President’s Division

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

Athletics

Assessment Summary Report

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

Community Relations

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

Institutional Events

Assessment Report Summary

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

Office for Institutional Effectiveness & Strategic Planning

OIEP

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s).

The Office for Institutional Effectiveness and Strategic Planning (OIEP) assessed its four functional areas: regional accreditation, strategic planning, academic and administrative assessment, and surveys and analytical studies.

To promote continuous quality improvement in the institutional assessment process, OIEP assessed completeness and quality of assessment plans and results. Completeness is measured by information being provided in all required fields and quality is measured through a rubric applied by the DAC/AAC assessment committees. Completeness results took a dip in 2016-2017; however, quality of assessment reports increased. Potential causes for such low completion/submission rates include post-reaffirmation fatigue, changes made to the assessment deadlines, and increased workloads of faculty and staff. While none of these are offered as an excuse or direct cause, they do highlight the challenges of creating a strong assessment culture throughout the College. Strategies to continue building a culture of assessment include: continued use of customized consultations, assessment workshops, IE Rubric application training, and email reminders for upcoming deadlines. New strategies include developing detailed written instructions for use of the IE Rubric, and earlier audit of assessment plans and results, and a system freeze of Compliance Assist to audit the system for timeliness of submission, and an overall review of the assessment process to look for areas of improvement.

The office’s assessment of accreditation for 2016-2017 focused on a successful reaffirmation through timelines and submission dates. While all external deadlines were met, there were areas of improvement in terms of internal planning. To that end, the preparation for FYIR will include a review of these processes to eliminate redundancies and inefficiencies. The College, however, was proud to report “zero recommendations” upon the conclusion of the on-site visit. For 2017-2018, this outcome will be replaced with an outcome focused on enhancing information, planning, and accreditation processes by developing self-service web applications.

The systematic process and submission of unit-level strategic planning is relatively new, so it is not surprising that targets for this outcome were not met. To measure strategic planning, alignment of assessment outcomes to College Strategic Initiatives were reviewed, as well as, the completion of unit strategic plans and tracking of annual progress. As the target of 100% completion of assessment reports was not met, it is not surprising that the target of 100% alignment of outcomes to strategic initiatives was also not
met. As the culture of accountability continues to develop on our campus, so will the rates for both of these measures. While 92% of submitting units had developed five-year goals, annual outcomes to measure progress towards those goals was very low (27%). Continued efforts to improve participation, engagement, and buy-in the unit-level strategic planning include the following strategies: meet with strategic planning coordinators to review process and plans, conducts workshops, increase the frequency of reminder emails to stakeholders.

The area of surveys and analytical studies had a productive year, but still did not meet all targets (one reason is because it was set to baseline). However, 270 consultations were held around the areas of institutional surveys and Qualtrics software. After reflecting on the data, the following efforts will be made to enhance the data-driven decisions on campus: provide additional consultations and presentations on institutional data that highlight both data results and how specific campus populations could utilize the results. The office will increase the number of user-friendly data reports in the form of infographics.

**Office of Institutional Diversity**

**Assessment Summary Report**

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Rénard Harris was the Interim CDO during the 2016-2017 academic year. Evidence based changes that have taken place within the last few assessment cycles because of assessment will be more defined at the end of the 2017-2018 academic year. To date the largest change has been the addition of the Crossing The Cistern initiative. There is no prior direct evidence as it relates to assessments that lead to the initiative being created, however in attempts to increase and influence a more diverse campus over time this initiative is appropriate.

**Office of Institutional Research and Planning**

**Assessment Summary Report**

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s):

**Office of Legal Affairs**

**Assessment Report Summary**

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s):

**Ombudsperson**

**Assessment Report Summary**

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s):

**Public Safety**

**Assessment Report Summary**

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s):

**Fire & EMS**

**Assessment Summary Report**

7. Summary of Assessment Results with Focus on Program Improvement: Describe evidence-based changes that have taken place within the last few assessment cycles because of assessment. Statements must be supported by evidence from the assessment report(s):