SACSCOC Update
Compliance Certification - Preliminary Findings
IE Plan Expectations
Action Items and Deadline
Monitoring Status

- CS 3.3.1.1
  IE: Educational programs (SLO’s)
- First Monitoring Report submitted April 2013
- Second Monitoring Report submitted April 2014
- Removed from Monitoring Status June 2014

Compliance Certification

- Submitted September 2014
- Off site review November 2014
- Preliminary findings

Upcoming Events

- Focused report - February 2015
- QEP - February 2015
- On site visit - April 2015
- Board decision - December 2015
Substantial progress made

- Infrastructure (manual, paper process > electronic, web based system)
- Basic education (committee work, individual meetings, website)

As an institution = early in evolution
As individual units = quality varies

Provide specific instructions and training materials to all units to ensure quality planning and assessment including

- Detailed expectations regarding the quality of outcomes, measures, targets, findings and action plans
WHAT THE SACSCOC REVIEWER WANTS

- SACSCOC Standards: every word
- Ongoing: multiple cycles
- Systematic: process in place
- Research based: numbers; percentages; comparative, longitudinal data
- Integrated: leaders analyze, share, discuss, act upon results
- Evidence of improvement: highlighted sections pointing to proof, not piles of data points, not 75 page reports
PRELIMINARY FINDINGS

- Outcomes
  - Established

- Measures
  - Alignment with outcome is not always evident
  - e.g., outcome: campus safety, measure: satisfaction or adequate resources

- Closing the loop
  - Representativeness of sample
  - Several units listed both learning outcomes (e.g., development of skills to foster wellness) and non-learning outcomes (e.g., increased awareness of services); however, none of the “close the loop” examples provided by the university were related to the learning outcomes
An outcome must align with the university mission and strategic plan, while also demonstrating movement toward unit-specific improvement.

An outcome must be measurable so that its achievement can be observed and verified with evidence.

Educational support units might have student learning outcomes instead of, or in addition to, operational outcomes.

Progress towards or completion of a strategic or long-term goal can be written as an outcome.

Consider:
- What goals are fundamental to our unit’s operations?
- How can we improve our unit?

Target:
- Institutional priorities
- Problem areas
- Tools to improve operations
- Administrative and indirect measures:
  - activity volume
  - benchmarking
  - document analysis
  - evaluations
  - existing data
  - external report
  - focus group
  - graduation/retention rates
  - job placement data
  - surveys

- Direct measures (student learning):
  - authentic performances/demonstrations
  - exams
  - evaluations
  - juried activities with outside panels
  - portfolios
  - pre/post tests
  - presentations or projects

Assessment methods should align with outcomes and measure achievement.
Good targets:
- Aspirational, but attainable
- Meaningful
- Developed based on structure of assessment method being used
EXAMPLES

O: Human Resources Management will improve the performance appraisal process for classified and unclassified employees through training and follow up.

M1: Tally supervisors trained
M2: Analysis of evaluations

T1: 80% of supervisors will be trained
T2: 80% of evaluations will be completed correctly

O: The Admissions office will increase FTE in 2015-16.

M: Number of FTE

T: FTE will increase by 5% in the 2015-16 academic year.
O: Customer requests received by the Help Desk will be promptly acknowledged and satisfactorily resolved.
M1: Analyze ticket log
M2: Satisfaction survey administered to all students, faculty and staff using services
T1: 75% of tickets will be resolved within 24 hours
T2: 80% of respondents will indicate that their request was satisfactorily resolved

O: The Registrar’s office will provide accurate course enrollment data.
M: Audit each semester
T: Student credit hour auditors from the governing board will verify the accuracy of class enrollment each semester reporting “no adjustments required.”
EXAMPLES

O: Students will be able to effectively use library services after attending orientation session.
M: Performance assessment by library staff
T: 90% of students attending orientation session will receive a favorable performance assessment by library staff

O: The faculty development seminars will enhance awareness of diversity issues that may affect classroom climate and students’ ability to learn.
M: Pre/post test
T: All participants will increase test score by at least 5%.

O: Implementation of a new telecommunication system will reduce cost and improve efficiencies.
M: Benchmark implementation of progress.
T: 50% of infrastructure will be in place by April 2015.
Good results:

- Reported in aggregate form (program or unit rather than individuals)
- Maintain anonymity of all participants
- Offer cogent analysis
- Exhibit multiple years of data to illustrate improvement
- Include supporting documentation
Good action plans:
- Clearly based on findings
- Map back to outcomes and measures
- Clearly state how/when findings were reviewed
- Clearly state changes implemented
- Include plan for how success of implemented changes will be tracked
R: Our goal was met.
A: No further action is needed. We will continue to monitor.
[unacceptable]
R: 85% of faculty who attended the diversity seminar increased their score in all areas. 25% missed questions about multicultural lenses.
A: At the next seminar we will add a brief explanation and video regarding multicultural lenses.
[this level of data collection allows for closing the loop improvements]
R: 90% of client respondents rated their overall health experience at Student Health Services at a 4 or above on a 5 point scale (1 = "very negative" and 5 = "very positive")
A: Need more detailed data to be useful. Revise client survey for implementation in Spring 2015.
[change to assessment tool]
ACTION ITEMS

Fall 2014 Cycle
- Report findings for all measures
- Upload supporting documentation to Document Management file
- Create closing the loop action plans based on data

Spring 2015 Cycle
- Review IE plan
- Make changes to ensure quality components
  - Student learning outcomes
  - Measures
  - Targets

Due Jan 16