

This is the template for program assessment of data collected during 2023-2024 academic year. The template ensures that programs are planning for, collecting and analyzing, and engaging with assessment data.

1.D.4 The institution's **processes** and methodologies for collecting and analyzing indicators of student achievement are transparent and are used to inform and implement strategies and allocate resources to mitigate perceived gaps in achievement and equity.

1.C.7 The institution **uses** the results of its assessment efforts to inform academic and learning-support planning and practices to continuously **improve** student learning outcomes.

NWCCU Standards were updated in Jan. 2020 and include student learning outcomes, student success and achievement measures. Student achievement including, but not limited to, persistence, completion, retention, and postgraduation success. Such indicators of student achievement should be disaggregated by race, ethnicity, age, gender, socioeconomic status, first generation college student, and any other institutionally meaningful categories that may help promote student achievement and close barriers to academic excellence and success (equity gaps).

What you Did – The Plan

Section 1 – Program Mission

NWCCU's standards for accreditation require that institutions offer "programs with appropriate content and rigor that are consistent with its mission" (1.C.1.)

- **Program Mission:** The mission of the Bachelor of Science in Nuclear Medicine and Molecular Imaging Technology (NMMIT) program at Oregon Institute of Technology is to prepare students to be successful in the field of Nuclear Medicine and Molecular Imaging. To be successful, graduates must demonstrate knowledge and skills that will allow them to be competitive in accessing employment, maintain their skills and abilities when employed, successfully pass the national registry examination in Nuclear Medicine, Computed Tomography (C.T.) and/or Magnetic Resonance Imaging (MRI), and provide competent and compassionate care.
- To support the Mission of the Bachelor of Science in NMMIT program at Oregon Tech, the program faculty have incorporated several courses to the curriculum to competitively differentiate our graduates and enhance their ability to be competitive in accessing employment. These courses include Computed Tomography and Mammography.
- Faculty also develop and manage a cross section of clinical externship site opportunities for each student's fourth year of clinical training and education. These clinical externship opportunities are offered in a variety of geographical locations and hospital sizes to cater to diverse learning styles and to effectively network graduates to employment opportunities.
- Graduates from the NMMIT program secure employment in hospitals and clinics as working technologists in Cardiac clinics, general Nuclear Medicine departments, PET/CT and CT departments, and outpatient Radiology clinics. Some graduates go on to medical school, Physician Assistant school, or Graduate degrees in Business or Health Care Management. Within 5-10 years from graduation, many graduates take on additional

responsibilities within their organizations as clinical instructors, managers within Nuclear Medicine departments, or upper-level management.

- **Mission Alignment:** Virtually every lecture course within our curriculum incorporates a hands-on, often project-based learning environment attached to it. Students are often assigned a project or problem and given opportunities to work individually or as part of a team, to address the problem or project. Often, these projects involve students interacting with the appropriate equipment in the lab such as gamma cameras, computers, well counters, dose calibrators, and thyroid probes, to provide hands on learning to solve problems. These exercises are designed to develop problem solving and critical thinking skills necessary in our industry.
- The mission, objectives, and student learning outcomes for the NMMIT program are reviewed annually by the program and at the fall retreat during convocation. They are also reviewed annually by the Nuclear Medicine and Molecular Imaging Technology Advisory board.

Changes to the Mission: There were no changes to the mission this year. We were finally able to replace one of our non-functioning cameras in the Nuclear Medicine laboratory. This change will enhance our mission in a significant way. Students will now have at least one camera to perform hands-on procedures and apply didactic material in a hands-on environment.

Section 2 – Program Student Learning Outcomes

NWCCU's standards for accreditation require that programs must "culminate in achievement of clearly identified student learning outcomes." (1.C.1.)

- **PSLOs:**
- **PSLO #1.** The student will apply knowledge, judgement, and critical thinking when problem solving.
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- **PSLO #2.** The student will demonstrate ethical reasoning through a variety of scenarios in lecture and lab, and adherence to professional responsibilities identified on their Professional Evaluation performed at the end of each term.
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- **PSLO #3.** The student will demonstrate teamwork by contributing equally to team goals and interacting with peers and faculty in a respectful and supportive manner.
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- **PSLO #4.** The student will demonstrate effective communication with other students, staff, and faculty in a respectful manner and at an appropriate time.
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- **PSLO #5.** The student demonstrates emotional intelligence competencies when working with others.
- **Narrative Justification:**
- The current PSLOs listed above were last reviewed by the NMMIT program faculty fall 2024. The PSLOs were last reviewed by our Advisory Board at our Clinical Instructor Workshop in May 2024.
- The primary external validation our program uses are (2) surveys we conduct at the end of each academic year. These surveys are sent to our clinical externship sites. One survey is sent to the student who is completing their clinical externship and fourth year of training, and the second survey, almost identical, is sent to the student's clinical instructor. Within each survey, we ask the student and clinical instructor to evaluate to what degree the student demonstrated knowledge and ability in a variety of skills, including each ESLO and PSLO. As a program,

we not only look at individual responses by student and site, but we also look for trends with each ESLO and PSLO for all students.

In addition, we review our National Registry data updates each year from the American Registry of Radiologic Technologists (ARRT) and the Nuclear Medicine Technology Certification Board (NMTCB). The ARRT and NMTCB inform us of any changes to the didactic education and clinical education/training requirements for graduates from Nuclear Medicine and Molecular Imaging Technology programs. We review these updates to adjust our curriculum, clinical training, and PSLOs as necessary.

- **Narrative of Changes to PSLOs:**

The NMMIT faculty met fall 2023 to discuss the value and benefit of our listed PSLOs. The faculty reviewed our program student learning outcomes (PSLOs) and identified those PSLOs we deemed aligned most closely with our mission and objectives. There were no changes in the PSLOs for 2023-2024.

Section 3 – Curriculum Map

NWCCU’s standards for accreditation requires that programs must demonstrate “an appropriate breadth, depth, sequencing, and synthesis of learning” of student learning outcomes. (1.C.2)

- **Curriculum Map:** How are each of your program student learning outcomes (and institutional ISLO’s) supported and scaffolded throughout the program’s curriculum? About how long is completing the curriculum expected to take?

To address this, please complete this table with program’s curriculum map, with identification of how each PSLO and ISLO appears within the courses in the curriculum at the **Foundation** (Introduction), **Practice** (Reinforcement and Application) and **Capstone** (Synthesis) levels.

University	ISLO 1 – Communication	ISLO 2 – Inquiry & Analysis	ISLO 3 – Ethical Reasoning	ISLO 4 – Quantitative Literacy	ISLO 5 – Teamwork	ISLO 6 – Diverse Perspectives		
Program	PSLO4	PSLO 1	PSLO 2		PSLO3			PSLO5
COURSE								
Hum or Soc Science			F			F		
WRI 121, 122, SPE 111	F							
SPE 321	F				F			

CHEM 350								
PHY 217								
NMT 217 Patient Care	F	F	F			F	F	
NMT 215 Rad Pharm		F			F			F
NMT 205 NM Admin								
NMT 225 Instrument					F			
NMT 212 Rad Physics								
NMT 256 Cardiac								
NMT 311 Proc I	P	P	P		P			
NMT 312 Proc II			P		P			
NMT 367 PET				P	P			
BIO 346 Pathophys								
NMT 355 C.T.								
NMT 388 Extern Prep	P					P		P
NMT 325 Spect								
NMT 313 Therapy								
NMT 410 Externship	C	C	C	C	C	C	C	C

Section 4 – Assessment Cycle

In this section, please complete this table to show which courses (and, where known, what assignments) are used to assess all PSLO and ISLO in a cycle that is completed in a minimum of **three-years**.

Although some programs may have compelling reasons to adopt a different cycle, assessment of program learning outcomes should follow a three-year cycle, with the intention that improvements prompted by one year's assessment should be designed and implemented during the two years prior to the next scheduled assessment of that outcome. If an alternative cycle is adopted, a clear description of the activities occurring in each year of the cycle should be described.

The years listed in the report should include the year actions were carried out, the year data presented in the report was collected from and the current year planned for data collection.

Note: The next time this report is written, courses in the Act year should move to the Plan year.

		Act	Collect	Plan
ISLO	PSLO	2022-2023	2023-2024	2024-2025
Communication	PSLO 4	Indirect Student Exit Survey	Indirect Student Exit Survey	Indirect Student Exit Survey

		NMT 410	NMT 410	NMT 410 Direct Assessment
Ethics	PSLO 2	Indirect Student Exit Survey NMT 410	Indirect Student Exit Survey NMT 410	Moved to collection 2025-26
Teamwork	PSLO3	Indirect Student Exit Survey NMT 410	Indirect Student Exit Survey NMT 410	Indirect Student Exit Survey NMT 410 Direct Assessment
Diversity		Indirect Student Exit Survey NMT 410 Direct Assessment NMT 388 (2023)	Indirect Student Exit Survey NMT 410	Indirect Student Exit Survey NMT 410
Inquiry and Analysis	PSLO1	Indirect Student Exit Survey NMT 410	Indirect Student Exit Survey NMT 410 Direct Assessment	Indirect Student Exit Survey NMT 410
Quantitative Literacy		Indirect Student Exit Survey NMT 410	Indirect Student Exit Survey NMT 410 Direct Assessment	Indirect Student Exit Survey NMT 410
	PSLO5	Indirect Student Exit Survey NMT 410 Direct Assessment NMT 388	Indirect Student Exit Survey NMT 410	Indirect Student Exit Survey NMT 410

Section 5 – Assessment Data Collection Processes

NWCCU's standards for accreditation require that institutions engage in "an effective system of assessment to evaluate the quality of learning in its programs" that "recognizes the central role of faculty in establishing quality, assessing student learning, and improving instructional programs." (1.C.5.)

In this section, explain the rules for the sample collection process for student work that is to be evaluated this academic year. Include the following information:

- **Performance Target:** Specify the standard of success for number of students performing acceptably on the assignment that indicates that the course has met the outcome for the program. Example: *80% of students scoring 3 or higher*
- **Activity:** For the courses indicated by the curriculum map for collection and analysis of student data this year, name the activity. May include a description of the assignment in the appendix for continuity.
- **Sample:** List the number of student artifacts (number or percentage of class) were assessed in each activity.
- **Accountability:** Describe briefly who was involved in the scoring and how standards remained consistent across all graders.
- **Representation:** Ensure that samples are represented across multiple locations, modalities, or instructors if applicable.
- **Rubric:** Indicate the performance target for acceptable performance on the assignment for a single student. If not multiple-choice assignment, include a rubric for the grading in the appendix for the activity.

ISLO: Inquiry and Analysis <i>Direct</i> Assessment					
Inquiry and Analysis: NMT 388 Junior Level Course N= 16					
Performance Criteria	Assessment Method	Capstone Level/Minimal Acceptable Performance	Measurement Scale		2023-2024 Results
Investigate:	Inquiry and Analysis ESLO Rubric	80% of students score <i>Proficiency</i> or higher.	-High Proficiency -Proficiency -Some Proficiency -Limited Proficiency		100%
Support:					100%
Evaluate:					100%
Conclude:					100%

- **Performance Target:** At least 80% of students scoring "High Proficiency" or "Some Proficiency".

- **Activity:** This was an assignment given to junior level students in the NMT 311 course fall term 2023. The assignment asked students to view a number Nuclear Medicine and Molecular Imaging images critically and to: Investigate and examine images in Nuclear Medicine and Molecular imaging, Identify key patient history questions related to the studies/images viewed, observe the images for key, relevant pathology, and come to conclusions based on the pathology that lead the viewer to be done imaging, continue with more relevant imaging in the department, or consider other relevant imaging in other departments.
- **Sample:** 16/16 students completed this assignment. 100%.
- **Accountability:** The Program Director and NMT 388 course instructor, Rick Hoylman, graded each assignment.
- **Representation:** N/A.
- **Rubric:** NMT 311 Clinical Competency Evaluation Form.

ISLO: Quantitative Literacy Direct Assessment					
Quantitative Literacy: NMT 215 Sophomore Level Course N= 16					
Performance Criteria	Assessment Method	Capstone Level/Minimal Acceptable Performance	Measurement Scale		2023-2024 Results
Calculate: Perform mathematical calculations correctly and evaluate them.	Quantitative Literacy ESLO Rubric	80% of students score at least 14.4/18 on the NMT 215 Lab Practical Grading Sheet.	-High Proficiency -Proficiency -Some Proficiency -Limited Proficiency		100%
Interpret:					100%
Apply in Context:					100%
Communicate:					100%

- **Performance Target:** At least 80% of students scoring at least 14.4/18 on the NMT 215 Lab Practical Grading Sheet.
- **Activity:** This was an assignment given to sophomore level students in the NMT 215 course Winter term 2024. The assignment asked students to read
- **Sample:** 16/16 students completed this assignment. 100%.
- **Accountability:** The Program Director and course instructor graded each assignment.
- **Representation:** N/A.
- **Rubric:** NMT 215 Lab Practical Grading Sheet.

Section 6 – Assessment Data and Interpretations

1.C.6 Consistent with its mission, the institution establishes and assesses, across all associate and bachelor level programs or within a General Education curriculum, institutional learning outcomes and/or core competencies. Examples of such learning outcomes and competencies include, but are not limited to, effective communication skills, global awareness, cultural sensitivity, scientific and quantitative reasoning, critical analysis and logical thinking, problem solving, and/or information literacy.

1.D.2 Consistent with its mission and in the context of and in comparison with regional and national peer institutions, the institution establishes and shares widely a set of indicators for student achievement including, but not limited to, persistence, completion, retention, and postgraduation success. Such indicators of student achievement should be disaggregated by race, ethnicity, age, gender, socioeconomic status, first generation college student, and any other institutionally meaningful categories that may help promote student achievement and close barriers to academic excellence and success (equity gaps).

1.C.1 The institution offers programs with appropriate content and rigor that are consistent with its mission, culminate in achievement of clearly identified student learning outcomes that lead to collegiate-level degrees, certificates, or credentials and include designators consistent with program content in recognized fields of study.

1.C.9 The institution's graduate programs are consistent with its mission, are in keeping with the expectations of its respective disciplines and professions and are described through nomenclature that is appropriate to the levels of graduate and professional degrees offered. The graduate programs differ from undergraduate programs by requiring, among other things, greater: depth of study; demands on student intellectual or creative capacities; knowledge of the literature of the field; and ongoing student engagement in research, scholarship, creative expression, and/or relevant professional practice.

In this section, present the data for **2023-2024** academic year specific to the program.

Items included provide information that programs are meeting the above listed accreditation standards.

- All Programs have looked at their indicators of student achievement for trends and gaps in relation to external and internal comparators. Those indicators are defined as: Graduation, Retention, Persistence, DFWI, Post Graduation Success.
- All Programs have assessed student performance on established program student learning outcomes both directly, indirectly and to ensure that all modalities and locations offer consistent programming. Data presented should be disaggregated by modality and location offered and be compared to established targets of success.
- Bachelor's and Associates Programs have assessed student performance on established institutional learning outcomes according to the institutional assessment cycle. These Programs should list the student data collected directly and indirectly that demonstrates student performance on **Quantitative Literacy and Inquiry and Analysis**.
- Graduate level programs should present data that establishes student performance different than Bachelor's level programs such as the number of students engaged in research, scholarship, creative expression or relevant professional practice.

Note: Below is an example of how this data could be presented efficiently. Performance targets listed are examples not requirements. Each program should establish performance targets that are meaningful for programmatic improvement and based either on external comparators, internally provided data or some established mission specific programmatic goal. Assessment methods should include both direct and indirect methods. Results should specify location or modality depending on programmatic offering.

Performance Criteria	Assessment Methods	Performance Target	Results	Interpretation	Equity Gap?
ISLO: Inquiry and Analysis and PSLO #1	Direct: Assignments in Classes assessed Indirect: None	80% of students scoring Proficiency or Higher on the Clinical	100%	Yes	No

		Competency Evaluation Form			
ISLO: Quantitative Literacy	Direct: Assignments in class assessed. Indirect: None	80% of students scoring >14.4/18 on the NMT 215 Lab Practical Evaluation form	100%	Yes	No
Graduation Rate	University Dashboard	6-year rate >50%	89% (16/18 students)	Yes	No
Retention	University Dashboard	1-year rate >75%	89%	Yes	No
Post Graduation Success	Employment survey	6 months post-graduation employment >75%	89%	Yes	No
DFWI	Average Oregon College Rating for Math Departments	All program <12%	?	?	?

- Interpretation of Results: A narrative discussion may be included here of faculty impressions overall regarding what the data presented indicates about the quality of education and services in the program from the academic year presented. Questions to consider: Are all locations and modalities delivering the same level of quality? Are all types of students able to perform at expected levels? Does student performance on outcomes show growth as they progress through the curriculum? What is the student perspective of their own learning of the curriculum? How are students from your program perceived to perform in the workforce? Are there gaps in graduation or retention that can be linked to student outcomes performance within the curriculum?

All students at the Klamath Falls location (only location for our program) performed above expectations. Data reveals students meet or exceed expectations from Winter sophomore year to Fall of junior year on two different ISLOs. We did not perform Exit Interview surveys for this year of graduating students so we do not have data on their perspective of learning of the curriculum. However, we do maintain 100% success rate on the National ARRT registry examination in Nuclear Medicine and Molecular Imaging. This suggests these students have achieved a high level of demonstrated competency by an outside, registry/evaluative agency within our discipline that evaluates competency required by our industry for students to be successful.

Of the 16 students, I confirmed that 14/16 have part-time or full-time jobs. I do not have data on 2 students as they have not responded to my inquiries post-graduation. There are no gaps identified.

Evidence of Improvement in Student Learning

The evidence of improvement in Student Learning can be presented either in narrative or tabular format. It should include the following items:

- **History of Results:** Data from previous reports on this years' measured outcomes should be looked at for trends. If student performance met targets this year, has it always met targets or did something change to make it better? If student performance did not meet targets, is this an expected result because of a trend or something new that needs to be monitored over time? This section can be an explanation of the interpretations of the data

using historical context. Perhaps an outcome has low performance because of an environmental factor unrelated to the program. External sources of data can be useful in these types of interpretations. Or perhaps an outcome continues to have low performance due to an unmet resource need or an unimplemented action plan.

- **Evaluation of Past Actions:** Look back on the last time you assessed these outcomes in the cycle. Were there action plans implemented? How has this data changed because of programmatic changes made? Did your program implement something really successful? This is a place to highlight how you know it was successful. Did your program implement something that did not go well? This is how you show that it did not go well and may need to be re-evaluated. Does your program continue to lack a requested resource? This is a place where you can demonstrate the continued need.

Below is an example of table format.

Performance Criteria	Previous Action Plan	Previous Data	Current Data	Interpretation
PSLO1-ISLO2	None Indicated	100%	100%	No gaps identified
ISLO4	None indicated	100%	100%	No gaps identified
Graduation Rate	None Indicated	100%	100%	No change
Retention	None Indicated	70%	89%	Improved
Post-Graduation Success	Faculty deep dive evaluation of certification criteria.	93%	89%	More data needed
DFWI	None Indicated	%	%	

How are you using the data? – Action

Section 7 – Data-driven Action Plans:

NWCCU's standards for accreditation require that institutions "uses the results of its assessment efforts to inform academic and learning support planning and practices."(1.C.7.)

Describe actions that need to be taken in the coming year.

- Every program should, based on assessment data collected in 2023-24, identify at least one area to focus on for improvement during 2024-2025 academic year stemming from these assessment results. **Action plans** should be generated when:
 - Student Performance on an outcome is **below target**. Consider improvements both to PSLO and ISLO performance from student work product.
 - Equity Gaps of student success in the program are identified for a particular student group. Consider supports for specific student groups that may benefit progress through the program.
 - A need is identified through student perspective data or external evaluators.
 - Faculty want to explore something innovative in the program.
- **Action plan specifics** should be listed to ensure accountability within the process. Specifics include: timeline, accountable party, which outcome will be measured to determine success, resources needed for successful implementation.

Action plans should be presented in the format that will be best utilized in future by the program to evaluate the success of the actions planned. Example of how this may appear in the table below:

Action Driver	Action Taken /# students impacted	Accountable Person	Resources Needed	Outcome Measure
Make sure to implement Spring, exit interview surveys for students and clinical instructors (C.I.s).	This is complete.	Assessment Coordinator for NMMIT program.	None. Survey complete for subsequent year.	Survey results for students and C.I.s
Follow up with graduates with a non-OIT email address to identify employment after graduation.	This is complete.	Assessment Coordinator and Program Director.	Cooperation with graduates. This cannot be enforced.	Location and type of employment (FT, PT or per diem).

Section 8 – Closing the Loop: Reflection on previous work

NWCCU's standards for accreditation require that institutions provide evidence of "continuous improvement of student learning." (1.C.7.)

- **Discuss last year's Action Plans:** as listed in last year's Program Assessment Report. This may be a good point to report some new data on last year's outcomes if improvements are already apparent. Did you implement the changes you stated in previous years' program assessment report, why or why not? What were the barriers or successes? **None necessary.**
- **Discuss programmatic Improvements** that were not Assessment Driven: What changed in your program over the last year, how do you expect that to impact student outcomes performance? Were there external pressures that drove these changes? What data do you need to collect to help support decisions for improvements that you want for your program? **We were able to secure a replacement piece of equipment compared to the previous years. This has helped immensely for student, applied learning in the lab.**
- **Improvements in Assessment Process:** What improvements will be made to the assessment process? What indicated that this change should be made? How will they yield better, more actionable information? **Not applicable.**
- **Faculty Discussion:** Summarize takeaways from all data in this report regarding program performance. How, when, to who were results presented discussed by program faculty? May include meeting minutes from when faculty evaluated assessment data and other meetings where assessment data were presented in the appendix.
- **Results were shared with my colleague, Professor Bennett. There were no significant takeaways for our program. Students continue to perform at a high level on campus and this is evidenced further by high registry pass results and high full time employment at many of our clinical externship sites post-graduation.**

Section 9 – Executive Summary

Answer the following questions regarding activities in your program this past academic year:

1. What are the top 3 continuous improvements your program has made in the last year, and what evidence/data did you use to make those changes? (For example: hired faculty, purchased more equipment, curriculum changes, etc.) **We were able to purchase an equipment in the lab the was long overdue. Previous equipment was non-functional for many years having a negative impact on student learning in the applied lab environment. We were able to continue to retain an adjunct instructor as well.**
2. Provide 3 examples of student achievement in your program over the last year. (For example: graduation, persistence, retention, DFWI rates, presentations, participation in student competitions, etc.) **High graduation**

rates, High retention rates, High national registry exam pass rates, and high employment rates with most of those being full time and most of them at current clinical externship training sites affiliated with our program.

3. Provide 3 examples of student success stories for your program over the last year. (For example: job placement, published papers, paper or poster presentations, participation in student competitions, industry impact, etc.) **As stated previously, our program maintains high retention and graduation rates in addition to high registry pass rates and high employment rates.**
4. Describe your efforts so far in closing equity gaps in your program? How have you assessed and identified equity gaps? What does your disaggregated data show? What actions have you taken to help students achieve their potential (For example: project-based experiences, inclusivity exercises, TILT assignment instructions, etc.)? **We have not identified any gaps in equity. We have adhered to all Accommodation requests for student learning/testing. We have encouraged mentorship programs between the junior and sophomore classes and encouraged study groups and additional mentorship for students who are struggling with concepts or courses. We also have an MIT Readmissions committee that meets with students who go out of phase in the program to identify issues leading to failure and ideas for success if/when students are readmitted to a program. We use Professional Evaluations as a tool to give students feedback regarding progress and potential lack of progress issues and provide suggestions to improve. Students are automatically included in the NMT club and encouraged to participate in events that foster inclusion.**

Program Assessment Report Feedback Rubric

2023-24 Assessment Report

Program: Nuclear Medicine and Molecular Imaging Technology

Department Chair: Leah Jolly

Program Assessment Report Author: Rick Hoylman

Rubric Measure	Well Developed, Progressing or Not included.
Program mission is aligned to University Mission	x
Educational Objectives Wording is Actionable	x
PSLO's are justified by Professional Standards	x
PSLO'S are aligned to ISLO	x
Curriculum Map: Scaffolding indicates Foundational, Practice, and Capstone Assessments by course	x
Assessment Cycle is three years or less to cover all PSLO and ISLO	x
Actions taken by programs on assessment during each year of the cycle are specified	x

During collection year, courses/assignments are specified that align to PSLO at FP&C levels	x
Rubric: Criteria for grading the assignment is described (may include as an appendix)	x
Sample: Number of samples reviewed is specified	x
Accountability: Reviewer of the assignment are specified	x
Assessment data is collected across all locations and modalities	
Performance Targets of acceptability are indicated	x
Results include: Graduation, Retention, Persistence, DFWI, Post Grad Success, Equity Gaps, PSLO, ISLO	x
Interpretation: Current results are compared against performance targets	x
Interpretation: Current results are compared against previous years of data	x
Interpretation: Current results are compared against some external comparator	x
Action drivers: Items not meeting performance targets have actions planned	x
Action drivers: Additional action plans for overall department improvement are indicated	x
Action plans: Specifics of accountability and timelines are indicated	x
Action plans: Actions are linked to identification of resources needed	x
Faculty discuss trends in the data	x
Faculty discuss previous action plan success given new data	x
Faculty discuss the assessment process and make any improvements necessary	x

Directions: Please provide comments on any item that is not graded as well developed.