



MEDICAL UNIVERSITY OF SOUTH CAROLINA
OFFICE OF ACADEMIC AFFAIRS AND PROVOST
POLICY MEMORANDUM

		MEMORANDUM ID:	AA-2012-001-Institutional Effectiveness
TITLE:	Policy to Assess and Document Continuous Quality Improvement In MUSC's Academic Programs		
ORIGINATOR:	Office of Institutional Effectiveness	DATE:	September 5 2012
REVIEWED/APPROVED:	DATE: 9/17/12	SIGNATURES:	
VICE PRESIDENT OF ACADEMIC AFFAIRS AND PROVOST			
IMPLEMENTATION:		DATE:	
DISTRIBUTION:	COLLEGE-WIDE DISTRIBUTION		

Rationale

The Medical University of South Carolina has historically engaged in decentralized assessment and documentation of continuous quality improvement activities in its academic programs (i.e., degree-- and certificate-- granting programs). Standards of accreditation adopted by the university's accrediting agency and individual programs' professional accrediting agencies now specify that institutes of higher learning must provide evidence of a centralized, standardized, institution-- wide assessment process wherein academic programs (1) identify expected learning outcomes, (2) utilize valid measures to assess learning outcomes, (3) identify criterion values for each measure, (4) assess the extent to which the program achieves these outcomes, and (5) provide evidence of changes implemented to improve outcomes based on analysis of the data. This process needs to be both continuous and well documented.

A centralized, standardized process of continuous quality improvement will afford each program's faculty insight into how well the program is accomplishing its educational mission and alert programs to areas for improvement. Additionally, it will allow the university and individual academic programs to provide documented evidence of MUSC's commitment to continuous quality improvement and accountability to students.

Policy

All academic programs, defined as any program for which MUSC confers a degree or certificate to students who successfully complete the program, will develop and implement a standardized assessment plan in collaboration with the University's Office of Institutional Effectiveness. This plan will identify expected student learning outcomes, assess the extent to which the program achieves these outcomes, and provide evidence of improvement based on analysis of the results.

POLICY NAME:	Policy to Assess and Document Continuous Quality Improvement In MUSC's Academic Programs	
MEMORANDUM ID:	AA-2012-001-Institutional Effectiveness	PAGE 2 OF 2

Summary: All academic programs will conduct an annual assessment of student learning outcomes using a standardized assessment protocol approved by the Office of Institutional Effectiveness. Each program will document this process and the results from the process using the University's central accountability management repository administered by the Office of Institutional Effectiveness. Results will be updated by October 15 each year. Every three years, each academic program will review the results longitudinally with its faculty and other relevant stakeholders and identify changes made/ to be made to potentially improve student learning outcomes based on results. These changes will be documented in the University's central accountability management system.

The Office of Institutional Effectiveness will provide all academic program directors or their designee explicit guidelines and assistance in developing in a valid assessment process. The process begins with identification of student learning outcomes that are well defined and measurable. The outcomes must be linked to the program's curriculum. A curriculum map is encouraged but not required. Importantly, each learning outcome must be evaluated by at least two assessment measures, and at least one of these must be a direct measure of student learning (observable; objective). Thus, a map of learning objectives by assessment measures is necessary and required.

Criterion/target values must be identified for each assessment measure. Results on each measure must be collected and documented (e.g., percent of students in each cohort that met the target value). Target values should be set high—stretch targets that are reasonable and meaningful but not necessarily easily attainable.

Results should be documented for each academic year, where each academic program can specify the appropriate 12-- month period that best defines its academic year. Although the program may adopt changes to improve outcomes as often as it determines are needed, the program will engage in a longitudinal assessment of outcomes at least every three years, with a reported dissemination plan and final report for changes implemented to potentially improve student learning outcomes, thus providing evidence of "closing the loop."

Access

Academic Affairs policy AA-- 2012-- 001-- IE will be available from the Office of Vice President for Academic Affairs and Provost and from the Office of Institutional Effectiveness. It will be distributed digitally as an email attachment to all College Deans, Academic Associate Deans, and Academic Program Directors. It will be maintained on the Office of Academic Affairs website. The Director of the Office of Institutional Effectiveness will be responsible for monitoring and maintaining the policy. This memorandum is a public document and has no restriction on its distribution.