2020 EPP Annual Report

CAEP ID:	10352	AACTE SID:	1841
Institution:	Lewis-Clark State College		
Unit:	Division of Education		

Section 1. EPP Profile

After reviewing and/or updating the Educator Preparation Provider's (EPP's) profile in AIMS, check the box to indicate that the information available is accurate.

1.1 In AIMS, the following information is current and accurate...

	Agree	Disagree
1.1.1 Contact person	⦿	○
1.1.2 EPP characteristics	⦿	○
1.1.3 Program listings	⦿	○

1.2 [For EPP seeking Continuing CAEP Accreditation—applies to CAEP eligible EPPs] Please provide a link to your webpage that demonstrates accurate representation of your Initial Licensure and/or Advanced Level programs as reviewed and accredited by CAEP (NCATE or TEAC).

Section 2. Program Completers

2.1 How many candidates completed programs that prepared them to work in preschool through grade 12 settings during Academic Year 2018-2019 ?

Enter a numeric value for each textbox.

2.1.1 Number of completers in programs leading to initial teacher certification or licensure[1]

> 48

2.1.2 Number of completers in advanced programs or programs leading to a degree, endorsement, or some other credential that prepares the holder to serve in P-12 schools (Do not include those completers counted above.)[2]

> 0

Total number of program completers 48

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[1] For a description of the scope for Initial-Licensure Programs, see Policy 3.01 in the Accreditation Policy Manual

[2] For a description of the scope for Advanced-Level Programs, see Policy 3.02 in the Accreditation Policy Manual

Section 3. Substantive Changes

Have any of the following substantive changes occurred at your educator preparation provider or institution/organization during the 2018-2019 academic year?

3.1 Changes in the established mission or objectives of the institution/organization or the EPP

3.2 Any change in the legal status, form of control, or ownership of the EPP.

3.3 The addition of programs of study at a degree or credential level different from those that were offered when most recently accredited

3.4 The 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

3.5 A contract with other providers for direct instructional services, including any teach-out agreements

Any change that means the EPP no longer satisfies accreditation standards or requirements:

3.6 Change in regional accreditation status

3.7 Change in state program approval

Section 4. Display of Annual Reporting Measures.

Annual Reporting Measures (CAEP Component 5.4 | A.5.4)	
Impact Measures (CAEP Standard 4)	Outcome Measures
1. Impact on P-12 learning and development (Component 4.1)	5. Graduation Rates (initial & advanced levels)
2. Indicators of teaching effectiveness (Component 4.2)	6. Ability of completers to meet licensing (certification) and any additional state requirements; Title II (initial & advanced levels)
3. Satisfaction of employers and employment milestones (Component 4.3 | A.4.1)	7. Ability of completers to be hired in education positions for which they have prepared (initial & advanced levels)
4. Satisfaction of completers (Component 4.4 | A.4.2)	8. Student loan default rates and other consumer information (initial & advanced levels)

4.1 Provide a link or links that demonstrate data relevant to each of the Annual Reporting Measures are public-friendly and prominently displayed on the educator preparation provider's website.

1

Link:	https://www.lcsc.edu/education/reports/
Description of data accessible via link:	Click PDF from bottom item, "CAEP Annual Reporting Measures" to see: 1 & 2. Measures of Completer's Impact on Student Growth & Teaching Effectiveness 3. Satisfaction of Employers 4. Satisfaction of Completers 5. Graduation Rates 6. % Completers Licensed 7. Hiring Rate 8. Other Consumer Information

Tag the Annual Reporting Measure(s) represented in the link above to the appropriate preparation level(s) (initial and/or advanced, as offered by the EPP) and corresponding measure number.

Level \ Annual Reporting Measure	1.	2.	3.	4.	5.	6.	7.	8.
Initial-Licensure Programs	✔	✔	✔	✔	✔	✔	✔	✔
Advanced-Level Programs		☐	☐	☐	☐	☐	☐	☐

4.2 Summarize data and trends from the data linked above, reflecting on the prompts below.

> *What has the provider learned from reviewing its Annual Reporting Measures over the past three years?*
> > *Discuss any emerging, long-term, expected, or unexpected trends? Discuss any programmatic/provider-wide changes being planned as a result of these data?*
> > *Are benchmarks available for comparison?*
> > *Are measures widely shared? How? With whom?*

Our completers measured with the Tripod 7C's earn average of B+ from their students in their first year of teaching - we believe this is a great outcome.
Case studies by completers under the SAHE grant indicate that our candidates understand and achieve in terms of objective-based student outcome improvement.
We see from completer and employer survey responses that our candidates would benefit from more diversity and ENL education. We struggle to envision how we can improve these substantively given our regional and resource situation.
Our response rates from completers and employers needs improving, and we have personalized requests which has improved them slightly, but we are stuck on how to improve them because of lack of resources to dedicate to the usual marketing-style means (Human Resources to call, email, cajole, repetition, other reward structures) to improve the return rates any more.

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

Summarize EPP activities and the outcomes of those activities as they relate to correcting the areas cited in the last Accreditation Action/Decision Report.

NCATE: **Areas for Improvement related to Standard 2 cited as a result of the last CAEP review:**

| 1. | **The unit has not systematically compiled, summarized, or analyzed candidate assessment data on a regular basis to inform unit decisions.** | **(ITP)** |

To address this concern and to meet CAEP's injunction in Standard 2.3 to have "multiple performance-based assessments," we have created, validated, conducted reliability measures, and implemented an EPP created Performance-Based Assessment that accounts for State, In-Tasc, and CAEP requirements and is structured similarly to existing performance-based instruments in having four separate evaluated sections: (1) Planning, (2) Performing (3) Assessing, and (4) Reflecting. The instrument is implemented two times for each candidate, once in their penultimate clinical experience, and once in clinical internship, so it functions as a growth measure. It is evaluated by two separate faculty evaluators, and the cooperating teacher serves as an additional evaluator for the performing section. The pilot implementation of the instrument was Fall 2019, the first collection of data comprehensively was supposed to be this Spring 2020, though the exigencies of the pandemic have forced us to cut back on the reliability aspect of two evaluators, and the actual conditions for the interns to complete the instrument are problematized. We are doing our best to keep the outcomes coherent and meaningful.
In addition, we have become more data-driven in our requirements for program acceptance and continuance for candidates. We have updated test requirements for entry and track GPA and single course requirements to promote between phases.
We have turned the portfolio into a program-long, growing requirement rather than merely an assembly during clinical internship. This allows course inputs and assessment over the length of each candidate's participation in the program, and viewing portfolio outcomes speaks meaningfully to unit-wide decisions rather than merely as evaluations of clinical internship.

NCATE: **Areas for Improvement related to Standard 4 cited as a result of the last CAEP review:**

| 1. | **Candidates have limited opportunities to interact with diverse candidates.** | **(ITP)** |

{note re. statement - should read "interact with diverse students"}
We have met our State's requirements to resolve this issue by being sure that our candidates systematically are placed in schools experiencing SES diversity, particularly high percentage poverty. This is the only possibility for assured clinical experiences with diverse students, because our surrounding districts are over 90% from a single ethnic/racial heritage, and the 10% are largely concentrated in one district on the New Perce reservation, which welcomes our candidates, but cannot possibly serve as a site for all of them in any given semester.

Section 6. Continuous Improvement
CAEP Standard 5

The provider maintains a quality assurance system comprised of valid data from multiple measures, including evidence of candidates' and completers' positive impact on P-12 student learning and development. The provider supports continuous improvement that is sustained and evidence-based, and that evaluates the effectiveness of its completers. The provider uses the results of inquiry and data collection to establish priorities, enhance program elements and capacity, and test innovations to improve completers' impact on P-12 student learning and development.

CAEP Standard 5, Component 5.3
The provider regularly and systematically assesses performance against its goals and relevant standards, tracks results over time, tests innovations and the effects of selection criteria on subsequent progress and completion, and uses results to improve program elements and processes.

6.1 Summarize any data-driven EPP-wide or programmatic modifications, innovations, or changes planned, worked on, or completed in the last academic year. This is an opportunity to share targeted continuous improvement efforts your EPP is proud of. Focus on one to three major efforts the EPP made and the relationship among data examined, changes, and studying the results of those changes.

- Describe how the EPP regularly and systematically assessed its performance against its goals or the CAEP standards.
- What innovations or changes did the EPP implement as a result of that review?
- How are progress and results tracked? How will the EPP know the degree to which changes are improvements?

The following questions were created from the March 2016 handbook for initial-level programs sufficiency criteria for standard 5, component 5.3 and may be helpful in cataloguing continuous improvement.

- What quality assurance system data did the provider review?
- What patterns across preparation programs (both strengths and weaknesses) did the provider identify?
- How did the provider use data/evidence for continuous improvement?
- How did the provider test innovations?
- What specific examples show that changes and program modifications can be linked back to evidence/data?
- How did the provider document explicit investigation of selection criteria used for Standard 3 in relation to candidate progress and completion?

- How did the provider document that data-driven changes are ongoing and based on systematic assessment of performance, and/or that innovations result in overall positive trends of improvement for EPPs, their candidates, and P-12 students?

The following thoughts are derived from the September 2017 handbook for advanced-level programs
How was stakeholders' feedback and input sought and incorporated into the evaluation, research, and decision-making activities?

A Division Chair and Assistant Chair from outside the institution were hired in Fall of 2017, and the faculty saw a 50% turnover between then and now; six of the professors in a Division of 12 (counting the chair and asst.) are new between then and now. They inherited an EPP with few documented protocols and no comprehensive group decision making about the curriculum or the candidates.
Since that time, we have improved the application process for candidates and the data provided to make candidate admission decisions by the faculty in meeting. We include data on the faculty as evaluators of candidate materials to check ourselves for reliability.
We have created a quick dispositions recording system to track dispositions of candidates across their program so that we are not promoting candidates into internship who have a critical mass of basic concerns accruing while they are students.
Our secondary team used survey data and interviews with recent completers to change course structure so that the general methods course and the content-methods courses were co-requisite, allowing them to share clinical hours, which has created a single, fifty hour clinical experience possibility so that the candidates have a much better clinical experience in which they can actually get to know a teacher, a class, and teach within it in the semester or year before their clinical internship.
The change noted in the prior question re. introduction of a Performance-Based Assessment instrument, serves as a central tool in CIP development. The outcomes should point us to where we are strong and where challenges exist for us to overcome in candidate preparation.
Revising our test score requirements to meet CAEP averages catalyzed discussion and decision-making around entry requirements overall.
To meet CAEP 4.1, we have initiated a completer mentoring program. Of course, participation is voluntary, so our 'n' so far is not high, but it yields data on both objective attainment by the completers' students and results of a Tripod 7 C's survey by each completer's students, both of which we use to determine how we are doing in preparing teachers.
We are on our way. Given that such an overhaul takes time, and that we value and wish to preserve some of the 'small-town' elements of our caring program, it is slow going to get to a comprehensive CIP.

Tag the standard(s) or component(s) to which the data or changes apply.

2.1 Partners co-construct mutually beneficial P-12 partnerships
2.3 Partners design high-quality clinical experiences
3.1 Recruits and supports high-quality and diverse candidate pool
3.2 Sets selective admission requirements
3.3 Monitors attributes and dispositions beyond academic ability
3.4 Creates and monitors candidate progress
3.5 Candidate positive impacts on P-12 students
4.1 Completer impact on student growth and learning
5.1 Effective quality assurance system that monitors progress using multiple measures
5.2 Quality assurance system relies on measures yielding reliable, valid, and actionable data.
5.3 Results for continuous program improvement are used

Upload data results or documentation of data-driven changes.

6.2 Would the provider be willing to share highlights, new initiatives, assessments, research, scholarship, or s activities during a CAEP Conference or in other CAEP Communications?

○ Yes ◉ No

6.3 Optional Comments

Section 7: Transition

In the transition from legacy standards and principles to the CAEP standards, CAEP wishes to support a succe
transition to CAEP Accreditation. The EPP Annual Report offers an opportunity for rigorous and thoughtful r
regarding progress in demonstrating evidence toward CAEP Accreditation. To this end, CAEP asks for the fo
information so that CAEP can identify areas of priority in providing guidance to EPPs.

7.1 Assess and identify gaps (if any) in the EPPâ€™s evidence relating to the CAEP standards and the progre
on addressing those gaps. This is an opportunity to share the EPPâ€™s assessment of its evidence. It may hel
the Readiness for Accreditation Self-Assessment Checklist, the CAEP Accreditation Handbook (for initial lev
programs), or the CAEP Handbook: Guidance on Self-Study Reports for Accreditation at the Advanced Level

If there are no identified gaps, click the box next to "No identified gaps" and proceed to question 7.2.

☐ **No identified gaps**

If there are identified gaps, please summarize the gaps and any steps planned or taken toward the gap(s) to be
prepared by your CAEP site visit in the text box below and tag the standard or component to which the text a

The requirement of 4.1 is a difficult one to address meaningfully and accurately. While the State may provide student test outcomes that can relate back to given elementary teachers, or perhaps reflect on high school literacy or math instructors somewhat less particularly, there are no metrics out there that are (1) subject specific for every subject (social studies? chemistry? etc.) or (2) assuring that they reflect solely upon the work of a given teacher. This leaves us with attempting to track completer outcomes one-by-one through completer mentoring wherein we gather data on objective attainment. Such programs cannot be mandated, since the completer is a graduate and not responsible to the EPP any more. However, we are attempting one, and our outcomes so far meet, at least marginally, the intent of 4.1.
Our progress towards a comprehensive CIP is slow. The pieces are in place now, and data will start to be generated, but the specific forums for data consideration and decision-making have yet to be determined. We are contemplating a data-summit approach at our annual retreat at the beginning of the academic year as the primary home for this work.

Tag the standard(s) or component(s) to which the text applies.

4.1 Completer impact on student growth and learning
5.1 Effective quality assurance system that monitors progress using multiple measures

7.2 I certify to the best of my knowledge that the EPP continues to meet legacy NCATE Standards or TEAC
Principles, as applicable.

◉ Yes ○ No

7.3 If no, please describe any changes that mean that the EPP does not continue to meet legacy NCATE Stand
TEAC Quality Principles, as applicable.

Section 8: Preparer's Authorization

Preparer's authorization. *By checking the box below, I indicate that I am authorized by the EPP to complete the 2020 EPP Annual Report.*

☑ **I am authorized to complete this report.**

Report Preparer's Information

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Position: Assistant Chair

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I understand that all the information that is provided to CAEP from EPPs seeking initial accreditation, continuing accreditation or having completed the accreditation process is considered the property of CAEP and may be used for training, research and data review. CAEP reserves the right to compile and issue data derived from accreditation documents.

CAEP Accreditation Policy

Policy 6.01 Annual Report

An EPP must submit an Annual Report to maintain accreditation or accreditation-eligibility. The report is opened for data entry each year in January. EPPs are given 90 days from the date of system availability to complete the report.

CAEP is required to collect and apply the data from the Annual Report to:

1. Monitor whether the EPP continues to meet the CAEP Standards between site visits.
2. Review and analyze stipulations and any AFIs submitted with evidence that they were addressed.
3. Monitor reports of substantive changes.
4. Collect headcount completer data, including for distance learning programs.
5. Monitor how the EPP publicly reports candidate performance data and other consumer information on its website.

CAEP accreditation staff conduct annual analysis of AFIs and/or stipulations and the decisions of the Accreditation Council to assess consistency.

Failure to submit an Annual Report will result in referral to the Accreditation Council for review. Adverse action may result.

Policy 8.05 Misleading or Incorrect Statements

The EPP is responsible for the adequacy and accuracy of all information submitted by the EPP for accreditation purposes, including program reviews, self-study reports, formative feedback reports and addendums and site visit report responses, and information made available to prospective candidates and the public. In particular, information displayed by the EPP pertaining to its accreditation and Title II decision, term, consumer information, or candidate performance (e.g., standardized test results, job placement rates, and licensing examination rates) must be accurate and current.

When CAEP becomes aware that an accredited EPP has misrepresented any action taken by CAEP with respect to the EPP and/or its accreditation, or uses accreditation reports or materials in a false or misleading manner, the EPP will be contacted and directed to issue a corrective communication. Failure to correct misleading or inaccurate statements can lead to adverse action.

☑ **Acknowledge**