

2021 ANNUAL ACADEMIC ASSESSMENT REPORT FORM
(Due October 15 to the dean)

The Faculty Senate Academic Assessment Committee (AAC) is committed to a vision of assessment that leads to continuous program improvements and benefits students. Annual assessment reporting informs decision making and resource allocation aimed at improving student learning and success. It also enables the AAC to analyze assessment across the institution and to respond to UA System, Board of Regents, legislative, and Northwest Commission on Colleges and Universities (NWCCU) requests. We thank you for your continued support of and participation in this annual activity.

Starting in Spring 2021, UAA is moving to one academic assessment reporting mechanism. The below form merges and streamlines the former Annual Academic Assessment Survey and the Annual Academic Assessment Report. It also incorporates questions about how academic programs contribute to student achievement of institutional core competencies and to student success.

This annual report will be due to the dean on October 15. Programs with suspended admissions and new programs in the first year of implementation are not required to complete this form.

These reports are public documents and will be posted on the assessment website. Responses are to be narrative only, and must be ADA and FERPA compliant. Do not embed any links, including to webpages or other documents. To be FERPA compliant, do not include the names of any current or former students. Rather, use statements such as, "In AY21 four program graduates were accepted to graduate programs in the field." Programs with specialized accreditation or other external recognitions must comply with restrictions regarding what can be published, as per the accreditor or external organization. Do not include appendices. Appendices to this form will not be accepted.

The form uses narrative, text, and drop-down boxes. Narrative boxes have a character limit, which includes spaces. When using text and drop-down boxes, if you want to undo an answer, press "Control-Z" or "Command-Z."

For technical assistance with this form, email Academic Affairs (uaa.oaa@alaska.edu).

PROGRAM SECTION (Due to the dean on October 15)

After completing the Program Section, the program should email this form to the dean, with a copy to the appropriate community campus director(s) if the program is delivered on a community campus.

Submission date: 10/15/2021

Submitted by: Term Assistant Professor Melainie Duckworth, MLS (ASCP)

Program(s) covered in this report: Phlebotomist OEC

(Programs with suspended admissions and new programs in the first year of implementation are not required to complete this form.)

If you selected "Other" above, please identify. *(100 characters or less)*

College: College of Health

Campuses where the program(s) is delivered: Anchorage KOD KPC MSC PWSC

Specialized accrediting agency (if applicable): N/A

If explanation is necessary, such as only some of the certificates and degrees are covered by the specialized accreditation, briefly describe:

INSTITUTIONAL STUDENT LEARNING CORE COMPETENCIES

In 2020, UAA launched a consensus-based, deliberative process to identify the key skillsets that help students achieve academic and post-graduation success. After a year-long process that included students, faculty, staff, administrators, alumni, and employers, the UAA community identified four "core competencies" at the heart of a quality UAA education. Students develop mastery of these competencies through curricular (e.g., courses), co-curricular (e.g., internships, conferences), and extra-curricular (e.g., student clubs) learning experiences.

After the stakeholder-based process in AY20, UAA conducted a pilot project focusing on the core competency of Personal, Professional, and Community Responsibility (PPCR). This decision was based on input from the 2020 Annual Academic Assessment Retreat.

Question #1 below is designed to engage program faculty in thinking about how they can or already do promote student learning in this core competency.

- 1. Personal, Professional, and Community Responsibility: The knowledge and skills necessary to promote personal flourishing, professional excellence, and community engagement.**
 - **What would you hope a student would say if asked where in your program or support service they had the opportunity to develop proficiency in this Core Competency? (500 characters or less)**

The practicum experience provided opportunity for personal skill development and professional engagement within a community partner setting. Clearly defined core

abilities and skills assessments allow for targeted development of critical knowledge and skills in phlebotomy.

- **Do you have an example that could be a model for the university of an intentionally designed course, assignment, or activity that showcases the student learning in this core competency?** Yes No

If yes, please briefly describe. (500 characters or less)

A core abilities assessment has been built into every required course in the phlebotomy program. This highlights specific indicators of professionalism with examples and a scale to determine how well the student demonstrates core abilities. Any professionalism concerns found in a course are discussed with the student along with recommendations for improvement.

- **Do you have any ideas about where your program or the university might develop other intentionally designed opportunities for students to develop proficiency in this core competency?** Yes No

If yes, please briefly describe. (500 characters or less)

PROGRAM STUDENT LEARNING OUTCOMES

2. **Please list the Program Student Learning Outcomes your program assessed in AY21. For each outcome, indicate one of the following: Exceeded faculty expectations, Met faculty expectations, or Did not meet faculty expectations.**

Example: Communicate effectively in a variety of contexts and formats – Exceeded faculty expectations.

Demonstrate entry-level competencies for a phlebotomist, including:

Select the appropriate site and demonstrate the proper technique for collecting, handling, and processing blood and non-blood specimens. -Exceeded faculty expectations

Adhere to infection control and safety policies and procedures. -Exceeded faculty expectations

Identify factors that affect specimen collection procedures and test results and take appropriate actions. -Exceeded faculty expectations

Perform point-of-care testing according to standard operating procedures. -Exceeded faculty expectations

Recognize legal implications when interacting with patients, peers, or other healthcare personnel and the public. -Exceeded faculty expectations

Demonstrate professional conduct, stress management, interpersonal and communication skills with patients, peers, other health care personnel, and the public. -Exceeded faculty expectations

Act upon individual needs for continuing education as a function of growth and maintenance of professional competence. -Exceeded faculty expectations

Recognize opportunities for professional development within the laboratory. -Exceeded faculty

expectations

- 3. Describe your assessment process in AY21 for these program student learning outcomes, including the collection of data, analysis of data, and faculty (and other, e.g., advisory board) conversations around the findings. (750 characters or less)**

The program was assessed by core abilities scores collected using a course rubric in each course, including practicum. The national certification agency (ASCP) provides an annual report which includes the students' overall scores, scores for content areas, and pass rate. Task objectives and clinical coordinator evaluations were collected during practicum student rotations. Qualtrics surveys were distributed for employers to evaluate newly hired graduates. Exit surveys were given to students to evaluate the overall program and learning experience. Advisory board meetings occurred twice during the academic year to provide faculty conversation with community partners. Faculty meetings discuss the assessment process and findings.

- 4. What are the findings and what do they tell the faculty about student learning in your program? (750 characters or less)**

The ASCP pass rate remains at 100 percent and employer surveys indicate all positive feedback concerning newly hired graduates. Exit surveys by students indicated the students were well-prepared for entry level phlebotomy positions. Core abilities remained high in all areas with an average of 5 out of 5, which exceeds the benchmark of 4. There was superior performance marked on task objectives with a score of 4.73 out of 5, which exceeds the benchmark of 4. According to ASCP exam scores, specimen processing content scores were slightly lower than other content scores and student exit surveys indicated a desire for more specimen processing instruction during practicums.

- 5. Based on the findings, did the faculty make any recommendations for changes to improve student achievement of the program student learning outcomes? Please describe the recommended action, what improvement in student learning the program hopes to see with this change, the proposed timeline, and how the program will know if the change has worked. If no recommendations for changes were made, please explain that decision. (750 Characters or less)**

During a faculty meeting, it was recommended that the practicum course include online learning content to supplement specimen processing experience. This change will be evaluated by an additional question concerning specimen processing on the yearly employer survey and student exit survey. These surveys will be evaluated next year to determine if the additional course changes improved the student learning outcomes for specimen processing.

PROGRAM IMPROVEMENTS AND ASSESSING IMPACT ON STUDENT LEARNING

6. In the past academic year, how did your program use the results of previous assessment cycles to make changes intended to improve student achievement of the program student learning outcomes? Please check all that apply.

- Course curriculum changes
- Course prerequisite changes
- Changes in teaching methods
- Changes in advising
- Degree requirement changes
- Degree course sequencing
- Course enrollment changes (e.g., course capacity, grading structure [pass/fail, A-F])
- Changes in program policies/procedures
- Changes to Program Student Learning Outcomes (PSLOs)
- College-wide initiatives (e.g., High Impact Practices)
- Faculty, staff, student development
- Other
- No changes were implemented in AY21.

If you checked "Other" above, please describe. (100 characters or less)

7. Do you have any information about how well these or other past improvements are working? Are they achieving their intended goals? Please include any data or assessment results that help you demonstrate this. (750 characters or less)

Increased instruction for point-of-care testing, addition of swab collection method instruction, and professional resume and interview skillbuilding were implemented as teaching method changes recommended by the advisory board community partners. According to the advisory board follow-up meeting, these changes were acceptable and practicum students demonstrated an acceptable skill level. No further recommendations were requested.

STUDENT SUCCESS AND THE CLOSING OF EQUITY GAPS

Programs are not required to respond to question #8 below for their report due on October 15, 2021. Question #8 will be required for the next round and moving forward.

8. Respond to at least one of the following metrics. Student success depends on many aspects of a student's experience. On the academic program level, it can relate to correct placement, course sequencing, standardized pre-requisites, the intentional use of high impact practices, proactive advising, course scheduling practices, etc. UAA is using the following two metrics in its cyclical

Program Review process, as well as in its reaffirmation of accreditation process. These data are included in the most recent IR-Reports Program Review dashboard. Please review these data for your program, note any equity gaps, and describe steps you are taking or plan to take to close those gaps.

Metric	Definition	Rationale
JUNIOR GRADUATION RATE - BACCALAUREATE	The percentage of students who graduate with a bachelor's degree within four years of first reaching junior class status (60 credits). <i>Data source: RPTP end-of-term freeze files. Disaggregate as per accreditation.</i>	Junior graduation rate (after 60 credits) can reflect a department's success in helping students complete their degrees. Within their first 60 credits, students typically focus on completing GERs and often switch majors. Tracking how long it takes students to complete their degrees after 60 credits, when many students have likely committed to a specific major, can provide actionable information for departments.
COURSE PASS RATES BY COURSE LEVEL (Undergraduate lower-division, undergraduate upper-division, and graduate).	The percentage of students who receive a passing grade (A, B, C, P) for all undergraduate students and (A, B, P) for graduate students in a course offered by a program compared to the same rate calculated for all courses at that level. Based on a 5-year trend. Included in the denominator for undergraduate courses are the grades D, F, W, I, NP, NB. Included in the denominator for graduate level are the grades C, D, F, W, I, NP, NB. Discipline acts as a proxy for a program. <i>Data source: RPTP end-of-term freeze files. Disaggregate as per accreditation.</i>	Low pass rates are one critical way to identify courses that are barriers to student success and degree completion. Failing key courses correlates with low retention and more major switching. Mitigation strategies can be internal or external to the course itself, including, among other things, the use of high-impact pedagogical practices, appropriate placement, course sequencing, tutoring, and other means to ensure student success within a particular course. This metric and the disaggregation of the data can inform planning, decision making, and the allocation of resources to programs and services designed to mitigate gaps in achievement and equity.

9. **Do you have any examples of post-graduate success you want to highlight? For example, major scholarships, the percent of students who pass licensure examinations, the percent of students accepted to graduate programs, the percent in post-graduation employment in the field or a related field. (750 characters or less)**

Our program continues to exhibit a 100 percent pass rate on the national certification exam.

Student job placement is high with more available jobs than graduates and employer satisfaction is 100 percent. For example, one student was hired at their practicum site before they had completed practicum rotation.

DEAN SECTION (Due to the program on January 15)

After completing the Dean Section and signing it, the dean should email this form to the program, and copy uaa_oaa@alaska.edu for posting. If the program is delivered on one or more community campus, the dean should consult with the appropriate community campus director(s) on the response and copy the appropriate community campus director(s) when emailing the response to the program.

1. **Based on the program's responses above, what guidance and support do you have for the program moving forward? Is there a particular area the program should focus on? (750 characters or less)**

The program is commended for its exemplary outcomes on the "ultimate assessment" of pass rates on the national certification exam. The program is also recognized for continuing to look for ways to improve, despite that excellent summative assessment. The inclusion of a range of quantitative and qualitative assessment tools, both formative and summative assessments, and input from both internal and external stakeholders provide well-rounded assessment data. Given the excellent program outcomes and the high industry demand for phlebotomists, the program is encouraged to explore ways to increase the reach of the program to more students. The dean's office is available to support these efforts.

2. **Is there something the program is doing particularly well in terms of its processes for the assessment and improvement of student learning, including the closing of equity gaps, that might serve as a model for other programs? If yes, please explain. You may skip this question. (750 characters or less)**

Dean's signature:



Date: 12/31/2021