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Article 14

What Does “Excellence” Look Like?: Program Evaluation and Outcomes Assessment in College Counseling

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Across higher education, increasing expectations of accountability have called on practitioners to demonstrate the effectiveness and impact of their work. “Assessment in higher education primarily responds to two forces: external demands for accountability and internal commitments to improvement” (Keeling, Wall, Underhile, & Dungy, 2008, p. 1). Through the evaluation of programs and the assessment of student learning and development outcomes, practitioners can begin to respond to expectations, but more importantly, they can determine whether and to what extent programs achieve their goals and whether students learn and develop in intended ways.

There are a variety of approaches to determining quality in higher education. Some look to rankings or ratings, like the U.S. News and World Report annual rankings. While these do provide some information, there is significant debate about whether the data used for comparisons really reflects the quality of the student experience. Licensure and certification convey that individuals have achieved a level of competence in their area of practice, but this does not address the program in which they work or the student outcomes of their work. Accreditation of institutions or of specific programs involves the application of externally-determined standards and the involvement of an external agency in evaluating achievement of criteria. In some situations, this is both effective and desirable, as in the accreditation of counseling centers/services by the International Association of Counseling Services (IACS). However, some counseling centers may not choose to be accredited, may not meet the necessary criteria to do so, or may not have the required financial resources. In situations such as these, other standards of practice and a self-assessment approach are particularly useful. A self-assessment philosophy, rather
than an externally-validated accreditation, may also fit better with some institutions’ preferred approaches to program review.

Assessment, according to Upcraft and Schuh (1996), is “any effort to gather, analyze, and interpret evidence which describes institutional, departmental, divisional, or agency effectiveness” (p. 18). They argue for a broad understanding of assessment, one that focuses on understanding experiences and information in the aggregate, rather than at an individual level. Evaluation is “any effort to use assessment evidence to improve institutional, departmental, divisional, or agency effectiveness” (Upcraft & Schuh, 1996, p. 19). Program evaluation explores whether the program or service is functioning effectively to achieve its mission and how it can be improved. It is necessary to have assessment evidence available to support the determination; documentation of the basis for judgments is essential to the process. Further, a complete assessment cycle requires a description of how the evidence is used to make program decisions. Such a comprehensive plan includes assessment of programs and services and of student outcomes; outcomes are one element of a program evaluation.

Outcomes assessment explores the effect of our work on students. It focuses on how they are different as a result of interacting with our programs and services. To assess outcomes effectively, we need to develop measurable learning and development outcomes and design strategies through which we can document change in students.

In the counseling literature, the term “assessment” more often refers to the evaluation of an individual with the goal of determining degree of mental health or pathology. College counselors are well schooled in the techniques necessary for conducting this kind of assessment; however, they often have not had comparable training in the skills and tools needed to assess either the quality of their services or the learning and development that students experience as a result of their work. As a vital service on campus and an integral element of support for students, it is imperative that college counselors become adept at this kind of assessment. By doing so, they can not only respond to institutional requirements for program evaluation and outcomes assessment, but they can also demonstrate the quality and impact of their services in an environment where increasing scrutiny and shrinking resources can make campus programs vulnerable to downsizing or outsourcing. Program evaluation and outcomes assessment have become important competencies for those who work across higher education, including college counselors.

In addition to the skills needed to conduct assessment and evaluation, college counselors also need to be familiar with tools and materials that are designed to aid in this work. The materials developed and promulgated by the Council for the Advancement of Standards in Higher Education (CAS, 2009) are created specifically for this purpose. CAS is a consortium of professional associations from across higher education that come together to create and disseminate standards of practice and to encourage self-assessment. Now more than 30 years old, CAS has published standards for more than 40 functional areas, as well as for master’s level graduate preparation programs in student affairs. The CAS materials provide a tool for practitioners to use to assess the quality of their services and to consider student outcomes. This paper focuses on helping college counselors understand the CAS materials, their uses for self-study and assessment of counseling services, and the assessment of learning and development outcomes.
Council for the Advancement of Standards

CAS is an organization of 40 member associations (including ACCA, the American College Counseling Association) from student service areas throughout higher education, committed to quality assurance. CAS has established standards and guidelines for multiple functional areas of higher education programs and services; they are designed to describe “good practice” and to provide direction and strategy for professional practice. The CAS standards and guidelines are developed and approved through a collaborative process involving the entire board of representatives. The fundamental principles underlying the work of CAS are derived from theories and models in human development, learning, and administration (CAS, 2009). Further, CAS ascribes to a set of values that are infused throughout the standards:

- Students & Their Institutions: The whole student is shaped by environments that provide learning opportunities reflective of society and diversity, with students having ultimate responsibility for learning
- Diversity & Multiculturalism: Institutions embracing diversity and eliminating barriers with justice and respect for differences, binding individuals to community
- Organization, Leadership, & Human Resources: Quality of leaders possessing sound preparation is essential, with success directly correlated to clarity of mission
- Health Engendering Environments: Education prospers in benevolent environments that provide students with appropriate challenge and necessary support
- Ethical Considerations: Educators exhibit impeccable ethical behavior in professional and personal life

Each set of CAS functional area standards is structured using the same 14 component parts: mission, program (including learning and development outcomes), leadership, human resources, ethics, legal responsibilities, equity and access, diversity, organization and management, campus and external relations, financial resources, technology, facilities and equipment, and assessment and evaluation. Thus, there is comparability across standards for various functional areas, which facilitates use of the CAS standards for a division-wide self-assessment. Further, embedded within each set of standards are the General Standards (CAS, 2009, pp. 31-35); these are standards that are essential in every area and appear verbatim in each set of standards. For example, the statement “Programs and services must develop, disseminate, implement, and regularly review their mission” (CAS, 2009, p. 31) applies regardless of the area being considered. The functional area-specific standards, such as those that pertain only to counseling services, comprise the rest of the document and address issues specific to each area, e.g., “The mission of counseling services is to assist students to define and accomplish personal, academic, and career goals” (CAS, 2009, p. 179).

The “CAS standards” are actually comprised of two types of statements: standards and guidelines. Standards are designed to reflect “an essential level of practice that, when met, represents quality performance. CAS standards use auxiliary verbs ‘must’ and ‘shall’ presented in bold print” (CAS, 2009, p. 406). A guideline is
a statement that clarifies or amplifies professional standards. Although not required for acceptable practice, a guideline is designed to provide institutions with suggestions and illustrations that can assist in establishing programs and services that more fully address the needs of students than those mandated by a standard. Guidelines may be thought of as providing guidance in ways to exceed fundamental requirements, to approach excellence, or to function at a more optimal level. CAS guidelines use the auxiliary verbs “should” and “may.” (CAS, 2009, p. 405)

For example, for Counseling Services, the following is a standard: “Counseling services must maintain a physical and social environment that facilitates optimal functioning and insures appropriate confidentiality” (CAS, 2009, p. 185). It represents an element that is required for good practice, regardless of institution type, circumstances, or size of the counseling service. The guideline that follows, however, represents the next level of preferred practice: “CS [counseling services], when feasible, should be physically separate from administrative offices, campus police, and judicial units” (CAS, 2009, p. 185). In some settings, especially small colleges or community colleges, the available facilities or the philosophy of the unit (i.e., “one-stop shop”) is such that it is not possible to have physically separate space. Even in that case, however, the expectation is that the staff will work to create an environment that facilitates the work and maintains confidentiality.

Taken together, the CAS standards and guidelines offer practitioners a benchmark of national standards against which to measure their programs and services. To facilitate the use of the CAS materials for self-assessment, CAS also publishes the Self-Assessment Guides (SAGs). These are documents available for every area in which standards are published; they translate the standards into a workbook format designed to help structure the work of a review committee. By breaking the standards into criterion statements to be measured on a rating scale, the SAGs assist in a self-study process.

**Program Review Process**

Whether conducted as a unit project for program development, as part of an institutional program review cycle, or as part of self-study related to accreditation, the program review process has certain elements in common. Sometimes called program evaluation, the purpose is to take a systematic look at all elements of a program or service to determine whether it is achieving its mission and accomplishing its goals. Although the charge to conduct program review may be connected to an expectation for accountability, the primary goal is to make evidence-based decisions about continued program planning and development and to identify areas for improvement. By using program review as part of a comprehensive assessment plan (Upcraft & Schuh, 1996), a sequence is established that leads to what is commonly called “closing the loop,” or demonstrating that data gathered has been used as the basis for making decisions about how to change or improve the program.

It is important to identify clearly the purpose and scope of the program review. In any case, the process should be fair and systematic, but knowing the purpose and understanding the final audience and use of the report is crucial in shaping the process.
An effective program review is structured to ensure objectivity and integrity in the process and results. Making judgments that are clearly evidence-based is part of that process, but careful consideration must also be given to the membership of the review team and the process used. While the review team may have members from the unit being studied, the group should be chosen intentionally and strategically to provide for multiple perspectives and potentially to develop allies among those who learn more about the area. CAS recommends that the chair of the review committee come from an area outside the unit being studied to ensure objectivity in managing the process. In situations where division units are on a cycle of program reviews, a useful model is to identify a chair from the area next to undergo review. In this way, the chair learns more about the process and so can better prepare for the upcoming review; anxiety is lessened and appreciation for the process is increased. A question often asked is whether the director of the unit should serve on the committee; it may be more helpful to have that person serve as a consultant to the committee in the early stages of its work, assisting with the gathering of documentation. Since the final program review is likely to be submitted to the director, it is more appropriate that that individual not serve as a member of the review team. For a single-area program review, a team of three to five individuals is usually sufficient, depending on the size and scope of the counseling service.

Once the team has been identified, it is important to take time to train them. In addition to training on the program review process itself, it is important to provide the opportunity for the team to come to agreement on what constitutes an acceptable level of achievement. If the program review process is using the CAS SAGs, the group needs to spend time becoming familiar with the rating scale and how they will apply it.

**Assembling Documentation**

Gathering the information to support raters’ judgments is a crucial part of the process. Much of the material needed is typically available in existing data and current materials. Both quantitative and qualitative data are useful, in addition to information such as annual reports, organizational charts, and staff resumes that contain essential information. Assembling documentation in anticipation of a program review facilitates the work of the review team and accelerates the process.

Existing evaluative evidence may be found in places such as student handbooks, staff training and procedural manuals, operational policies and procedures, brochures and websites describing services available, organizational charts, budget reports, strategic plans, and staff activity reports. Qualitative data may include focus group information, summaries of responses to open-ended questions on evaluations or follow-up studies, client satisfaction surveys, individual client assessments of progress, and solicited and unsolicited comments from students, faculty, staff, parents, and other constituents. Quantitative data may be gathered from evaluations of individual programs, survey data, information regarding demand for services, numbers of student clients and demographic information, needs assessment data, follow-up studies, institutional research reports, or institutional fact books. Campuses are data-rich environments, and information may be available in other units or divisions. Identifying sources of existing institutional data can be invaluable in assembling appropriate documentation for a program review process.
Team Tasks

Once team training is complete and documentation has been assembled, each member of the team should work through the Self-Assessment Guide, using the documentation provided to support judgments about each of the criterion statements to be rated. The task is to decide whether the criterion is not met, minimally met, well met, or fully met. Two other possible ratings are ND, meaning Not Done, and NR, meaning Not Rated. ND is used only in cases where the item represents a function that is not within the scope of the unit being evaluated. NR is used where sufficient documentation is not available on which to base a rating. The SAG also offers overview questions for each section of the standards and guidelines to gather broader perspectives on the functioning of the area.

The work forms provided at the end of the Self-Assessment Guides lead the team through assembling all of the ratings, identifying areas of agreement and of discrepancy, determining appropriate follow-up, and developing an action plan to guide implementation of the recommended changes. Without completing these forms to translate findings into action plans, the program review is not complete, and the “loop” is not closed. The last step of the review is to report the findings to the appropriate party so that the action plan can be put into practice. Depending on the purpose of the program review, it may be more effective to have the team report strengths, discuss discrepancies, identify areas for improvement, and list areas needing further documentation; these can then be shared with the unit director so that the action plan can be developed by the staff responsible for implementation. The important consideration is not what CAS or any other external entity considers to be “right,” but rather what will be most productive and effective for the staff involved.

Learning and Development Outcomes

While standards of practice are directed toward operational and programmatic issues, CAS also includes the identification and measurement of student learning and development outcomes as a necessary element for a high-quality program or service. Current expectations for accountability tend to emphasize outcomes assessment; however, it is important to remember that a comprehensive assessment plan will include assessment of both program and individual outcomes. Program outcomes are those that relate to program goals; for example, if a counseling center strives to provide services to both residential and commuter students, then a program outcome to be measured would be the percentage of student clients from each group. This does not reflect anything about the change effected in the students themselves; it can, however, demonstrate the extent to which the percentages reflect the institution’s profile for residency and the success related to reaching both residents and commuters. Intended learning and development outcomes are those that have been targeted by the counseling center as desirable for students to attain as a result of participation in programs and services. These may be very specific, as in the example of a workshop on assertiveness, or very broad, as in a goal that student clients will enhance their intrapersonal development.

CAS has identified six learning and development outcome domains (CAS, 2009, pp. 26-28):
Knowledge acquisition, construction, integration, and application
Cognitive complexity
Intrapersonal development
Interpersonal competence
Humanitarianism and civic engagement
Practical competence

Additionally, CAS has delineated more specific dimensions within each domain to assist practitioners in developing intended outcomes for their work. While any functional area is expected to support all of the outcome domains through its work, each unit is expected to identify the domain or domains that are most salient to its practice and to focus its outcomes assessment on those. Specifically, the standards require that a unit must promote student learning and development outcomes, identify relevant and desirable outcomes, assess those outcomes, provide evidence of their impact on student learning and development, and articulate how they contribute to or support student learning and development in the other domains (CAS, 2009, p. 31).

Counseling services have a particular challenge when it comes to the identification and measurement of outcomes. While this is feasible in relation to outreach programming, workshops, training (e.g., for resident assistants), and similar targeted activities, it is much more difficult to structure in terms of individual clients. One way to do this is to ensure that counselors are working from a model that includes setting goals with clients or using structured assessments at the outset of counseling. Given this baseline, progress toward mutually identified outcomes can be measured both formatively and summatively. Outcomes can then be coded or categorized to reflect domains or broad topics and can be reported in aggregate to protect confidentiality. Depending on the context, there are multiple ways of measuring outcomes. Surveys, questionnaires, and other forms of self-report are indirect measures, but since counseling often focuses on the subjective state of the client, these may have more relevance in a counseling context. Direct measures include observations, reflective journals, and pre/post-assessments. For programmatic interventions, focus groups or interviews may also be used.

Regardless of whether the focus is program or learning and development outcomes, it is important to map the desired outcomes to the institutional mission, division mission and goals, and department division and goals. Only by mapping these linkages among levels can practitioners ensure that their work is contributing to the achievement of desired outcomes at higher levels of the organization. Using measured learning and development outcomes is similar to using the results of program reviews; it is crucial that the information gathered through outcomes assessment is used in making decisions about how to enhance or improve services.

Conclusion

The question of what “excellence” looks like is relevant regardless of one’s area of practice; practitioners want to do good work that benefits students and want to be able, when called on, to demonstrate that their work makes a difference. The current era of accountability too often casts a negative light on assessment, seeming to suggest that it is something to be done out of self-defense. Assessment, however, is not an after-thought or
a force field designed to deflect critics; rather it should be a vital part of how we build our programs and services, how we manage them, and how we learn to improve them. It is not enough simply to believe that we offer good services; we must discover whether they are accomplishing the desired results, and assessment is the process by which we can do that.

Practitioners throughout higher education work hard and generally strive to be good stewards of increasingly scarce resources. Counselors work to juggle case loads, wait lists, requests for programs, administrative work, and crisis response. The work can be difficult to report on, since so much of it is confidential in nature. Assessment can seem like just one more thing being added to an already long list of work tasks. However, assessment can also be an effective tool in the quest to demonstrate effectiveness, document outcomes, and make the case for additional resources.

Practitioners not yet engaged in assessment practice may ask where to start. The answer is simple: Start small, start do-able, start narrow, start targeted… but start. Start with one program, one workshop, one desired outcome, or one measurement tool. In assessment, as in the therapeutic process itself, progress begins with just one step, and that step, in turn, leads toward excellence.

References


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