

Present: K. Wills (Chair), R. Aaron, K. Alfrey, P. Altenburger, T. Banta, R. Bennett, K. Black, W. Crabtree, T. Davis, C. Gentle-Genitty, S. Graunke, M. Hansen, L. Houser, S. Hundley, S. Kahn, J. Lee, K. MacDorman, H. Mzumara, K. Norris, G. Pike, T. Roberson, M. Rust, C. Schuck, C. Toledo, C. Walcott, S. Weeden, W. Worley

K. Wills opened the meeting and asked for approval of the **September meeting summary**. No changes were suggested. She then asked for subcommittee reports. L. Houser said that she had received a small number of **proposals for PRAC grants** by the posted deadline of October 15. She asked if any member knew of additional proposals that were in process but not submitted by the deadline. Social Work representatives indicated that additional time to obtain a letter of endorsement from their dean would permit them to submit a proposal. Houser then offered to extend the deadline to October 31, with the understanding that the review committee would still be able to submit its recommendations for funding during the December PRAC meeting.

Banta noted that the IUPUI General Education Task Force again is accepting course proposals for the IUPUI General Education Core. Each course proposal must include student learning outcomes and specify how those will be assessed. She recalled that as the campus prepared for the 2012 accreditation review, three processes were put in place that should be helpful now:

- For every undergraduate course, faculty identified 1, 2, or 3 PULs to be emphasized.
- Faculty periodically rate the effectiveness of student achievement of the PULs having major or moderate emphasis in their course.
- Student learning outcomes for every degree program were archived on the Registrar's website.

Now the student learning outcomes for general education courses should be aligned with and contribute to the student learning outcomes for the major field and the PULs. The PUL assessment that is already underway in existing courses should be helpful in preparing the assessment component of course proposals for the General Education Core. Finally, course-level assessment findings will be helpful as faculty in each discipline make their overall assessment plans for the year and think ahead about the content of the annual PRAC report for their unit.

Banta introduced M. Hansen, P. Altenburger, and S. Kahn and invited them to share their own perspectives on assessment planning.

Hansen provided an overview of assessment basics, beginning with resources for assessment available at IUPUI. Then she discussed essential planning steps, including the suggestion that the "Planning for Learning and Assessment" matrix be used as a planning and reporting framework. Next Hansen presented the University College mission and key outcome measures, which include student learning, cognitive motivational and affective states (hope, self efficacy), academic performance, retention and graduation rates, successful transition to the major, and degree completion. She also discussed changes made based on assessment findings within University College. Her slides are attached.

P. Altenburger described the assessment plan for the three-year graduate professional program in physical therapy. Faculty have identified seventeen overall student learning outcomes of which a sample of five were presented. In 2004, student interviews and the national board exam in physical therapy provided the principal evidence of learning for the program. In 2009 Altenburger, who serves as chair of the Department of Physical Therapy, convened a faculty retreat for the purpose of reviewing the five learning outcomes and means of assessing them. The faculty identified clinical performance and cultural competence as two areas in which student achievement could be improved. They added a number of new measures for each student learning outcome, including clinical exams, exit interviews, a survey of graduates, and periodic classroom assessment questionnaires. They also implemented an electronic portfolio. In the capstone course students make digital videos that help to demonstrate their level of expertise in clinical settings. Altenburger's slides are attached.

S. Kahn distributed the rubric for evaluating PRAC reports that was used by the PRAC Report Review Committee last year. She briefly described the review process and invited anyone interested to join the group that has volunteered so far for this year. She noted that most of the rubric dimensions apply to both PRAC reports and assessment programs themselves, and offered some additional advice, based on last year's review, for PRAC reportwriting: the people responsible for assessment should be in communication with the person writing the report; the report should offer context for the benefit of readers (programs in the unit reported on, assessment cycle the unit uses, and so on); and sound assessment relies on both direct and indirect measures, but need not be quantitative or standardized. Finally, she suggested that reports be no longer than 15 pages—they should be summaries, with examples, not detailed accounts of all assessment conducted.