Assessment Report Summary
Program: Student Affairs

College of Charleston

Student Affairs

Campus Recreation

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

With respect to outcome 2, Student Employees' Work Characteristics, the change from the previous year saw the supervisory staff approach the year-end review with greater diligence given they understand that the year to year turnover for student staff is considerable. Working with a brand new group each year, and one with a measure of inexperience, the supervisors did not want to lose ground with the scores of the previous year. The supervisory staff did re-examine the training process but concluded no significant changes were to be made. The results of the current assessment show the new group of student employees scored similarly with that of the previous year. The training and work experiences did provide the student staff the needed impetus to improve on their initial scores from the start of the year as compared to their scores at the end of the year. These results support continuing a similar program of training to assist in the personal development of these behaviors.

Another change that was instituted for this cycle was to include the student staff in the evaluation process. The thought was the evaluation of their work performance should be more than a one-sided effort by a supervisor and that they also share a role in determining the outcome. It was expected that work experiences would permit them to develop an accurate appraisal of their work performance. The results did show that most were able to accurately appraise their work. One belief is that a sense of accountability occurred when the self-evaluation process was used. This idea merits further examination.

The assessment results provide an objective view of the same data that when paired with subjective assessments permit a better choice to be made. A good case in point is evaluating contracts related to services needed to operate the George Street Fitness Center. Making the decision to continue an $8000 preventive maintenance package is one where relying on this collected data permits a decision to be made with greater confidence. The subjective view would be yes purchase it, but using the collected data to look at it as a unit cost per visit it then becomes an easier decision to justify. Considering what equipment should be added falls into the same category as do decisions related to appropriate staffing levels at differing times during the operation of the facility.

From measure 3.2, the review of the maintenance and injury incident logs benefitted the program by providing a more efficient operation and of course one that is safer for the participants. Examination of this data suggests what risk management steps should be considered, possible training requirements, or even giving greater emphasis to certain areas during those training sessions. While a few instances do not make a trend, given the age group and dietary habits of this younger set, more attention will be directed to exercise-related syncope (fainting) through some educational opportunities such as flyers or “Did You Know?” surveys. Picking out clues from the data such as in this example can help shape the workshops that are offered.
Career Center

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

Despite not meeting the target for Outcome 1, Measure 1.1 (Electronic Hiring form), the Career Center view the implementation of the electronic hiring form as successful. As mentioned in the results, it has reduced the sheer volume of contracts being submitted and has streamlined the process for both the on-campus employers and the Career Center staff. Once the duplicated form for the graduate-level contracts is implemented, similar changes are expected. One issue this process brought to light is the challenge of accurately tracking the number of student employee contracts, which will be an area to review in the upcoming academic year.

The results of the Choosing A Major workshop evaluations validated the worthiness of continuing to provide the workshops for freshman and sophomores. Not only does it help the attendees feel more confident, but it also makes them aware of where the Career Center is located and that the Career Center is a resource and partner with the AAPC for help in choice of major, which could ideally result in their return for future assistance and referral of other students. The workshop committee continually evaluates the effectiveness of the format and materials used for this workshop, so realizing an adjustment of the post-workshop evaluation is needed was extremely valuable for future measure of student learning.

It was reassuring to learn that students indicated the Career Center's marketing efforts are adequate, especially after the concerted efforts in Spring 2016. However, the staff understands that as technology progresses, so does the myriad of social media outlets. This should be an on-going evaluation to make sure the Career Center is reaching as many students as possible in the various methods they prefer. As a result, the staff recognizes the need for designated staff to address the changing needs of marketing methods and frequency.

Civic Engagement Center

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

The Center for Civic Engagement’s (CCE) two-fold assessment strategy included the qualitative assessment of alternative break reflection journals, and extensive pre- and post- Qualtrics surveys. While this year was set to baseline, CCE found that student participants, on average, scored at the Milestone level on the AAC&U VALUE 4-point rubric, and regularly had statistically significant increases on the survey measuring student learning level outcomes along civic knowledge, civic skills, and civic values (please see attached survey results). Further, Bonner Leader program participants consistently scored higher on all assessment levels, on par with the expectations and learning goals of a four-year civic leadership program. CCE staff assessed data for the Spring 2016 semester and plan to use the same methodologies for the 2016-17 academic year, with particular attention to adapting the AAC&U 4-point VALUE rubric to better fit programming, revising reflection journal questions, and shortening the survey instrument.
Previous assessment strategies and cycles were based on the divisional goals of expanding programming, increasing diversity and retention efforts, and increasing experiential learning. CCE programming consistently and continues to meet those targets and goals. For instance, the Bonner Leader program has over 60 percent of its participants who are high financial need, first-generation, and/or students of color, with a four-year graduation rate for of over 90 percent. While we continue to hit those quantitative targets, CCE staff set a new baseline this year, based on the office mission statement, quality of programming, and what participants are learning, shifting to student learning outcomes. To that end, CCE staff are going to focus on increased training around civic skills, the lowest average of the three learning outcomes from the reflection journal analysis. As the CCE staff shares the results with constituents, further discussions of alternative break programming may include how more participants can move into the Capstone categories, and how this may involve tracking individual students through a range of experiences offered through the Center for Civic Engagement.

**Assessment Report Summary**

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

Completing this year’s assessment process revealed that both goals and measures are seen as valid and important ways to determine how CASAS is meeting its mission. With an abundance of student behaviors of interest, and multiple measures available this is very gratifying. Most, if not all, of the outcomes and measures selected will be carried forward into the next assessment cycle.

As mentioned above, it is hard to know which strategies for each of the three goals contributed to the results obtained from the measures used. However, CASAS will continue to use a multipronged approach to community education and therapeutic intervention.

Regarding outcome 1, Reducing Binge Drinking, this year was the first one there was a noticeable improvement in the target measure of binge drinking. This is encouraging and perhaps reflects the multidisciplinary and interdepartmental AoD working groups’ efforts to reduce student substance misuse. Since alcohol misuse is a significant problem on college campuses, and since College of Charleston students report more alcohol misuse than other colleges this goal and measure will continue to be monitored in future years. The increase in enforcement was documented and the numbers represent a new threshold.

Regarding outcome 2, Enhance Student Wellness, the crisis texting service has been very well received and utilized by students and a major contributor to the increased use of our Cougar Counseling Team volunteers over the last three years (2013-2014 - 40 students, 2014-2015 - 170 students—the year texting was introduced—and 2015-2016 - 224 students). As mentioned above, the Garrett Lee Smith SAMHSA grant ends but CASAS now has 2 staff certified in an evidence-based two-day suicide prevention training model, and 2 pursuing certification which will allow CASAS to continue a major part of its community capacity building to prevent suicide or other forms of self harm. With several studies showing increasing distress rates among college students, CASAS will continue to focus on training campus resources to recognize and refer students in distress, especially students with thoughts of suicide. The results demonstrate that the training currently coordinated by
CASAS enhances the confidence level within our campus partners to intercede when a student appears in distress.

Regarding outcome 3, Helping Students Reach Counseling SLOs, measure 3.1. the initial benchmark of 60% improvement proved to be too optimistic and will be revised to 50% for the next assessment cycle.

CASAS is extremely pleased with the student feedback both quantitative and qualitative on the care they received. Additionally, only 6% of students were referred to off campus resources. CASAS surveyed other college counseling centers to find a benchmark and the range of referrals off campus was 6% - 10%, and number of counselors available in each center and the overall student population was not able to be compared in this range. This goal and its measures will be carried forward since providing accessible, high quality counseling services is the foundation and cornerstone to the CASAS mission, and a range of studies show that students coming to college have pre-existing mental health disorders usually cited as 20%, and students need skills to cope with their emotions to help them be academically successful and persevere in college.

Dean of Students

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

The Office of the Dean of Students, and the assessment companion the Office of Victim Services, have executed evidence-based changes regarding the peer-facilitated presentations about sexual misconduct within the First-Year Experience (FYE). The training module for the FYE peer facilitators has been strengthened over three years, but not significantly changed, because the training effectively prepares peer educators to present on the topic of sexual misconduct. Three years of assessment results demonstrate that the presentations made during a Synthesis Seminar or a Beyond George Street Seminar effectively impact student learning (Outcome 3). A sizeable majority (over 95%) of the first-year student audience can recall the information introduced and earn a score of 80 or above on a post-presentation quiz. The students select correct answers with regard to definitions of key concepts, types of safe bystander intervention and the identification of a confidential resource. The Director of the Office of Victim Services states that since the initiation of this peer-led session more of her clients mention that they recall hearing about Victim Services in their FYE seminar.

The results for Outcome 2.2 record that the peer facilitators bring forth the required information and that this trend was maintained over three years. They adhere to the directions presented in the training module about covering key definitions (sexual assault, consent, stalking, etc.). They conform to the request to use more than one format or method of instruction in order to maintain audience engagement. A significant portion of the peer facilitators (over 75% across three years) respond that they feel comfortable presenting on the topics related to sexual misconduct.

The results for Outcomes 2.2, 3.1. and 3.2 reinforce that peer educators can effectively conduct presentations about sexual misconduct and that the current training module effectively prepares them for the presentations. No significant changes are planned with regard to the training or the
In reviewing the results for Outcome 1 some changes are necessary in the prevention education initiatives of the Office of the Dean of Students and the Office of Victim Services. The three topics of the campaign were identified by the Sexual Misconduct Committee and were linked to the results of the assessment plan and report for 2014-15 in that certain themes arose: 1) hold perpetrators accountable because they are likely to repeat the crime; 2) amnesty - victims will not get in trouble for using alcohol or drugs; and 3) confidential assistance is available. In that report it was uncovered that students who report do so for many reasons combined and not one alone. The first theme, especially, was derived from the 2014-15 results.

Outcome 1.1 indicates that the offices can marshal resources to create and disseminate posters and social media messages within a relatively short amount of time. The results from the Stakeholder interviews (Outcome 1.2) reveal, however, that a media campaign alone is not sufficient for Stakeholders to detect an enhanced awareness among the students they serve. Most of the Stakeholders did not believe that students possess awareness about the pattern of repeat offenders or that the campus policy grants victims amnesty for alcohol and drug use. The Stakeholders were upbeat and certain (90% of interviewees), however, about the high degree of student awareness about the confidential resources available on the College of Charleston campus.

These results will be shared with the Sexual Misconduct Committee to execute a more robust and multifaceted communication campaign regarding our sexual misconduct policy and facts about the causes of sexual misconduct. The 2016-17 assessment plan will include a project related to sexual misconduct prevention.

Disability Services

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s). The outcome that has continued for several cycles related to “online resource availability” for faculty, which includes other means of faculty education.

2014 saw the development of a “For Faculty” page on the CDS website. After a profoundly successful 2015 cycle in which web-based faculty resources were increased exponentially on the website, steps were taken during the current assessment cycle to scrutinize website utilization data and solicit feedback from faculty via a survey tool about website use. The limited information that was yielded from the survey due to low response rate requires CDS to find new means by which to obtain such feedback, and new means by which to convey faculty education.

Due to the other two outcomes in the assessment plan being new as of this academic year, their
results will be applied to departmental operations and built upon during the 2016-17 academic year.

Fraternity and Sorority Life

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

Many of our measures this year were set to baseline because it was the first year for assessing these items. The Office of Fraternity & Sorority Life was able to identify areas in need of improvement based on the Greek Community Standards results and has developed a new training process that will occur with the next set of officers focusing on the areas that chapters were lacking. The conduct training process is also being revised based on the areas that conduct board members scored lowest in the assessment. The assessment cycle for the upcoming year will hopefully reflect these changes with positive results moving students and chapters towards a greater understanding of accountability and chapter management processes.

Higdon Student leadership Center

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

The assessment data collected this year for three programs, Second Year Leadership Series (Outcome #1), Leadership CofC (Outcome #2), and the Institute by LeaderShape (Outcome #3), present a mixed bag of results. Each of the three outcomes included three separate measures. The Center is slightly disappointed in that not all of the measures produced desired results. For Outcome #2, one of the main reasons for this comes from the realization that the data collected throughout the year showed discrepancy between the instrument used and its correlation to stated learning goals. Secondly, the data was not critically analyzed in a timely manner, which did not allow the department an opportunity to amend the instrument before distribution. For Outcomes #2 and 3, some data results were affected for reporting purposes, because of various mistakes made in the implementation phase of collection. Examples include inaccurate records of attendance at events and oversight of staff members to distribute a prepared survey instrument.

Moving forward, the Center will address the issue of misalignment of the survey instrument and correlation to learning goals, by creating new instruments for program and pre/post surveys for the Leadership CofC program, Outcome #2. Another change the Center will implement for the next assessment cycle, is a quantitative driven question format more consistently, for all Outcomes.

There is positive growth reported, through at least one measure, for each of the three outcomes. For Outcome #1, the Center is able to show growth of learning through Measure 1.1, a survey that measured, through qualitative means, the participants’ self perception of increased knowledge, as a result of their participation in the program. Similarly, for Outcome #2, the Center is able to show growth of learning through two surveys (Measure
2.1 and 2.3), that qualitatively measured students' self-perception of increased knowledge. And lastly, for Outcome #3, the Center is able to show growth of learning through Measure 3.2., an instrument that qualitatively measured students' self-perception of increased growth and understanding, as a result of their participation in the program.

Additionally, the Center is able to show some comparison with data from the 2014-15 assessment cycle for Outcome #2 and #3. The important relevance of the data comparison for Outcome #2 is that it shows a greater increase of learning for the 2015-16 year compared to 2014-15. The Center believes this positive change is the result of program format and curriculum changes made that were more intentionally aligned with specific skill development. For Outcome #3, the comparison data of 2014-15 and 2015-16 is ambiguous; the Center can not delineate any significant programmatic changes that would explain the higher percentages seen in the 2015-16 data.

The Higdon Student Leadership Center assessment plan continues to support the Student Affairs goals of expand programming and increase experiential learning.

Multicultural Student Programs and Services

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

Analysis of previous years' data has resulted in a number of changes to the Mentoring Matters Program. In the 2011-2012 academic year, the Office of Multicultural Student Programs and Services implemented a campus-wide mentoring program to assist underrepresented students attending the College of Charleston. For the first four years of the program, the mentors for the program consisted of upperclassmen, staff, and faculty members.

Most student participants met with their mentors 2-3 times per month (21%), with a smaller number reporting meeting once a month (14%) and once a week (9%). One participant remarked, “Knowing that I could call or e-mail my mentor whenever I was having a difficult week made things easier knowing that someone was in my back corner.” Of concern is the fact that 16% (n=9) of the students said they had never met with their mentor. One student who had a faculty mentor noted, “He’s not always in his office. It’s annoying.” When cross tabulation was employed, eight of the nine students who never met with their mentor were matched with upperclassmen. A mentee shared, “My mentor did not respond to my attempts to contact her.”

As a follow-up, students were asked about communication outside the traditional face-to-face model of mentoring. Alternative methods of communication included phone calls, texting, and e-mail. The majority of students said their mentor was “always” available (55%) vs. those who said their mentor was “never” available (12%). A mentee shared, “We talked about everything together” while another noted, “[I liked]…having someone I could come talk to when things became overbearing.” Of the 19 mentees who had upperclassmen mentors, seven replied they were “never” available. Sixty-four percent of students with faculty or staff mentors felt they were “always” available.

In terms of efficacy of the mentor relationships, certain findings are of note. When broken out by type of mentor, those participants who had student mentors were less likely to answer in the affirmative, while those who had faculty or staff mentors were more likely to answer yes. Specifically, nine of the 19 students (47%) who had upperclassmen mentors rated the relationship as very ineffective, ineffective, or somewhat ineffective. One student maintained, “I couldn’t relate to my mentor at all.” Another noted “We could have met more and tried to get to know each other’s lives better.” In
contrast, 62% of student mentees with faculty or staff mentors reported the relationship as effective or very effective. A mentee communicated, “I believe my mentoring experience could have been improved if I was assigned an adult.”

Keeping the goal of the program in mind, the Office of MSPS decided to only allow faculty and staff members to serve as mentors for the 2015-2016 academic year. Additional program improvements include:

- Hosting a meet and greet reception for all participants to meet in person.
- Provided mentors with some additional training and resources.
- Required both mentor and mentee complete a Pre-program Evaluation. In the evaluation, both the mentor and mentee will state their expectations of the mentoring relationship.
- Required the mentors to submit monthly summary forms.
- Had all participants assess the program.

The Office of MSPS will use the data obtained from surveys related to the programs and services offered to the college community to assist the department in making improvements to the program. In turn, MSPS will also continue to monitor and assess the programs, services, activities, events and resources throughout the next academic year to determine what and how it can continue to facilitate the academic, social, and personal progress of the underrepresented students served.

Residence Life & Housing

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

The department was disappointed with the performance target results for outcome 1. The number of completed dossiers was significantly lower than the 100% completion rate goal. It should be noted that the software system (eRez) used to complete resident dossiers was newly introduced in the fall of 2015 and was not operational until after the staff training period. The results indicate a need for more staff training with the software system and more familiarity with how to use it effectively. Therefore, results will be used to adjust RA training sessions in the fall of 2016 to more thoroughly train staff on the system. Since the first six weeks are the most crucial for an incoming student in deciding whether to stay at the college, this initial contact with students in the residence halls is crucial to students feeling they have a connection to the college. In addition, dossiers. Dossiers not completed within the first three weeks will result in staff documentation.

The second outcome related to roommate contracts and the use of roommate contracts to improve communication among roommates. While the performance target of 100% completion for roommate contracts was not met, the results indicate that resident assistants understand the importance of this tool in resident communication. Staff training in the fall of 2016 will include a thorough review of how to use the software (eRez) that tracks roommate contract completion. A session on facilitation and confrontation was added to student staff training in the fall of 2015 and will be on the training schedule for fall 2016. The Residence Life staff documentation process will be implemented for any staff members not completing roommate contracts by the specified deadline.
The department was pleased with the results of outcome 3. The performance target of 50% retention for resident assistants was met. The department will look at ways to increase retention further. Focus groups are planned for fall 2016 to engage current resident assistants in feedback in a number of areas, including job satisfaction and how to increase it. The department is examining partnerships with other offices to recruit the most highly qualified candidates. It is the desire of the department not to just reach a minimum number in regards to GPA and conduct records but to set the standard even higher.

Student Health Services

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

Given that this year is a set to baseline year for all three of Student Health Services assessment programs, there have not been any changes that have been fully implemented to date. However, each of the plans; the Immunization Policy Awareness program, the LARC Awareness Program and the International Student Insurance program have indicated solid work to be done going forward.

Since SHS’s assessment of how many students voluntarily submitted immunization records demonstrates low (35%, n=3389) compliance, the need for action to address this issue is very apparent. Widespread immunization compliance is integral to the health and wellness of any population. The low percentage of completed health and immunization forms could potentially impair the College of Charleston’s ability to react to a campus outbreak in a timely and efficient manner, thus putting the campus community at risk. This particular assessment indicates a strong need for better outreach and communication to incoming students about the need to submit the appropriate forms. Additionally, communication with policy makers on campus to emphasize the importance of changes at the institutional level that incentivize students and parents to submit the appropriate information is imperative if there is hope of improving submission rates.

In the LARC Awareness assessment, the Women’s Health Research team and SHS internal staff plan to continue to work together using the 2015-2016 data to increase awareness, understand how students learn about the availability of contraception (both LARC and more traditional methods) on campus and improve accessibility to these services. The measures taken in the upcoming year will intend to inform the teams about what is successful and what does not seem to impact familiarity with family planning services at Student Health, thereby streamlining efforts for maximum impact.

And lastly, the Health Insurance and International Student assessment also uncovered a need for better education and accessibility to information in this population. SHS will partner with CIE to increase student survey participation rates, interjecting programs are earlier points in the academic year and adjusting survey techniques. Additionally, because the international health insurance plan and administering company will change next year, this will mean that SHS staff needs to be re-educated early in the academic year on the new insurance network and operation components of the plan. The information gathered as part of this year’s assessment also suggests a need to obtain a list of international students enrolled earlier in the school year to help facilitate any necessary specialty referral from SHS.
Student Life

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

The data collected during this assessment cycle will be extremely useful in the revision of the Student Life strategic plan, updating policies, procedures, and guidelines, refining the delivery of services and resources, and the thoughtful planning and execution of programs for the upcoming academic year.

Student learning outcomes associated with student employee experiences were assessed for the first time. Responses received to a locally-produced instrument indicated that student staff members felt more confident utilizing customer service-based communication skills as the period of their employment progressed. Additional comments noted that communicating with a supervisor was both new and empowering. As a result of the data collected, additional focus will be placed on life skills training in future orientation sessions and monthly staff meetings. Collaboration with the Career Center will also be explored to provide information and resources related to further development of life skills (financial planning, business communication) and marketing transferable skills gained in a cover letter, resume/vita and during an in-person interview.

Providing opportunities to allow students to make good choices related to healthy lifestyles and overall wellness is reflected in the College's strategic plan. Surveys related to late night programs offered during the two previous academic years indicate that students see these events as contributing positively to the CofC environment, make it easier to meet other students, and do not associate a negative stereotype with alcohol-free activities.

The majority of students that attended the annual Student Organizations Summit in September of 2015 felt that the presenters included were well-prepared and familiar with their material. While information offered was appreciated, the follow-up survey completed by attendees three months after the event demonstrated that students did not feel confident navigating the financial processes associated with using funds allocated to their student organizations.

The Stern Student Center and Student Life facilities experience high traffic and high use by students, faculty and staff members and off-campus organizations. While reservations for use of facilities continues to increase (due to the number of registered student organizations and the lack of other available campus venues that can accommodate large groups), it was surprising to see that more faculty/staff reservations were confirmed during the spring 2016 semester than those received from student groups. Completed guest surveys indicated that student life facilities met or exceeded user needs and customer service levels were also high. Set-up crews performed tasks efficiently and effectively, adding to the overall customer experience. Usage data showing a continued increase in reservations (both submitted and confirmed) support the need for additional meeting and programming spaces on-campus and will support Student Life strategic planning and fundraising efforts.
Technical Support

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

For the 2015-2016 assessment cycle there were two outcomes which focused on operations in Technical Support. It should be noted that for the 2016-2017 assessment cycle, Technical Support will be absorbed as a function under the Office of the Executive Vice President rather than an individual area.

The tests for Web Page Accessibility with a screen reader on the selected pages predating earlier versions of prescribed content management software produced solid results in the pass rates of 58 of 59 tested, with the one failing page corrected on the same day as tested. For the Technology Coordinator to run these older pages through the JAWS screen reader also provided a reality check of what a sight-impaired individual could potentially miss if non-text images are not properly identified. Also the fact that pdf documents will appear only after downloaded and opened was also proven. While the current version of the content management system software will prompt web page maintainers to add tags to non-text images now and going forward, this accessibility requirement and experience will be highlighted in a brief quick reference training document to be made available to all web page maintainers and web page content managers (department directors) for fall 2016-2017.

The tests for Brand Manual Standards compliance revealed that approximately 5% of the 424 web pages across 15 areas of the division required corrections for brand standards (21 pages) and similarly, 5% had broken links within the content (26 pages). The Technology Coordinator maintains department web pages for 6 of the 15 areas of the division as the primary maintainer and generally is the back-up maintainer for the others, and this was the first time a concerted effort was made to measure the instances of corrections required of all 424 division web pages at the main page and second page level, including those maintained by 9 other division members. Going forward, quarterly testing of all division webpages at these levels will be planned, and semi-annual tests for subsequent levels. In addition, while 1-on-1 training by the Technology Coordinator is always offered and accessible to department web page maintainers, and while such corrective action is often discovered during page updates or revisits, the components to be checked for brand manual compliance will be highlighted in a brief quick reference handbook to be made available to all web page maintainers and web page content managers (department directors) for fall 2016-2017 to be used as an instructional/review tool.

The surveys for Social Media Presence in the Division, namely, the EVP Student Affairs Facebook Page and for Department Social Media Presence in Facebook, Instagram, Twitter and blogs will help to explore further the value and/or use of these communication methods for connecting with the students in conjunction with the accepted and best practices for officially sanctioned social media accounts, and possibly for considering training or a review of formats and expectations for brand manual compliance to the account administrators.
Upward Bound

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

Objective 1

ACT scores did not improve over prior year.

GPA increased slightly.

Need to go back and enter data properly because it was not for 2013-2014 cycle.

Objective 2

Regarding success/proficiency in core subjects (English, Math, Science, Foreign Language) a more rigorous review of students' progress reports (via PowerSchool) and semester grades will be implemented to determine percentage that have achieved at least the equivalent of 2.5 or higher in each class (81, numerically).

No prior data is available because assessment of subject-area effectiveness was not conducted prior to this cycle. This information has heretofore not been examined, with a focus moreso being on passing classes and overall GPA.

Objective 3

No improvement from 2014 to 2015 cohort; slight reduction in graduation percentage for 6-year period.
As stated in use of results, more intentional follow-up and outreach needs to occur with most recent graduates of the program, with contacts recorded; a minimum of one to two "touches" per former student per semester is the initial goal. It must be noted that the cohorts being examined at this time completed Upward Bound prior to the present grant cycle and arrival of current staff.

Victim Services

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

The Office of Victim Services and our assessment companion the Office of the Dean of Students, have executed evidence-based changes regarding the peer-facilitated presentations about sexual misconduct within the First-Year Experience (FYE). The training module for the FYE peer facilitators has been strengthened over three years, but not significantly changed, because the training effectively prepares peer educators to present on the topic of sexual misconduct. Three years of assessment results demonstrate that the presentations made during a Synthesis Seminar or a Beyond George Street Seminar effectively impact student learning (Outcome 3). A sizeable majority (over 95%) of the first-year student audience can recall the information introduced and earn a score of 80 or above on a post-presentation quiz. The students select correct answers with regard to definitions of key concepts, types of safe bystander intervention and the identification of a confidential resource. The Office of Victim Services has observed that since the initiation of this peer-led session more of their clients mention that they recall hearing about Victim Services in their FYE seminar.

The results for Outcome 2.2 record that the peer facilitators bring forth the required information and that this trend was maintained over three years. They adhere to the directions presented in the training module about covering key definitions (sexual assault, consent, stalking, etc.). They conform to the request to use more than one format or method of instruction in order to maintain audience engagement. A significant portion of the peer facilitators (over 75% across three years) respond that they feel comfortable presenting on the topics related to sexual misconduct.

The results for Outcomes 2.2, 3.1. and 3.2 reinforce that peer educators can effectively conduct presentations about sexual misconduct and that the current training module effectively prepares them for the presentations. No significant changes are planned with regard to the training or the session content.

In reviewing the results for Outcome 1 some changes are necessary in the prevention education initiatives of the Office of the Dean of Students and the Office of Victim Services. The three topics of the campaign were identified by the Sexual Misconduct Committee and were linked to the results of the assessment plan and report for 2014-15 in that certain themes arose: 1) hold perpetrators
accountable because they are likely to repeat the crime; 2) amnesty - victims will not get in trouble for using alcohol or drugs; and 3) confidential assistance is available. In that report it was uncovered that students who report do so for many reasons combined and not one alone. The first theme, especially, was derived from the 2014-15 results.

Outcome 1.1 indicates that the offices can marshal resources to create and disseminate posters and social media messages within a relatively short amount of time. The results from the Stakeholder interviews (Outcome 1.2) reveal, however, that a media campaign alone is not sufficient for Stakeholders to detect an enhanced awareness among the students they serve. Most of the Stakeholders did not believe that students possess awareness about the pattern of repeat offenders or that our campus policy grants victims amnesty for alcohol and drug use. The Stakeholders were upbeat and certain (90% of interviewees), however, about the high degree of student awareness about the confidential resources available on the College of Charleston campus.

These results will be shared with the Sexual Misconduct Committee to execute a more robust and multifaceted communication campaign regarding our sexual misconduct policy and facts about the causes of sexual misconduct. The 2016-17 assessment plan will include a project related to sexual misconduct prevention.