

Tool D: Handbook for Targeted Review

I. INTRODUCTION

This handbook outlines the process for targeted review of programs. As described in the guide, targeted review occurs in any year following the release of annually reported data (as opposed to in-depth review, which occurs on a multiyear cycle). Every program—on its own—may want to undertake the kind of examination described below in order to support ongoing improvement efforts. But it is not realistic for states to review every program every year, given their limited capacity. Thus, we recommend that states prioritize efforts to improve programs whose annual report data show the greatest cause for concern. In these cases, targeted review can be a useful strategy for confirming or disconfirming concerns raised in the annual report.

The targeted review model we describe in this handbook is informed by research, evaluation and improvement efforts within the field. As with the other tools, we offer this model with the expectation that states will adapt it to fit local needs.

The handbook is divided into five sections. Section II describes the purpose of targeted reviews, as well as timing considerations. Section III delineates the measures used to assess program quality. Section IV outlines the processes employed during program review. Section V discusses the necessary credentials and training for reviewers.

II. PURPOSE AND TIMING

Targeted review is designed to respond to data patterns identified in the annual report, enabling state personnel (or their designees) to diagnose and select programs with a pattern of concerning results for further review. The targeted review enables states to explore underlying causes for the concerning results. For example, a program with a 100% admissions rate might appear to be unselective, but in-depth review might reveal that potential applicants are prescreened by partner districts, leading to a high-quality pool of applicants—which would allay concerns about the high admissions rate. On the other hand, in-depth review might reveal that the high admissions rate is caused by pressures to maximize profit despite the quality of candidates, which would cause the state to identify admissions as an area in need of improvement for continued state approval in its conclusions for the in-depth review process.

Reviews allow state personnel and other team members to suggest improvements for the program's design and execution and, in some cases, to learn in detail about effective practices that can be shared with other programs. Further, targeted review can form the basis for state decisions about program status, with findings contributing to a state's determination as to whether a program can continue to operate and whether any specific improvements are required in the short-term as a condition for continued operation.

Although it might be ideal for each program to have an in-depth review to foster continuous improvement, states have a limited capacity to conduct such reviews. Since states have a responsibility to hold programs accountable, we recommend that they use annual reports to identify a small number of programs with the most concerning results for targeted review. The actual number of programs targeted depends on both a review of annual reports and the state's capacity to conduct the more intensive targeted reviews. In the meantime, programs not targeted for state review might choose to use their annual report results (especially in comparison to other programs' results) to identify areas that they want to investigate for themselves in support of their own continuous improvement. And, as described in Section III of the guide and Tool C, we recommend that all programs be reviewed in depth on a periodic basis in conjunction with accreditation timelines or other review processes.

Once states have established normative targets or performance targets for annual reports (see Tool B), they will need to establish decision rules for triggering a targeted, in-depth review. For example, a state may decide to prioritize reviews for programs that have a large number of indicators below expectations. For any program meeting the threshold for review, we recommend that the review occur as soon as possible after concerns are identified.

III. REVIEW MEASURES

Targeted review examines the same measures as those in the annual report—measures related to program inputs, program processes, program outputs, and program graduate outcomes. But a targeted review also explores program functions and features underlying the indicators in the annual report, asking:

- *To what extent are the data in the annual report accurate reflections of program quality?* Reviewers have the opportunity to examine additional data, disaggregate it (for example, by geographic area or school district), and analyze trends over time.
- *Why is the program meeting or not meeting expectations on a given measure?* Reviewers can engage program leaders in an analysis of the factors contributing to a program's relative strengths and weaknesses.
- *What should be done to improve program performance?* Reviewers and program leaders can analyze gaps between current and desired outcomes and identify strategies to close those gaps.

It is crucial to note that reviewers might conclude that the concerns triggering a review do not reflect problems of program quality. The implications of such a conclusion are described below.

IV. THE REVIEW PROCESS

The process of review depends on the scope of concerns emerging from the annual report. If the state considers the concerns to be relatively minor, program leaders could invite program leaders to submit a short memorandum providing evidence of program quality and indicating any improvement steps they are already taking. State leaders can review these documents, amend the annual report as necessary, and consider the review complete; or, state leaders might engage a team to conduct a site visit to gather more information.

For more significant reviews, the process proceeds as follows:

1. State leaders identify the particular measure(s) of concern needing deeper investigation and assign a review team.

See above for details about the identification of areas of concern. See the next section for details on the review team.

2. Program leaders gather additional data relevant to the measure(s) of concern and assemble knowledgeable program staff and stakeholders to contribute to the review.

Since the review is targeted and focused on developing an understanding of the measure(s) of concern, we recommend that the data collected be similarly focused and specific. For example, if the annual report suggests that a program is not adequately selective in admissions, program leaders might assemble: recruitment materials (e.g., brochures, work plans for recruitment), admissions materials (e.g., selection instruments, a cross-section of essays with names redacted), and admissions data disaggregated by important characteristics (e.g., sending district, race/ethnicity, gender, prior teaching experience).

The program team members need relevant knowledge and expertise in order to assess evidence sources. Continuing the example above, a deeper investigation of admissions would benefit from interviews with staff who have responsibility for recruitment and admissions, as well as staff from districts targeted for recruitment.

3. The review team analyzes the available data, develops conclusions, and identifies recommended action steps for program improvement.

Critical to the review is the use of a rigorous process for analyzing data on measures of concern and developing sound conclusions and action steps. We recommend two approaches to analysis: root cause analysis and gap analysis. These may be used in combination.

Root Cause Analysis

Root cause analysis is a well-established methodology used across a range of industry sectors to trace problems back to their source. Beginning with an identified problem (e.g., low satisfaction rates from program graduates), it asks program leaders and reviewers to consider why the problem exists. This inquiry continues until participants agree that they have arrived at the root cause of the problem. Because it is designed to surface and address the substantive issues that are leading to underperformance, it lends well to devising action plans to remedy those issues. For further information and tools for conducting root cause analysis, see <http://asq.org/learn-about-quality/root-cause-analysis/overview/overview.html>.

Consider this example: A program's annual report indicates that only 50% of graduates think the program content was rigorous and relevant to them in their current school leadership roles. Using root cause analysis, a review team looks more closely at the data and determines that most of the graduates concerned about program content now work in one school district. By asking why these graduates might be dissatisfied, it becomes clear (based on input from knowledgeable field supervisors from the program) that the district has seen a steady increase in the percentage of students who are non-native English speakers and has made the implementation of differentiated instructional strategies for these students a top priority for principals at

all levels. Further inquiry surfaces two facts: (1) for the past three years, the program has used a series of adjunct faculty with relatively little experience with English language learners to teach the only courses where this content is addressed; and (2) neither the syllabi for those courses nor the leadership practicum include opportunities to learn or practice up-to-date strategies for supporting English language learners. The review team concludes that these are root problems and need to be addressed in an action plan for improvement.

Gap Analysis

Gap analysis is a strategy used in program evaluation by organizations in both education and business to determine gaps between a desired state and a current one. Data are collected on key indicators that may indicate the status of a program based on relevant variables. Stakeholders then critically analyze the data for areas in which there are significant gaps and determine strategies to achieve the desired state using an improvement plan. The plan is then monitored using the same key indicators that were used for the original gap analysis. For further information and tools for conducting gap analysis, see <http://www.ahrq.gov/professionals/systems/hospital/qitoolkit/d5-gapanalysis.pdf>.

One of the benefits of the analysis methodologies described here is that they can help determine whether the data of concern reflect program quality or are attributable to other factors. Consider this example: A program is flagged for review because, for two years in a row, its rate of placement into principal and assistant principal roles has been low. Further review shows that the district where the program has historically placed candidates has just completed contract negotiations with substantial changes in compensation: Pay differentials for teachers assuming teacher leadership roles have been increased, and salaries for administrators have gone up. In part because of these changes, fewer principals and assistant principals are leaving, and candidates are being encouraged to take on teacher leadership roles. In this case, the program's data about placement may not be cause for concern.

4. State-designated reviewers complete a draft summary report identifying action steps for the program and the state.

At the end of the site visit, the review team meets with program-level leaders to discuss key findings and action steps based on the analysis. If the review disconfirms the original concerns, there may not be any action steps. If the original concerns are verified, state-designated reviewers develop a summary report that includes specific action steps for both the program (as needed) and the state. These action steps are designed to support continuous program improvement.

The draft report is shared with both the appropriate state authority and the institution undergoing review. The institution subsequently has an opportunity to respond to any and all descriptions, recommendations and action steps before the report is finalized. Based on the institution's feedback and in light of any additional data or information provided, a final version of the report is developed, again identifying specific action steps for both the program and the state. The state authority monitors the program based on the report's action steps and timeline. A determination is made as to whether further targeted review or a full in-depth review is warranted. In the unlikely event that program leaders believe their program has been misrepresented, they have avenues to appeal this determination.

V. THE REVIEW TEAM

We recommend the review team consist of at least three professionals, including one representative from the state department of education, one faculty member from outside the institution, and one school or district administrator. One of these individuals, preferably the individual with the most experience conducting reviews, would be designated the review team leader and would be responsible for submitting the final draft of the review report.

Reviewers possess relevant expertise for making professional judgments, including (as relevant to the measures driving the review):

- content expertise in leadership;
- understanding of adult learning theory;
- knowledge of current research on effective leadership preparation;
- ability to analyze programs for curricular alignment, evidence-based instructional strategies, and effective performance-based assessment;
- strong facilitation skills and expertise around leading root cause and gap analysis protocols; and
- understanding of program evaluation data and how to interpret it appropriately.

This list of reviewer expertise is similar to the list for in-depth reviews. We would particularly note the need for at least one reviewer with strong facilitation skills who can lead the program team through sophisticated analysis processes.

We recommend that potential reviewers fill out an application to participate as a reviewer in which they: (1) provide information on their experience with program review, (2) share their knowledge and experience with the standards and review process used in the state, and (3) explain why they are interested in becoming reviewers. We also recommended that reviewers submit at least one letter of recommendation that speaks to their ability to make program judgments. If faculty members are from the state in which the review is taking place, they should work in state-approved programs that have been identified as either effective or highly effective.

In addition to having reviewers with the above areas of expertise, states should provide training to reviewers to ensure that review team members are prepared to conduct an in-depth review. At a minimum, training familiarizes reviewers with state and national preparation program standards, how to read an annual report, how to conduct a review, how to collect and analyze data, how to facilitate analysis protocols, and ultimately how to present the data in a fair and meaningful way. Training includes information and guidance around these practices, as well as the opportunity for simulated practice (e.g., study a sample program report, participate in a mock review exercise). Training is provided on a regular basis to ensure sufficient capacity within the state for the review process.