

2020 EPP Annual Report - Reviewer Feedback (Staff Review Report)

Section 1 AIMS Profile & Section 2 Program Completers

Overview: These sections ask for a yearly update to the EPP's electronic profile information and number of completers to ensure relevant communication and actions from CAEP.

Why are these sections important? The assurance of accurate profile information (including confirming up to five points of contact, identifying EPP characteristics, and detailing programs offered) are crucial to CAEP being able to get in touch with you, as well as being aware of EPP characteristics for research and site team assignment purposes, and accurate scrutiny of disaggregated data from relevant programs by Program Reviewers and/or site visitors and Accreditation Councilors. Additionally, completer counts are important to accurate billing for accreditation activities.

Why does CAEP ask for this information, and what do we do with it?

✓ **CAEP asks for current listings of contact persons** due to potential turnover at the EPP that may prevent the most relevant individuals from receiving essential information. As the contact information confirmed in the EPP Annual Report is used for official accreditation-related communications, the EPP should take the opportunity to list up to two "EPP Heads" and up to three "CAEP Coordinators" to facilitate a consistent flow of information to appropriate individuals. Individual identified "EPP Head" should have authority over the EPP. This contact may receive time-sensitive communications related to the accreditation of the EPP. The individual(s) identified as the CAEP Coordinator should have a role in managing accreditation activities and may be carbon copied on communications to the EPP head.

✓ **CAEP asks for current EPP Characteristics** to generate official accreditation documents, provide context for site visitors and Accreditation Councilors, allow for disaggregation of information by relevant demographics for research purposes, and ensuring adequate representation in formal and informal feedback efforts.

- **Basic Information.** This section includes information that CAEP uses to generate official accreditation documents, including mailing address and EPP name.

- **EPP Characteristics and Affiliations.** This section provides contextual information for better understanding the EPP and its work including types of licensure/degree programs at the initial-teacher licensure and/or advanced-level, EPP type consistent with Carnegie Classification, Professional Development School levels, Religious affiliation, admissions test(s), language of instruction, teaching majors, institutional/regional accreditation, institutional memberships, and off campus/branch campus(es)/distance learning/alternative certification programs.

✓ **CAEP asks for current EPP Program Listings** to ensure current information for all programs offered by the EPP that fall within CAEP's scope, as well as those covered by current NCATE or TEAC accreditation. Please review, update, and/or add each Program Name, Level, Certificate Level for Degree(s), and Program Category Fields.

✓ **CAEP asks for current EPP Program Completers** to generate accurate billing information, as the CAEP Annual Fee structure is based on the number of completers - for both initial-licensure and advanced-level programs - and scaled to support smaller EPPs.

1. [1.1] Is at least one individual listed for each available contact identity - EPP head and CAEP Coordinator - with email addresses that appear valid?

Yes No

2. [1.1 & 1.2] Based on information from the EPP's Information Page, Program Options page, EPP's link to its approved programs (as indicated in Section 1.2 of the EPP Annual Report), are there any apparent discrepancies?

Yes No

The EPP did not provide a link to its website to clearly demonstrate which Initial and/or Advanced Programs were part of the last accreditation review, as requested in Section 1.2 of the annual report. Please update the webpage and include the link on the 2021 Annual Report.

3. [2.1] Comparing the EPP's completer numbers from last year to this year, is there a discrepancy which may indicate a mistake?

Yes No

Section 3 Substantive Changes

Overview: If a substantive change occurred during the Academic Year of the present EPP Annual Report through the date of the submission of this report, the EPP should provide an explanation. The explanation should provide CAEP with information about the nature of the change, a rationale for the change, an implementation timeline, and other any other essential information. Substantive changes to be reported include changes in the published mission or objectives of the institution/organization or the EPP; in the legal status, form of control, or ownership of the EPP; addition of programs of study at a degree or credential level different from those that were offered when most recently accredited; 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; a contract with other providers for direct instructional services, including any teach-out agreements; that means the EPP no longer satisfies accreditation standards or requirement; in regional accreditation status; or in state program approval.

Why is this section important? Advising CAEP of substantive changes is one of the actions that must be taken to maintain accreditation or eligibility. Changes are reviewed to determine effects, if any, to accreditation status.

Why does CAEP ask for this information, and what do we do with it?

✓ CAEP, in accordance with Federal regulation (34 CFR Part 602 Subpart B (§602.22)), requires an EPP to inform CAEP of any changes to the educational mission, program, or programs of the EPP which may adversely affect the capacity of the EPP to continue to meet CAEP's standards. These changes must be communicated as part of the Annual Report or in a separate communication to the CAEP President, addressed to president@caepnet.org or the current mailing address for the organization. CAEP has the responsibility to determine what effect, if any, substantive changes would have on an EPP's accreditation

1. [3.2] Did the EPP indicate any change in the legal status, form of control, or ownership of the EPP?
 Yes No
2. [3.6] Did the EPP indicate changes in its regional/institutional accreditation status?
 Yes No
3. [3.7] Did the EPP indicate changes in its state approval status?
 Yes No

Section 4. Display of Annual Reporting Measures.

Overview: CAEP re-worked its approach to the Annual Reporting Measures. Instead of requesting data via a series of questions and CAEP-created standardized tables, CAEP has aligned its approach to CAEP Standards 4 and 5. In Section 4 of the 2018 EPP Annual Report, the provider is asked to publicly display data, pertaining to each of the Annual Reporting Measures (four of these measures are impact measures matching the four components of the CAEP Standard 4 for Initial-Licensure Programs and two of these match the two components of CAEP Standard 4 for Advanced-Level Programs), on the its website. This approach respects an EPP's context by allowing context-specific data collection and hosting in a manner of the EPP's choice, as long as the presented data are appropriate measures and are accurate.

Why is this section important? Having accreditation standards and policies that require EPPs "to routinely provide reliable information to the public on their performance, including student achievement," is central to maintaining CAEP's CHEA recognition, CAEP's role as an accreditor, and EPP's demonstration of accountability to stakeholders and provision of transparent information to potential candidates.

Why does CAEP ask for this information, and what do we do with it?

✓ The requirement to widely disseminate and display the Annual Reporting Measures is located in Components 5.4 and A.5.4 of the CAEP Standards and a part of CAEP Policy (Policies 6.01, on Annual Reporting, and 8.01, on Consumer Information). EPPs accredited under the NCATE standards or TEAC quality principles were required to publicly display candidate performance data in previous EPP Annual Report years. The updated Section 4 includes and builds from that approach by including the Annual Reporting Measures. In alignment with Component 5.4, providers are also asked to summarize the data and trends represented in the provider's Annual Reporting Measures, which allows EPPs to prepare for writing a self-study report and to use the EPP Annual Report as a repository and source for working toward Component 5.4. Site visitors and Accreditation Councilors review EPP Annual Report submissions in evaluating your EPP's evidence toward Component 5.4. Annual Report Reviewers flag exemplars of best practices of displaying these data to enhance the tips and exemplars to be included in next year's EPP Annual Report Technical Guide.

1. [4.1] Review Section 4 links

a. Link: <http://caep.uprag.edu/pcmas-teacher-certification-exam/>

- i. Does the above link work?
 Yes No
- ii. Are data publicly/prominently displayed?
 Yes No
- iii. Are measures displayed but not tagged?
 Yes No
- iv. Are data relative to measure number(s) indicated appropriate?
 Yes No

b. Link: <http://caep.uprag.edu/accreditation-evidences/>

- i. Does the above link work?
 Yes No
- ii. Are data publicly/prominently displayed?
 Yes No
- iii. Are measures displayed but not tagged?
 Yes No

If yes, please summarize issue.

Data regarding loan default rates (8) and graduation rates (5) can be found through this second link.

- iv. Are data relative to measure number(s) indicated appropriate?
 Yes No

c. Link: <http://caep.uprag.edu/accreditation-evidences/>

- i. Does the above link work?
 Yes No
- ii. Are data publicly/prominently displayed?
 Yes No
- iii. Are measures displayed but not tagged?
 Yes No

If yes, please summarize issue.

Same link as above - please reference comments above.

- iv. Are data relative to measure number(s) indicated appropriate?
 Yes No

d. Link: <http://caep.uprag.edu/accreditation-evidences/>

- i. Does the above link work?
 Yes No
- ii. Are data publicly/prominently displayed?
 Yes No
- iii. Are measures displayed but not tagged?
 Yes No

If yes, please summarize issue.

This link to evidence has been repeated in this report.

- iv. Are data relative to measure number(s) indicated appropriate?
 Yes No

e. Link: <http://caep.uprag.edu/accreditation-evidences/>

- i. Does the above link work?
 Yes No
- ii. Are data publicly/prominently displayed?
 Yes No
- iii. Are measures displayed but not tagged?
 Yes No

If yes, please summarize issue.

This link has been copied many times into the report.

- iv. Are data relative to measure number(s) indicated appropriate?
 Yes No

f. Link: <http://caep.uprag.edu/accreditation-evidences/>

- i. Does the above link work?
 Yes No

ii. Are data publicly/prominently displayed?

Yes No

iii. Are measures displayed but not tagged?

Yes No

If yes, please summarize issue.

This link has been copied many times into the report.

iv. Are data relative to measure number(s) indicated appropriate?

Yes No

2. [4.1] Are any measures missing across link(s) provided that should be present, according to the EPP's indication of offering program(s) leading to initial-teacher licensure and/or advanced-level programs [1.1 & 2.1]?

Yes No

If yes, please summarize issue.

It appears that the following measures are missing from the website: 1,2,3,4, and 7. To ensure compliance with CAEP requirements, the EPP needs to update and prominently display the information on its own website with complete data for all the annual reporting measure(s), as collected from academic year 2018-19, and send a confirmation to CAEP staff via email (eppannualreport@caepnet.org) by January 31, 2021.

3. Is display of data an example of best practice?

Yes No

4. [4.2] Does EPP narrative sufficiently address all question prompts?

Yes No

Section 5. Areas for Improvement, Weaknesses, and/or Stipulations

Overview: This section asks EPPs to report on progress correcting any Areas for Improvement, Weaknesses, and/or Stipulations cited during the most recent accreditation site visit.

Why is this section important? Any citations earned by EPPs at the most recent accreditation visit represent parts of accreditation standards or principles that were not demonstrated sufficiently according to expectations represented by such a designation. Therefore, rectifying these deficiencies is essential to the quality of the EPP and the integrity of accreditation. This section allows for the EPP's annual reflection on progress -looking toward addressing gaps sufficiently within the required time - and CAEP's monitoring of the EPP during the accreditation cycle between in-depth self-study submissions.

Why does CAEP ask for this information, and what do we do with it?

✓ Accreditation is a check on work EPPs do daily - not just every seven years. Therefore, CAEP's role as an accreditor, in general and as part of being recognized by CHEA, includes monitoring EPPs between site visits, particularly when accreditation standards were not fully met. Under CAEP, Areas for Improvement describe a weakness in evidence for a CAEP Standard and/or component that should be remediated by the end of the accreditation term, while Stipulations describe one or more systemic concerns or serious deficiencies in evidence for a CAEP Standard and/or component that must be remedied to continue accreditation. Accordingly, this section allows EPPs and CAEP to check-in on progress to prompt EPPs to hopefully have fully corrected any deficiencies by the time of the next review, if not sooner as these represent aspects of EPP's program(s) that hinder ensuring development of effective candidates to meet the needs of P-12 students. Further, EPP Annual Report Reviewers review progress and offer prompts, as appropriate to steer EPPs in productive direction.

1

CAEP: Stipulation (ITP) related to 3 Candidate Quality, Recruitment, And Selectivity

The EPP did not provide a written recruitment plan to document evidence and results. (component 3.1)

A review of the ever declining numbers of candidates that apply for admission into the program has led us to develop a recruitment plan that will positively impact those numbers in years to come. The program faculty, administrators, and stakeholders agreed on two phases of recruitment strategies that complement the strategies already in place, but also expand their reach. The discussions also yielded ideas for slight program changes that will also be implemented, such as access to more online core courses and direct contact between possible candidates and our current program candidates through a series of workshops, functions, and invitations to attend real classes. The objective of the listed strategies is to make us proactive and organized in our efforts rather than depend on what used to be effortless and effective. The program and its stakeholders realize that our survival lies in changing our approaches to fit the new tendencies and demographics of the future educator.

a. Please consider the following prompts as you continue to address deficiencies cited in relation to CAEP standards.

Stakeholder engagement

- How are you engaging stakeholders (**P-12 partners, academic and clinical faculty, staff, administrators, community members, candidates, and completers**) in this work?
- How are you engaging stakeholders (**particularly P-12 partners**) in this work?
- How are you engaging stakeholders (**particularly a coalition of EPP faculty - academic and clinical -, staff, and administrators**) in this work?
- How are you engaging stakeholders (**particularly candidates and completers**) in this work?
- How are these data shared with stakeholders?
- Progress monitoring**
- How are you monitoring and measuring progress?
- How do you/will you know the degree to which these changes result in improved outcomes?
- Leveraging data**
- How are you leveraging existing data sources to inform your effort(s)?
- How can the actionability of data be improved? (Actionable: Sufficiently detailed and relevant to directly indicate or clearly suggest a course of action. Information is actionable if it supplies the who, what, when, where, and why that allows one to determine how to change current practice(s) to achieve the intended goal.)
- What benchmarks or comparisons can you use to gauge your progress and add context?
- Integration/Triangulation**
- How does this effort complement existing initiatives?
- How do these data work with other information and assessment results in your quality assurance system?
- Do you see any opportunities for data triangulation/convergence in your quality assurance system?
- How are you using these data for program improvement?
- Assessment Quality**
- How does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?
- If you made modifications to a proprietary assessment, how have you re-evaluated validity?
- If you made a change to an EPP-created assessment, how does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?
- Other**
- Specify:

2

CAEP: Areas for Improvement (ITP) related to 4 Program Impact

The EPP has limited evidence of a plan to measure indicators of teaching effectiveness for its completers. (component 4.2)

At the moment we are still working on a Teacher Observation Classroom Tool (Marzano Framework), but it's been delayed due to COVID 19.

a. Please consider the following prompts as you continue to address deficiencies cited in relation to CAEP standards.

- Stakeholder engagement**
- How are you engaging stakeholders (**P-12 partners, academic and clinical faculty, staff, administrators, community members, candidates, and completers**) in this work?
- How are you engaging stakeholders (**particularly P-12 partners**) in this work?
- How are you engaging stakeholders (**particularly a coalition of EPP faculty - academic and clinical -, staff, and administrators**) in this work?
- How are you engaging stakeholders (**particularly candidates and completers**) in this work?
- How are these data shared with stakeholders?
- Progress monitoring**
- How are you monitoring and measuring progress?
- How do you/will you know the degree to which these changes result in improved outcomes?
- Leveraging data**
- How are you leveraging existing data sources to inform your effort(s)?
- How can the actionability of data be improved? (Actionable: Sufficiently detailed and

relevant to directly indicate or clearly suggest a course of action. Information is actionable if it supplies the who, what, when, where, and why that allows one to determine how to change current practice(s) to achieve the intended goal.)

- What benchmarks or comparisons can you use to gauge your progress and add context?

Integration/Triangulation

- How does this effort complement existing initiatives?
- How do these data work with other information and assessment results in your quality assurance system?
- Do you see any opportunities for data triangulation/convergence in your quality assurance system?
- How are you using these data for program improvement?

Assessment Quality

- How does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?
- If you made modifications to a proprietary assessment, how have you re-evaluated validity?
- If you made a change to an EPP-created assessment, how does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?

Other

- Specify:

3

CAEP: Stipulation (ITP) related to **4 Program Impact**

The EPP did not provide evidence that program completers contribute to an expected level of student learning growth. (component 4.1)

At the moment we are still working on a P-12 student interview/survey combination, but it's been delayed due to COVID 19.

a. Please consider the following prompts as you continue to address deficiencies cited in relation to CAEP standards.

Stakeholder engagement

- How are you engaging stakeholders (**P-12 partners, academic and clinical faculty, staff, administrators, community members, candidates, and completers**) in this work?
- How are you engaging stakeholders (**particularly P-12 partners**) in this work?
- How are you engaging stakeholders (**particularly a coalition of EPP faculty - academic and clinical -, staff, and administrators**) in this work?
- How are you engaging stakeholders (**particularly candidates and completers**) in this work?
- How are these data shared with stakeholders?

Progress monitoring

- How are you monitoring and measuring progress?
- How do you/will you know the degree to which these changes result in improved outcomes?

Leveraging data

- How are you leveraging existing data sources to inform your effort(s)?
- How can the actionability of data be improved? (Actionable: Sufficiently detailed and relevant to directly indicate or clearly suggest a course of action. Information is actionable if it supplies the who, what, when, where, and why that allows one to determine how to change current practice(s) to achieve the intended goal.)
- What benchmarks or comparisons can you use to gauge your progress and add context?

Integration/Triangulation

- How does this effort complement existing initiatives?
- How do these data work with other information and assessment results in your quality assurance system?
- Do you see any opportunities for data triangulation/convergence in your quality assurance system?
- How are you using these data for program improvement?

Assessment Quality

- How does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?
- If you made modifications to a proprietary assessment, how have you re-evaluated

validity?

- If you made a change to an EPP-created assessment, how does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?

Other

- Specify:

4

CAEP: Areas for Improvement (ITP) related to 5 Provider Quality Assurance and Continuous Improvement
There was limited evidence that the provider regularly and systematically assesses performance against its goals and relevant standards, tests innovations, and uses results to improve program elements and processes. (component 5.3)

The PPM UPRAg has never had a culture of research until now. Since this agency pointed out that we're supposed to regularly and systematically assess our performance and use the results of said assessments to improve program elements and processes, we have begun to collect and analyze data on a variety of areas. For example, candidate dispositions are now surveyed at each transition point and the data collected is compared and analyzed. In addition, the candidates have been creating electronic portfolios for continuous reflection that is built up in each core course they take until they finalize it at the end of their clinical practice.

a. Please consider the following prompts as you continue to address deficiencies cited in relation to CAEP standards.

Stakeholder engagement

- How are you engaging stakeholders (**P-12 partners, academic and clinical faculty, staff, administrators, community members, candidates, and completers**) in this work?
- How are you engaging stakeholders (**particularly P-12 partners**) in this work?
- How are you engaging stakeholders (**particularly a coalition of EPP faculty - academic and clinical -, staff, and administrators**) in this work?
- How are you engaging stakeholders (**particularly candidates and completers**) in this work?
- How are these data shared with stakeholders?

Progress monitoring

- How are you monitoring and measuring progress?
- How do you/will you know the degree to which these changes result in improved outcomes?

Leveraging data

- How are you leveraging existing data sources to inform your effort(s)?
- How can the actionability of data be improved? (Actionable: Sufficiently detailed and relevant to directly indicate or clearly suggest a course of action. Information is actionable if it supplies the who, what, when, where, and why that allows one to determine how to change current practice(s) to achieve the intended goal.)
- What benchmarks or comparisons can you use to gauge your progress and add context?

Integration/Triangulation

- How does this effort complement existing initiatives?
- How do these data work with other information and assessment results in your quality assurance system?
- Do you see any opportunities for data triangulation/convergence in your quality assurance system?
- How are you using these data for program improvement?

Assessment Quality

- How does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?
- If you made modifications to a proprietary assessment, how have you re-evaluated validity?
- If you made a change to an EPP-created assessment, how does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?

Other

- Specify:

5

CAEP: Areas for Improvement (ITP) related to 5 Provider Quality Assurance and Continuous Improvement
The EPP provided limited evidence of diverse stakeholder involvement in decision making, program evaluation and selection, and implementation of changes for improvement. (component 5.5)

We have held two meetings with stakeholders since we discovered our probationary status and are working on organizing virtual meetings this summer to work on the stipulations. Attendance lists are available on our website. Once we meet again to work on improvements and/or changes, those recommendations will also be added to the website

a. Please consider the following prompts as you continue to address deficiencies cited in relation to CAEP standards.

Stakeholder engagement

- How are you engaging stakeholders (**P-12 partners, academic and clinical faculty, staff, administrators, community members, candidates, and completers**) in this work?
- How are you engaging stakeholders (**particularly P-12 partners**) in this work?
- How are you engaging stakeholders (**particularly a coalition of EPP faculty - academic and clinical -, staff, and administrators**) in this work?
- How are you engaging stakeholders (**particularly candidates and completers**) in this work?
- How are these data shared with stakeholders?

Progress monitoring

- How are you monitoring and measuring progress?
- How do you/will you know the degree to which these changes result in improved outcomes?

Leveraging data

- How are you leveraging existing data sources to inform your effort(s)?
- How can the actionability of data be improved? (Actionable: Sufficiently detailed and relevant to directly indicate or clearly suggest a course of action. Information is actionable if it supplies the who, what, when, where, and why that allows one to determine how to change current practice(s) to achieve the intended goal.)
- What benchmarks or comparisons can you use to gauge your progress and add context?

Integration/Triangulation

- How does this effort complement existing initiatives?
- How do these data work with other information and assessment results in your quality assurance system?
- Do you see any opportunities for data triangulation/convergence in your quality assurance system?
- How are you using these data for program improvement?

Assessment Quality

- How does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?
- If you made modifications to a proprietary assessment, how have you re-evaluated validity?
- If you made a change to an EPP-created assessment, how does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?

Other

- Specify:

6

CAEP: Stipulation (ITP) related to **5 Provider Quality Assurance and Continuous Improvement**
The EPP does not have an articulated quality assurance system to collect valid data from multiple measures that monitors candidate progress, completer achievements, and provider operational effectiveness. (component 5.1)

We are in the process of validating all of our instruments.

a. Please consider the following prompts as you continue to address deficiencies cited in relation to CAEP standards.

Stakeholder engagement

- How are you engaging stakeholders (**P-12 partners, academic and clinical faculty, staff, administrators, community members, candidates, and completers**) in this work?
- How are you engaging stakeholders (**particularly P-12 partners**) in this work?
- How are you engaging stakeholders (**particularly a coalition of EPP faculty - academic and clinical -, staff, and administrators**) in this work?
- How are you engaging stakeholders (**particularly candidates and completers**) in this work?
- How are these data shared with stakeholders?

Progress monitoring

- How are you monitoring and measuring progress?
- How do you/will you know the degree to which these changes result in improved outcomes?

Leveraging data

- How are you leveraging existing data sources to inform your effort(s)?
- How can the actionability of data be improved? (Actionable: Sufficiently detailed and relevant to directly indicate or clearly suggest a course of action. Information is actionable if it supplies the who, what, when, where, and why that allows one to determine how to change current practice(s) to achieve the intended goal.)
- What benchmarks or comparisons can you use to gauge your progress and add context?

Integration/Triangulation

- How does this effort complement existing initiatives?
- How do these data work with other information and assessment results in your quality assurance system?
- Do you see any opportunities for data triangulation/convergence in your quality assurance system?
- How are you using these data for program improvement?

Assessment Quality

- How does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?
- If you made modifications to a proprietary assessment, how have you re-evaluated validity?
- If you made a change to an EPP-created assessment, how does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?

Other

- Specify:

7

CAEP: Stipulation (ITP) related to 5 Provider Quality Assurance and Continuous Improvement
The EPP does not have evidence that the quality assurance system relies on relevant, verifiable, cumulative and actionable measures that produces empirical evidence of data that are valid and consistent. (component 5.2)

We are in the process of making sure all of our measures follow these rules.

a. Please consider the following prompts as you continue to address deficiencies cited in relation to CAEP standards.

Stakeholder engagement

- How are you engaging stakeholders (**P-12 partners, academic and clinical faculty, staff, administrators, community members, candidates, and completers**) in this work?
- How are you engaging stakeholders (**particularly P-12 partners**) in this work?
- How are you engaging stakeholders (**particularly a coalition of EPP faculty - academic and clinical -, staff, and administrators**) in this work?
- How are you engaging stakeholders (**particularly candidates and completers**) in this work?
- How are these data shared with stakeholders?

Progress monitoring

- How are you monitoring and measuring progress?
- How do you/will you know the degree to which these changes result in improved outcomes?

Leveraging data

- How are you leveraging existing data sources to inform your effort(s)?
- How can the actionability of data be improved? (Actionable: Sufficiently detailed and relevant to directly indicate or clearly suggest a course of action. Information is actionable if it supplies the who, what, when, where, and why that allows one to determine how to change current practice(s) to achieve the intended goal.)
- What benchmarks or comparisons can you use to gauge your progress and add context?

Integration/Triangulation

- How does this effort complement existing initiatives?
- How do these data work with other information and assessment results in your quality assurance system?
- Do you see any opportunities for data triangulation/convergence in your quality

- assurance system?
 How are you using these data for program improvement?

Assessment Quality

- How does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?
 If you made modifications to a proprietary assessment, how have you re-evaluated validity?
 If you made a change to an EPP-created assessment, how does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?

Other

- Specify:

8

CAEP: Stipulation (ITP) related to **5 Provider Quality Assurance and Continuous Improvement**
There are no measures of completer impact that are externally benchmarked, analyzed, shared widely, or acted upon in decision-making related to programs, resource allocation, and future directions. (component 5.4)

We are in the process of developing a system that will allow us to more than comply with this stipulation and have started with the multiple meetings with Alumnni Association, Stakeholders, Advisory Board, Faculty and Candidates. Another improvement is the PPM UPRAg Website being revamped and made more visible within our UPR Aguadilla main site.

a. Please consider the following prompts as you continue to address deficiencies cited in relation to CAEP standards.

Stakeholder engagement

- How are you engaging stakeholders (**P-12 partners, academic and clinical faculty, staff, administrators, community members, candidates, and completers**) in this work?
 How are you engaging stakeholders (**particularly P-12 partners**) in this work?
 How are you engaging stakeholders (**particularly a coalition of EPP faculty - academic and clinical -, staff, and administrators**) in this work?
 How are you engaging stakeholders (**particularly candidates and completers**) in this work?
 How are these data shared with stakeholders?

Progress monitoring

- How are you monitoring and measuring progress?
 How do you/will you know the degree to which these changes result in improved outcomes?

Leveraging data

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 How can the actionability of data be improved? (Actionable: Sufficiently detailed and relevant to directly indicate or clearly suggest a course of action. Information is actionable if it supplies the who, what, when, where, and why that allows one to determine how to change current practice(s) to achieve the intended goal.)
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Assessment Quality

- How does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?
 If you made modifications to a proprietary assessment, how have you re-evaluated validity?
 If you made a change to an EPP-created assessment, how does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?

Other

- Specify:

Section 6. Continuous Improvement

Overview: In this section of the EPP Annual Report, EPPs no longer respond by accreditation pathway. Instead of responding to pathway requirements, all providers have an opportunity to share continuous improvement efforts and processes relating to the CAEP Standards.

Why is this section important? The prompts in Section 6 are aligned with Standard 5 and Component 5.3, allowing providers to use the EPP Annual Report to catalog data and narrative over time in a way that prepares the provider to respond to Component 5.3 in the self-study report. Component 5.3 provides a chance for EPPs to put data related to the rest of CAEP's Standards to work to systematically change programs to improve outcomes for candidates and ultimately the P-12 students they will serve. Not only is the application of appropriate data to make and monitor informed changes a requirement of CAEP's Standards, but it is also a regular behavior and value of high-performing organizations; noticeably, the Baldrige Criteria and improvement science research inspired Standard 5.

Why does CAEP ask for this information, and what do we do with it?

- ✓ Quality assurance systems and data-informed continuous improvement are essential, foundational requirements for CAEP accreditation. This section instantiates an ongoing culture of evidence, while allowing CAEP to see some of the work done between accreditation cycles. Further EPP Annual Report Reviewers identify models of data-informed improvement so that CAEP may further collaborate with the field to spread continuous improvement initiatives.

General organizational reflections prompts to guide your quality assurance and continuous improvement efforts (Created by the Carnegie Foundation for the Advancement of Teaching explicitly for EPP use in CAEP's Standard 5):

In the spirit of CAEP Standard 5, iteratively reflect on what are you trying, how are you inquiring about your change efforts, what have you learned, and what are you trying next?

- As you examine the outcomes you currently achieve (i.e., data on the first four standards), and identify gaps between current results and established standards, why is it that these results continue to occur?
- How do you understand the problem(s) you need to solve? And what inquiries have you engaged in to help clarify this problem analysis (e.g., data analyses that might inform sources of variation in performance; in-depth interviews with current participants and recent graduates a.k.a. user-centered empathy inquiries)?
- Based on your systematic problem analysis, what is your working theory of improvement? (e.g., what are the three to five places in your instructional system that are your high leverage improvement targets/drivers and what drivers (or areas for intervention) are thought to lead to improvements within them?)
- How has this working theory been tested? What changes have you tried and why did you focus here (looking for connection to relevant research evidence and working theory of improvement)? How do you (will you?) know if these changes are an improvement?
- More generally, as you cycle through your processes of continuous improvement (iteratively refining your theories based on the results of the changes made) what are you learning about your instructional system, and how has this helped you to refine your working theory of improvement?

Remember we often learn most from our failures. So, if relevant, what perhaps might you have tried, found evidence that it did not work as you intended, and what did you learn from this about what to try next?

1. [6.1] Please consider the following prompts

Stakeholder engagement

- How are you engaging stakeholders (**P-12 partners, academic and clinical faculty, staff, administrators, community members, candidates, and completers**) in this work?
- How are you engaging stakeholders (**particularly P-12 partners**) in this work?
- How are you engaging stakeholders (**particularly a coalition of EPP faculty - academic and clinical -, staff, and administrators**) in this work?
- How are you engaging stakeholders (**particularly candidates and completers**) in this work?
- How are these data shared with stakeholders?

Progress monitoring

- How are you monitoring and measuring progress?
- How do you/will you know the degree to which these changes result in improved outcomes?

Leveraging data

- How are you leveraging existing data sources to inform your effort(s)?
- How can the actionability of data be improved? (Actionable: Sufficiently detailed and relevant to directly indicate or clearly suggest a course of action. Information is actionable)

if it supplies the who, what, when, where, and why that allows one to determine how to change current practice(s) to achieve the intended goal.)

What benchmarks or comparisons can you use to gauge your progress and add context?

Integration/Triangulation

How does this effort complement existing initiatives?

How do these data work with other information and assessment results in your quality assurance system?

Do you see any opportunities for data triangulation/convergence in your quality assurance system?

How are you using these data for program improvement?

Assessment Quality

How does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?

If you made modifications to a proprietary assessment, how have you re-evaluated validity?

If you made a change to an EPP-created assessment, how does your assessment align with the sufficient-level criteria on the CAEP Evaluation Framework for EPP-Created Assessments?

Other

Specify:

a. Further clarification (optional)

2. Did the EPP indicate the willingness to share highlights, new initiative, assessments, research, scholarship, or service activities during a CAEP Conference or in other CAEP communications?

Yes No

Thank you for your willingness to share your EPP's continuous improvement efforts. EPP Annual Report Reviewers and CAEP Staff are reviewing these and will reach out and share as appropriate.

2.1 Is the continuous improvement initiative(s) described a particularly compelling example that would benefit other EPPs?

Yes No

2.2 Display Tagging from EPP AR.

3.1 Recruits and supports high-quality and diverse candidate pool

3.3 Monitors attributes and dispositions beyond academic ability

3.6 Candidates understand the expectation of the profession

4.4 Completer satisfaction

A.1.1 Candidate Knowledge, Skills, and Professional Dispositions

A.1.2 Professional Responsibilities

A.3.2 Candidates Demonstrate Academic Achievement and Ability to Complete Preparation Successfully

A.4.2 Satisfaction of Completers

Section 8: Preparer's Authorization

Overview: : The report preparer checks the box to affirm that they are authorized to complete the report by the and enters their name, position, phone number, and email address. The report preparer checks the box to acknowledge their understanding of the CAEP Policies pertaining to the EPP Annual Report.

Why is this section important? The final section of the report requests information on the report preparer and asks the preparer to affirm that he or she is authorized to complete the EPP Annual Report and demonstrate that he or she understands and agrees to CAEP's policy on data ownership, annual reporting, and misleading or incorrect statements.

Why does CAEP ask for this information, and what do we do with it?

✓ As submission of the EPP Annual Report is a condition of maintaining current accreditation or eligibility status, collecting the authorization of the preparer is needed to officially represent the EPP, as well as protect the EPP and CAEP. This section must be completed before the EPP Annual Report is officially submitted. CAEP visits this information if any questions of authenticity arise or to aid in contacting the EPP, if needed.

Comment:

Authorization Provided.