

**2018 MULTI-DIMENSIONAL ASSESSMENT
OF THE MSW PROGRAM**

SCHOOL OF SOCIAL WORK

SAINT LOUIS UNIVERSITY

SUBMITTED BY

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JUNE 27, 2018

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EXECUTIVE SUMMARY

Introduction

This report represents a multi-dimensional evaluation of the MSW Program at the School of Social Work in the College of Public Health for Social Justice at Saint Louis University (SLU-SSW). This report includes evaluation outcomes for both the traditional, classroom-based MSW Program at the SLU-SSW (SLU-MSW) and the Online MSW Program operated by SLU-SSW in collaboration with Lourdes University in Ohio (SLU-LOU Online). Outcomes for these two programs will be presented separately. The tools that informed this report include the following: (a) MSW Graduate Exit Survey for the traditional and online programs given to graduating students and asking them to rate their level of satisfaction and perceived preparedness on a number of competencies and practice behaviors including curriculum, instructors, practicum, and administration and services; (b) MSW Practicum Learning Agreement Final Evaluations representing field instructors ratings on quality of practicum students' practice on various competencies and practice behaviors in areas including assessment, intervention, evaluation of practice, social justice, policy, and values and ethics; and (c) Association of Social Work Boards test scores.

This annual assessment is conducted as part of the Council on Social Work Education's accreditation of the MSW program in the SLU-SSW. This assessment examines various implicit and explicit aspects of the MSW curriculum and program that include: (1) performance and perceived preparedness on competencies and practice behaviors at the programmatic and concentration level; (2) student satisfaction on various components of the MSW program including curriculum, teaching, diversity, advising, administration, admissions and university services (i.e. writing center, library, financial aid office, health and counseling); and (3) performance of students on their licensing exams.

Synopsis of the Process

The results of the assessment are provided to the Director of the School of Social Work, the Director of the MSW Program and the Chairs of the Clinical Concentration, the Community and Organization Concentration and the Applied Behavior Analysis Concentration. The results of this report are then shared and discussed by the concentration-level committees made up of the concentration chairs, faculty that teach within the concentrations and the online program, field liaisons, and student representatives and community representatives. Concentration level committees review the results and identify any areas that are considered strengths and challenges within the concentration. Areas identified that need to be addressed are discussed within these committees and any changes are then proposed and voted upon. These changes are then sent to the MSW Program Committee for review and ratification. These changes may also go up to the Faculty Assembly of the SLU-SSW if appropriate.

Further, results from the report are also reviewed at the MSW Program Committee. This committee is chaired by the Director of the MSW Program and is comprised of the Director of Field, the chairs of each of the three concentrations, field liaisons, MSW student representatives and community representatives. Any improvements or changes indicated by the report are discussed and voted upon within this committee. These changes, if appropriate, are then sent for approval at the School of Social Work Assembly.

Finally, as part of our CSWE accreditation requirements, we post some of our results on our webpage in order that potential and current students, faculty, staff and the public can review the results of our assessment.

Impact of Assessment

This report has been at least partially influential in several programmatic improvements in past 5 years. These include: (1) consolidation of the Family and Health/Mental Health Concentrations into the Clinical Concentration including the development of a required practice course (SWRK5733 Advanced Clinical

Practice) that merged and improved the two previously required practice courses in the Family and Health/Mental Health Concentrations; (2) changes to our research and policy curricula sequences; (3) adjustments to our specializations and how students take part in the Inter-professional Team Seminar (IPTS) on the South Campus; (4) changes to curricula policy in regard to when certain courses and field assignments are taken by students within the program. An example of two recent changes in the last two years include: (1) requiring students in the Clinical Concentration to take SWRK5762 Clinical Diagnosis and Assessment (formerly an elective course); (2) the requirement that students take their foundation field practicum within 18 credit hours of the program as opposed with within the first 30 hours as was the previous policy; and (3) the recommendation that students take their advanced clinical field placement with one of their required core clinical concentration courses (SWRK 5733) in order that they may better integrate course and field material.

This report is vital in assessing how students meet these competencies in their coursework and practicum. This report has also been instrumental in developing and assisting new practice competencies across the School. For instance, we have revised our MSW and BSSW exit surveys to better reflect changes in our programs competencies made in 2017 when we implemented the 2015 EPAS standards and competencies.

Benchmarks

The benchmarks represent a high standard of achievement that historically have been desired by faculty and are reflected in how the data were coded in the annual program assessment reports. The benchmark percentages are not the same across instruments because the number of points differed in the Likert-like scales. Each benchmark, despite being different, represents a high standard of achievement.

MSW Graduate Exit Survey for SLU and Lourdes Online Program (GES-SLU & GES-Lourdes)

Seventy-five percent (75%) of respondents will rate the item 4 or 5 (4 indicates well-prepared and 5 indicates very well prepared) on the 5 point Likert-like scale.

Foundation, Concentration and Lourdes Practicum Learning Agreements/Evaluations (LA/E)

Respondents will rate the item at a mean of 4 on and 5 point Likert-like scale; 4.0 is defined as “Student consistently meets competency”.

Synopsis of the Results

Overall, students in their field practicum were evaluated by their field supervisors as consistently meeting competency using the 2015 EPAS Competencies implemented in 2017. The average competency score for students in foundation practicum was 4.23 out of 5 in the SLU-MSW Program. This was similar to 2017 when the score was 4.3 out of 5. The average competency scores for the Community and Organization concentration was 4.23 and for the Clinical Concentration was 4.28. The average competency score for the Lourdes Online program (SLU-LOU Online) (which uses the Clinical Concentration Learning Agreement) was 4.32. **These scores indicate that, overall, our benchmark for practicum was achieved for the SLU-SSW.**

In addition, data indicate that students in 2018 were satisfied with their SLU-SSW experience and felt that they were well prepared in 9 program competencies. 93% of respondents in the SLU-MSW Program and 75% (3 out of 4) in the SLU-LOU Online program indicated they were at least satisfied with the education they received in the SLU MSW Program. Approximately 70% of recent graduates of the SLU-MSW program indicated they were at least well prepared in the 9 program competencies, down substantially from 81% from 2015 to 2017. The average score across these competencies was 4.0 out of a possible 5 points with 5 indicating “well prepared.” In 2016 and 2017 the mean was 4.2. In the SLU-LOU Online program 92% indicated they were at least “well prepared” in the competencies, down from 99% in 2017. The average score across these

competencies was 4.2. **These scores indicate that, overall, our benchmark for perceived preparedness was not achieved for the SLU-SSW. In addition, 6 out of 9 individual foundation competencies fell below the 75% benchmark of students indicating they were at least “well prepared.”**

It should also be noted that while there were only 4 respondents to the SLU-LOU Online program Graduate Exit Survey, satisfaction with the SLU experience was significantly lower than in the previous year.

As in previous years, the most commonly cited strengths of the program were the knowledge, support and dedication of professors and the practice-oriented focus of the classes. The most commonly cited weaknesses in the program were the lack of diversity in instructors and students and the need to continue to revise the required public health course (SWRK5501) and policy sequence (SWRK5702 and 5707). Over the past two years students have increasingly indicated the need to improve the SLU SSW intentional efforts to address issues of diversity, equity and inclusion in the classroom and across the program. This include the need for professors and administration to make a more intentional effort to discuss and address issues of inclusion in the classroom as well as increasing the diversity of the student body, faculty and staff. Lastly, SLU-LOU Online students indicated that they felt disconnected from both SLU and Lourdes campuses and that more intentional efforts to help Online students feel more connected are necessary.

In 2017, the total pass rate for SLU MSW graduates taking the ASWB Masters (LMSW) test was 77% (same as 2016 and down from 81% in 2015) compared to the 2017 national average of 70%. In 2017, the total pass rate for SLU MSW Graduates taking the ASWB Clinical exam (LCSW) was 67% (down from 69% in 2016, but up from 63% in 2015) compared to the 2016 national average of 68%.

This report will first synthesize the results of each of the above tools in relation to the MSW *Program competencies* in order to provide an assessment of the level to which the Saint Louis University MSW Program Classroom based and Lourdes Online Cohort Program are meeting these competencies. This report will then offer a summary of results for each of the above tools. Results of each tool are then offered at the end of this report (see Table 1, Tables 2.1ab to 2.4ab, and Table 3).

SUMMARY RESULTS OF MSW EVALUATION TOOLS

The following provides a summary of results for each of the MSW Program Evaluation Tools. These tools include: (a) The SLU-MSW (offline) and SLU-LOU (Online) Graduate Exit Surveys; (b) MSW Foundation and Concentration Practicum Learning Agreement for the SLU-MSW (offline) Foundation, Community and Organization, and Clinical Concentrations and the SLU-LOU (Online) program which uses the clinical concentration learning agreements; and (c) the ASWB Test Score Results for 2017. All results for each tool are presented in separate tables that follow this section. The SLU-MSW (Offline) Graduate Exit Survey results will be presented first. Following these results, the results from the SLU-LOU Online Program Graduate Exit Survey will be presented separately.

2018 SLU-MSW (Offline) Graduate Exit Survey (See Table 1. for Full Results)

A total of 46 graduates (Dec. '17, May '18 and Aug. '18) completed the SLU MSW (offline) Graduate Exit Survey out of a total of 83 for a response rate of 55%. The mean age of respondents was 28 years of age. 89% of respondents identified as women and 11% identified as male. In 2016, approximately 84% of respondents were white, 11% were African American, and 5% Latino. In 2017 and 2018, an electronic error with the survey software resulted in not being able to record participants' racial or ethnic backgrounds.

1. *Demographics.* 91% of respondents indicated they were in the Clinical Concentration. 4% indicated they were in the Community and Organization Concentration. 4% indicated they were in the Applied

Behavioral Analysis (ABA) Concentration. 32% indicated they received either Full (28%) or Partial (4%) Advanced Standing. This is down from 61% in 2016 and 45% in 2017. 83% of respondents were full time students. This is down from 92% in 2016 and up from 77% in 2017. The mean commuting distance to SLU campus one way for respondents was 19 miles.

- Foundation Competencies.* Students were asked to rate their level of preparedness following completion of the MSW program on 9 competencies on a 5-point scale with anchor points of: 5 = very well prepared; 4 = well prepared; 3 adequately prepared; 2 = minimally prepared; and 1=Not Prepared. When taking all 9 competencies together, 32% (down from 44% in 2016 and 41% in 2017) of respondents on the graduate exit survey indicated that they were “very well prepared” and 70% of respondents indicated that they were at least “well prepared”. **This is substantially down from 81% in 2015 to 2017 indicating that as a whole the school has not exceeded its benchmark of 75% of respondents indicating they were at least “well-Prepared” in the 9 foundation competencies.** The average score for all competencies was 4.0 out of 5.0, which was down from 4.2 in 2016 and 2017. The competencies in which respondents indicated they were best prepared were: (1) Demonstrate ethical and professional behavior (87% indicating at least “well prepared”) and (2) Engage diversity and difference in practice (82% indicating at least “well prepared”). These top competencies were the same in 2017.

The two areas where respondents felt the least prepared was “Engage in Policy Practice” (45% indicating at least “Well Prepared”), and “Engaging in Practice informed Research and Research Informed Practice” (56% indicating at least “Well Prepared”). In 2018, 45% (back down from 57% in 2017 to the same level as 2016) indicated that they were at least “well prepared” in the “Engage in Policy Practice” competency. In 2015, this percentage was 58%. 8% of respondents indicated that they were minimally or not prepared in this area. The average score was a 3.5 (2017=3.6; 2016=3.4) indicating respondents felt “adequately prepared.” **This was the fourth year in a row that this competency (Engage in Policy Practice) has not achieved its required benchmark indicating the need for a review of curriculum.** The other competencies to be below the 75% benchmark were: (1) Advancing Human Rights and Social, Economic and Environmental Justice (69%); (2) Engaging in Diversity and Difference in Practice (72%); (3) Engaging in Practice informed Research and Research Informed Practice (56%); (4) Intervene with Ind., Fam., Grp., Org., and Com. (70%); and (5) Evaluate Practice with individuals, families, groups, organizations and communities (70%). **This represents a total of 6 out of 9 competencies that fell below the 75% benchmark of respondents indicating they were at least “well-prepared.”**

- Concentration Competencies.* Respondents were asked to rate their level of preparedness for each of their concentration level practice competencies. For the Community and Organization Concentration (n=2), 100% of respondents indicated that they were at least ‘well-prepared’ on nine competencies overall. For the Clinical Concentration (n=42), 78% respondents indicated that they were at least ‘well prepared’ on nine competencies overall. For the ABA Concentration (n=2), 75% respondents indicated that they were at least ‘well prepared’ on four competencies overall.
- Teaching and Curriculum.* The vast majority of students indicated the traditional format 2.5/3.5 hour class once per week as their preferred format (80%). This was the same in 2017. It is also up from 74% in 2016, but down from 87% in 2015. The online format (41%) was listed as the most popular second choice for the first time continuing a trend for several years. This is up from 30% from last year. The condensed/weekend format and intercession format were popular second and third choices with 30% indicating condensed/weekend format as their preferred second choice and 22% indicating the intercession as their preferred second choice. These data indicate that students may be increasingly more interested online formats.

Respondents evaluated the quality of 18 areas of the MSW program using a 5 – point scale ranging from very satisfied (5) to very dissatisfied (1). Areas include curriculum, teaching, classroom space and technology, and field education. When taking all 18 program areas together, 73% of respondents indicated that they were either “very satisfied” or “satisfied”. In 2017 and 2016 this percentage was 77% and 75% respectively. The three most highly rated areas included: (1) HBSE (92% at least ‘satisfied’, 63% ‘very satisfied’ - M=4.6); (2) Quality of teaching (88% at least ‘satisfied’ - M=4.1); and (3) Expertise of professors (88% at least ‘satisfied’ - M=4.2).

As was the case in 2016 and 2017, the lowest rated area included Mission and Practice in Global Health with only 34% indicating they were at least ‘Satisfied’ in this area, and 39% at least ‘Dissatisfied.’ (15% ‘very dissatisfied’ and ‘24% dissatisfied’ - M=2.9). In 2017 40% were at least ‘Dissatisfied’ (18% ‘very dissatisfied’, 32% at least ‘dissatisfied’, M=3.0). These ratings, while low are up substantially from 2016 when 41% indicated they were dissatisfied and 65% indicated they were at least dissatisfied. The mean score in 2016 was 2.1. As a result of student feedback through this assessment several changes were made to this required course in 2016 including making it an online option. Changing the curricula to more reflect social work values and practices and changing instructors.

As was the case in 2016 and 2017, the second lowest rated area was the Policy Sequence (22% at least ‘dissatisfied’, M=3.4). 59% indicated they were at least ‘Satisfied’ in this area. In 2017, 64% of respondents indicated they were at least satisfied in this area. In addition, 24% indicated they were at least ‘Dissatisfied’ in this area. These numbers are similar to 2016. In other areas, 80% indicated they were at least ‘satisfied’ with the quality of Field Education and 78% were at least ‘satisfied’ with the ability of instructors to effectively use technology. 83% of respondents were at least ‘satisfied’ with the quality of electives offered. The most popular electives identified included the Death, Dying and Grief course, CBT Substance Use Treatment, and Motivational Interviewing. Respondents were asked to ‘grade’ professors in the MSW Program based on their ability to prepare them to be an effective social worker. 75% of respondents gave professors in the MSW program an A- or higher. The average grade was an A-. This was up from 2017 when 67% gave professors an A- or above.

5. *Mentoring.* 74% of respondents indicated they were at least ‘satisfied’ with the quality of academic mentoring. This is down from 2016 (88%) and about the same from 75% in 2016 and 2015. 85% of respondents indicated that their academic mentor met or exceeded their expectations (this was 88% in 2017 and 87% in 2016) and 66% indicated that their mentor was either ‘valuable’ or ‘very valuable’ in shaping their educational plan (70% in 2017). 66% of respondents indicated that they typically met with their mentor face to face and 27% indicated they typically met with their mentor by e-mail. 90% of respondents indicated they met at least once a semester with their mentor (this was down from 100% in 2017). The average grade that respondents gave their mentors was a B+. 70%% rated their mentors a B or better (up from 68% in 2017 and down from 73% in 2016) and 54% rated their mentors an A- or better (down from 64% in 2017, but up from 43% in 2016).
6. *Diversity.* Students were asked to rate their level of agreement with four statements regarding Diversity at the SLU-SSW. When asked if there is a commitment to diversity at the SLU-SSSW 76% of respondents either ‘strongly agreed’ or ‘agreed’ with this statement. This is up from 72% in 2017 and the same percentage as 2016. 9% either “Disagreed “or “Strongly Disagreed” with this statement. This is down from 16% in 2017 and up from 6% in 2016. When asked if they felt safe at SLU-SSW 95% ‘agreed’ or ‘strongly agreed’ with this statement. This is up from 83% in 2017 and the same percentage in 2016 (2% at least ‘Disagreed” with this statement down from 9% in 2017). 75% ‘agreed’ or ‘strongly agreed’ that SLU-SSW was welcoming (down from 79% in 2017 and 2016) and 88% ‘agreed’ or ‘strongly agreed’ that they felt valued and respected at the SLU-SSW (86% in 2016 and 2017). **Several qualitative comments strongly indicated the need for more diverse faculty and students in the**

program and the need to more intentionally discuss issues of inclusion, equity and bias in the classroom.

7. *SLU-SSW Support Services.* 76% indicated that that they were either ‘very satisfied’ or ‘satisfied’ with the quality of the School’s admission process (up from 74% in 2017 and down from 81% in 2016). 83% of respondents were at least ‘satisfied’ with the quality communications and information from the MSW Program Office (up from 74% in 2016 and 2017), and 70% were at least ‘satisfied’ with the quality of assistance from the MSW Field Office (up from 66% in 2017 and 57% in 2016).
8. *SLU Support Services.* Students were also asked to rank the adequacy of 5 University Supportive Resources areas using a 5 – point scale ranging from very satisfied (5) to very dissatisfied (1). *The* librarian and library services were again ranked highly as 61% of respondents indicated they were at least ‘satisfied’ (down from 81% in 2017). 46% of respondents indicated that they did not use the graduate writing center. 39% did not use the University career counseling services. 39% indicated they did not use the University Health Service. 64% of respondents indicated that they were either ‘very satisfied’ or ‘satisfied’ with financial aid services (up from 46% in 2017 and 2016).
9. *Overall Rating.* When asked to indicate how satisfied respondents were overall with the education they received at SLU-SSW 93% indicated they were at least ‘Satisfied’. This is up from 86% in 2017 and 89% in 2016. 37% indicated they were ‘Very Satisfied’ (up from 25% in 2017, but down from 54% in 2016) and 0% indicated they were ‘Dissatisfied or ‘Very Dissatisfied.’ Respondents were also asked to indicate how likely on a scale from 1-10 (10 being most likely and 1 being least likely) they were to recommend the SLU-SSW to a friend or colleague. 29% rated their likelihood a ‘10’ (up from 23% in 2016, but down from 38% in 2016), while 56% rated their likelihood an ‘8’ or higher (Down from 65% in 2017 and 76% in 2016). 41% indicated their likelihood between a 4 and a 7. This is up from 25% in 2017 and 2016. Only 2% rated their likelihood below a ‘4’ which is down from 9% in 2017, but up from 0% in 2016. The average score was a ‘7.9’ out of ‘10.’ In 2017 this score was a ‘7.7.’
10. *Qualitative Comments.* As in previous years, the most commonly cited strengths of the program were the knowledge, support and dedication of professors and the practice-oriented focus of the classes. Several professors were named explicitly and the dedication of professors were repeatedly mentioned in very comment. The most commonly cited weakness was by far a lack of diversity in the student body and faculty and the lack of conversations about race, equity and inclusion. This is the third year in a row this has been a top concern. The second most cited weakness was the lack of practice-based intervention or therapy classes. Consistency and quality across professors and increasing the rigor of classes was mentioned. The policy and research sequences were also explicitly mentioned and needing attention. Finally, some respondents commented that the quality of adjunct instruction needed to be addressed – this has been a theme for at least two to three years.

2018 Online Lourdes University Program Graduate Exit Survey (See Table 3 for Full Results)

A total of 4 graduates completed the online MSW Graduate Exit Survey out of a total of 10 for a response rate of 40%. The mean age of respondents was 32 years of age. 100% of respondents identified as white women.

1. *Demographics.* 100% of respondents indicated they were in the Clinical Concentration. 25% came into the program with a BSW or BSSW degree. 25% indicated they received full advanced standing and the same percentage indicated they received partial advanced standing. 50% did not have any advanced standing.
2. *Foundation Competencies.* Students were asked to rate their level of preparedness following completion

of the MSW program on 9 competencies on a 5-point scale with anchor points of: 5 = very well prepared; 4 = well prepared; 3 adequately prepared; 2 = minimally prepared; and 1=Not Prepared. When taking all 9 competencies together, 28% of respondents on the graduate exit survey indicated that they were “very well prepared” and 92% of respondents indicated that they were at least “well prepared.” This exceeded the benchmark of 75% of respondents indicating they were at least “well-prepared” in the 9 foundation competencies. The average score for all competencies was 4.2 out of 5.0. The competency in which respondents indicated they were best prepared was: Demonstrate ethical and professional behavior (50% indicating “very well prepared,” and 100% indicated at least “well prepared”). The area where respondents felt the least prepared was “Engage in policy practice” (0% indicating “Very Well Prepared”, 75% indicating “Well Prepared”).

3. *Concentration Competencies.* All students in the Lourdes Online MSW Program are currently in the Clinical Concentration. Respondents were asked to rate their level of preparedness for each of their concentration level practice competencies. For the Clinical Concentration, 89% of respondents indicated that they were at least ‘well prepared’ on nine competencies overall.
4. *Teaching and Curriculum.* Respondents evaluated the quality of 18 areas of the MSW program using a 5 – point scale ranging from very satisfied (5) to very dissatisfied (1). Areas include curriculum, teaching, classroom space and technology, and field education. When taking all 18 program areas together, 81% of respondents indicated that they were either “very satisfied” or “satisfied”.

Respondents were asked to ‘grade’ professors in the MSW Program based on their ability to prepare them to be an effective social worker. 50% of respondents gave professors in the MSW program an A- or higher. The average grade was an A-.

5. *Mentoring.* 75% of respondents indicated they were at least ‘satisfied’ with the quality of academic mentoring. 75% of respondents indicated that their academic mentor met or exceeded their expectations and 75% indicated that their mentor was either ‘valuable’ or ‘very valuable’ in shaping their educational plan. 75% of respondents indicated that they typically met with their mentor face to face and 25% indicated they typically met with their mentor by e-mail. 100% of respondents indicated they met at least once a semester with their mentor. The average grade that respondents gave their mentors was an B+. 33% rated their mentors an A- or better and 67% rated their mentors a B or better.
6. *Diversity.* Students were asked to rate their level of agreement with four statements regarding Diversity at the SLU-SSW. When asked if there is a commitment to diversity at the SLU-SSW 50% of respondents ‘agreed’ with this statement and 50% had no opinion. When asked if they felt safe at SLU-SSW 75% ‘agreed’ or ‘strongly agreed’ with this statement. 25% indicated no opinion. No respondent disagreed with this statement. 75% ‘agreed’ or ‘strongly agreed’ that SLU-SSW was welcoming and 75% ‘agreed’ or ‘strongly agreed’ that they felt valued and respected at the SLU-SSW. 25% indicated they had no opinion on these two statements.
7. *SLU-SSW Support Services.* 50% indicated that that they were either ‘very satisfied’ or ‘satisfied’ with the quality of the School’s admission process. 25% were ‘neutral’ and 25% were ‘dissatisfied.’ 50% of respondents were ‘satisfied’ with the quality communications and information from the MSW Program Office and 50% were ‘dissatisfied.’ 50% were at least ‘satisfied’ with the quality of assistance from the MSW Field Office and 50% indicated they were ‘dissatisfied.’
8. *SLU Support Services.* Students were also asked to rank the adequacy of 5 University Supportive Resources areas using a 5 – point scale ranging from very satisfied (5) to very dissatisfied (1). 25% indicated they were ‘very satisfied’ with *the librarian and library services*. Most of the rest of the

services offered by SLU were not used by respondents. 25% indicated they were ‘very satisfied’ with SLU financial services and 25% indicated they were ‘very dissatisfied.’

9. *Overall Rating.* When asked to indicate how satisfied respondents were overall with the education they received at SLU-SSW 75% indicated they were at least ‘Satisfied’. 25% indicated they were ‘Neutral.’ 25% indicated they were “Very Satisfied.” Respondents were also asked to indicate how likely on a scale from 1-10 (10 being most likely and 1 being least likely) they were to recommend the SLU-SSW to a friend or colleague. 50% rated their likelihood an 8, 25% a 6 and 25% between 0 and 4. No one ranked the program a 9 or a 10. This is a significant drop from 2017 when 100% ranked the program between a 9 and a 10. The average score was a ‘6.25’ out of ‘10.’
10. *Qualitative Comments.* Students were asked to describe the strengths and weaknesses of each of the concentrations, field education, values and ethics, the research option and the MSW program overall. The most commonly cited strengths of the program were the knowledge, support and dedication of professors. The most commonly cited areas in the program that need to be strengthened were the need for better communication and collaboration and the need for more elective options for students. See Table 3. for specific comments.

2018 Field Education Learning Agreements (See Tables 2.1a,b-2.4a,b For Full Results)

2018 Foundation Practica Learning Agreements (Table 2.1a,b)

A total of 56 2017-2018 learning agreements were rated on 19 practice behaviors spanning the 9 foundation practice competencies using a 5 point scale for the 2017-2018 academic year. The anchors of the scale were as follows: (1) Performance is generally unacceptable; (2) Student inconsistently meets competency; (3) Student meets competency most of the time; (4) Student consistently meets competency; and (5) Student consistently exhibits mastery of competency. **The benchmark for this scale is a mean of 4.0 indicating that, on average, students will consistently meet each competency.** These competencies, part of the revised EPAS 2015 set of competencies and practice behaviors, were developed and newly adopted in the fall of 2016 and implemented in the spring of 2017.

Taking all 19 items together, the average score of for all 2017-2018 learning agreements in foundation practicum was 4.2 indicating that students consistently met competency and that the overall benchmark was achieved. This was the same score as in the Spring of 2017. The practice behavior in which students were rated most highly was: Demonstrate empathy and effective interpersonal skills with clients (4.42). Competency 2 (Engage diversity and difference in practice) was the highest rated competency with a combined score across two practice behaviors of 4.39. The practice behavior in which students were rated lowest was: *Identify, analyze and advocate for social policies at the local, state or federal level that impact social well-being, service delivery, and access to social services* (3.89). While this score was the lowest, it still indicates that students largely and consistently met competency in this area. This score was, however, one-tenth of a point below our identified benchmark. This is an areas in the curriculum requiring attention given it has historically been the lowest rated area for the last 3 to 5 years.

Students were also rated on 10 professional work behaviors. These work behaviors are the same as in previous years. **The average score across all work behaviors was 4.4 indicating that students consistently met or exhibited mastery of the competency and that the overall benchmark was achieved.** As in previous years,

the lowest rated behavior was *Assertiveness* (4.13). The highest professional behaviors rated were: (1) Personal appearance; and (2) Appropriate use of technology (4.62)

All students passed foundation practica for 2018.

2018 Community and Organization Concentration Practica Learning Agreements (Table 2.2a,b)

A total of 21 2017-2018 learning agreements were rated on 15 practice behaviors spanning the 9 Community and Organization Concentration practice competencies using a 5 point scale for the 2017-2018 academic year. The anchors of the scale were as follows: (1) Performance is generally unacceptable; (2) Student inconsistently meets competency; (3) Student meets competency most of the time; (4) Student consistently meets competency; and (5) Student consistently exhibits mastery of competency. **The benchmark for this scale is a mean of 4.0 indicating that, on average, students will consistently meet each competency.** These competencies, part of the revised EPAS 2015 set of competencies and practice behaviors, were developed and newly adopted in the fall of 2016 and implemented in the spring of 2017.

Taking all 15 items together, the average score of for all 2017-2018 learning agreements in Community and Organization Concentration practicum was 4.23 indicating that students consistently met competency and that the overall benchmark was achieved. This was the same as in Spring 2017. The practice behavior in which students were rated most highly was: Engage in advocacy or community awareness activities (4.5). The practice behaviors in which students were rated lowest were: (1) *Participate in policy analysis, development, and practice within legislative or organizational bodies* (4.0); and (2) *Participate in resources development activities* (4.0). While these scores were the lowest, they still indicate that students consistently met competency in these areas.

Students were also rated on 10 professional work behaviors. **These work behaviors are the same as in previous years. The average score across all work behaviors was 4.42 indicating that students consistently met or exhibited mastery of the competency and that the overall benchmark was achieved.** As in previous years, the lowest rated behavior was *Assertiveness* (4.14). The highest professional behavior rated was *Appropriate use of Technology* (4.71).

All students passed Community and Organization Concentration practica for 2017-2018.

2018 Clinical Concentration Practica Learning Agreements (Table 2.3a,b)

A total of 133 2017-2018 learning agreements were rated on 18 practice behaviors spanning the 9 Clinical Concentration practice competencies using a 5 point scale for the 2017-2018 academic year. The anchors of the scale were as follows: (1) Performance is generally unacceptable; (2) Student inconsistently meets competency; (3) Student meets competency most of the time; (4) Student consistently meets competency; and (5) Student consistently exhibits mastery of competency. **The benchmark for this scale is a mean of 4.0 indicating that, on average, students will consistently meet each competency.** These competencies, part of the revised EPAS 2015 set of competencies and practice behaviors, were developed and newly adopted in the fall of 2016 and implemented in the spring of 2017.

Taking all 18 items together, the average score of for all 2017-2018 learning agreements in Clinical Concentration practicum was 4.3 indicating that students consistently met competency and that the overall benchmark was achieved. This was the same score as in Spring 2017. The practice behaviors in which students were rated most highly were: (1) *Identify and apply relevant ethical principles in clinical practice* (4.43); and (2) *Use advanced clinical skills to engage diverse clients and constituencies* (4.43). The practice behavior in which students were rated lowest was: *Acquire strong knowledge of relevant governmental and*

agency policies in order to advocate for clients. (4.06). While this score was the lowest, it still indicates that students consistently met competency in this area.

Students were also rated on 10 professional work behaviors. **These work behaviors are the same as in previous years. The average score across all work behaviors was 4.54 indicating that students consistently met or exhibited mastery of the competency and that the overall benchmark was achieved.** As in previous years, the lowest rated behavior was *Assertiveness* (4.3). The highest professional behaviors rated were *Personal appearance* (4.69) and *Appropriate use of Technology* (4.7).

All students passed Clinical Concentration practica for 2017-2018.

2018 Online Lourdes University Field Education Learning Agreements (See Tables 2.4a,b For Full Results)

A total of 19 learning agreements were rated on 18 practice behaviors spanning the 9 Clinical Concentration practice competencies using a 5 point scale for the 2017-2018 academic year. The anchors of the scale were as follows: (1) Performance is generally unacceptable; (2) Student inconsistently meets competency; (3) Student meets competency most of the time; (4) Student consistently meets competency; and (5) Student consistently exhibits mastery of competency. **The benchmark for this scale is a mean of 4.0 indicating that, on average, students will consistently meet each competency.** These competencies, part of the revised EPAS 2015 set of competencies and practice behaviors, were developed and newly adopted in the fall of 2016 and implemented in the spring of 2017.

In 2017-2018, Practice Behavior 1 under competency 1 (Demonstrate knowledge and skills specific to population in providing clinical social work) was not available. Taking the other 17 items together, the average score of for all 11 Spring 2017 learning agreements for the SLU-SSW Online MSW Program at Lourdes University in Clinical Concentration practicum was 4.32 indicating that students consistently met competency and that the overall benchmark was achieved. The practice behaviors in which students were rated most highly was *Address disparities in clinical, organizational and community practice levels as they impact client systems* (4.68).

The two practice behaviors in which students were rated lowest were: *Use policy practice approaches to advocate for social policies* (4.16); and (2) *Use practice experiences and theory to inform scientific inquiry and research* (4.16). While these scores were the lowest, they still indicate that students consistently met competency in these areas.

Students were also rated on 10 professional work behaviors. **The average score across all work behaviors was 4.39 indicating that students consistently met or exhibited mastery of the competency and that the overall benchmark was achieved.** The highest professional behaviors rated were: (1) *Personal Appearance related to Agency Standards* (4.53). The lowest rated behavior was *Assertiveness* (4.26). These were similar scores as the previous year.

All students in the SLU-SSW Online Program at Lourdes University passed Clinical Concentration practica for 2017-2018.

Association of Social Work Board (ASWB) Test Scores

ASWB Masters Exam 2013-2017

1. In 2013, 53 SLU MSW graduates took the ASWB Masters (LMSW) test for the first time with a first time pass rate of 87% (46/53) and retest pass rate of 100% (n=2) for total pass rate of 87%. The national pass rate for first time test takers was 82% and retest pass rate was 31% for a total pass rate of 71%.

2. In 2014, 64 SLU MSW graduates took the ASWB Masters (LMSW) test for the first time with a first time pass rate of 91% (58/64) and retest pass rate of 67% (2/3) for total pass rate of 90%. The national pass rate for first time test takers was 82% and retest pass rate was 33% for a total pass rate of 71%.
3. In 2015, 100 SLU MSW graduates took the ASWB Masters (LMSW) test for the first time with a first time pass rate of 87% and retest pass rate of 27% for total pass rate of 81%. The national pass rate for first time test takers was 81% and retest pass rate was 29% for a total pass rate of 69%.
4. In 2016, 71 SLU MSW graduates took the ASWB Masters (LMSW) test for the first time with a first time pass rate of 86% and retest pass rate of 50% for total pass rate of 77%. The national pass rate for first time test takers was 81% and retest pass rate was 32% for a total pass rate of 70%.
5. In 2017, 91 SLU MSW graduates took the ASWB Masters (LMSW) test for the first time with a first time pass rate of 89% and retest pass rate of 7% for total pass rate of 77%. The national pass rate for first time test takers was 81% and retest pass rate was 36% for a total pass rate of 70%.

ASWB Clinical Exam 2013-2017

1. In 2013, 29 SLU MSW graduates took the ASWB Clinical exam (LCSW) for the first time with a pass rate of 76% and 27% of 22 repeat test takers passed the exam for a total pass rate of 55%. The national averages for first time and repeat pass rate was 78% and 37% respectively for a total pass rate of 67%. In 2012, 0 SLU MSW graduates took the ASWB advanced generalist test.
2. In 2014, 54 SLU MSW graduates took the ASWB Clinical exam (LCSW) for the first time with a pass rate of 83% and 26% of 27 repeat test takers passed the exam for a total pass rate of 64%. The national averages for first time and repeat pass rate was 78% and 38% respectively for a total pass rate of 67%.
3. In 2015, 43 SLU MSW graduates took the ASWB Clinical exam (LCSW) for the first time with a pass rate of 79% and 37% of 27 repeat test takers passed the exam for a total pass rate of 63%. The national averages for first time and repeat pass rate was 76% and 35% respectively for a total pass rate of 64%.
4. In 2016, 57 SLU MSW graduates took the ASWB Clinical exam (LCSW) for the first time with a pass rate of 82% and 38% of 26 repeat test takers passed the exam for a total pass rate of 69%. The national averages for first time and repeat pass rate was 78% and 36% respectively for a total pass rate of 67%.
5. In 2017, 50 SLU MSW graduates took the ASWB Clinical exam (LCSW) for the first time with a pass rate of 76%. 53% of 32 repeat test takers passed the exam for a total pass rate of 67%. The national averages for first time and repeat pass rate was 78% and 40% respectively for a total pass rate of 68%.

TABLE 1. 2018 MSW GRADUATE EXIT SURVEY RESULTS

In the 2017-2018 academic school year a total of 46 graduates from December 2017, May 2018 and August 2018 completed the MSW Graduate Exit Survey. A total of 83 surveys were sent to students. The response rate was 55%. The primary purpose of the survey is to provide information that will improve the MSW program and facilitate long range planning.

- 1. **Mean Age:** 28 years
- 2. **Gender:** 89% Female; 11% Male
- 3-4. **Ethnicity:** [Error]
- 5. **Concentration:**
 - Clinical 91.3% (n=42)
 - Comm. & Org. 4.4% (n=2)
 - ABA 4.4% (n=2)
- 6. **Came to SLU with an BSSW/BSW?:** Yes: 35%
No: 65%
- 7. **Received Advanced Standing:** Full: 28%
Partial: 4%
None: 67%
- 8. **Considered a full or partime student?** Full: 83%
Part: 17%
- 9a. **Mean # of hours worked in a social work position while in the MSW Program:** M=4 (n=37)
- 9b. **Mean # of hours worked in a non-social work position while in the MSW Program:** M=4 (n=36)
- 9c. **Mean # of hours worked as a graduate assistant while in the MSW Program:** M=6 (n=31)
- 10. **Mean commuting distance to SLU campus (One-Way):** M=19Miles
(R: .5-164)
- 11. **Preferences for Class Formats:**

Format/Preference	1 st Choice	2 nd Choice	3 rd Choice	4 th Choice
Traditional Format (2.5/3.5;1x/wk)	80%	7%	7%	7%
Condensed/Weekend	4%	30%	30%	35%
Intercession	9%	22%	41%	28%
Online/Hybrid	9%	41%	10%	30%

12. Now that you have completed the MSW Program, please rate by placing an “x” in your selected box, reflecting how well prepared you are to do each of the following (N=46):

MSW FOUNDATION PROGRAM COMPETENCIES AND PRACTICE BEHAVIORS						
Definitions	Very well prepared	Well prepared	Adequately Prepared	Minimally Prepared	Not Prepared	Rating Average
Ratings	(5)	(4)	(3)	(2)	(1)	
1. Demonstrate ethical and professional behavior	54%	33%	13%	0%	0%	4.4
2. Engage diversity and difference in practice.	37%	35%	24%	4%	0%	4.0
3. Advance Human Rights and Social, Economic and Environmental Justice	28%	41%	24%	4%	2%	3.9
4. Engage in Practice-Informed Research and Research-Informed Practice.	28%	28%	33%	9%	2%	3.7
5. Engage in Policy Practice.	15%	30%	46%	4%	4%	3.5
6. Engage with Individuals, Families, Groups, Organizations and Communities.	39%	43%	17%	4%	0%	4.2
7. Assess Individuals, Families, Groups, Organizations and Communities.	30%	50%	15%	4%	0%	4.1
8. Intervene with Individuals, Families, Groups, Organizations and Communities.	35%	35%	26%	4%	0%	4.0
9. Evaluate Practice with Individuals, Families, Groups, Organizations and Communities.	22%	48%	24%	7%	0%	3.9

13. Community & Organization Concentration Graduates Only: On the Basis of your MSW studies in the School of Social Work, how well prepared were you to do each of the following (N=2):

COMMUNITY & ORGANIZATION CONCENTRATION COMPETENCIES & PRACTICE BEHAVIORS						
Definitions	Very well prepared	Well prepared	Adequately Prepared	Minimally Prepared	Not Prepared	Rating Average
Ratings	(5)	(4)	(3)	(2)	(1)	
1. Use codes of ethics and human rights principles to guide practice with communities and organizations?	100%	0%	0%	0%	0%	5.9
2. Demonstrate culturally competent practice with communities and organizations?	100%	0%	0%	0%	0%	5.0
3. Approach community and organizational planned change using logical, scientific and theoretical frameworks to organize and/or sustain advocacy and/or support networks?	0%	50%	50%	0%	0%	3.5
4. Use research and professional expertise to improve practice with communities and organizations?	50%	50%	0%	0%	0%	4.05

5. Provide leadership in a variety of roles in community and organizational practice?	100%	0%	0%	0%	0%	5.0
Engage community and organizations in a planned change process using logical, scientific and theoretical frameworks?	50%	50%	0%	0%	0%	4.5
Approach community and organizational planned change using logical, scientific and theoretical frameworks to plan and/or conduct an assessment of community or organizational needs and strengths with stakeholders?	50%	50%	0%	0%	0%	4.5
Approach community and organizational planned change using logical, scientific and theoretical frameworks to engage in community and organizational practice?	100%	0%	0%	0%	0%	5.0
Use research and professional expertise to evaluate practice with communities and organizations?	50%	50%	0%	0%	0%	4.5

14. Clinical Concentration Graduates Only: On the Basis of your MSW studies in the School of Social Work, how well prepared were you to (n=42):

CLINICAL CONCENTRATION COMPETENCIES & PRACTICE BEHAVIORS						
Definitions	Very well prepared	Well prepared	Adequately Prepared	Minimally Prepared	Not Prepared	Rating Average
Ratings	(5)	(4)	(3)	(2)	(1)	
1. Demonstrate professional behavior consistent with social work values and ethics in clinical practice?	61%	37%	3%	0%	0%	4.6
2. Demonstrate competence in working with diverse families and performing a bio-psycho-social-spiritual assessment?	50%	34%	8%	8%	0%	4.3
3. Integrate human rights and social, economic, and environmental justice into clinical practice?	39%	42%	16%	3%	0%	4.2
4. Use an evidence-informed practice process in clinical work with individuals, families, groups, and larger systems?	41%	35%	24%	0%	0%	4.2
5. Use policy practice approaches to advocate for social policies that enhance clients and clinical service delivery?	18%	34%	45%	3%	0%	3.7
6. Demonstrate effective client engagement skills in clinical practice?	53%	34%	13%	0%	0%	4.4
7. Demonstrate effective client assessment skills in clinical practice?	47%	34%	13%	5%	0%	4.2
8. Demonstrate effective client intervention skills in clinical practice?	34%	42%	21%	3%	0%	4.1
9. Use research and clinical expertise to evaluate client, practice, and program outcomes?	24%	39%	29%	8%	0%	3.8

15. ABA Concentration Graduates Only: On the Basis of your MSW studies in the School of Social Work, how well prepared were you to (N=2):

APPLIED BEHAVIOR ANALYSIS CONCENTRATION COMPETENCIES & PRACTICE BEHAVIORS						
Definitions	Very well prepared	Well prepared	Adequately Prepared	Minimally Prepared	Not Prepared	Rating Average
Ratings	(5)	(4)	(3)	(2)	(1)	
1. Construct applied behavior analysis services within the context of responsible professional social work and behavior analysis codes of ethics?	0%	100%	0%	0%	0%	4.0
2. Demonstrate competent applied behavior analysis practice to social work clients?	0%	100%	0%	0%	0%	4.0
3. Provide leadership in addressing social constraints that inhibit the expression of human fulfillment and human rights, especially regarding diverse and vulnerable populations?	0%	0%	100%	0%	0%	3.0
4. Design and evaluate applied behavior analysis services provided to social work clients?	0%	100%	0%	0%	0%	4.0

16. Please rate your satisfaction with the following aspects of the MSW Program. Please use the “Comments” section to cite specific strengths and/or make suggestions for improvements (N=44).

5=Very Satisfied (VS) 4=Satisfied (S) 3=Neutral(N) 2=Dissatisfied (D) 1=Very Dissatisfied (VD)
Please circle the number of your rating with the scale definitions above.

Aspect	Very Satisfied %	Satisfied %	Neutral %	Dissatisfied %	Very Dissatisfied %	Ave. Rating
a. Quality of Teaching	27	61	10	2	0	4.1
b. Level of expertise of professors in course subject matter(n=43)	37	51	10	2	0	4.2
c. Level of safety, respect and inclusion you felt in the classroom	39	39	20	2	0	4.2
d. Variety of courses offered.	17	59	27	7	0	3.9
e. Quality of Courses Offered	20	46	24	10	0	3.8
f. Availability of Course Offerings	20	32	37	12	0	3.6
g. Quality of classroom space	34	49	12	2	2	4.1
h. Level of course-related technology available	24	56	17	2	0	4.0
i. Ability of instructors to effectively use technology in their courses	27	51	20	2	0	4.0
j. Quality of Field Education (Pract./Seminar)	41	39	10	10	0	4.1
k. Foundation Courses	32	24	22	15	7	3.6
l. Concentration Core Courses	54	27	10	7	2	4.2
m. HBSE	63	29	7	0	0	4.6
n. Policy Sequence	10	49	17	17	7	3.4
o. Research Sequence	27	39	27	5	2	3.8
p. Electives	33	50	18	0	0	4.2
q. Values and Ethics	39	27	24	7	2	3.9

<i>Aspect</i>	Very Satisfied %	Satisfied %	Neutral %	Dissatisfied %	Very Dissatisfied %	Ave. Rating
<i>r. Mission Practice Global Public Health SWRK5501</i>	12	22	27	24	15	2.9

17. Please provide any additional comments about the quality of teaching and courses at the MSW Level (Please identify specific courses or instructors as appropriate).

Human Behavior II with Mancini, Clinical Diagnosis, Individuals and Family and Groups with Shannon Cooper-Sadlo

Some of the professors (specifically adjunct professors, i.e. Gladden), did not spend adequate time grading assignments and providing feedback to students. I got the sense that they just did not have time to put into the class what we needed. The most effective courses were taught by professors who included social justice within their course work and showed great expertise in the area of the curriculum (this specifically showed for Shannon Cooper-Sadlo, Julia Lopez, and Chaz). I found that on occasion professors had a difficult time challenging racist, sexist or homophobic comments made within the classroom.

Values and Ethics - The cases presented were simple and had no challenging ethical dilemma. There was no use of relevant cases in order to help challenge students to grow and stretch their mindsets on SW ethics. This was a common reaction of myself and others in Dr. Heinicke's Class. Although he is a kind soul, not much was learned and it could have been a very growth inspiring experience had it been filled with relative examples. It honestly was a lot more of a dated prospective to the field of social work and never truly left his perspective which seems to be very limited. - Jill Taylor's Advanced social work practice class was extremely practice based and this is what so many student's in the MSW program comment on missing out on. She was able to truly create a safe place for students to feel empowered, share, grow, be challenged in their thinking and learn. In most classes, students are bored or feel as if a certain class is a waste of time due to unchallenged content or impractical information. This was an extremely practical and empowering teaching style that Jill Taylor used. Other professors would truly model their programs around her challenging and engaging qualities that she incorporates into the classroom. Every student walked away better after her classes. This was all verbally expressed by all of the fellow classmates.

Most classes and professors ran professionally however the classes I had with Mr Todd Richardson did not. He continually would argue with students and chosen topics, make inappropriate comments , allowed students to drink at lobby day and at the end of his class went out drinking with students. Saying class was over so they were no longer his students .

Jessica Adams, SWRK 5707-01, seems very stressful when conducting lectures.

The quality of teaching was great. I loved every class that I was in, with the exception of a few incidents in class.

The majority of my courses were taught with high quality instructors. A few, in particular, stand out. HSBE II with Dr. Mancini and Clinical Diagnosis and Intervention with Dr. Cooper-Sadlo were excellent, primarily because the instructors were passionate about the course material, made classes interactive and interesting, and made students feels like practicing social workers from the get-go. Both instructors also truly reflected the tenants of social work; I required some special accommodations at the end of the semester and they worked with me unlike any other professors ever have. Adjunct professor, Charles (Chaz) Franke was also exceptional; he made class very conversational and enjoyable.

I rarely felt challenged to think or write at a higher level. I often put in very little effort and still maintained good grades. While I enjoyed getting good grades, I don't feel that it really helped me to learn. I would have enjoyed more constructive feedback from my teachers. I also think I would have benefited for more diversity among the faculty.

I had some issues with the instructor for Policy Practice. I feel that she was too busy in her personal life to create a good learning atmosphere for students. She was not responsive to email questions, not quick in giving

feedback, and not good at listening to requests and feedback from students.

All professors were kind but some seemed not to be knowledgeable in the courses they were teaching. 5720 had a nice Professor but the structure of the class was inadequate. I felt like I had to teach myself all the material. Individuals, groups and families should have been taught as three different classes or differently because I learned close to nothing in that class and care into my practicum with no skills from this class.

I felt that the ethics course with Cara Wallace was slanted toward the specific views of the professor, and at times I felt that I was being patronized by the instructor because my reflections of an ethical situation did not align with her views. I also felt patronized due to my "lack of religious views" during ethical discussions. After several class periods I did not feel comfortable speaking in class.

I am extremely pleased with all of the courses I took, the enthusiasm and knowledge of the professors, and the quality of the courses. The only complaint I have was my education Liaison, but even then I enjoyed my seminar class and had a great practicum placement.

The quality of the teaching and the courses were hit and miss. Mancini, Henicke, Matthieu, Sadler-Cooper, Helton and the Minors along with Jill Taylor and Kristen (policy) taught extremely well conducted courses. If this was the curriculum standard across the board, SLU would be the top school for social work in the nation. Unfortunately, Schnider (Human Behavior 1), Jess Adams (policy 2) and the guy that taught the public health online course were among the worst academic experiences one can encounter. These folks stain the potential of the school and their future alums.

For clinical concentration classes - instructors should have experience, interest, and competence. It's helpful to hear about direct application of concepts and to situate theory and research into practice environments. If an instructor is too far removed from direct practice, and cannot make the connection to the realities of those with whom we will work, they should not be teaching core classes. All of Mancini's classes were excellent (HB2 and Diagnosis), as was the class I took with Shannon Cooper-Sadlo (EBP with Children and Youth). I've heard good things about Dr. Matthieu and Chaz Franke, and I would have liked to take courses with them. I am not particularly interested in policy practice, but Professor McMillian's course was good. I appreciated Professor's Helton's willingness to make connections between policy, research, and people in the community (this could be expanded in other classes, namely short research projects or presentations from community members or those in the field). Dr. Wallace and Professor Barrett were also excellent. Trauma practice with kids should be examined and revised - 8 week format was unhelpful.

In my time at SLU I had the both the best and worst instructors of my collegiate career. This information was expressed in my course evaluations but after hearing from other students the same issues were happening with the same professor in the semester following my statements about my policy course. On the other hand many of the instructors have been great and offered a wide range of knowledge and experience to share.

Many professors did not seem to actually grade or read over the assignments and just gave out good grades.

The quality of teaching throughout the program is inconsistent. There are some really great professors (like Dr. Matthieu, Dr. Mancini, Rich, and Dr. Huang) that you could tell were invested in what they were teaching and genuinely cared about student learning. And then there were a handful of professors (Jessica Adams and Danny Gladden) where I sincerely regret the fact that I paid almost \$3000 to have that experience. In my experience with those professors, they were dismissive and not concerned about student learning as evident by their grading timelines and attitude in the classroom. In turn, it made caring about the subject material (Public Policy and SW Practice with Communities and Organizations) challenging. It was really unfortunate but I do not think this is the norm in the School of Social Work.

Patrick Young is a great instructor for the community and organizing concentration. His presence enhances the program and SLU should make active efforts to retain him. The tenured comm/org instructors like Birkenmaier and Dr. McMillin were fantastic and I wish there had been more opportunities to take courses with them. The Value and Ethics course could really use an overhaul. The way that it's taught now is more of a group therapy session than a seminar on values and ethics. That class is probably the one I was least satisfied with. We really never got to a point in class where values and ethics were meaningfully applied to our own practicum or work

situations. There were fictitious examples and role plays used to explore ethical dilemmas, but even that seemed too far removed for students to practice and retain the information.

The most beneficial courses that I had experienced through my MSW included human behavior and diagnosis. Mancini was by far the best professor I have had in the program. These classes were the foundation for my clinical skills and he truly masters teaching these concepts in a way for students to comprehend and apply.

I believe there needs to be more on specific clinical interventions, types of therapy such as family therapy, and a greater number of elective courses to choose from.

What I am finding working as a mental health therapist is that I was decently prepared in understanding theory, identifying intervention approaches, and theoretically completing a biopsychosocial assessment. (I was in a hospital setting before this position for practicum and the biopsychosocial assessment felt more natural in that environment.) I have not felt suitably prepared for implementing specific interventions, like developing a DBT-based treatment plan for a 26-year-old Female with Borderline Personality Disorder, who recently attempted suicide after incarceration. I wish the Advanced Clinical Social Work Course could have provided more of an environment for such assignments. Granted, this may have been covered in the Community Mental Health course that I was not able to take due to students in Ohio taking precedence.

Dr. Jesse Helton was a phenomenal research methods professor. He was very caring in that he wanted to make sure students understood and had support when needed. Christine Schnieder was phenomenal at teaching HBSE. Her clinical experience provided many real life connections to theories and treatment modalities. She was a very fair grader and offered great feedback on assignments.

This varies greatly between courses and instructors. Professors such as Shannon Cooper-Sadlo and Michael Mancini were extremely helpful in providing useful and engaging course content. I appreciated their attention to real practice scenarios and the provision of interesting and applicable texts. It seemed as though classes such as Community and Organizations and Practice with Individuals, Families, and Groups can be much improved upon. In particular, my experience in Community and Org, was such that I perceived the Professor was perpetually unprepared, did not use the text, and relied solely on the discourse of students to fill the time. When I took Individuals, Families, and Groups, the Professor was wonderful, but the course was very unorganized in terms of content and structure.

Overall, I was satisfied with the quality of teaching - the professors definitely care about student growth and development. Sometimes the adjunct professors were not as skilled as professors, but I appreciated the "real world" experience they brought to the classroom

My first year instructors lacked passion and an ability to make class material seem relevant. I felt I didn't learn anything in some foundation classes (Social Policy, Policy Practice for Social Justice, Research) that I would retain throughout my career versus just in the classroom setting. I enjoyed HBSEII, CBT, Advanced Practice in Trauma: Children and Youth, Clinical Diagnosis and Assessment and Couples/Marital counseling for the practical aspects of the course.

I found some of the professors for the foundation courses were amazing and knowledgeable including Kristen Kremer, and Laurie Brockhaus. When considering the higher level courses: Michael Mancini, Chaz Franke, Monica Matthieu, and Sue Tebb are excellent professors and truly want their students to excel. I would have loved to take additional courses from them.

All classes taught by Chaz Frankie, Craig and Alicia Miner, and Shannon Cooper Sadlo were incredibly helpful in helping me to increase my clinical Skills. Unlike other classes, these classes and professors left me feeling as though I had gotten the true clinical experience I was looking for when coming to SLU.

I felt that the SWRK 5501 course was redundant to other public health courses I took in undergrad at SLU and it provided no new material for me. I was upset I had to pay \$3,000 out of pocket to take that course over the summer.

I regret not being able to take motivational interviewing.

18. Please identify any electives that you think were especially useful in your MSW education

SWRK 5808

The yoga and trauma intercession course taught with Laurie Brockhaus was amazing! Also any of the trauma-informed classes and working with youth courses were particularly good (and relative to my current work in the field).

Substance Use Disorders- This helped me to develop a way of explaining, in laymen's terms, how substance use affects the brain. Because of this, I was able to help certain people have empathy for others who suffer from such disorders.

My substance use courses but the introduction course and the advanced course were the most formative classes I took during my program and this was because of the Minors. The way that they set the advanced substance use interventions class up was extreme practice based which I full heartedly believe our program needs more of. I left the class feeling competent and sure of myself because they truly walked you through the process of what you need to know as substance use therapist. They did this by setting the class up like a regular work day. If the Minors could help SLU's MSW rework the framework of classes and how they are approached, it would know doubt produce some of the most prepared and empowered practitioners. This was all verbally expressed by fellow classmates.

Trauma with adults and partner violence course have been electives that are helping me in my career.

Death and dying.

Motivational Interviewing

Integrative and Complementary Health Practice was great, as was Men of Color, Myths and Health.

None- hardly any were offered and the interesting ones that were offered had times that did not fit well into my schedule. I had practicum or full time work M-F 8:00-4:30

Behavioral interventions with adolescents

Substance use and addiction

Motivational Interviewing with the Minors was likely the most influential course I took during the MSW curriculum. It was more of a way of seeing the world, self and others and the ability to practice it in a directly applicable way. Great job for this class.

Death, Dying, Grief, and Loss Evidence Based Practice with Children and Youth

Death and Dying

substance use interventions, death and dying, CBT, and trauma informed care.

CBT and SW Practice with Veterans and Military Service Members.

Death dying and grief. Extremely grateful to have taken it.

Motivational Interviewing--I wasn't even a clinical student and I found immense value in that class. That class really should be required for all MSW students. The skill development in that course was alarmingly rapid and I could really see measure improvement in my practice after each class period. At first I was a bit concerned by being taught by a husband/wife duo--Craig and Alicia Miner--but those concerns quickly faded. They are both experts in the field and incredibly gifted teachers. That elective really should be promoted more to all MSW

students regardless of concentration.

Substance abuse, trauma work

The Veterans course

I enjoyed all but one elective I took- the one I did not like was a course through Washington University. I believe they will all be useful in the end and, currently, I am not at a point in my new position where I could adequately discern which was the most useful.

Two of my electives transferred from a previously attended university. I was contacted by SLU to let me know they were counted as credit. I was very thankful for that and in fact whoever was in charge of it let me know before I even had a chance to ask. I really appreciated that.

I really appreciated Evidence-Based Practice with Children and Families. It provided not only theory, but practical interventions to use in my career. Additionally, though I don't plan to work in palliative care, I found Death, Dying, and Grief to be an extremely helpful class.

Cognitive Behavior Therapy, Advanced Counseling Skills for Substance Use Disorders, Trauma with Adults

Clinical Diagnosis, Advanced Clinical Social Work Practice

CBT for Social Workers Clinical diagnosis and assessment

advanced substance use counseling, diagnosis class, advanced human behavior, all trauma elective courses were absolutely wonderful.

I really enjoyed the Death, Dying, and Grief course that I took with Cara Wallace and Beth Barrett. The course was unique and so helpful in my professional and personal life. I also really enjoyed the CBT course with Jill Taylor. She was phenomenal and did a great job of teaching the content effectively and used a variety of teaching styles.

Community Mental Health

19. What are some areas of the MSW curriculum that need to be improved?

I think that policy and research needs to be integrated throughout the MSW curriculum. Many of the students had clinical concentrations and did not appear to value the policy or research courses, and by integrating the material in all the courses students may have been able to see the intersections between clinical work and policy/research (which is vital).

- More practice based classes - More specific therapy based course options. - Higher standards for involvement - professors would show up to class and not truly be present. i.e. texting throughout class, copy and pasting responses to course work and simply giving everyone an A (Danny Gladden). People in a masters level program should be challenged to grow and show up mentally and this type of modeling from professors does not inspire that. - More quizzes or reflections to monitor people actually doing the reading - in Dr. Mancini's class, there was weekly quizzes as a form of accountability - classmates reflected learning the most is his class due to a higher expectation that he held for us. - The program has low expectations for it's students and I think that it translates poorly into students level of commitment and energy put into learning. If you do not challenge students to rise to the next level, it will be hard to not grow stagnant in their learning. I saw this a lot in myself and classmates. When there was higher expectations and involvement from Profs., myself and others rose to the occasion.

The research class is very dry and if it could become an elective instead of required that would be great for future students. I have been in the field of social work for 16 years now and never done a day of research that was learned in that class nor will I as that is not something I want to do. I think of it was offered as an elective those students wanting to go into that field of social work would get more out of it rather than all of us having to take it.

More theories need to be taught and emphasized in most of classes. Need more classes about culture diversity.

The classes seemed out of sequence to me. Advanced Social Work Practice (Clinical) and Human Behavior in the Social Work Environment should be taught last, as they are the first things you encounter with clients. Public Health and Research should be taught the first semester, because most MSW's are not going to work on a research project right after graduation.

My Policy Practice for Social Justice class with Jessica Adams was subpar. Jess was difficult to get in touch with, assignments were unclear, quiz questions were ambiguous, her teaching methods were disorganized and unclear, and it took until the end of the semester to return nearly all of our assignments. Most students never knew where they stood in the class. We were constantly unsure whether or not we were doing assignments correctly.

More diversity among a variety of backgrounds

The public health course was the worst. There seemed to be minimal direction and the topic was not bad as engaging as it could have been.

I would like to see a greater variety of elective courses. I felt sometimes my options were limited.

Electives. Professors not only being knowledgeable on the material but knowing the schedule and what they wanted us to do. Clinical diagnosis with Shannon and HBSE II w/ Chaz were taught well and the schedule was followed and logical.

the public health course and the overall continuity between courses. When speaking with peers about the same class, it seemed like they were experiencing a different course.

I wish there were more electives offered. However, I enjoyed the electives I did have.

Policy is suffering. Kristen did great but Adams was confusing, demeaning and, in the end, worthless. Schnider also was terrible for human behavior. There was lots of name dropping ("Oh, Dan [Siegel], I said, you are so wrong and you know it hahahahaha. And he said, Oh.. Christine, you are so right."), impressed logic ("you don't really have to listen to the patient if you know the framework well enough") and terrible advice with handling agitated clients ("and I got right in his face and told him he could just leave but that that would be very bad for him - and he knew it"). Stain.

I think one of the strengths of the program is the faculty, as mentioned above. I would, however, recommend an examination of the rigor of some of the core classes. Students should have a sense of the place in which they are located. What does it mean to be a social work student attending a rich PWI institution that is insulated from the community a block or two down the street? How do students become self-aware and self-reflective about their privileges and how do they learn to respond to them in community and clinical settings? Sometimes I felt that certain classes and professors did not challenge us enough to make these connections. Besides that, there were some classes in which professors were teaching to the syllabus (i.e. the curriculum was designed, and they taught the curriculum without any additional input or reflection or interest on their part). They did not take ownership of the class, which led to confusion for students and a less interesting, and rigorous class (because faculty and students alike were trying to muddle through what was on the syllabus). It was like they were given a coat that didn't fit them and that they didn't feel very passionate about, but they put it on anyway.

Encouraging more crossover between specializations. As a clinical student I would like to have been more encouraged to take an ABA or communities course.

More critical feedback on assignments, not just easy grades. There are many areas lacking in the program such as information on specific community resources and what it is like to be hands-on in the field of social work.

Clinical Diagnosis - I get it, diagnosis is flawed and not a perfect system. I still need to know how to do it so I can get paid and hopefully work on making the system better. Advanced Practice - I'm honestly not sure what I was supposed to have gained from this class so I'm assuming that I didn't. I did not enjoy the structure of the course or the content and wish it would have focused on advanced social work practice beyond treatment planning for ONE client. I wish this course would have focused more on specific treatment modalities, how to

generally write treatment plans, and determining the best intervention for the client.

The Values and Ethics course and emphasizing practical application in it. The online only option for Public Health was nearly disastrous for me. I live with ADHD and try to avoid online classes at all costs, because I know I do poorly in them. I would have greatly preferred to take Public Health in-person. I also ended up enrolling in another public health course online which wasn't ideal, because the elective I had enrolled in was unexpectedly canceled a week before the semester began. The two online classes I took were the only ones I did not receive an "A" in and the program would be better off if there was a way for students like me to avoid enrolling in any online classes.

Availability of classes. There were a few times where a class I needed was not offered due to low enrollment. Considering the amount of money we pay as students, classes should be offered regardless of enrollment or made into an independent study.

The core classes need to be improved. Choices of electives need to be improved.

There is a lack of social diversity through the curriculum. The majority of clients are described either as Caucasian or African American, typically heterosexual, cisgender, and lower socioeconomic status. The only times I really found a class discussion, that lasted more than a half hour, was in the Health and Mental Health Interventions with Older Adults course taught by Dr. Tebb. She had asked a member of SAGE of PROMO Fund to come in and speak about LGBT elders. However, there was hardly ever discussions on working with other diverse clientele except for- understand one's personal biases, find culturally relevant information, and take diversity CEU's.

The public health course was very tedious and the group work assignments were extremely difficult to schedule. Since the class was online, I felt group work was more difficult to complete because there was no face-to-face class time with members of the group. Many of the people in my group were working full time, in practicum, and raising families. Having to do a group project on something we could have done individually and learned just as much was inconvenient and stressful.

I would appreciate more of a concentration on racial equity, and interacting with diverse populations.

More diverse course offerings; more opportunities for practice-based courses/assignments outside of practicum; more connection to current events

Danny Gladden's course- he mostly focused on his skills and professional life. His course felt irrelevant. It would have been nice to have additional resources and classes for mental health, and counseling.

Offering more therapy courses. I wish I would have had more therapy classes specific to various interventions

More community!

Given that we talked about motivational interviewing in all classes, yet I never was really able to completely learn it, I think it would be beneficial to offer this.

20. What overall grade would you give your professors in the MSW program based on their ability to prepare you to be an effective social worker?

A+	14%
A	19%
A-	42%
B+	14%
B	6%
B-	3%
C+	3%
Ave. grade	A-
A- or better	75%

21. MENTORING/ADVISING Please indicate your level of satisfaction with the following aspects of your academic mentoring/advising in the MSW Program.

<i>Aspect</i>	Very Satisfied %	Satisfied %	Neutral %	Dissatisfied %	Very Dissatisfied %	M
Overall Quality of Academic Advising	42	32	15	12	0	4.0
Ability of your advisor to help you know the courses you needed to take in order to graduate.	42	39	10	10	0	4.1
Ability of your advisor to help with career planning.	32	29	22	12	5	3.7
Responsiveness of your advisor to questions or concerns you had while in the MSW Program.	44	29	17	7	2	4.1

22. How well did your academic mentor/advisor meet your expectations?

Exceeded Expectation: 34%

Met Expectations: 51%

Well Below Expectations: 15%

23. How valuable was your MSW mentor/advisor in shaping your educational plan?

Very Valuable: 24%

Valuable: 42%

Minimally Valuable: 29%

Not at All Valuable: 5%

24. How did you typically meet with your mentor/advisor?

Face to Face: 66%

E-mail: 27%

Telephone: 7%

25. How often did you typically meet with your mentor/advisor?

Two or More Times a Semester: 17%

Once a Semester: 73%

Not at All:

10%

26. What overall grade would you give your mentor/advisor in the MSW program based on his or her ability to assist you in developing and completing your educational plan?

A+	4%	A	25%
A-	25%	B+	8%
B	8%	B-	0%
C+	17%	C	4%
C-	4%	D+	0%
D	4%	D-	0%
F	0%		

Ave. grade B+
A- or better 54%
B or Better: 70%

27. Please provide any comments about the quality of mentoring/advising at the MSW Level.

It may be beneficial to have students opt into choosing their own adviser. Not sure how this logistically would work, but feel that it would be helpful for students to be able to meet and greet with advisers prior to working with them for their entire graduate program. (this may aid to students forming a stronger relationship with their advisers).

Dr. Matthieu is an excellent mentor and adviser. She welcomed any and all concerns which I had. She even allowed me to express frustrations which I encountered without judging me. She candidly made me aware of what reality was and helped me change what I could and helped me accept those things which I could not change. She is empathetic, energetic, and demanded a 100% effort. In doing so, she brought out the best in me and all students under her. She was understanding and flexible. She deserved every bit of the Professor of the Year Award when she won it this year, and I am proud to say that I voted for her and I am blessed to have had her as a professor and adviser.

- My academic advisor was good. I met with her once. - My field work advisor was a poor experience. It took a lot of effort to get answers to questions that I would send and there was NO CONTACT with the site supervisor and them. There should be something that monitors this better because I felt like I was very forgotten and there were times where I truly needed questions answered.

My advisor was always there to answer any questions for me. She also helped me advocate for online classes and independent studies. If not for her I still be at SLU trying to get my classes done due to the inflexible schedule of classes.

Dr. Monica Matthieu was always answered all of my questions appropriately, but at times she seemed hurried and I felt like I couldn't finish everything I needed to talk to her about. In the last class that I had with her, she humiliated me in front of the class. Beth Barrett should let everyone who holds their hand up in class talk. She does not do this

Dr. Cooper-Sadlo was great and always responsive to my questions!

I didn't see her very often and probably could have figured most of it out without seeing her at all.

My advisor was great. I had my classes and everything mapped out so I truly only went to my advisor with minimal questions.

My advisor told me that I was going to be able to graduate. When I applied to graduate, I found out I was missing a class. He also never really helped me plan, just approved after I did most of the work. One semester he never responded back and I messed up my schedule a little.

I really appreciate Professor Barrett and her input into my course schedule and her always positive attitude and outlook.

We only met once, however my adviser was also responsive through email, and helpful with answering my questions.

Monica was fantastic. Best advisor I've ever had.

There is potential for mentoring/advising to be more than just a semester meeting to review course selection. But this is dependent on the advising professors willingness and ability to be more available. Quality of advising depends on the luck of the draw. For myself, I wish I had been able to talk to more faculty members about their experiences and about additional questions from class. Professors who were willing to take the time to talk and answer questions (even if only briefly) were the most helpful aspect of the program. If this were replicated and communicated to students, it would be an asset to the program.

My advisor was not knowledgeable of the program and often could not answer my questions or had to refer me to someone else. At times, the information he gave me was wrong.

I feel as though I truly gained a mentor through this program, so thanks!

I had a crummy advisor experience. There are absolutely MSW advisors doing an outstanding job and taking that role with their students very seriously. However, I had a faculty member who made it obvious that serving as an academic advisor wasn't particularly important. Honestly, I'm sympathetic more than disappointed or frustrated; as a tenured faculty member completing research, assisting students with academic planning is doing very little to advance their projects or career goals. I'm not sure how faculty are selected for advisor roles, perhaps that's the issue? If faculty must serve as an advisor, or must advise to be considered for promotion (or otherwise incentivized), that's inherently problematic and a disservice to the students. From my perspective, most students would rather be advised by an adjunct faculty member, a program coordinator, or student services staff member that has less experience and standing in the program if it meant the advisor would have more time and enthusiasm to allot to advising students.

I was assigned a mentor/advisor who had just started at the university. She was not the most knowledgeable individual of the curriculum offered through the program and the majority of her personal knowledge was based on her experiences in a different state. Although her personal experience provided fair insight, it was rather unhelpful for the Illinois/Missouri area. I had to do a lot of individual research to gain what little insight I needed for my own schedule. I worked as an academic advisor on campus, so I was already having to assist sixty-eight other individuals with their own academic futures. It would have been nice to not have the added struggle of my own MSW level academic future adding to the weight on my shoulders.

I think this is dependent on the student's desire to use this resource. I think my advisor was available and helpful, and I could have used this resource more had I perceived I needed or wanted to do so.

I couldn't be happier with my advisor and mentors in the MSW program. They took a vested interest in my learning and professional growth and I received a lot of support and guidance throughout my time at SLU.

I did not receive much guidance regarding the order in which to take classes. I did not get solid follow-up from my Adviser; when I had questions I often ended up speaking with someone a couple weeks after the original inquiry.

Jesse Helton was wonderful and truly made my experience at SLU less stressful.

28. DIVERSITY Please indicate your level of agreement with the following statements based on your experiences in the MSW Program at the SLU School of Social Work. (n=42).

Aspect	Strongly Agree (5) %	Agree (4) %	No Opinion (3) %	Disagree (2) %	Strongly Disagree (1) %	M
There is a commitment to diversity at the SLU School of Social Work.	27	49	15	7	2	3.9
I felt safe at the SLU School of Social Work.	39	56	2	2	0	4.3
The SLU School of Social Work was welcoming to all students.	24	51	10	15	0	3.9
I felt valued and respected at the SLU School of Social Work.	37	51	2	10	0	4.2

29. Please describe any perspectives or experiences you feel would elaborate on your answers regarding diversity at the SLU School of Social Work

There were many political things that occurred during my graduate program (local/national/global news) that were often not pulled into classroom conversations. Especially as it relates to local news and protests/shootings. I think that the professors could do a better job at preparing themselves for holding space to discuss things that may be effecting students within their classrooms.

I felt like I was valued and respected, even when stating my opposing viewpoints. I felt that way though, only if I kept my viewpoints to myself. I realize that my views are my own and aren't necessarily the same as everyone else's. However, there were times, such as in Values and Ethics in summer of 2017 when the first assignment was to tell my story of my political background. I was honest, candid, and followed the assignment's directions to the letter. I was given a "C" on the assignment. I felt, for no other reason, that my below average grade was given because of my personal beliefs. This was unfair as the assignment required us to be open about our personal beliefs. I felt that the instructor, Cara Wallace, failed to be an objective listener and grader when she deliberately required that we, the students, write subjectively about our personal beliefs. This was discriminatory in nature and action. If we are to respect all opinions, we have to respect all peoples, even if you disagree with them. Personally, it does not matter if one is more left or right-wing, liberal or conservative, red or blue, republican or democrat. My may concern is whether or not the person in question is able to support their beliefs with research, truth, logic, and reason. This is what ought be the standard for arguments and the forum in which we share it, our American society, is supposed to be a free marketplace of ideas where all opinions are respected. In this marketplace, people should be able to express their beliefs without fear of physical retaliation or loss of life or limb. Instead, in our society today, people are given labels if they express a certain belief. This labeling system does more to sew the seeds of hatred and division in our society. Social Justice is NOT giving validation to only one side of an argument and shouting down the other side. True justice is in allowing each side to make its case in a free and open forum, using truth, logic and reason, and allowing each individual to chose which beliefs they agree with and, above all, the choice to be able to formulate their own arguments and express their own beliefs without fear of retaliation.

If there is a commitment to diversity at SLU, that needs to be reflected in their staff, professors, etc. Not just a lip service.

SLU social work does provide diversity based on race and ethnicity, however when it comes to people returning to school to further their education in social work after being in the field for 10 years they do not. Time after

time myself and other students who had years of experience had to take foundation courses why students who graduated with BSW and came straight to MSW did not. Although they had courses fresh in their mind in class you could tell the lack basic knowledge that could have been learned if they had to take the foundation classes. In the foundation classes myself and other experience students would lead classes in discussion and sometimes be bored as the subject matter was something we had been practicing for years. Instead of SLU looking at students as degree level they should also look at experience level when assigning standings advance or not advance.

I experienced a few instances of students being called out to be somewhat of a spokesperson for their specific race or diverse experience. While I don't think that makes anyone feel unsafe (as the question suggests) that can feel very isolating and embarrassing. I don't think these questions in question 27 are really an accurate representation of whether or not the school is diverse or understanding/supportive of diversity

As a male and as a veteran it was hard to fit in. I was a bit older, too. I went the whole two years without any contacts from my classes. I made no friends and was not invited to any social events or study groups. I'm a friendly guy and am open and respectful to everyone. I noticed that many of the female students were young, shy and more comfortable with each other. I shared in class several times parts of my history I thought were relevant. I think my experiences I expressed ostracized me from my cohort. They tended to be shocked and disgusted by what I shared. Keep in mind, I just came from another university and had a plethora of friendships and study partners/groups. I don't have a problem creating social contacts. I felt I was discriminated against because of my age and sex. I could tell many of the girls felt uncomfortable around me.

You already have my feedback.

Regarding diversity, the university and faculty do a wonderful job acknowledging that diversity exists, but I do not feel that it and their staff take the extra step to understand and enact policy/programs that facilitates the entirety and scope of what diversity really is.

This isn't something that I personally experienced, but I noticed several times that School of Social Work students and sometimes faculty were not open to students with more conservative opinions and values. Heaven forbid you be a Republican in this program because you aren't going to make it very long without being judged or told that you're wrong, which I didn't always think was fair to those students. It's easy to take more liberal and democratic thinking for granted and assume that it's the correct way - especially when almost everyone else also identifies that way too - but it does a great disservice in what would be teachable moments. Because reality is that not everyone in Social Work or administrators or clients are going to have the same mindset and I felt like it was a good experience to have students in the classroom who challenged the norm, but their opinions weren't welcome.

There is this idea that as a program created by social workers for future social workers, with the backing of the CSWE and NASW Code of Ethics, there should be an inclusion that other programs seem to lack. The School of Social Work at SLU's diversity feels like a blanket inclusion- nothing really reaching out to promote diversity but nothing deterring diversity.

I felt valued, respected, and safe, but I am also a white, female, middle class student. It's rare that I don't feel safe and more often than not I feel valued and respected. I think the school could make more of an effort to focus on equity through course content and discussions.

There needs to be more in-depth focus on diversity and working with diverse populations.

30. Please rate your satisfaction with the following aspects of the University Support Services. Please use the “Comments” section to cite specific strengths and/or make suggestions for improvements. (n=43)

5=Very Satisfied 4=Satisfied 3=Somewhat Satisfied 2=Dissatisfied 1=Very Dissatisfied 0=Did Not Use

Aspect	Very Satisfied %	Satisfied %	Neutral %	Dissatisfied %	Very Dissatisfied %	Did Not Use %
<i>Quality of School Admissions</i>	32	44	15	0	0	10
Quality of communications and information from the MSW Program Office.	56	27	10	2	2	2
Quality of assistance from the MSW Field Education Office.	40	30	20	10	0	0
<i>1. Librarian and library services</i>	29	32	15	0	0	24
<i>2. Graduate Writing Center</i>	12	15	27	0	0	46
<i>3. Career Counselor & Services</i>	17	20	24	0	0	39
<i>4. SLU Health and Counseling</i>	24	10	22	5	0	39
<i>5. SLU Student Financial Services</i>	27	37	17	12	0	7

31. Please provide any specific comments about the MSW Program Elements and SLU Services

Financial aid and the Social work office messed up my transcript for independent studies numerous times. When they finally got it right I owed them 1,800 dollars before I could register for my final semester to graduate. Slu through these kind of road blocks at me continually through out my time there causing me to have to take less courses a semester and even having to take leave at my job to complete the program requirements

Everyone in the Financial Aid office was great. Any time I called they were able to answer me right away.

I had a very negative experience with a counselor at the counseling center.

My field liaison was great. She was very responsive, available, and helpful (also kind and supportive). The career counselor was available and great with resume help, but could have more knowledge about specific social work profession questions. The counseling center was helpful, and it would probably be a good idea to communicate this resource to students (and encourage them to use it) upfront.

Amelia goes above and beyond and without her many of these scores would have been lower. She was always responsive to emails and helped get you in contact with someone if they were not answering emails. As a graduate student, the library introduction was a complete waste of time and hassle. I have been searching for articles in web based databases and periodicals since high school and as a working adult it was very unnecessary to come to SLU for this mandatory training.

Overall, I found the supportive staff to be really great. The librarian was super helpful, especially through the chat feature. She saved me so much time searching for specific articles that I couldn't find. My financial aid

counselor really came through for me in a really tough moment and was always accessible.

I have had a very strange experience with the financial services office these past two years. My advisor was very difficult to get a hold of and did not answer questions clearly.

I had sent multiple emails and calls inquiring about deadlines, scholarship opportunities, and clarification for the admission process with little to no feedback from the University, including the school of social work. I felt like my concerns were not validated nor ever truly addressed. It got to the point where I almost deleted my entire application due to the frustration. I am still a little unnerved by the fact I was told the wrong day for the deadline and missed out on all scholarships for the remainder of my time at SLU- despite asking multiple times about when I may be able to apply for other scholarships.

I utilized a psychiatrist at the SLU Health Center - Dr. Brian Holoyda. I cannot say enough good things about him. He was patient and receptive to my feedback and explored many medication options to stabilize my mental health.

The quality of communication is highly lacking. Every time I emailed or went in person to ask specific questions, it felt as though I was verbally reprimanded for not checking the Google site. The Google site is not always updated and is not easy to navigate. I often chose to ask MSW alumni information to avoid asking Amelia.

All of my SLU financial aid office experiences were cold, uninterested, and business-oriented. I always felt like a burden and Shayla was unhelpful in working with me.

32. Overall, how satisfied are you with the education you received in the MSW Program at Saint Louis University School of Social Work? (n=44)

Aspect	Very Satisfied %	Satisfied %	Neutral %	Dissatisfied %	Very Dissatisfied %
Overall, how satisfied are you with the education you received in the MSW Program at Saint Louis University School of Social Work?	37	56	7	0	0

33. On a scale from 0-10, how likely are you to recommend the SLU School of Social Work to a friend or colleague?

10: 29%

09: 12%

08: 15%

07: 24%

06: 15%

05: 0%

04: 2%

00-03 2%

08-10 56%

07-04 41%

Average = 8/10

34. What do you see as the strengths of the MSW Program?

-One on one support from a faculty mentor with similar interests and experiences -Advanced standing/accelerated program Variety of course offerings, concentrations and specializations

-Professors that have field experience -Grounded education that provides students with a more holistic understanding of social justice issues

- It is based in STL which is a prime location for learning about community based action and grassroots organizations. I learned the most from the city and my peers and some professors were able to bring that into the class as well.

The main strength is the knowledge of the professors and the real world teaching most bring into the classroom.

Professors are very respectful to students. They are very passionate about teaching. They are very helpful, and strength based when it comes to teaching students. I am very thankful for taking the MSW Program at SLU.

Dr. Michael Mancini, Dr. Stephen McMillin, Dr. Jill Taylor, Dr. Monica Matthieu are all great strength to the MSW Program at SLU. It was an honor to be in their classroom. Jane Gillespie was a great strength to the program.

The MSW Program recognizes students' strengths, and validates those strengths. The quality of instruction is amazing (as a transfer student, I can truly attest to this). Instructors treat students with great respect.

Most of the people in the program are really good people who have a desire to see the world become a better place

Their commitment to making sure students were well versed in the community as well as in the classroom.

Self-care conversations. A lot of night classes in comparison to other STL MSW programs.

The professors are all so great, and understanding. I never came across a professor that was not passionate or genuine about what they were teaching. That alone is why I recommend people to go to SLU.

Bringing in good teachers like Mancini, Henicke, Matthieu, Sadler-Cooper, Helton and the Minors along with Jill Taylor and Kristen (policy). Also, Amelia was a lifesaver - excellent support from her.

I think I already mentioned the faculty. Truly, the faculty members make all the difference in the program. The elective I took were great.

Class time availability.

The professors have good experience and insight. There are a broad range of electives that cover many diverse topics that encompass the field of social work.

Experience with clinical social work. I was told (by several people both in social work and not) before I started the program that if I wanted to be a competent social work clinician and hit the ground running out of grad school, SLU was the way to go compared to other schools in the area. I have found this to be true, in both my own feelings and in my employment search.

Outstanding faculty, accomplished alumni, diverse course offerings, ability to complete the degree with evening-only classes, and a willingness to meet students where they are at while still holding us accountable.

The knowledge and wisdom that the professors provide students with; opportunities for engagement and involvement in the community.

The MSW Program at SLU does provide one with resources, critical thinking development, and continued growth within the realm of social work. It is clear that the program values the direct impact an individual has on the lives of the future clients that students will be working with. The introspection and continued perseverance to the Jesuit mission are what set SLU apart.

The main strength of the program is the staff and the class sizes. It was intimate and helpful. I also like the option of being able to complete the program through only night courses. As a working individual that was ideal.

Overall quality of the clinical program, accessibility of professors, availability of opportunities for learning and leadership, community among students.

Student-focused, desire to mold new social workers

Emphasizes evidence-based practice and "the client is right"

The students

While I wish there were more therapy classes, I truly feel I am walking away from SLU as a better clinician with the education and tools I need to do good work with my clients. Having a good clinical experience is the reason I chose SLU, and I more than feel I received that.

The ability of the professors to be able to connect with their students and develop professional relationships is a very strong point of the MSW program. Many of my friends who are in other social work programs across the country have pointed out how they wish they knew their professors better and I feel very blessed and grateful that I am comfortable enough to reach out to my professors for help academically as well as for career advice help. I believe the small number of students in classes has also really helped me to stay engaged and connect with my peers as well as provided support and comfort.

34. Please describe what you see as the main area(s) in need of improvement in the MSW Program?

-Diversity of the student body -Course work should be more rigorous (often times coursework was easily graded which did not push students to try harder i.e. they waited till the last minute) -Push for students to engage in the SLU community more

- More practice based classes - More accountability for professors, students, and advisers so that a minimum learning standard is being met. - More diversity in staff.

More classes offered at different times for older students returning to school. More flexibility for students who have experience in the field and more financial opportunities than loans so a student isn't working 40 hours a week, plus going to class and trying to raise their family.

I think more theories in social work spectrum need to be taught in MSW Program. More class discussions and practice need to be conducted in MSW Program. More discussions about cultural diversity need to be conducted as well.

Procedures for certain situations that are out of the students control. The death of a family should not be ruled an absence. I received an F in the Practicum class due to two situations that were out of my control. One was the death of my brother, the other one was that my car broke down the morning that I was suppose to be in class. Both were out of my control. I live 100 miles away. I could not get to class either time. I did not go back to school at the age of 53 to earn an F in a 4 session class. With a click of a mouse the F could be removed. I hope that someone considers changing the rule on this procedure, because I don't want to see another student endure the time it took me to make up time for this situation. I'm still mad over the situation. The F needs to be taken off my transcript.

The Policy & Social Justice class (or at least the instructor) could be better.

Diversity Course rigor (not that everything should be hard, but that there should be a bit more of a challenge to courses) Giving students the information necessary to be successful- I felt a lot that I had to figure things out on my own or from other students Website to find practicum is awful Greater emphasis on career planning (i.e. licensure info and prep prior to graduation)

There needs to be more diversity

Mentioned above.

Areas of improvement would be the field education liaisons. My liaison was very difficult to get a hold of, and not extremely helpful when I faced challenges in my practicum.

Again, teachers. Schnider (Human Behavior 1), Jess Adams (policy 2) and the guy that taught the public health online course absolutely need to go. My fear is that many of the younger students are not aware of an alternative teaching for these subjects and assume that 1) the information accurately portrays the concept of the course and 2) these teachers are of quality.

Talking about diversity, difference, and privilege and connecting it to concrete community issues Core social work skills need to be taught by competent instructors As an aside, I wonder if it would be helpful to have a counseling 101 course (the LMSW test has a list of psychologists and theories, many of which I have never heard of.)

Much is lacking on the course work. I felt that I took classes that were not needed (such as research 2 and policy 2) while courses that would be beneficial to my field of interest were left out. There needs to be a course on community resources. In addition, there should be more opportunities to take more electives than required courses such as research 2 and policy 2.

Need for response to student feedback, both on an individual professor level and School-wide. I feel like there were several complaints and suggestions brought forward during the last 2 years and I have yet to see much change, which is frustrating. I like to think that I don't fill out these surveys and professor evaluations for nothing.

The coursework could be more rigorous and challenging, creating a path to avoid enrolling in any online classes, ensuring that the great course offerings listed are offered. There were more than several occasions I enrolled in a course (or intended to enroll due to program requirements) when the course would end up being cut for low-enrollment, or canceled due to not having an instructor. The course offerings are really what gave SLU a competitive edge over my BSW alma mater, UMSL, when deciding which MSW program to apply for. There were points of the program where I was immensely frustrated at the inaccuracy of the SLU course catalog and was considering a transfer back to UMSL. Situations where the catalog would say that required program electives would be offered in even-year spring (or something similar) and then not be offered. There were points of the program where I was nearly convinced I wasn't going to be able to complete my concentration or specialization area within a reasonable time frame. Often, the alternative presented would be a Wash U course during a weekday--which wasn't an option for me while working full-time--and this would discourage me further. We have a great course catalog and should make an effort to increase the accuracy of that catalog and the timeline of offerings. Also, increased transparency as to which courses typically don't make due to low-enrollment.

More guidance as far as practicum goes. I had a good experience, but know many students who did not and were not helped by their liaison.

More detailed practice in things that will come up in the field. Many classes seemed like basic overviews

See prior notes.

I would have liked to have had more paid practicum options available for field experience. Perhaps partnering with local agencies more to develop those relationships so the many hours of field work are not such a financial burden.

Consistency of quality across courses and instructors, preparing students with practical tools and interventions.

greater development of specific therapeutic interventions and applied learning opportunities

Organization, responding in a timely manner to students' needs

Foundation course professors

More therapy classes

I did not feel as though I was fully aware of what happens after graduation. I wish that more was talked about regarding applying for licensure exam/studying etc.

MSW LEARNING AGREEMENT RESULTS TABLES 2.1a,b to 2.4a,b

C/PB#	Table 2.1a: 2018 Foundation Practicum Competencies and Practice Behaviors (n=56 Learning Agreements) Pass=56; Fail=0	Mean Score
C1	Demonstrate Ethical and Professional Behavior	
PB1	Demonstrate knowledge of social work values and ethical principles in ethical decision making. (Apply the NASW Code of Ethics).	4.33
PB2	Demonstrate professionalism and professional behavior in all communications (oral, written, technology) in generalist practice.	4.40
PB3	Use supervision to reflect and seek feedback to develop strong social work practice.	4.38
C2	Engage diversity and difference in practice	
PB1	Demonstrate through communications the importance of diversity and difference in practice at the micro, mezzo, or macro level.	4.38
PB2	Demonstrate cultural competence through self-awareness and respect for diversity in age, class, color, culture, disability or ability, ethnicity, gender, gender expression, immigration status, marital status, political ideology, race, religion/spirituality, sex, sexual orientation, and tribal sovereign status.	4.40
C3	Advance human rights and social, economic, and environmental justice	
PB1	Identify the forms and mechanisms of oppression and discrimination faced by vulnerable groups, as well as the role of power and privilege in society.	4.25
PB2	Engage in advocacy activities that seek to empower vulnerable groups and advance social, economic, and environmental justice	4.20
C4	Engage in practice-informed research and research-informed practice.	
PB1	Use research evidence to inform and improve practice, policy, and service delivery.	4.27
PB2	Use practice experience and data to engage in research methods to determine outcomes.	4.05
C5	Engage in policy practice	
PB1	Identify, analyze, and advocate for social policies at the local, state, or federal level that impact social well-being, service delivery, and access to social services.	3.89
C6	Engage with individuals, families, groups, organizations, and communities	
PB1	Apply knowledge of human behavior and social work theoretical frameworks to engage clients	4.29
PB2	Demonstrate empathy and effective interpersonal skills with clients/client systems to engage in changes	4.42
C7	Assess with individuals, families, groups, organizations, and communities	
PB1	Demonstrate assessment skills through effective interviewing and data collection with individuals, families, groups, organizations and/or communities	4.16
PB2	Use a bio-psycho-social-spiritual assessment framework in assessment with individuals, families, groups, organizations, and/or communities	4.16
PB3	Through assessment, develop goals and objectives using a strengths, needs and challenges based approach	4.22
C8	Intervene with individuals, families, groups, organizations, and communities	
PB1	Implement interventions to achieve practice goals and enhance well-being of clients and constituencies/client systems.	4.36
PB2	Participate with inter-professional groups, teams, and/or coalitions in practice interventions.	4.29
C9	Evaluate practice with individuals, families, groups, organizations, and communities	
PB1	Select and use appropriate methods for evaluation of practice or program outcomes.	3.93
PB2	Apply evaluation findings to improve practice at the micro, mezzo, and macros.	3.93
T	Combined Rubric Score for All Practice Behaviors	4.23

Table 2.1b 2018 Foundation Practicum Professional Work Behavior Scores	
Professional Work Behavior	Mean Score
1. Professional Responsibility/Interest in Professional Development	4.44
2. Poise and Self Control	4.56
3. Assertiveness	4.13
4. Personal Appearance related to Agency Standards	4.62
5. Plan and Arrange Work	4.36
6. Ability to Assume Responsibility for Own Learning	4.31
7. Understand and Work within Agency Structure	4.42
8. Written and Verbal Communication	4.42
9. Use of Supervision	4.53
10. Appropriate Use of Technology (e.g., personal or agency computer or electronic devices)	4.62
Total Average Score Across All Behaviors	4.44

#	Table 2.2a: 2018 Community and Organization Concentration Practicum Competencies and Practice Behaviors (n=21)(16 unduplicated students) Pass = 21; Fail = 0.	Mean Score
C1	Use codes of ethics and human rights principles to guide practice with communities and organizations	
PB1	Relate social work values and ethics (e.g. social justice, self-determination, democratic participation) in community and organization work	4.43
PB2	Engage in advocacy or community awareness activities that focus on eliminating the stigma, discrimination, and oppression faced by vulnerable populations	4.48
C2	Demonstrate culturally competent practice with communities and organizations .	
PB1	Demonstrate cultural competence and knowledge of populations served in community practice, organizational practice, or policy practice	4.38
C3	Approach community and organizational planned change using theoretical frameworks and evidence-based practice models to organize and/or sustain advocacy and/or support networks.	
PB1	Participate in social planning activities such as strategic planning, advocacy campaigns, and/or community efforts	4.14
PB2	Participate in task groups, coalitions, task forces, committees, or neighborhood groups in order to enhance communities or organizations.	4.19
C4	Use research and professional expertise to improve practice with communities and organizations.	
PB1	Identify and use research products (e.g. articles, books, and clearinghouses) and professional expertise to improve practice with communities and organizations.	4.38
C5	Provide leadership in a variety of roles in community and organizational practice	
PB1	Demonstrate professional expertise through public speaking to a community group, board, or policy decision making body	4.14
PB2	Provide leadership in community, organizational, or policy practice for a project	4.33
C6	Approach community and organizational planned change using theoretical frameworks and evidence-based practice models	
PB1	Identify and apply theoretical frameworks that guide community and organizational practice	4.10
PB2	Understand and engage in community or organizational practice models that are evidence-based.	4.19
C7	Approach community and organizational planned change using theoretical frameworks and evidence-based practice models to plan and/or conduct an assessment of community or organizational needs and strengths with stakeholders	
PB1	Participate in community or organizational needs and/or strengths assessment in order to enhance community or organization service delivery	4.19
C8	Approach community and organizational planned change using theoretical frameworks and evidence-based practice models to engage in community and organizational practice	
PB1	Participate in community organizing or development	4.20
PB2	Participate in policy analysis, development, and practice within legislative or organizational bodies.	4.00
PB3	Participate in resource development activities (e.g. fundraising or grant writing) and understand budgeting and financial management process	4.00
C9	Use research and professional expertise to evaluate practice with communities and organizations	
PB1	Generate and/or use empirical research, secondary data, databases, geographic information system (GIS), professional expertise, and/or other forms of evidence in evaluation, and program development in communities or organizations.	UNK
T	Combined Rubric Score for All Practice Behaviors	4.23

Table 2.2b 2018 Community and Organization Professional Work Behavior Scores	
Professional Work Behavior	Mean Score
1. <i>Professional Responsibility/Interest in Professional Development</i>	4.38
2. <i>Poise and Self Control</i>	4.33
3. <i>Assertiveness</i>	4.14
4. <i>Personal Appearance related to Agency Standards</i>	4.57
5. <i>Plan and Arrange Work</i>	4.29
6. <i>Ability to Assume Responsibility for Own Learning</i>	4.33
7. <i>Understand and Work within Agency Structure</i>	4.52
8. <i>Written and Verbal Communication</i>	4.52
9. <i>Use of Supervision</i>	4.38
10. <i>Appropriate Use of Technology (e.g., personal or agency computer or electronic devices)</i>	4.71
Total Average Score Across All Behaviors	4.42

#	Table 2.3a: 2018 Clinical Concentration Practicum Competencies and Practice Behaviors [N=133 Learning Agreements (90 unduplicated students)] - 133 Pass; 0 Fail)	Mean Score
C1	Demonstrate professional behavior consistent with social work values and ethics in clinical practice.	
PB1	Demonstrate knowledge and skills specific to population in providing clinical social work.	4.43
PB2	Identify and apply relevant ethical principles in clinical practice.	4.41
PB3	Develop competence in ethical decision making in clinical practice.	4.32
C2	Demonstrate competence in working with diverse populations from a bio-psycho-social-spiritual perspective.	
PB1	Apply knowledge and demonstrate cultural competence with diverse populations to enhance client well-being.	4.35
PB2	Use a strengths based approach in performing bio-psycho-social-spiritual assessments.	4.35
C3	<i>Integrate Human Rights and Social, Economic, and Environmental Justice into Clinical Practice</i>	
PB1	Apply clinical skills to advance human rights and social and economic justice	4.24
PB2	Address disparities in clinical, organizational, and community practice levels as they impact individual client systems	4.23
C4	<i>Use an evidence informed practice process in clinical work with individuals, families, groups, and larger systems</i>	
PB1	Use practice experiences and theory to inform scientific inquiry and research.	4.13
PB2	Critically evaluate and translate research evidence to inform and improve practice, policy, and service delivery.	4.17
C5	<i>Apply policy practice skills to advance human rights and social and economic justice.</i>	
PB1	Use policy practice approaches to advocate for social policies that enhance clients and clinical service delivery	4.12
PB2	Acquire strong knowledge of relevant governmental (e.g., Medicaid, Social Security Disability, Individuals with Disabilities Education Act, mandated reporting) and agency policies in order to advocate for clients in securing resources or understanding the relevant policy system.	4.06
C6	<i>Demonstrate advanced client engagement skills in clinical practice</i>	
PB1	Integrate knowledge of human behavior and the social environment, person-in-environment, and other multidisciplinary theoretical frameworks to engage with clients and constituencies.	4.50
PB2	Use advanced clinical skills to engage diverse clients and constituencies into a working therapeutic alliance.	4.43
C7	<i>Demonstrate advanced client assessment skills in clinical practice</i>	
PB1	Synthesizing knowledge obtained from clients and constituencies with practice wisdom and data driven decision-making to inform a client centered bio-psycho-social-spiritual assessment.	4.22
PB2	Integrate shared decision making process with clients and constituencies to inform treatment planning.	4.31
C8	<i>Demonstrate advanced client intervention skills in clinical practice</i>	
PB1	Utilize the evidence-based practice process to implement effective interventions with clients and constituencies	4.29
PB2	Use advanced clinical skill in coordinating and collaborating services, resources, and treatment for clients, constituencies, and multiple service systems	4.28
C9	<i>Use research and clinical expertise to evaluate client, practice, and program outcomes</i>	
PB1	Critically analyze, monitor, and evaluate intervention and program processes and outcomes to improve practice effectiveness	4.21
T	Combined Rubric Score for All Practice Behaviors	4.28

Table 2.3b: 2018 Clinical Practicum Professional Work Behavior Scores	
Professional Work Behavior	Mean Score
<i>1. Professional Responsibility/Interest in Professional Development</i>	4.58
<i>2. Poise and Self Control</i>	4.61
<i>3. Assertiveness</i>	4.13
<i>4. Personal Appearance related to Agency Standards</i>	4.69
<i>5. Plan and Arrange Work</i>	4.51
<i>6. Ability to Assume Responsibility for Own Learning</i>	4.53
<i>7. Understand and Work within Agency Structure</i>	4.56
<i>8. Written and Verbal Communication</i>	4.47
<i>9. Use of Supervision</i>	4.65
<i>10. Appropriate Use of Technology (e.g., personal or agency computer or electronic devices)</i>	4.68
Total Average Score Across All Behaviors	4.54

#	Table 2.4a: 2018 LOURDES Clinical Concentration Practicum Competencies and Practice Behaviors [n=19(18 Unduplicated Students)] Learning Agreements - Pass =19;Fail=0)	Mean Score
C1	Demonstrate professional behavior consistent with social work values and ethics in clinical practice.	
PB1	Demonstrate knowledge and skills specific to population in providing clinical social work.	UKN
PB2	Identify and apply relevant ethical principles in clinical practice.	4.47
PB3	Develop competence in ethical decision making in clinical practice.	4.42
C2	Demonstrate competence in working with diverse populations from a bio-psycho-social-spiritual perspective.	
PB1	Apply knowledge and demonstrate cultural competence with diverse populations to enhance client well-being.	4.33
PB2	Use a strengths based approach in performing bio-psycho-social-spiritual assessments.	4.37
C3	<i>Integrate Human Rights and Social, Economic, and Environmental Justice into Clinical Practice</i>	
PB1	Apply clinical skills to advance human rights and social and economic justice	4.42
PB2	Address disparities in clinical, organizational, and community practice levels as they impact individual client systems	4.68
C4	<i>Use an evidence informed practice process in clinical work with individuals, families, groups, and larger systems</i>	
PB1	Use practice experiences and theory to inform scientific inquiry and research.	4.16
PB2	Critically evaluate and translate research evidence to inform and improve practice, policy, and service delivery.	4.32
C5	<i>Apply policy practice skills to advance human rights and social and economic justice.</i>	
PB1	Use policy practice approaches to advocate for social policies that enhance clients and clinical service delivery	4.16
PB2	Acquire strong knowledge of relevant governmental (e.g., Medicaid, Social Security Disability, Individuals with Disabilities Education Act, mandated reporting) and agency policies in order to advocate for clients in securing resources or understanding the relevant policy system.	4.21
C6	<i>Demonstrate advanced client engagement skills in clinical practice</i>	
PB1	Integrate knowledge of human behavior and the social environment, person-in-environment, and other multidisciplinary theoretical frameworks to engage with clients and constituencies.	4.42
PB2	Use advanced clinical skills to engage diverse clients and constituencies into a working therapeutic alliance.	4.32
C7	<i>Demonstrate advanced client assessment skills in clinical practice</i>	
PB1	Synthesizing knowledge obtained from clients and constituencies with practice wisdom and data driven decision-making to inform a client centered bio-psycho-social-spiritual assessment.	4.21
PB2	Integrate shared decision making process with clients and constituencies to inform treatment planning.	4.22
C8	<i>Demonstrate advanced client intervention skills in clinical practice</i>	
PB1	Utilize the evidence-based practice process to implement effective interventions with clients and constituencies	4.26
PB2	Use advanced clinical skill in coordinating and collaborating services, resources, and treatment for clients, constituencies, and multiple service systems	4.26
C9	<i>Use research and clinical expertise to evaluate client, practice, and program outcomes</i>	
PB1	Critically analyze, monitor, and evaluate intervention and program processes and outcomes to improve practice effectiveness	4.26
T	Combined Rubric Score for All Practice Behaviors	4.32

Table 2.4b: 2018 LOURDES Clinical Practicum Professional Work Behavior Scores	
Professional Work Behavior	Mean Score
1. <i>Professional Responsibility/Interest in Professional Development</i>	4.47
2. <i>Poise and Self Control</i>	4.42
3. <i>Assertiveness</i>	4.26
4. <i>Personal Appearance related to Agency Standards</i>	4.53
5. <i>Plan and Arrange Work</i>	4.37
6. <i>Ability to Assume Responsibility for Own Learning</i>	4.42
7. <i>Understand and Work within Agency Structure</i>	4.42
8. <i>Written and Verbal Communication</i>	4.37
9. <i>Use of Supervision</i>	4.32
10. <i>Appropriate Use of Technology (e.g., personal or agency computer or electronic devices)</i>	4.37
Total Average Score Across All Behaviors	4.39

TABLE 3. 2018 SLU-SSW ONLINE MSW AT LOURDES UNIVERISTY GRADUATE EXIT SURVEY RESULTS

In the spring of 2017 a total of 10 students graduated from the SLU-SSW Online MSW Program at Lourdes University. A total of 10 surveys were sent to students. A total of 4 surveys were successfully completed for a response rate was 40%. The primary purpose of the survey is to provide information that will improve the MSW program and facilitate long range planning.

- 1. **Mean Age:** 32 years
- 2. **Gender:** 100% Female
- 3-4. **Ethnicity:** 100% White

- 5. **Concentration:** Clinical 100%

- 6. **Came to SLU with an BSSW/BSW?:** Yes: 25%
No: 75%

- 7. **Received Advanced Standing:** Full: 25%
Partial: 25%
None: 50%

- 8. **Considered a full or partime student?** Full: Unk
Part: Unk

- 9a. **Mean # of hours worked in a social work position while in the MSW Program:** M=32 (n=4)
- 9b. **Mean # of hours worked in a non-social work position while in the MSW Program:** M=25 (n=1)
- 9c. **Mean # of hours worked as a graduate assistant while in the MSW Program:** M=0 (n=0)

10. Now that you have completed the MSW Program, please rate by placing an “x” in your selected box, reflecting how well prepared you are to do each of the following (N=4):

MSW FOUNDATION PROGRAM COMPETENCIES AND PRACTICE BEHAVIORS						
Definitions	Very well prepared	Well prepared	Adequately Prepared	Minimally Prepared	Not Prepared	Rating Average
Ratings	(5)	(4)	(3)	(2)	(1)	
1. Demonstrate ethical and professional behavior	50%	50%	0%	0%	0%	4.5
2. Engage diversity and difference in practice.	25%	75%	0%	0%	0%	4.3
3. Advance Human Rights and Social, Economic and Environmental Justice	25%	50%	25%	0%	0%	4.0
4. Engage in Practice-Informed Research and Research-Informed Practice.	25%	50%	25%	0%	0%	4.0
5. Engage in Policy Practice.	25%	75%	0%	0%	0%	4.3
6. Engage with Individuals, Families, Groups, Organizations and Communities.	25%	75%	0%	0%	0%	4.3
7. Assess Individuals, Families, Groups, Organizations and Communities.	25%	75%	0%	0%	0%	4.3
8. Intervene with Individuals, Families, Groups, Organizations and Communities.	25%	75%	0%	0%	0%	4.3

9. Evaluate Practice with Individuals, Families, Groups, Organizations and Communities.	25%	50%	25%	0%	0%	4.0
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11. Clinical Concentration Graduates Only: On the Basis of your MSW studies in the School of Social Work, how well prepared were you to (n=4):

CLINICAL CONCENTRATION COMPETENCIES & PRACTICE BEHAVIORS						
Definitions	Very well prepared	Well prepared	Adequately Prepared	Minimally Prepared	Not Prepared	Rating Average
Ratings	(5)	(4)	(3)	(2)	(1)	
1. Demonstrate professional behavior consistent with social work values and ethics in clinical practice?	50%	50%	0%	0%	0%	4.5
2. Demonstrate competence in working with diverse families and performing a bio-psycho-social-spiritual assessment?	50%	50%	0%	0%	0%	4.5
3. Integrate human rights and social, economic, and environmental justice into clinical practice?	50%	50%	0%	0%	0%	4.5
4. Use an evidence-informed practice process in clinical work with individuals, families, groups, and larger systems?	50%	50%	0%	0%	0%	4.5
5. Use policy practice approaches to advocate for social policies that enhance clients and clinical service delivery?	25%	25%	50%	0%	0%	3.75
6. Demonstrate effective client engagement skills in clinical practice?	25%	75%	0%	0%	0%	4.3
7. Demonstrate effective client assessment skills in clinical practice?	25%	50%	25%	0%	0%	4.0
8. Demonstrate effective client intervention skills in clinical practice?	0%	100%	0%	0%	0%	4.0
9. Use research and clinical expertise to evaluate client, practice, and program outcomes?	0%	75%	25%	0%	0%	3.75

12. Please rate your satisfaction with the following aspects of the MSW Program. Please use the “Comments” section to cite specific strengths and/or make suggestions for improvements (N=4).

5=Very Satisfied (VS) 4=Satisfied (S) 3=Neutral(N) 2=Dissatisfied (D) 1=Very Dissatisfied (VD)
Please circle the number of your rating with the scale definitions above.

<i>Aspect</i>	Very Satisfied %	Satisfied %	Neutral %	Dissatisfied %	Very Dissatisfied %	Ave. Rating
<i>a. Quality of Teaching</i>	50	25	25	0	0	4.3
<i>b. Level of expertise of professors in course subject matter</i>	50	50	0	0	0	4.5
<i>c. Level of safety, respect and inclusion you felt in the classroom</i>	50	25	25	0	0	4.3
<i>d. Variety of courses offered.</i>	0	50	50	0	0	3.5
<i>e. Quality of Courses Offered</i>	50	50	0	0	0	4.5

<i>Aspect</i>	Very Satisfied %	Satisfied %	Neutral %	Dissatisfied %	Very Dissatisfied %	Ave. Rating
<i>f. Availability of Course Offerings</i>	25	25	25	25	0	3.5
<i>g. Quality of classroom space</i>	25	25	50	0	0	3.8
<i>h. Level of course-related technology available</i>	50	25	25	0	0	4.3
<i>i. Ability of instructors to effectively use technology in their courses</i>	50	50	0	0	0	4.5
<i>j. Quality of Field Education (Pract./Seminar)</i>	50	50	0	0	0	4.5
<i>k. Foundation Courses</i>	50	25	25	0	0	4.3
<i>l. Concentration Core Courses</i>	25	75	0	0	0	4.3
<i>m. HBSE</i>	50	50	0	0	0	4.5
<i>n. Policy Sequence</i>	25	50	25	0	0	4.0
<i>o. Research Sequence</i>	25	75	0	0	0	4.3
<i>p. Electives(n=3)</i>	0	33	67	0	0	3.3
<i>q. Values and Ethics</i>	25	75	0	0	0	4.3
<i>r. Mission Practice Global Public Health SWRK5501</i>	25	75	20	0	0	4.3

13. Please provide any additional comments about the quality of teaching and courses at the MSW Level (Please identify specific courses or instructors as appropriate).

Dr. Monica Matthieu- excellent starting me off with coursework that was used consecutively in each course afterwards and many weekly exercises prepared and assisted me with my work on a crisis hotline and now in SWT IFAST role. Dr. Terry Keller's human behavior I reminded me of the diversity yet similarities in with the human condition world wide. Research I&II furthered my interest in the research process and publishing to increase awareness for underserved populations struggling with mental illness and recovery. Social Policy with Jesse Helton encouraged my interest in policy work and taught lessons I look forward to practicing to improve and growth programs in underserved areas. Dr. Birkenmaier coursework and assignments for our desired interests provided me with practical tools to assist colleagues to advocate for clients and community needs. Furthermore, her weekly videos made you feel like you were in the classroom as did Dr. Mancini's , Brandy's, McMillian's , Craig & Alicia's , Jill Taylor, PhD's . I hope I didn't miss anyone. Dr. Mancini's human behavior II course was phenomenal! I share so much from this course with colleagues from the extra books he included during the course, journal articles and the introduction to Pat Deegan's work! Being part of the first SLU-LOU Ireland Immersion international Social Work course is another experience of knowledge that I reflect on and incorporate into my developing practice. Honestly, every course and professor were amazing and I am saddened to not be learning even more from all of you. Each class was packed full of information, journals, professor's Professional experience to aid in our journeys such as Dr. McMillian's healthcare course. Thank you to all of you for your dedication!

Some courses there were many links that did not fully worked. There were courses where there was no major interaction with professors, and felt very distant from whom was teaching courses.

In the SLU-LOU program, there were VERY few options for electives. We did not have the opportunity to tailor our classes to our specific needs.

Michael Mancini was the best!

14. Please identify any electives that you think were especially useful in your MSW education

Administration elective option

Had credits transfer over did not take many electives.

Research Methods and Policy Practice

15. What are some areas of the MSW curriculum that need to be improved?

Therapy interventions

It would have been beneficial to make sure all links were working, and that there were face times with professors. Also it would have been nice to have the applied behavior analysis as part of the curriculum.

It would be more helpful to have opportunities to diagnosis a client or be given a real-life situation in a class setting and react/ respond appropriately. I know how to act ethically and appropriately in various situations. It would be nice to learn how I can advocate for social justice outside of working a 9-5 job. It would be helpful to understand different types of social work rather than the standard mental health/ counselor fields. It would be helpful to learn how I can conduct further research and what resources I can utilize once I graduate.

Better communication with Lourdes students

16. What overall grade would you give your professors in the MSW program based on their ability to prepare you to be an effective social worker? (n=4)

A+	25%
A	25%
A-	0%
B+	50%
B	0%
B-	0%
C	0%
Ave. grade	A-
A- or better	50%

17. MENTORING/ADVISING Please indicate your level of satisfaction with the following aspects of your academic mentoring/advising in the MSW Program (n=4).

<i>Aspect</i>	Very Satisfied %	Satisfied %	Neutral %	Dissatisfied %	Very Dissatisfied %	M
Overall Quality of Academic Advising	25	50	25	0	0	4.0
Ability of your advisor to help you know the courses you needed to take in order to graduate.	50	50	0	0	0	4.5
Ability of your advisor to help with career planning.	25	50	0	25	0	3.8
Responsiveness of your advisor to questions or concerns you had while in the MSW Program.	25	50	25	0	0	4.0

18. How well did your academic mentor/advisor meet your expectations?

Exceeded Expectation: 25%

Met Expectations: 50%

Well Below Expectations: 25%

19. How valuable was your MSW mentor/advisor in shaping your educational plan?

Very Valuable: 25%

Valuable: 50%

Minimally Valuable: 25%

Not at All Valuable: 0%

20. How did you typically meet with your mentor/advisor?

Face to Face: 75%

E-mail: 25%

Telephone: 0%

21. How often did you typically meet with your mentor/advisor?

Two or More Times a Semester: 0%

Once a Semester: 100%

Not at All: 0%

22. What overall grade would you give your mentor/advisor in the MSW program based on his or her ability to assist you in developing and completing your educational plan? (n=3)

A+	0%	A	33%
A-	0%	B+	0%
B	33%	B-	33%
C+	0%	C	0%
C-	0%	D+	0%
D	0%	D-	0%
F	0%		

Ave. grade B+

A- or better 33%

B or Better: 67%

23. Please provide any comments about the quality of mentoring/advising at the MSW Level.

Being part of the Lourdes co-hort I can not honestly say I would recommend this program. I felt distant and blocked out from both Lourdes and Saint Louis. There were not opportunities for scholarships, nor any opportunities for major grad assistance work.

It would have been beneficial if my advisor took the time to know my particular interests and strengths to help in career planning. Instead, my advisor only informed me of which classes I needed to take to graduate. I believe my advisor would have done this if he had the time; however, he was the advisor for ALL SLU-LOU students.

24. DIVERSITY Please indicate your level of agreement with the following statements based on your experiences in the MSW Program at the SLU School of Social Work. (n=4).

Aspect	Strongly Agree (5) %	Agree (4) %	No Opinion (3) %	Disagree (2) %	Strongly Disagree (1) %	M
There is a commitment to diversity at the SLU School of Social Work.	0	50	50	0	0	3.5
I felt safe at the SLU School of Social Work.	25	50	25	0	0	4.0
The SLU School of Social Work was welcoming to all students.	50	25	25	0	0	4.3
I felt valued and respected at the SLU School of Social Work.	25	50	25	0	0	4.0

25. Please describe any perspectives or experiences you feel would elaborate on your answers regarding diversity at the SLU School of Social Work

Mission & Practice in Public Health dept

I felt very distant, and doing online learning I am not sure I would recommend for other students. It was a lot of opportunities lost, and did not have that one on one connection with advisers, faculty or staff. I cannot say that this would be a recommendation for other students or I would have done it this way again.

26. Please rate your satisfaction with the following aspects of the University Support Services. Please use the “Comments” section to cite specific strengths and/or make suggestions for improvements. (n=4)

5=Very Satisfied 4=Satisfied 3=Somewhat Satisfied 2=Dissatisfied 1=Very Dissatisfied 0=Did Not Use

Aspect	Very Satisfied %	Satisfied %	Neutral %	Dissatisfied %	Very Dissatisfied %	Did Not Use %	M
<i>Quality of School Admissions</i>	25	25	25	25	0	0	3.5
Quality of communications and information from the MSW Program Office.	0	50	0	50	0	0	3.0
Quality of assistance from the MSW Field Education Office.	25	25	0	50	0	0	3.3
<i>1. Librarian and library services</i>	25	0	75	0	0	33	3.5
<i>2. Graduate Writing Center</i>	0	0	50	25	0	25	3.5
<i>3. Career Counselor & Services</i>	0	0	50	25	0	25	3.5
<i>4. SLU Health and Counseling</i>	0	0	50	25	0	25	3.5
<i>5. SLU Student Financial Services</i>	25	0	50	0	25	0	3.0

27. Please provide any specific comments about the MSW Program Elements and SLU Services

Thank you Amelia, Beth, Jamie, and Christy!

The struggle was not many connections, and many opportunities to grow and learn. Online students were not treated the same and did not have the opportunities or resources as in person schooling would have given. There were no opportunities for scholarships, collaboration, or major events or projects to be a part of.

I was informed I was eligible for scholarships; I sought more information but was never given any. I was told that it would be looked into and eventually gave up when nobody gave me any answers. I received info. about offerings on the SLU campus and received NO INFORMATION about anything on the Lourdes campus (I asked to be on an email mailing list like the rest of the university but there was no follow-through on the administrative end). Financial aid/ administration information was unclear for the SLU/LOU program. I needed to ask questions every step of the way and it was often difficult to reach someone. I had to ask for information regarding financial aid information. I'm not sure why I need to pay for graduate fees when I was NEVER offered ANY opportunities for outside classroom activities. I believe administration should look into reimbursing SLU/LOU students for these costs.

28. Overall, how satisfied are you with the education you received in the MSW Program at Saint Louis University School of Social Work? (n=44)

Aspect	Very Satisfied %	Satisfied %	Neutral %	Dissatisfied %	Very Dissatisfied %
Overall, how satisfied are you with the education you received in the MSW Program at Saint Louis University School of Social Work?	25	50	25	0	0

29. On a scale from 0-10, how likely are you to recommend the SLU School of Social Work to a friend or colleague?

- 10: 0%**
- 09: 0%**
- 08: 50%**
- 07: 0%**
- 06: 25%**
- 05: 0%**
- 04: 0%**

00-03 25%

08-10 50%

Average = 6.25/10

30. What do you see as the strengths of the MSW Program?

Experienced passionate professors

Main strengths was prioritizing and powering through while working an excessive amounts of hours.

Good classes and professors

31. Please describe what you see as the main area(s) in need of improvement in the MSW Program?

Communication between SLU-LOU campuses and SLU speakers events availability at LOU.

More collaboration, more opportunities for interaction, and scholarships, and job opportunities.

I understand I was in the first year of the SLU/LOU program and, naturally, kinks need to be worked out. However, there were not enough staff or resources dedicated to this program. I received good solid classes but, unfortunately, that is the extent of it. I do not feel part of the SLU or the Lourdes community which is a shame as I believe these are both excellent universities.