assessment Criteria
The Capstone/Practicum (student teaching) Assessment Instrument is administered during the clinical practice to determine candidates’ levels of mastery in relation to our four fundamental principles of professionalism. Each principal is part of a category that relates to our conceptual framework and the state definition of professionalism. These criteria are managed in multiple assessment measures at the course level in the Foundational, Candidacy and Clinical Status Levels in our Gates and Status Levels Matrix. For example, each Program requires candidates to observe and work in the field during method courses. Triangulation data from multiple iterations known as multiple assessment measures (MAMs) of these criteria yielded strong connections between our candidates’ dispositional outcomes and our Red Flag process for identifying and tracking candidates through various gates. This process is designed to better ensure that our key assessment data in this assessment measure are robust, and also that these data are a representative sample of our candidates’ sincere growth mindset as emerging reflective practitioners. Summary of overall data: All 232 fall 2018 and spring 2019 candidates were rated by university supervisors and cooperating teachers in the target and target plus one rating for each criterion; with only three candidates rated in the spring 2019 data set at the developing level. Therefore, data indicate that candidates in all certification Programs demonstrate positive and productive dispositional attitudes while engaging in clinical experiences. These data align with candidates’ perceptions of their professional dispositions as they relate to our key criteria. Disaggregated data for subpopulations were investigated in relation to our AFI’s: The Curriculum and Instruction Program is expansive in the sense that not all tracks in each of the specializations in the Master’s Degrees results in certification. At the present, the PK4 certification track, specifically, the Curriculum and Instruction Option C and the graduate Special Education certification degree were disaggregated for analysis. During the 2018-19 AY, 10 graduate students were enrolled in one of the Curriculum and Instruction Programs, with Early Childhood Option C (N=2) and Special Education at the advanced level (N=8). Since CAEP requires IHEs to report data for only those Programs with certification designations, and after speaking with CAEP representative, we determined that we will continue to provide evidence of CAEP competencies for the Curriculum and Instruction Early Childhood Option C Program, but not in the other C&I designations that do not lead to certification. During the 2018-19 AY, the C&I Option C was in the midst of a self-study draft for NAECY. Data from the 208-19 AY included a number of key assessments, one required evidence for analyzing professional dispositions. Candidates are evaluated as part of their student teaching experience, and these data have been aggregated within the initial results because the number of candidates was too low to reveal any relevant cohort outcomes for Programmatic change. As a result, the Program has a case-by-case dispositional interview process as part of our IHEs transition plan (known as Gates and Status Levels) and managed as an Individualized Action Plan for candidates exhibiting dispositional issues. As with the undergraduate evaluation of dispositions, advanced data provide a glimpse into candidates’ levels of professionalism as they transition throughout the C&I Option C Program. In relation to the advanced Special Education Program, dispositional data are collected as part of student teaching. The Program is working to redesign key assessments to meet SPA standards. As a result, a number of redesigned assessments are in the works, and will be used as Programmatic evidence. However, as with the C&I Option C, the number of advanced candidates is low for the 2018-19 AY. Overall Advanced Progress: The TEC Unit continues to work to institute a systematized the delivery of a Professional Dispositions Assessments at three transition points, specifically at the Foundational Status, Candidacy Status and Clinical Status Gates for advanced candidates. To that end we have held Unit level retreats each semester to identify courses for advanced Programs to determine a path for implementing the assessment consistently across the Unit. During the 2018-19 AY, a course level matrix was instituted to begin to align each Program’s key assessments within the Unit as they relate to all CAEP standards, and also for professional dispositions. Ongoing investigations into recording and aligning data across Programs is planned for the upcoming AY. At end of the student teaching semester, University Supervisors complete a Professional Dispositions Assessment for each student teacher to evaluate professional attitudes, values, and beliefs. Since a significant level of candidates, university supervisors and cooperating teachers rated candidates in target and target plus one levels of mastery, it is clear that our candidates are confident and comfortable in professional roles during clinical practice. They demonstrate ethical principles, are critical and reflective practitioners, collaborate with other educators, and demonstrate a commitment toward diversity learners. Use of Data: The instrument allows for both quantitively and qualitative evidence. The quantitative evidence ranks candidates at or above benchmark levels, but more importantly, open responses shed light on our candidates’ growth as professionals. No responses were alarming in relation to candidates’ demonstration of professionalism.

NCATE: Areas for Improvement related to Standard 2 cited as a result of the last CAEP review:

1. The unit does not systemically collect and assess candidate impact on student learning (Advanced).
NCATE: Areas for Improvement related to Standard 4 cited as a result of the last CAEP review:

1. Candidates have limited opportunities to interact with peers from diverse backgrounds. (ITP) (ADV)
2. The unit does not ensure that all candidates have experiences with diverse P-12 learners. (ITP) (ADV)

Standard 2 Assessment Criteria: The ISL assignment meets each Program’s SPA needs as well as serves as a meta-investigation of our candidates’ levels of mastery in teaching and learning during clinical experiences across all Programs. Since each Program has the option to administer and evaluate the ISL in their own way, i.e., as part of a practicum course or as part of student teaching supervision, we had to ensure that we had a way of combining the data without over taxing faculty’s reporting of data. As a result, faculty who score the ISL report an overview of candidates’ learning outcomes and maintain raw data within their SPA data collection. Data are reported at this Unit level with the intent of a comparison among Programs and not as an individual look into any one Program’s individual candidates. We have used the meta-rubric within each Program to report their PAR level data. Criteria include: Alignment with Learning Goals and Instruction, Interpretation of Data, Evidence of Impact on Student Learning, Interpretation of Student Learning, Insights on Effective Instruction and Assessment, and Implications for Future Teaching.

Progress Related to AFI: The TEC Unit acknowledges that advanced Programs include SPA level assessments that measure impact on learning, yet as a Unit we struggled to align each individual Program’s assessment related to candidates’ abilities to document P-12 student learning across the Unit. As reported in the Standard 1 AFI, the TEC Unit has maintained robust data collection and analysis at the initial level and continues to align criteria and assessment practices at the advanced level for certification Programs. We have enacted a goal for the 2018-19 AY that includes mapping impact on student learning criteria across all Programs. To ensure this, we have interested Program Directors for Program inclusions in the assessment distribution. The impact on Student Learning assessment instrument is given to all University Supervisors and when applicable, course instructors teaching the ECH professional seminar as a practicum course. The Impact on Student Learning Project provides an opportunity for teacher education candidates across all initial Programs, and candidates in certification Programs at the Master's levels, specifically ECH and EEC to closely examine their effect on the teaching and learning process in P-12 classroom settings. The instrument measures elements related to candidates’ abilities to: plan instruction, data analyze for P-12 learners’ outcomes, communicate the results to others, and implications for future use. Strengths: Since this assessment is managed at the clinical status level for initial certification candidates for a wide variety of certification areas, a meta-rubric known as a PAR is used to report Programmatic data results to the Unit rather than individual student level, raw data. The decision to use a meta-rubric is based on the fact that each Program collects ISL data in different ways and at different points in the semester, yet each has fundamental, Unit level criteria. Since ISL data are used by Programs for SPA results, and each Program has content related competencies that are explicit to each SPA, we use a meta-rubric to outline Unit level criteria similar across all Programs, specifically those elements noted above. This meta-data for clinical candidates in the fall 2018 semester (N=3) and spring 2019 semester (N=10) represent clinical status level candidates respectively. In both semesters, candidates scored at benchmark (“Target”) or above benchmark (“Target Plus One”) in the learning outcomes in all criteria, yet a small representative sample in both semesters noted that a few candidates were classified as “Developing” (slightly below benchmark) in two criteria: data analysis, and using data for future implications in the spring 2019 semester only. Areas of Improvement: Results from the 2017-18 AY indicated that candidates needed additional support in evaluating effective instruction and aligning learning goals to instruction, yet candidates in the 2018-19 AY were not rated in the “Developing” classification of mastery in these areas. As noted above, candidates in this AY are in need of examining the robustness of K-12 student learning outcomes and articulating implications for instruction. Use of Data: These results are used by individual Programs to adjust and modify course level assignments to address the specific learning needs of candidates. As noted in the 2017-18 AY CAEP report, the use of a meta-rubric was instituted with the purpose of reporting data trends across Programs and not specific candidate’s learning outcomes. As an IHE, we continue to discuss ISL expectations as they relate to separate Programs, but our goals also represent a Unit approach to intervention. We continue to investigate inter-rater reliability within each Program and across the Unit. As we noted in the 2017-18 report, there continues to be evidence of the need to adjust both calibration training and criteria structure within the instrument. Yet, we have reached a consensus. At this point, we can attribute the results to be cohort specific in the sense that fall 2018 and spring 2019 data results in all categories are similar, yet there are a small number of candidates in each semester who were evaluated at the “Developing” level of mastery. With ongoing calibrating and reporting discussions, the validity of the results will improve. So, the 2019-20 AY will be focused on assessment training for this instrument and all key assessments.
2019 marked the inaugural implementation of this assessment with the focus on gathering open ended data related to diverse populations. Criteria in this instrument include elements directly related to our Conceptual Framework (as noted above), and also asks candidates to provide evidence of working with linguistically, culturally, economically, racially, and cognitively diverse populations. The number of clinical candidates were 44/44 in Fall 18 and 71/74 Spring 19. For both the Fall 18 and Spring 19 semesters, results indicate that student teachers selected “Target Plus One” in two specific criteria, indicating: that they were able to contemplate their attitudes, skills, and beliefs in ensuring fair and equitable treatment of PK-12 learning and professional partners, and that they felt they demonstrated respect for all students PK-12 diverse learning needs. Results not only indicate that candidates are satisfied with their training, but that our fundamental, conceptual framework principles are significant to candidates’ perceptions of their learning outcomes. Areas of Improvement: Data from the fall 2018 and spring 2019 cohorts reveal that a significant number of candidates rated each category at the “Target” or “Target Plus One” classification of benchmark/above benchmark mastery, yet a small percentage noted the level of satisfactory perceptions and/or mastery. Specifically, 4/44 candidate ratings in fall 2018 and 6/74 candidate ratings in spring 2018 consistently ranked survey questions within the satisfactory (“Developing”) classification. Raw data were not disaggregated by Program, but open ended responses did reveal data triangulation in the sense that there were no underlying themes noted in students’ individual responses that classified criteria from the multiple choice answers to the open ended answers. Therefore, results most likely yield the interpretation that candidates were conservative when selecting a ranking for their level of mastery or satisfaction. For example, the term “Developing” included a growth mindset terms, such as ...somewhat limited, but overall positive... So, it can be concluded that since 90% of the candidates in each semester reported “Target” and “Target Plus One” classifications, candidates are satisfied with the quality of their education, even those who reported a “Developing” classification. Use of Data: These data are used by education faculty in adjusting and modifying both course level assignments and Programmatic changes that address the specific learning needs of teacher education candidates. This feedback allows teacher education faculty to look at all education Programs from a student’s perspective in a Program, and to examine a Unit level perception. Since candidates complete this assessment prior to the end of their clinical experiences, results are reviewed and discussed with the student teachers on the last professional development day to ensure that they can respond to the analysis/interpretation. For the 2017-18 and 2018-19 AY, open ended responses revealed that candidates also needed support and training in implementing classroom based technologies. As a result, the Office of Partnerships, Professional Experiences and Outreach (OPPEO) reached out to LEAs to identify common technology usage in area schools. With this stakeholder information, the TEC Unit via the Director of the Office of Partnerships, Professional Experiences and Outreach, as well as technology savvy faculty, offered technology trainings as part of TEC retreats in both the fall and spring semesters. It will be interesting to compare data from the 2019-20 AY in relation to technology integration.

**NCATE: Areas for Improvement related to Standard 6 cited as a result of the last CAEP review:**

1. The unit does not provide adequate personnel resources to implement the unit’s assessment system.

**Standard 6 Progress Related to AFI: In this AFI, the Unit has made significant impact.** In summer 2017, an Interim Associate Dean with accreditation expertise in teacher education, was appointed to guide the implementation of the Unit Assessment System. As a result, the TEC reorganized to address Unit level assessment protocols, as well as support certification Programs to meet SPA requirements. The 2018-19 AY marks the full academic year of the implementation of the systematic accounting for candidates’ transitions for initial certification Programs, known as Gates and Status Levels. In addition, a comprehensive communication system has been implemented that informs each candidate of his/her status and essential criteria for meeting the next gate in their progression toward certification. This communication system includes timely information for academic advisors and monitors counseling candidates out of certification-track majors. Along with TEC unit faculty members, the Interim Associate Dean, the Director of the Partnerships, Professional Experiences and Outreach (OPPEO), the Assessment and Accreditation Coordinator maintains all student records related to certification and accreditation. Under the Dean in the College of Education and Human Services, the Director of the redesigned OPPEO administers the key assessments to all candidates and stakeholders at various intervals during the semester. In addition, the OPPEO Director coordinates data distribution to Programs for their analysis discussions. TEC holds a retreat each semester to review assessment data and monitor goals, yet, it is important to acknowledge that we continue to strive to address both Program level and Unit level data discussions during the academic year. We continue to enact goals that structure processes and opportunities that communicate and evaluate our mission. We have worked with Shippensburg University’s Office of Communication and Marketing to upload our yearly reports and data for review by all stakeholders. In the summer of 2019, faculty designated as Program directors were financially compensated by the Provost’s Office to complete and submit SPA reports, yet, this work required participation from all education faculty. SPA report data yield opportunities to link key assessments with multiple assessment measures and strengthen our ability to address this AFI. The TEC Unit is most proud of the ongoing changes we have made to respond to this AFIs, yet we acknowledge that we continue to investigate options to allocate time to enact and monitor a robust assessment protocol.

**Section 6. Continuous Improvement**

**CAEP Standard 5**

_The provider maintains a quality assurance system comprised of valid data from multiple measures, including evidence of candidates' and completers' positive impact on P-12 student learning and development. The provider supports continuous improvement that is sustained and evidence-based, and that evaluates the effectiveness of its completers. The provider uses the results of inquiry and data collection to establish priorities, enhance program elements and capacity, and test innovations to improve completers' impact on P-12 student learning and development._

**CAEP Standard 5, Component 5.3**
The provider regularly and systematically assesses performance against its goals and relevant standards, tracks results over time, tests innovations and the effects of selection criteria on subsequent progress and completion, and uses results to improve program elements and processes.

6.1 Summarize any data-driven EPP-wide or programmatic modifications, innovations, or changes planned, worked on, or completed in the last academic year. This is an opportunity to share targeted continuous improvement efforts your EPP is proud of. Focus on one to three major efforts the EPP made and the relationship among data examined, changes, and studying the results of those changes.

- Describe how the EPP regularly and systematically assessed its performance against its goals or the CAEP standards.
- What innovations or changes did the EPP implement as a result of that review?
- How are progress and results tracked? How will the EPP know the degree to which changes are improvements?

The following questions were created from the March 2016 handbook for initial-level programs sufficiency criteria for standard 5, component 5.3 and may be helpful in cataloguing continuous improvement.

- What quality assurance system data did the provider review?
- What patterns across preparation programs (both strengths and weaknesses) did the provider identify?
- How did the provider use data/evidence for continuous improvement?
- How did the provider test innovations?
- What specific examples show that changes and program modifications can be linked back to evidence/data?
- How did the provider document explicit investigation of selection criteria used for Standard 3 in relation to candidate progress and completion?
- How did the provider document that data-driven changes are ongoing and based on systematic assessment of performance, and/or that innovations result in overall positive trends of improvement for EPPs, their candidates, and P-12 students?

The following thoughts are derived from the September 2017 handbook for advanced-level programs

How was stakeholders' feedback and input sought and incorporated into the evaluation, research, and decision-making activities?

The Unit is committed to collecting robust data to assess candidates’ performance at the course level and throughout all Programs. Faculty members teaching or supervising a data-rich course (i.e., methods, student teaching or practicum) continue to collect and analyze data according to the Unit Assessment System Protocol. At the end of the semester, after entering scores into a data management system and assigning grades, faculty members continue to use the Course Assessment Rubric (CAR) to measure the course outcomes against the Conceptual Framework (CF) goals. Then, Programs submit a Data Report to the TEC Unit. At the TEC retreat at the end of each semester, Programs analyze candidate performance data and other data pertaining to candidates' Gates and Status Levels from the semester using the Program Assessment Rubric (PAR). Findings are discussed at department/Program meetings and as part of the monthly Teacher Education Council (TEC) meetings and recorded in the minutes. This retreat is attended by all Unit members, the department/Program chairs, the Assessment and Accreditation Coordinator, the OPPEO Director, the Interim Associate Dean, and the Dean in the College of Education and Human Services. At this meeting, all data are analyzed using the Unit Assessment Rubric (UAR) and the Dean shares data on the Unit's operation criteria described in the UAR. Data are aggregated and summarized, and specific actions on the use of results to improve candidate performance, Program quality and Unit operations are identified. For reporting purposes, the Dean creates and disseminates an executive summary to the Provost's Office containing provisions for budget allocations informed by the assessment findings. The Dean's office shares an annual report with a summary of the assessment findings and the recommendations for improvement. The report is made available to the entire Unit and the professional community via the College of Education and Human Services website for accreditation purposes.

For the 2018-19 AY, data generated from the Unit assessments include: Impact on Student Learning, Candidates' Quality Assurance and Diversity Awareness, Clinical Evaluation (PDE 430) and Professional Dispositions. Raw data and summary results are available on our accreditation webpage at https://www.ship.edu/coehs/ncate/ncate_caep_accreditation/. Instruments are administered for each certification area, including those at the Master’s levels that result in certification. For the proposes of this report, data represent an aggregated, Unit level lens across all certification Programs. We acknowledge that there are limitations in analyzing our data as a Unit, but we rely on individual Programs to interpret their data results each semester as part of course and Programmatic evaluation practices. Therefore, the Unit analysis within this report for the 2018-19 AY are not contextualized as a comparison across Programs, but as a comparison from Unit data from the 2017-18 AY in order to provide recommendations for altering assessment protocols and validating our assessment practices.

As part of our Unit Assessment System managed by the TEC, Unit data are reviewed from the fall semester in January of the previous semester, and the spring data are reviewed at the TEC retreat in May, or if needed, in August of the next semester. As a result of these data analysis retreats, Unit-wide improvement goals are established at the course and Program level, and are reviewed by the TEC Unit. These goals include how to best ensure validity and reliability of our key assessments. Key assessments are distributed via Survey Monkey links through transitions links known as Gates and Status Levels. We are in the process of moving our assessment results to a system known as Nuventive. Assessments are administered within the following timelines for all initial certification Programs, including Master’s Programs: Curriculum and Instruction Early Childhood Option C, and Special Education, yet data in this report do not reflect advanced certification areas in Educational Leadership at the building and district levels or Reading Specialist. The following are our key assessments:

- Key Assessment Title (Knowledge Skills and Dispositions) Status Level Administration
- 1.Professional Dispositions (D) collected at the Foundational Status, Candidacy Status, Clinical Status
Impact on Student Learning or Clinical Practice Impact (KSD) collected at the Clinical Status
3. Capstone/Practicum/Internship (PDE 430) (KSD) collected at the Clinical Status
4. Quality Assurance and Diversity Awareness Exit Survey (KSD) collected at the Clinical Status
5. Alumni and Stakeholder Program Satisfaction Survey (KSD) collected at the Alumni/Certification Status
6. Certification and Licenser Exams (KS) collected prior to Candidacy Status for Basic Skills and prior to Alumni/Certification Status for PECT or Praxis

As a result of removing TK20 as our data collection tool and instituting Survey Monkey at both initial and advanced Programs' initial certification levels known in Pennsylvania as Instructional I, we have a protocol for capturing data at the Unit level from all Programs. We will continue to refine both our delivery method (Survey Monkey) and the instruments themselves. It is important to note that we match demographic data to ensure that we have 100% response rate using Survey Monkey. We send multiple reminders to all stakeholders to complete all assessments. Our assessment instruments have four levels of mastery, “Unsatisfactory”, “Developing”, “Target” (benchmark) and “Target Plus One” (above benchmark). Since our spring 2017 NCATE visit and review, we have learned that our previous data samples lacked evidence to make benchmark comparisons across all Programs, so we continue to institute assessment delivery so that we have cycles of data for comparisons. As part of our Unit Assessment System, we have formalized data analysis retreats at the course (CAR), Program (PAR) and TEC Unit levels (MAR, UAR), but we continue to work with LEAs to ensure that they work consistently with the Unit to review and analyze data for course and Programmatic changes for our certifications Programs. Each semester, we review our data results at TEC meetings and with stakeholders. We set goals and adapt instruments. For example, we edited instrument questions to better disaggregate data for each Program's analysis for SPA reports. Since 2017-18 marked the first year of a revitalized and robust Unit level oversight of data distribution and collection, we are working to ensure that we are collecting reliable data in a consistent manner so that we can continue to contextualize our trends, outcomes, and comparisons within and across Programs. Yet, we continue to struggle to determine specific multiple assessment measures for both the advanced and initial Programs as a means of predicting overall outcome data at the clinical and alumni status levels for our key assessments. We also have to build training experiences for inter-rater reliability. Although we have attempted to enact training sessions at retreats, we have realized that we also needed to address accounting for CAEP competencies within our Programs. We continue to establish and enact goals that serve our candidates and meet accreditation expectations.

Tag the standard(s) or component(s) to which the data or changes apply.

| 1.1 Understanding of InTASC Standards |
| 1.2 Use of research and evidence to measure students' progress |
| 1.4 All P-12 students afforded access to college- and career-ready standards. |
| 1.5 Model and apply technology standards |
| 2.1 Partners co-construct mutually beneficial P-12 partnerships |
| 2.2 Partners co-select, prepare, evaluate, support, and retain high-quality clinical educators |
| 2.3 Partners design high-quality clinical experiences |
| 3.1 Recruits and supports high-quality and diverse candidate pool |
| 3.2 Sets selective admission requirements |
| 3.3 Monitors attributes and dispositions beyond academic ability |
| 3.4 Creates and monitors candidate progress |
| 3.5 Candidate positive impacts on P-12 students |
| 4.3 Employer satisfaction |
| 4.4 Completer satisfaction |
| 5.1 Effective quality assurance system that monitors progress using multiple measures |
| 5.2 Quality assurance system relies on measures yielding reliable, valid, and actionable data. |
| 5.4 Measures of completer impact are analyzed, shared and used in decision-making |
| A.3.2 Candidates Demonstrate Academic Achievement and Ability to Complete Preparation Successfully |
| x.1 Diversity |
| x.2 Technology |
| x.4 Previous AFI / Weaknesses |

Upload data results or documentation of data-driven changes.

Data Protocols and Changes for section 6.pdf
6.2 Would the provider be willing to share highlights, new initiatives, assessments, research, scholarship, or service activities during a CAEP Conference or in other CAEP Communications?

- Yes
- No

6.3 Optional Comments

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Section 7: Transition

In the transition from legacy standards and principles to the CAEP standards, CAEP wishes to support a successful transition to CAEP Accreditation. The EPP Annual Report offers an opportunity for rigorous and thoughtful reflection regarding progress in demonstrating evidence toward CAEP Accreditation. To this end, CAEP asks for the following information so that CAEP can identify areas of priority in providing guidance to EPPs.

7.1 Assess and identify gaps (if any) in the EPP’s evidence relating to the CAEP standards and the progress made on addressing those gaps. This is an opportunity to share the EPP’s assessment of its evidence. It may help the Readiness for Accreditation Self-Assessment Checklist, the CAEP Accreditation Handbook (for initial level programs), or the CAEP Handbook: Guidance on Self-Study Reports for Accreditation at the Advanced Level.

If there are no identified gaps, click the box next to "No identified gaps" and proceed to question 7.2.

- No identified gaps

If there are identified gaps, please summarize the gaps and any steps planned or taken toward the gap(s) to be prepared by your CAEP site visit in the text box below and tag the standard or component to which the text applies.

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Since the Unit is moving from an NCATE to CAEP accreditation review, there is a general concern regarding the validity and reliability of the key assessment instruments, including documenting inter-rater reliability expectations. To that end, the Unit has begun to explore alternatives to both the Unit Assessment System Protocol and the instruments themselves. We strive to meet CAEP standards and expectations. We sincerely appreciate the ongoing support we have from CAEP personnel as we prepare for our 2022 self-study team visit. In addition, we strive to contextualize our practices in relation to technology usage by faculty in courses and as part of key assessments and by candidates during field experiences. For example, evidence from a retreat indicates the level of work the Unit addresses.

Retreat Agenda
April 26, 2019 12:00-4:00
Shippen 140
Next Retreat
May 3, 2019 12:00-4:00
CAEP/INTASC Standards and Syllabi
Conceptual Framework Update and PARs for Assessment Protocol
Curriculum Alignment with Teacher Effectiveness at the I and A Levels for ALL Clinical Practice
Matrix of ALL Key Assessments for SPAs mixed with CAEP Key Assessments
Tech Training
SPA Working Groups-Anticipated Needs
Website Updates and CAEP Report

Possible May (August) Agenda
Diversity Plan
Assessment Timeline for Unit Assessment System
Assessment Calibration: calibration for instrument validity
Assessment Analysis: reviewing data and writing reports
Student Teaching Supervisor and Cooperating Teacher Training as part of the Assessment System
Alumni Assessment and Stakeholder Follow-up
Call to Action Look for upcoming email requests during the summer
PA Teacher Candidate Effectiveness Rubric (PAC-TE)
Danielson Framework and CF Responding to Requests for the Upcoming AY:
*Technology Goals that Lead to Course Redesign
*Syllabi Collection for Fall 2019
*Handbook Collection for Fall 2019
Tag the standard(s) or component(s) to which the text applies.

<table>
<thead>
<tr>
<th>1.1 Understanding of InTASC Standards</th>
<th>7.2 I certify to the best of my knowledge that the EPP continues to meet legacy NCATE Standards or TEAC Principles, as applicable.</th>
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<tbody>
<tr>
<td>1.2 Use of research and evidence to measure students' progress</td>
<td>( ) Yes ( ) No</td>
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<td>x.5 State Standards (if applicable)</td>
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Section 8: Preparer’s Authorization

Preparer’s authorization. By checking the box below, I indicate that I am authorized by the EPP to complete the 2020 EPP Annual Report.

☑️ I am authorized to complete this report.

Report Preparer’s Information

Name: Lynn Baynum
Position: Dean’s Associate for TEC and CAEP Accreditation
Phone: 71747711233019
E-mail: LFBayn@ship.edu

I understand that all the information that is provided to CAEP from EPPs seeking initial accreditation, continuing accreditation or having completed the accreditation process is considered the property of CAEP and may be used for training, research and data review. CAEP reserves the right to compile and issue data derived from accreditation documents.

CAEP Accreditation Policy

Policy 6.01 Annual Report

An EPP must submit an Annual Report to maintain accreditation or accreditation-eligibility. The report is opened for data entry each year in January. EPPs are given 90 days from the date of system availability to complete the report.

CAEP is required to collect and apply the data from the Annual Report to:

1. Monitor whether the EPP continues to meet the CAEP Standards between site visits.
2. Review and analyze stipulations and any AFIs submitted with evidence that they were addressed.
3. Monitor reports of substantive changes.
4. Collect headcount completer data, including for distance learning programs.
5. Monitor how the EPP publicly reports candidate performance data and other consumer information on its website.

CAEP accreditation staff conduct annual analysis of AFIs and/or stipulations and the decisions of the Accreditation Council to assess consistency.

Failure to submit an Annual Report will result in referral to the Accreditation Council for review. Adverse action may result.

Policy 8.05 Misleading or Incorrect Statements

The EPP is responsible for the adequacy and accuracy of all information submitted by the EPP for accreditation purposes, including program reviews, self-study reports, formative feedback reports and addendums and site visit report responses, and information made available to prospective candidates and the public. In particular, information displayed by the EPP pertaining to its accreditation and Title II decision, term, consumer information, or candidate performance (e.g., standardized test results, job placement rates, and licensing examination rates) must be accurate and current.

When CAEP becomes aware that an accredited EPP has misrepresented any action taken by CAEP with respect to the EPP and/or its accreditation, or uses accreditation reports or materials in a false or misleading manner, the EPP will be contacted and directed to issue a corrective communication. Failure to correct misleading or inaccurate statements can lead to adverse action.

☑️ Acknowledge