CAS Update: Step Four of Program Review
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To help AFA members, we have embarked on a year-long series of articles to support better enactment of self-assessment and program review of their fraternity/sorority advising program (FSAP) using the Council for the Advancement of Standards (CAS). Past articles can be found here under the section of “Guides and Updates”.

This issue emphasizes the fourth stage of CAS program review. As a reminder, this process consists of seven steps:

1. Plan the Process
2. Assemble and Educate the Team (note this and step three go back and forth some, explained below)
3. Identify, Collect, and Review Evidence (primary purpose of self-assessment)
4. Conduct and Interpret Ratings Using Evaluate Evidence (launches FSAP into program review)
5. Develop an Action Plan
6. Prepare a Report
7. Close the Loop

By this point you have conducted an internal department self-assessment, assembled and educated your team, and compiled all the evidence to have all involved assess alignment with the CAS Standards. To do this as a CAS self-assessment and program review, you will have used the self-assessment guide (SAG).

This fourth step emphasizes a shift in thinking from self-assessment to conducting program review. Self-assessment asks the questions “How do we think we are doing” and program review asks two questions: (1) “How do others external to our organization (department, unit, etc.) think we are doing” and (2) “How do their perceptions align with our perceptions.” As you progress through the last four steps of this seven step model, these questions inform your action planning and steps to infuse new or modified culture into your FSAP.

If you plan to use external reviewers, individuals outside your institution with past experience in using FSAP CAS Standards and within the field of fraternity/sorority advising, then you will also have to consider their involvement in this step. This article summarizes some of the
challenges you will have with the internal review committee and, if applicable, an external team of reviewers.

Internal Review Committee
As you move into conducting and interpreting ratings using evaluate evidence, two primary challenges are sure to emerge with the internally appointed review committee:

1. **Inter-team rating reliability.** Lots of factors influence how someone would score your their perceptions of how well you are achieving a standard. The SAG scoring process has you select from one of six criterion measures:
   a. DNA - does not apply;
   b. Insufficient Evidence/Unable to Rate;
   c. 0 or does not meet;
   d. 1 or partly meets;
   e. 2 or meets; and
   f. 3 or exceeds

Feedback from the appointed committee is first done individually at a pace determined by the reviewer in the timeframe assigned when the committee was appointed. Those providing feedback use evidence provided to determine an individual’s perception of alignment of the FSAP to the standards. They must also provide a short rationale for their score.

As you get all of the scores compiled from each rater, you can imagine some of the issues that could arise. For example, someone who never gives threes may have a challenge understanding someone who is more inclined to score favorably. Another potential issue is the difference between IE and 0: at what point is the failure to meet about evidence provision versus just the fact that even with all the evidence provided, the rater just does not think the FSAP meets this standard?

These challenges must be addressed by the committee’s chair who has the responsibility to compile scores and identify areas of dissent across the group. The chair’s task early on is to address this potential for conflict in the internal review committee (so, what can we do to come to consensus on what constitutes meets versus exceeds for example). Once scores are submitted, they will be tasked with examining scores provided and seeing how they match up against each other.
2. **Determining Consensus.** Step four to this point has been done mainly individually. Once the committee chair has the scores compiled into one document (recommended is an Excel spreadsheet), it is time to have the committee meeting to determine consensus. For some items, the simple shared score of the team will be enough for consensus, as if there’s pretty much agreement across members then there is not necessarily much need to discussion. However, if scores are low as a result of rater variability in scores or there are outliers that need addressing, then it is important to have a careful conversation to determine consensus. Ultimately, once the chair provides the FSAP with their assessment of the evidence, there should be one agreed upon score from the committee.

The confidentiality of these discussions is vital. There is no need for the chair or anyone on the committee to share any issues of dissent or disagreement with the staff in the FSAP. By the time the staff receives their report, the reviewers on the committee should have developed consensus. Future conversations should also be tailored to address if there are gaps between perceptions of the FSAP and the committee, then what are the reasons for this lack of alignment rather than hashing out how scores were developed.

Two sources we have seen often influence this gap is the amount and type of evidence (FSAP staff often can think they do something well but they do not have evidence to prove) and potential biases of either group to pull in information they did not have access to when determining their scores (for example, a chapter advisor who is on the committee knows her chapter has challenges in managing risk so interprets that as a problem of the FSAP even if evidence indicates a meets or exceeds level of evidence).

**External Reviewers**

Determining if you will use external reviewers, or individuals with expertise in fraternity/sorority program review using CAS (or just in general due to their expertise), should be considered early on in this process. The value of bringing these individuals in is that they will bring a less biased impression of the performance of the FSAP than would those who work day-to-day in the department or are part of an internal review committee. This has to be considered an expense of the process and a budget should be developed to run CAS program review using external experts whose costs should be covered as well as given a stipend. We have seen stipends range from $500 to $1,500 for the 2-3 day visit and in almost all cases, any other costs are covered by the institution.

While these individuals bring in less bias about the fraternity/sorority community and the FSAP at your institution, there are still three issues to be addressed if you use this model: first, they
have an impression about how FSL is administered in general and possibly in diverse contexts. Therefore, you have to manage their interpretation of evidence and results from the department and the internal review committee to make sure they understand the context of the institution and how the FSAP is positioned within.

Second, their review of the self-assessment and internal review begins remotely. You should provide them access to all of the same data that you did for department self-assessment and internal review. This requires a lot of work to get those documents uploaded to an externally shared drive. You should also provide them with the Excel sheets that include your scores thus far. One of their early responsibilities in their remote review is to examine the gaps between FSAP self-assessment and the internal review committee and assess why that gap exists. They need to review evidence and scores to assess the extent to which either group’s numbers are justified.

Finally, the team most likely will culminate their review on site, which will involve a number of meetings with key stakeholders to ask questions that help to identify areas of strength and improvement based on the CAS Standards, as well as manage the process of identifying why gaps in perception exist, how to reconcile them, and who needs to be involved in the determination of next steps. The external team should provide their own copy of the Excel sheet scoring as well as a report of their perceptions. A good report identifies how gaps in perception may need to be reconciled and what steps should be taken to move from program review to improvements implementation.

For a great example of how a FSAP can launch self-assessment and engage their internal review committee and external reviewers, look to University of South Florida. An overview of the process is highlighted in the recent Advance U, which can be accessed via a PDF of the slides or as a recording.

**Conclusion**

By the time steps 1-4 are completed, you are likely approaching the seven or eight month mark. There is no perfect timeframe, and you have to make this work for your culture. That said, the thoroughness of this process matters. Take the time you need to make these steps happen.

This issue focused on interpreting evidence and scoring perceptions of how the FSAP is doing in meeting CAS Standards. Through an internal review committee, self-assessment conducted by those within the FSAP is examined to determine how those strengths and areas of
Improvement identified match up against those identified by the internal review committee who is external to the department but internal to the institution.

Many campuses use a process in which national FSAP experts come to campus and meet with stakeholders as a part of their assessment of the fraternity/sorority community. These meetings coupled with the scoring sheets of the department and the internal review committee help experts to identify their own perceptions and figure out what can be done to increase alignment with CAS Standards.

In the next issue, we will focus on step five: developing the action plan. At this stage, the mindset moves from self-assessment and program review toward implementing a plan for improvement.