

Disability Resource Center

San José State University

Learning Outcomes and Assessment Report

2009 / 2010

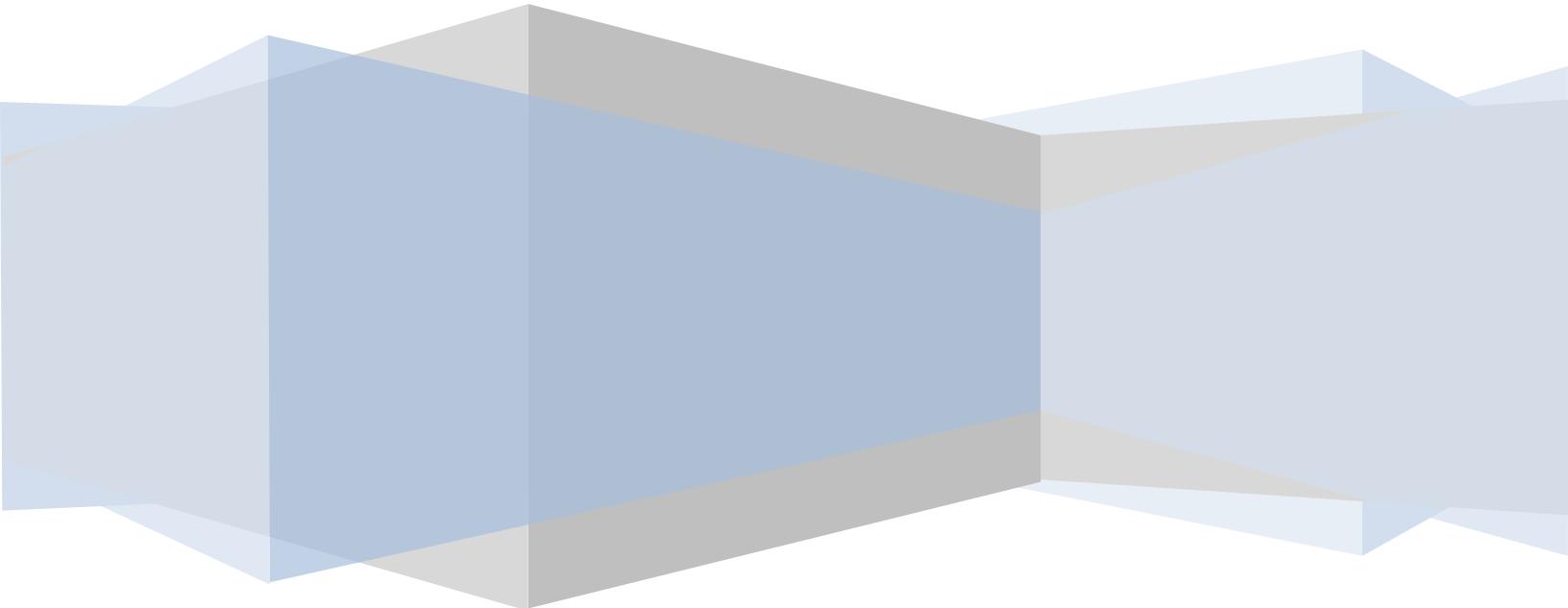


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DISABILITY RESOURCE CENTER

LEARNING OUTCOMES REPORT

2009 / 2010

INTRODUCTION

During the Academic Year 2009/2010, in following with the Division of Student Affairs charge to participate in student Learning Outcomes (LO), the LO Assessment Committee reasoned that the Disability Resource Center's (DRC) first two LO's are vital to students with disabilities academic success. To this end, the Assessment Committee developed a process to ascertain students' skill sets with respect to students' knowledge of their disability and accompanying functional limitations (see Appendix A for a comprehensive outline of the Process). The foundation for the Assessment Committee was derived from two of DRC's established LO's:

Learning Outcome #1:

- a. Student can name his/her specific disability with ease.
- b. Student can describe his/her specific disability with ease (e.g. student can provide one to three characteristics/symptoms of the diagnosed disability).
- c. Student can articulate how the effects of his/her disability impact the student in an academic setting through concrete examples.
- d. Student can communicate to others (including professors) about how the functional limitations of his/her disability impact the student in an academic setting.

Learning Outcome #2:

- a. Student understands how the functional limitations of his/her disability impact specific curriculum requirements and can determine reasonable accommodations.
- b. Student can communicate to professors the need for curriculum-related accommodations.

The student Learning Outcomes' assessed the following student skills:

1. Disability diagnosis knowledge and elaboration accuracy (LO #1a and b)
2. Knowledge of accommodation needs and the relationship of disability needs to curriculum requirements (LO #2a)

ASSUMPTIONS

The following assumptions were acknowledged by the LO Assessment Committee:

- Students will answer the questions posed on the *DRC Confidential Student Intake Form* honestly and freely.
 - Students are not answering questions to please the Counselor or to put him/her in a better light.
 - Students accept that they have a disability as evidenced by their registration with the DRC.
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METHODOLOGY

Students new to the DRC, not to the University, ranging from freshman to senior standing, completed two questions on the *DRC Confidential Student Intake Form* which correlated to LO #1 and #2: LO #1) “What is the name of your disability(ies)? If the particular name of your disability is not coming to mind, simply explain what the disability is in a few words;” LO #2) “Provide at least one example of how your disability(ies) impacts you in your daily activities (i.e., in the classroom, studying, talking tests, reading, etc.).” (see Appendix A for a copy of the instrument). Two hundred seventy-one (271) new students (136 Fall 09 / 135 Spring 10) completed the aforestated questions by means of self-report.

The *DRC Confidential Student Intake Form* solicited information to assist DRC counselors in providing students with individualized academic support specific to their disability related functional limitations and potential impact on curriculum requirements. Six professional counselors met one-on-one with students and conducted an Intake via the interactive process. The Intake process was standardized and conducted in the following manner:

- Counselors utilized information presented by the student on the *DRC Confidential Student Intake Form* to begin the discussion with the student;
- Counselors recorded student responses on the *Learning Outcomes Counselor Response Sheet*; counselors rated student responses on the following scale: No, Somewhat, and Yes (see Appendix A for a copy of the instrument). While the *DRC Confidential Student Intake Form* aimed to determine students’ **perceptions** of their disability the discussion with the counselor aimed to determine the **accuracy** of students’ disability knowledge and functional limitations. The in-person assessment permitted the counselors to observe how the students responded to the questions and permitted glimpses into nonverbal communication.

- Counselors verified students' information alongside submitted documentation to validate whether or not the student could name his/her disability and accompanying functional limitations;
- Based on the student's responses the counselor proceeded with the Intake in one of two discussions:
 - Student correctly named his/her disability:
 - Counselor initiated a holistic discussion with the student regarding his/her disability utilizing the counselor's professional knowledge along with the student's input. Using the example provided by the student with regard to the impact of his/her disability in daily life (i.e.: in the classroom, studying, taking test, reading, etc.) the counselor discussed the information for clarification and application to the student's coursework.
 - Student could not name his/her disability:
 - Counselor utilized student's submitted documentation in conjunction with the counselor's professional knowledge to inform and educate the student concerning the nature of his/her specific disability, as well as the functional limitations presented by the disability. Given that the student either provided a limited example, or was unable to provide an example regarding the impact of his/her disability in daily life (i.e.: in the classroom, studying, taking test, reading, etc.), the counselor worked with the student to identify specific functional limitations which could potentially impact curriculum requirements. Subsequently, the counselor worked together with the student in reviewing course syllabi to extrapolate information to assist in determining level of impact, if any.

RESULTS

Counselors engaged with 271 students new to the DRC, ranging from freshman to senior standing. There were disparities between students' perceived notions of their disability, and presenting functional limitations, and the actual disability diagnoses, and functional limitations. When disparities occurred counselors educated students each time a students' perception did not match accurate disability-related information. Counselors referred to the disability documentation in the student's case file together with the counselor's disability knowledge when educating students.

Statement One: "What is the name of your disability(ies)? If the particular name of your disability is not coming to mind, simply explain what the disability is in a few words."

In response to the first question on the *DRC Confidential Student Intake Form (assesses perceptions)*, "What is the name of your disability(ies)? If the particular name of your disability is not coming to mind, simply explain what the disability is in a few words." Following the student's self-report during the Intake session, the counselor discussed with the student his/her response and recorded the student's oral response on the *Learning Outcomes Counselor Response Sheet (assesses actual knowledge)* using the following scale: "Yes, Somewhat, or No," Responses revealed 110 students (Fall 09 = 58 / Spring 10 =-52) accurately named their disability and could effectively explain the disability; 10 students (F 09 = 5 / Spring 10 = 52) could not name their disability or explain it; 20 students (Fall 09 =10 / Spring 10 = 10) could somewhat name their disability and explain it.

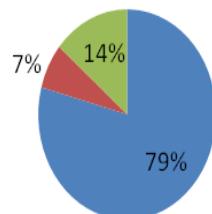
Statement Two: "Provide at least one example of how your disability(ies) impacts you in your daily activities (i.e., in the classroom, studying, taking test, reading, etc.)"

In response to the second question on the *DRC Confidential Student Intake Form (assesses perceptions)*, "Provide at least one example of how your disability(ies) impacts you in your daily activities (i.e., in the classroom, studying, taking test, reading, etc.)" Following the student's self-report during the Intake session, the counselor discussed with the student his/her response and recorded the student's oral response on the *Learning Outcomes Counselor Response Sheet (assesses actual skills demonstrated)* using the following scale: "Yes, Somewhat, or No." Responses revealed 110 students (Fall 09 = 58 / Spring 10 =-52) accurately provided at least one example of how their disability impacts them in their daily life; 7 students (F 09 = 5 / Spring 10 = 2) could not provide an example; 16 students (Fall 09 =7 / Spring 10 = 9) could somewhat provide an example.

On the whole, students' self-report reinforced counselors' responses as evidenced by the data collected: Fall 09: 81% / Spring 10: 74%. Data collected further revealed that DRC's LO #1 objectives were met to a great extent: Fall 09: 79% / Spring 10: 80%.

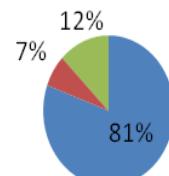
Fall 09 LO# 1 Objective Met

■ Yes ■ No ■ Somewhat



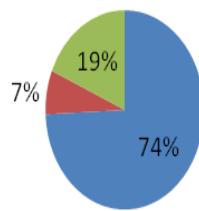
Fall 09 LO #1 Counselor Response

■ Yes ■ No ■ Somewhat



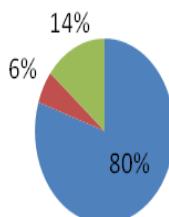
Spring 10 LO #1 Counselor Response

■ Yes ■ No ■ Somewhat



Spring 10 LO# 1 Objective Met

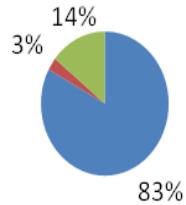
■ Yes ■ No ■ Somewhat



Data collected for LO #2 exceeded the positive results of LO #1. Students' self-report for LO #2 continued to reinforce counselors' responses as evidenced by the data collected: Fall 09: 83% / Spring 10: 83%. Data collected continued to reveal that DRC's LO #2 objectives were also met to a great extent: Fall 09: 85% / Spring 10: 84%.

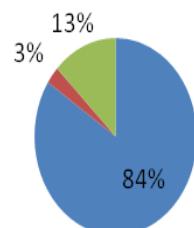
Spring 10 LO #2 Counselor Response

■ Yes ■ No ■ Somewhat



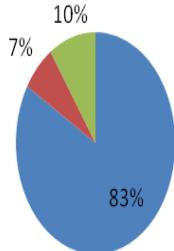
Spring 10 LO# 2 Objective Met

■ Yes ■ No ■ Somewhat



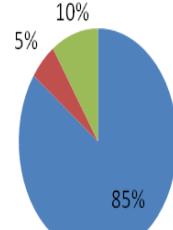
Fall 09 LO #2 Counselor Response

■ Yes ■ No ■ Somewhat



Fall 09 LO# 2 Objective Met

■ Yes ■ No ■ Somewhat



DISCREPANCIES

It should be noted, due to circumstances beyond counselors' control, discrepancies existed in the Learning Outcomes process delineated below:

- Due to an unforeseen staff situation, DRC's permanent front desk employee resigned. DRC filled the void with ever-changing temporary coverage during the LO assessment period. Regrettably, the temporary incumbents did not possess the knowledge or skills in working with students that DRC's permanent employee had. As a result, a number of new students did not receive the *DRC Confidential Student Intake Form* upon check-in; therefore, student information was not acquired;

- There were occasions when students received and completed the *DRC Confidential Student Intake Form*; however, due to DRC's multi-level process to digitalize student's information upon receipt, the counselor did not receive the student's self-report in a timely fashion to conduct the Intake prior to the end of the session. Conducting the Intake post session was not an option due to the counselor's back-to-back student appointments.
- As a result of late arrival by a number of students, the *DRC Confidential Student Intake Form* was completed, however, counselors were unable to conduct the Intake due to lack of time. Consequently, the *Learning Outcomes Counselor Response Sheet* was not completed. Conducting the Intake post session was not an option due to the counselor's back-to-back student appointments.

These discrepancies address why 142 students from the 271 student sample, together with the six counselors, completed both the *DRC Confidential Student Intake Form* and *Learning Outcomes Counselor Response Sheet* respectively, for a total of 52.4% completion rate.

Appendix A

DRC Learning Outcomes 2009 – 2010 Process Procedures

Instrument: *DRC Confidential Student Intake Form*

Assessment Tool: *Learning Outcomes Counselor Response Sheet*

DRC LEARNING OUTCOMES 2009 - 2010 PROCESS PROCEDURES

Learning Outcomes

Newly registered students will work one-on-one with a DRC Counselor to:

1. identify their specific disability; and
2. identify their functional limitations resulting from the disability.

DRC Goals

- To assess the level of student's disability knowledge to facilitate a successful learning experience
- To assist students in gaining an understanding of his/her functional limitations and how the functional limitations will/will not impact his/her curriculum requirements

Target Population

- New students exclusively
(definition of new student: new to DRC, **NOT** SJSU)

LO Timeline

- Implementation: Fall 2009; first week of the semester
- Commencement: Spring 2010; last week of appointments
- Assessment report: Summer 2010

Procedures

1. Cindie/student assistant receives completed *DRC Confidential Student Intake Form* from student prior to meeting with counselor to ensure student has signed his/her initial at the bottom of page one
2. *DRC Confidential Student Intake Form* scanned to the student's confidential file by Cindie/student assistant
3. Cindie/student assistant gives hard copy of student's *DRC Confidential Student Intake Form* to scheduled counselor
4. Shauna will work with Grace to create central file to house Intake forms
5. When counselors are finished with the *DRC Confidential Student Intake Form* counselors place the intake form in the "To Be Filed" box on the student assistant desk[†]
6. Cindie/student assistant to file *DRC Confidential Student Intake Form* in the central file
7. Counselors to retain individual *Learning Outcomes Counselor Response Sheet*[†]

Action Steps

1. When Front Desk schedules appointment, informs student to arrive 15 minutes early to complete *DRC Confidential Student Intake Form*
2. Prior to first meeting with counselor, student completes *DRC Confidential Student Intake Form* answering questions pertaining to his/her disability as accurately as he/she is able to
3. During student's scheduled appointment, counselor begins dialogue with student regarding student's disability utilizing student's *DRC Confidential Student Intake Form* responses as a guide
4. Counselor determines student's disability knowledge and accuracy based on student's Intake process and student submitted disability documentation
5. At the end of session, counselor will present student with the "Yellow ALERT SJSU Sign-up" reminder card
6. Counselor completes *Learning Outcomes Counselor Response Sheet*[†]

[†] Forms will be used for the 2009-2010 LO assessment report

