

# Introduction

## Institutional Overview

### Preface

Laramie County Community College (herein after “LCCC” or “the College”) is a public, two-year comprehensive community college serving Laramie and Albany counties in Southeast Wyoming. The main campus is in Cheyenne (Laramie County and the state capital). The College has a branch campus in Laramie (Albany County and the home of the University of Wyoming) and two outreach centers in Laramie County -- one in Pine Bluffs, WY and the other on the F.E. Warren Air Force Base. LCCC was established in 1968. An elected seven-member board of trustees governs the College.

## Mission, Vision, and Values

### MISSION

To transform our students’ lives through the power of inspired learning.

### OUR VALUES

**Core Values** - We believe these values are inherent in the cultural fabric of the College and could not be extracted in any way.

1. **Passion** – Our institution is wholly dedicated to engaging in our work, sharing our beliefs, and debating the merits of any course of action as we strive to transform our students’ lives through inspired learning.
2. **Authenticity** – True to our Western heritage, we are genuine to a fault, without pretense, and steadfast in our dedication in delivering on a promise, product, or need.
3. **Desire to Make a Difference** – We engage in and pursue our goals for the opportunity to create better lives, better communities, and a better world for those who are here today and the generations that follow.

**Aspirational Values** - We readily admit to a mismatch between our desire for these values and their existence at the College. However, our strong desire for these values will shape the actions we take to ensure the universal presence of these values at LCCC into the future.

1. **Commitment to Quality** – Quality is found at the intersection of hard work and high standards being met consistently. We are committed to promoting a culture of evidence that compels us to continuously strive for greater competence and productivity while always seeking to transform students’ lives through inspired learning.

2. **Entrepreneurship** – In an uncertain era, endless opportunities await those institutions willing to take risks. Grabbing these opportunities requires informed risk-taking and innovation fostered in a safe, yet demanding environment.

3. **Tolerance** – As an institution, we must engage in wide-ranging, open-minded discourse with civility and objectivity grounded in what is best for our students as well as ourselves.

## **OUR BIG GOAL**

Our accomplishments as a community college will distinguish LCCC from others in the nation, in turn benefiting our communities and bringing pride to the great State of Wyoming.

## **OUR VISION**

In the future we are individuals united for a single purpose - to transform our students’ lives. Our nationally recognized, entrepreneurial, and innovative programs and services help students become the most sought after individuals. We develop world-class instructors. We are relentless in the use of evidence to make decisions that responsibly and efficiently allocate resources, drive instruction, and create an environment of adaptability and productivity. Every individual has the freedom to innovate and take informed risks based on promising practices and creative ideas. We fail quickly, and learn from that failure as much as from our success. Clear academic pathways, high-touch services, and engaged employees are the bedrock of our students’ success. We drive collaboration throughout the community to ensure the success of all students who come to LCCC. We are changing the world of higher education, facing seemingly impossible challenges head on.

## **LCCC’s People**

LCCC is a community of people – students, faculty and staff. In academic year 2017-2018 the College enrolled 6,148 students in credit courses, equating to an annualized FTE of 3,190. Of the student body, 38 percent were full-time students with 62 percent part-time. Approximately 22 percent of LCCC’s students are enrolled in transfer degree programs; 23 percent are in career and technical programs of study, with the remaining undeclared. LCCC enrolled 2,369 individuals in non-credit life enrichment classes, 3,190 in non-credit workforce development courses, and an estimated 2,142 participants in customized training programs.

The College is comprised of a dedicated group of faculty and staff that fulfill various roles leading to mission attainment. In fiscal year 2017-2018, the College employed a total of 376 regular, benefited positions, with 18 administrators, 50 managerial, 72 professional, 126 faculty (teaching and non-teaching), and 110 educational services classified staff. The College also employed approximately 830 part-time employees from adjunct faculty to seasonal workers.

### **Academic Offerings**

Student learning is the primary focus of the College. LCCC is a public, associate-degree granting institution according in the Carnegie classification system. The College offers credit and noncredit courses for transfer, workforce development, and life enrichment. Students may earn degrees (Associate of Arts, Associate of Science, or Associate of Applied Science) in 78 programs and certificates in 27 programs. The College also offers educational activities leading to non-credit certification, credit certificates of completion, or the ability to sit for a variety of professional certifications. LCCC also offers adult basic education and high school equivalency courses through the Adult Career and Education System (ACES).

### **Quality Improvement Journey**

LCCC began its quality improvement journey when it first signed onto the AQIP Accreditation pathway in 2008. The College submitted its first systems portfolio to the Higher Learning Commission (herein after “HLC” or “the Commission”) in 2010, at a time of turmoil resulting from organizational unrest around its culture, its leadership, and its organizational structure. Following the removal of a sitting president in 2010 and amidst great leadership deficiencies, the institution sought a new future grounded in authentic acceptance of some of the most brutal facts about the state of the College. Once the Institution embraced these facts, a new platform for organizational reinvention and rebirth emerged.

Thus, as demonstrated throughout this Systems Portfolio, LCCC’s institutional transformation is well underway. The foundation has been laid with quality philosophies grounded in policy; mature and integrated processes driven by administrative procedures; and cycles of assessment, planning, resource allocation, implementation, and evaluation are integrated at all levels of the Institution. A culture of evidence is taking shape, and a dedication to honest analysis and hard work is prevalent.

The results are undeniable. The College has moved from being a laggard in the state to a leader. The Cheyenne campus has been physically transformed with nearly \$100 million of capital improvements completed or in progress. Leadership, at all levels, has been strengthened. LCCC has received national and local recognition for its innovation in programs and services. Most importantly, LCCC has been continually improving student outcomes,

particularly the rate at which students succeed in their educational pursuits. See Category Six within this systems portfolio for more information on the results of LCCC's quality journey.

### **Closing**

It is evident the College's journey towards a culture of continuous, quality improvement has been a fast one since it accepted this challenge. While the Institution has not yet reached maturity in the full alignment of its quality culture, it has made nearly unbelievable progress in a short amount of time towards integrating the foundational aspects of CQI within the campus community.

## **Category One Introduction: Helping Students Learn**

LCCC communicates its passion to help students learn and be successful through its mission statement, “to transform our students’ lives through the power of inspired learning.” The College embraces this mission through campus-wide, faculty-driven processes focused on continuously improving all aspects of teaching and learning.

The July 2012 Quality Checkup report challenged the College to create a comprehensive assessment framework that articulated assessable student learning outcomes (competencies) at the course, program, and institutional levels. Since then, LCCC has developed and strengthened systems to assist faculty in developing measurable outcomes that are formalized via the Master Course Outline of Record (MCOR) process. The MCOR also aligns course-level student learning competencies with those established at the program and institution levels.

The College has also responded to the strategic challenges articulated in the 2015 Appraisal Feedback Report. Since 2014, LCCC has demonstrated a commitment to its evaluative processes and applied discipline in its practices with a sustained annual academic assessment process and five cycles of program review (eight programs per year). Additionally, specific targets were set and monitored for all program assessment plans, and every academic program review self-study section requires average peer-review ratings of at least 3.0. Learning assessment data for common outcomes and annual program analysis data (externally benchmarked) are shared using online Tableau dashboards with filtering available for course, program, and institutional levels.

The integration of the MCOR, annual assessment planning, and program review processes are explicit, repeatable and periodically evaluated for improvement; all use internal peer-review methods to share processes college-wide. Annually, LCCC best practices for assessment and program review are identified for common access. These evaluative quality processes produce regular activity outputs (e.g., improvements and action plans) and align to College strategic planning. Category One processes are at the aligned level of the quality maturity matrix with results moving from the reacting level, experienced four years ago, to the systematic level (archived, analyzed with trend data, and shared).

From four years of assessment activity, the College faculty have learned that the current institutional rubric process requires substantial refinements. Even though it works well for discipline areas where the course and program competencies match the rubric definitions, most programs experience imprecise matches with questionable data validity. As a result, some programs (e.g., Education, English, and History) are beginning to implement program-specific rubrics with better-aligned assignments for specified learning competencies, resulting in higher quality data. These gains need replication through the added training and design resources that are being developed by the current Guided Pathways 2.0 quality initiative.

Through its Guided Pathways 2.0 efforts, the College continues to make major strides in improving teaching and learning. LCCC has established nine major “must-have” teams to develop and improve systems that help students select career/educational paths and successfully complete them in a timely manner. Five must-have teams (General Education v2.0, Program Maps, Co-requisite Developmental Math and English, Course and Program Competencies, and Excellence in Instruction) are focused on strengthening LCCC’s processes for Helping Students Learn.

# 1.1 - Common Learning Outcomes

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Common Learning Outcomes focuses on the knowledge, skills and abilities expected of graduates from all programs. The institution should provide evidence for Core Components 3.B., 3.E. and 4.B. in this section.

## **1P1: PROCESSES**

Describe the processes for determining, communicating and ensuring the stated common learning outcomes, and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Aligning common outcomes (institutional or general education goals) to the mission, educational offerings and degree levels of the institution (3.B.1, 3.E.2)
- Determining common outcomes (3.B.2, 4.B.4)
- Articulating the purposes, content and level of achievement of the outcomes (3.B.2, 4.B.1)
- Incorporating into the curriculum opportunities for all students to achieve the outcomes (3.B.3, 3.B.5)
- Ensuring the outcomes remain relevant and aligned with student, workplace and societal needs (3.B.4)
- Designing, aligning and delivering cocurricular activities to support learning (3.E.1, 4.B.2)
- Selecting the tools, methods and instruments used to assess attainment of common learning outcomes (4.B.2)
- Assessing common learning outcomes (4.B.1, 4.B.2, 4.B.4)

## **1R1: RESULTS**

What are the results for determining if students possess the knowledge, skills and abilities that are expected at each degree level? The results presented should be for the processes identified in 1P1. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

## **1I1: IMPROVEMENT**

Based on 1R1, what process improvements have been implemented or will be implemented in the next one to three years? (4.B.3)

## **Responses**

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**1P1a. Aligning common outcomes (institutional or general education goals) to the mission, educational offerings and degree levels of the institution (3.B.1, 3.E.2)**

The College's process to align common outcomes to the [mission](#), educational offerings, and degree levels is through its institutional competencies and general education core. LCCC developed the core and competencies based on the belief that students' education should prepare students academically, professionally, and personally for the lives they will lead beyond college. The institutional competencies are outlined on page three of the [General Education Procedure 2.2P](#), which governs the development of the general education core at the College and articulates how general education requirements vary based on degree level. Additionally, the varying general education alignment between degrees and certificates aligns to the College's mission to prepare students for their chosen path beyond the College (3.B.1, 3.E.2).

Institutional competencies shape the development of the general education core curriculum, incorporated into all degree and credit-bearing certificates at the College. The formal process of aligning courses to institutional competencies is via the [Master Course Outline of Record](#) (MCOR) (pg. 3). The MCOR establishes a connection between the course, the institutional competency the course addresses, and how the competency will be assessed. All courses are required to have an approved MCOR that is reviewed by the Academic Standards Committee (ASC). Additionally, faculty proposing the addition of a course to the general education core complete the [general education checklist](#), reviewed and approved by the ASC, to demonstrate the course's connection to the institutional competencies.

**1P1b. Determining common outcomes (3.B.2, 4.B.4)**

LCCC uses a campus-wide, faculty-driven process, implemented in 2012, for determining common outcomes through the identification of skills necessary for successful graduates from the College. The College has implemented several additional processes to strengthen the College's common outcomes process. Referenced above, General Education Procedure 2.2P outlines a competency-based general education core and the skills each student will have attained at graduation. Also referenced above, the general education checklist process ensures that all general education courses directly align with the institutional competencies. The ASC, comprised of campus-wide representation of faculty, staff, and administration, oversees this process. Institutional competencies, and the MCOR procedure requires all courses to include a common course assessment that faculty use as a standard measurement of the institutional competencies. (3.B.2, 4.B.4)

To further strengthen systems and processes college-wide, LCCC applied for and was accepted as one of the 13 colleges in the AACC Guided Pathways 2.0 project. As part of this project, the College identified nine "must have" systems, including [general education](#) and [course and program competencies](#), for extensive review and revision. The planned goals and outcomes are listed in the charter documents. The nine "must haves" teams will develop more robust processes, which will be in place by Fall 2020.

**1P1c. Articulating the purposes, content and level of achievement of the outcomes (3.B.2, 4.B.1)**

LCCC's process for articulating the purposes, content, and level of achievement of outcomes centers on communication, operation, and evaluation. The College primarily uses the General Education Procedure to communicate the purposes and content of the outcomes to College employees (3.B.2); outcomes are also communicated through the [Catalog](#) (pg. 32-33), which disseminates the information to students and other College stakeholders (3.B.2). The procedure also indirectly communicates levels of achievement of the outcomes through [core competency rubrics](#) (Appendix B, pg. 12). The process is operationalized through use of MCORs, which serve as process maps for the ASC, faculty, and other stakeholders to instruct and assess the outcomes (3.B.2, 4.B.1).

#### **1P1d. Incorporating into the curriculum opportunities for all students to achieve the outcomes (3.B.3, 3.B.5)**

LCCC incorporates opportunities for all students to achieve the outcomes through the College's [general education core](#); all degree-seeking students must complete these requirements, which vary by degree sought. Other opportunities are through a student's program-specific courses, selected in consultation with an academic advisor, that reinforce knowledge and skills gained through the general education core. The College strategically schedules courses in a variety of modalities (e.g. online, hybrid, face-to-face), lengths (e.g. 16-weeks, 8-weeks), and times (morning, afternoon, evening) to ensure students have learning opportunities that meet their scheduling needs (3.B.3, 3.B.5).

#### **1P1e. Ensuring the outcomes remain relevant and aligned with student, workplace and societal needs (3.B.4)**

LCCC has established a blueprint for academic success based on four general education outcomes and accompanying competencies that are incorporated throughout the curriculum. All students are expected to attain proficiency in each of these areas as part of their academic program at the College. One of these outcomes is Human Culture, and includes the competency of Cultural Awareness which contains the largest collection of courses on campus with approximately forty-nine (3.B.4).

The College's process to ensure that outcomes remain relevant and aligned with student, workplace, and societal needs has four primary components. The first is an annual [alumni survey](#), which asks recent graduates to evaluate the importance of the institutional competencies to their current employment and/or academic program. The second component is the mandatory inclusion of advisory committees in all academic programs. Advisory committees, governed by the [Advisory Committee Handbook](#), are comprised of a mixture of College faculty, K-12 partners, and community and industry leaders: advisory committees are required to meet annually to collect committee member feedback on outcome relevance and develop program modifications as needed to align with stakeholder needs. The third component, to meet the needs of students intending to transfer to another college or university, is through articulation with partner institutions, particularly the University of Wyoming. This includes the general education transfer block, designed to meet requirements of these partners, and participation in the [Interstate Passport program](#) (LCCC's 2018-19 Catalog, pg. 31), as well as numerous academic program-specific [articulations](#) ensuring students' needs are met via transfer opportunities. The fourth

component, part of program review, evaluates how well [programs align](#) to workplace, societal, student, and other stakeholder needs.

LCCC also utilizes secondary components to ensure that outcomes remain relevant and aligned with student, workplace, and societal needs, including student focus groups, student questionnaires/surveys, statewide articulation summits, and service on local business advisory boards.

#### **1P1f. Designing, aligning and delivering cocurricular activities to support learning (3.E.1, 4.B.2)**

LCCC's process for designing, aligning, and delivering co-curricular activities to support learning is governed through the Office of Student Life. Co-curricular activities include student organizations as well as events; the co-curricular student organization process is outlined in the [Student Organization Procedure \(3.E.1\)](#). All co-curricular organizations and activities follow an approval process. Currently, this process is through conversation between the Coordinator for Student Engagement and Diversity and the student organization/activity sponsor. The conversation ensures that student organizations/activities establish learning outcomes that align with institutional competencies and an assessment plan to measure student achievement of these outcomes (e.g. surveys, comment cards, relevant competency rubrics, etc.). Furthermore, the [Student Activity Fee Allocation Procedure](#) (section 5.C.2) requires student organizations to articulate learning outcomes and an assessment plan in order to receive operational monies from student fees (4.B.2). Some examples of co-curricular activities include Rotaract, Phi Theta Kappa, Student Alliance for Equality, *Wingspan*, and the Radiography Club.

#### **1P1g. Selecting the tools, methods and instruments used to assess attainment of common learning outcomes (4.B.2)**

The College's process for selecting the tools, methods, and instruments used to assess attainment of common learning is collaborative and ongoing. Institutional rubrics and MCORs were developed and implemented in 2014 through campus-wide conversations led by the Student Learning Assessment (SLA) Subcommittee of ASC. As part of that implementation, College faculty identified and began using common course assessments (CCA) to evaluate student learning of institutional competencies. These CCAs were also approved by faculty serving on the Academic Standards Committee. Since 2014, several technologies have been employed to streamline assessment; technologies are selected using an RFP process that involves broad representation to ensure appropriate tools are employed. CurriQunet, for example, has been implemented to provide an online MCOR and course review/approval process, rather than an e-mail system used previously; CCA data are collected through the learning management system (LMS). The college is implementing a [Tableau dashboard](#) to enhance LCCC's capacity to analyze assessment data (e.g. by course, by semester, comparative data). A Campus Labs module is used to systematically conduct [program review](#), which also serves as an assessment mechanism in that faculty must demonstrate the use of student learning assessment data in planning and evaluating the curriculum (4.B.2).

#### **1P1h. Assessing common learning outcomes (4.B.1, 4.B.2, 4.B.4)**

The College's process for assessing learning outcomes is built on the use of institutional competency rubrics and CCAs, referenced above. Student performance on the CCA, a course-specific assignment or activity, is evaluated using the relevant institutional rubrics and data are collected each semester in the LMS. Institutional Research (IR) staff analyze the data and update the CCA Tableau dashboard, which is shared with faculty and administrators. These data provide LCCC with course-level evidence on student performance. Results are aggregated at the institutional level and included in the College's annual [KPI Report Card 2017-18](#) (A.5a to A.5j) referenced throughout this portfolio and discussed in detail in section 5P1.

Indirect student learning assessment is conducted through the annual alumni survey, referenced above, which asks recent graduates to rate their confidence about their abilities in the institutional competencies. The [Graduation Exit Survey](#) is administered to students near the end of the fall and spring semesters and includes items where students rate their confidence levels for each of the institutional learning competencies (see 1R1a). Additionally, each program at the College completes an [annual assessment plan](#) (pg. 6) focusing on ways the program will address student learning. Many programs offer general education courses and focus on ways to strengthen learning outcomes as part of their annual assessment (**4.B.1, 4.B.2, 4.B.4**).

#### **1R1a. Summary results of measures (include tables and figures when possible)**

A review of 2017-18 [student learning assessment results](#) shows that at least 70 percent of students assessed demonstrated proficient skills in eight of ten areas, as established by the corresponding institutional rubrics. Quantitative reasoning and scientific reasoning performed under 70 percent over the last four years. Additionally, although results have fluctuated from year to year, two competencies show positive trends (e.g. cultural awareness and problem solving). [Alumni survey results](#) from 2015-16 and 2016-17 graduates show that most respondents enrolled at other higher education institutions felt at least somewhat prepared to continue their education in all nine competencies. The percentage indicating that they were very prepared ranged from 33% (aesthetic analysis) to 65% (written communication); the majority responded "very prepared" on four of the nine competencies. The LCCC [Graduation Exit Survey](#), 2017-18 (items Q71-78, pg. 17) shows that student confidence levels (somewhat to very confident) ranged from 85 to 93 percent for all institutional competencies except collaboration (teamwork), which they rated at 81 percent.

#### **1R1b. Comparison of results with internal targets and external benchmarks**

As shown in the data above (student learning assessment results in 1R1a) internal improvement targets were met for five of the ten institutional competencies. While the target was unmet for Effective Interpersonal Communication, the 2017-18 results showed improvement from the previous year. Alumni survey results met the target of 50% responding "very prepared" for four of the nine competencies.

Because internally developed rubrics are used to assess student learning, no external benchmarks are available for these measures.

#### **1R1c. Interpretation of results and insights gained**

The data for five of the institutional competencies show positive trends in student achievement with students performing at a Proficient or Exceptional level. However, a great deal of fluctuation is also apparent. Through faculty forums, inconsistencies in how common course assessments are administered, assessed, and reported have been identified, which has resulted in inconsistent data collection. Two reasons for this exist: program modifications and a large new faculty population in the last several years. The movement to align course, program, and institutional competencies has meant many programs and the associated CCAs have been revised in the last two years, making comparing data from year-to-year difficult. Changes in new faculty orientation have led to inconsistent communication about student learning assessment; process improvements have not always been communicated to continuing faculty in the same way as to new faculty. As a result, not all faculty were completing the common course assessment each semester for each course they taught.

### **III. Based on 1R1, what process improvements have been implemented or will be implemented in the next one to three years? (4.B.3)**

Recent improvements have been focused on employing technologies to improve data collection and to make assessment data more accessible and useful to faculty and administrators (e.g., the Tableau dashboard referenced above).

Based on the College's current processes and data, the following are planned improvements in the coming academic years:

- LCCC was accepted as one of thirteen colleges into the AACC Guided Pathways 2.0 project. As a result, the College is in the process of reviewing and revising its [general education core](#) as well as [course and program competencies](#). The goal is to have both revised and implemented by fall 2020. This will include reviewing and revising institutional competencies and rubrics.
- The College will implement increased faculty training using the institutional rubrics, designing common course assessments, and grade norming to ensure cogency among faculty as well as consistency in collecting data on general education.
- The Office of Student Life is working to strengthen the design, assessment, and implementation of co-curricular activities at the College. Part of this process will include the formalization of a co-curricular process that correlates co-curricular activities to institutional competencies, and, where applicable, course and program-level competencies.

## 1.2 - Program Learning Outcomes

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Program Learning Outcomes focuses on the knowledge, skills and abilities graduates from particular programs are expected to possess. The institution should provide evidence for Core Components 3.B., 3.E. and 4.B. in this section.

### 1P2: PROCESSES

Describe the processes for determining, communicating and ensuring the stated program learning outcomes and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Aligning learning outcomes for programs (e.g., nursing, business administration, elementary teaching, etc.) to the mission, educational offerings and degree levels of the institution (3.E.2)
- Determining program outcomes (4.B.4)
- Articulating the purposes, content and level of achievement of the outcomes (4.B.1)
- Ensuring the outcomes remain relevant and aligned with student, workplace and societal needs (3.B.4)
- Designing, aligning and delivering cocurricular activities to support learning (3.E.1, 4.B.2)
- Selecting the tools, methods and instruments used to assess attainment of program learning outcomes (4.B.2)
- Assessing program learning outcomes (4.B.1, 4.B.2, 4.B.4)

### 1R2: RESULTS

What are the results for determining if students possess the knowledge, skills and abilities that are expected in programs? The results presented should be for the processes identified in 1P2. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Overall levels of deployment of the program assessment processes within the institution (i.e., how many programs are/not assessing program goals)
- Summary results of assessments (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of assessment results and insights gained

### 1I2: IMPROVEMENT

Based on 1R2, what process improvements have been implemented or will be implemented in the next one to three years? (4.B.3)

## Responses

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**1P2a. Aligning learning outcomes for programs (e.g., nursing, business administration, elementary teaching, etc.) to the mission, educational offerings and degree levels of the institution (3.E.2)**

The Institution's process for aligning program learning outcomes (called competencies at LCCC) to the mission, educational offerings and degree levels is embedded in its quality assurance processes for assessment planning, program review, and course management. [Annual assessment planning](#) (pg. 2) requires academic programs to describe the program's alignment, including learning competencies, to the LCCC mission (student preparation, workforce development, transfer, and community engagement). Moreover, programs going through the program review process list [program-level learning competencies](#) (pg. 4) and demonstrate alignment with the programs' mission-centered values in the self-study. Best practices for both [academic assessment](#) and [program review](#) are accessible in the campus portal (myLCCC), providing faculty with resources for developing effective mission alignments. Finally, the [Master Course of Record](#) (MCOR) (pg. 3) procedure requires programs to align their course learning competencies to applicable program-level competencies to ensure their alignment with educational offerings (3.E.2).

**1P2b. Determining program outcomes (4.B.4)**

The College's process for determining program outcomes/competencies is incorporated in its mission alignment process (1P2a above), quality assurance processes, and procedures. Through the academic standards embedded in the program review process, faculty demonstrate how their competencies meet stakeholders' needs. Stakeholder input regarding program competencies is collected in various ways, including advisory committees. Transfer program faculty attend annual articulation meetings with the University of Wyoming to inform competencies. Some programs align competencies to accreditation requirements or associated certification exams, while others, such as Psychology and Education, align learning competencies to professional association guidelines. Faculty developing new programs follow LCCC's [Program Development and Approval Procedure](#) (pg. 2), which requires new program learning competencies to incorporate advisory committee feedback.

Faculty's peer review of annual program-level assessment plans strengthens program learning competencies. The College's planning standards use the best practices found in learning assessment literature, including the *Nine Principles of Good Practice for Assessing Student Learning* developed in 1991 with support from the American Association for Higher Education (AAHE), Trudy Banta's 2002 *Characteristics of Effective Outcomes Assessment*, and Linda Suskie's 2004 *Good Assessment Practices* (4.B.4).

**1P2c. Articulating the purposes, content and level of achievement of the outcomes (4.B.1)**

As above, the College's process to articulate the purposes, content, and level of achievement of the program outcomes/competencies is embedded in its evaluative, quality assurance processes (annual assessment planning, academic program review, and MCOR process). Faculty members articulate the purpose and content of their program competencies in the [annual assessment plans](#) (pg. 5), in their program review self-studies ([Section I](#)) (pg. 4), on the [MCOR](#) (pg. 3), and list

them on their LCCC [program websites](#). Faculty articulate the students' level of achievement of competencies through competency rubrics in the LMS, and display student learning achievement levels/targets in annual assessment plans ([Section D: Expected Level of Learning Performance](#)) (pg. 3). The levels of achievement for competencies are internally peer-reviewed, which increases faculty participation and sharing of competency achievement levels (**4.B.1**).

**1P2d. Ensuring the outcomes remain relevant and aligned with student, workplace and societal needs (3.B.4)**

LCCC uses its evaluative and quality assurance processes to ensure that learning outcomes/competencies remain relevant and aligned with student, workplace and societal needs. Academic program review [Standard II.A.2](#) (pg. 5) requires faculty to demonstrate how the program sustains relevancy, while [Standard II.C.1](#) (pg. 6) requires alignment to stakeholder and societal needs. Faculty use a variety of mechanisms to meet these requirements, including advisory councils, special accreditation standards, state agencies, articulation meetings, professional guidelines, and surveys of students. [Best practices](#) (pg. 29) for responsiveness to stakeholder needs, shared across campus, provide faculty resources to strengthen competencies. Coursework that develops and satisfies the Cultural Awareness competency (described in 3P1e), often align to program level competencies that are aligned with professional association standards focused on cultural diversity (e.g., National Council of Teachers of English) (**3.B.4**).

**1P2e. Designing, aligning and delivering cocurricular activities to support learning (3.E.1, 4.B.2)**

The College uses several processes to design, align, and deliver cocurricular activities to support student learning, including student organizations, funding procedures, and academic program review. Additionally, the College participates in the AACC Pathways 2.0 project; one "must-have" team is developing and implementing formalized [Essential Student Experiences](#) that include purposeful co-curricular activities and their assessment.

The students' Campus Activities Board plans cultural, co-curricular, and social events for the student body. One of its objectives is to provide faculty opportunities to partner with Campus Activities to help promote learning in coursework. Additionally, some academic program areas have associated student organization, such as the Collegiate Music Association, that target specific co-curricular activities to support their program learning competencies ([see Clubs and Organizations](#)) (**3.E.1**).

The College formally supports co-curricular activities through its [Scholarships and Waivers Procedure](#) (pg.3), which emphasizes structured environments that develop students' abilities to collaborate, communicate, and meet other LCCC institutional competencies. The College's [Student Activity Fee Allocation Committee Procedure](#) (pg. 2) provides the financial base for developing co-curricular activities to support classroom learning (**3.E.1**).

Academic program faculty design and align co-curricular activity to support learning through the program review process; [self-study Section II.B.5](#) (pg. 6) requires faculty to describe *Co-curricular Opportunities for Students' Engagement with Each Other, The Campus, and Broader*

*Community.* The program review process includes internal, faculty peer review to ensure these opportunities satisfy the requirements (4.B.2).

### **1P2f. Selecting the tools, methods and instruments used to assess attainment of program learning outcomes (4.B.2)**

The College uses a collaborative process, involving broad faculty and staff representation to select tools used to assess attainment of program learning outcomes/competencies. In fall 2013, an ad hoc faculty and staff committee selected [Campus Labs](#) Compliance Assist and Planning modules for its assessment management system. Two Campus Labs survey tools (Baseline and Course Evaluation) were also purchased to support learning assessment. Simultaneously, the College's Student Learning Assessment (SLA) subcommittee, made up of faculty and staff, developed nine learning rubrics for assessing the Institutional Learning Competencies in 2013-14; these are also used to measure related program-level competencies (4.B.2). Both the Canvas and Tableau tools were recently selected, in part, because the state's community college system provides funding support and server resources.

Using commonly-held best practices in learning assessment, the Institutional Effectiveness Department developed templates and quality standards that populate the Campus Labs management system. The internal review engages faculty members in review of assessment plans outside their school to encourage cross-departmental collaboration and identify best practices that are shared with the campus (4.B.2). Based on stakeholder feedback, the College selected [myLCCC](#), a campus portal that provides single sign-on access to assessment planning and to the IE Department's "[virtual office](#)" for best practices resources and example assessment plans. The College won a Champion User award from Campus Labs in 2018 (4.B.4).

### **1P2g. Assessing program learning outcomes (4.B.1, 4.B.2, 4.B.4)**

The College uses its [continuous improvement process](#), consisting of two mutually reinforcing evaluation platforms, to assess program learning competencies. The [Academic Program Review Procedure](#) (pg. 2) establishes this integration of self-evaluation processes. An annual, online, assessment management platform provides structure for academic programs to evaluate two or more program-level student learning competencies and two or more program operational outcomes that support learning. This platform is closely integrated with the College's five-year program review online evaluation platform, which reinforces the annual assessment of student learning.

[Program review standards and guidelines](#) ensure that programs annually assess two or more learning competencies and demonstrate that they are achieving these competencies. Program review includes a feedback self-study section that describes [characteristics of feedback systems](#) to inform student learning assessment. A subsequent self-study section aligns to programs' assessment planning module so that peer reviewers can view [annual planning and data reporting activity](#), including peer review feedback. All programs must define the expected student learning performance on competencies and verify student achievement of success in their data findings and summaries (4.B.1, 4.B.2).

Both platforms use internal peer review as feedback systems for programs to improve their student learning assessment planning. Therefore, programs annually receive faculty feedback from within and from outside their schools, and every fifth year receive an additional set of faculty feedback comments. Faculty peer review involves about 40 faculty per year in either learning assessment planning or program review of learning assessment. The templates and embedded quality standards used in annual learning assessment relate to best practices found in learning assessment literature (see 1P2b) **(4.B.4)**.

### **1R2a. Overall levels of deployment of the program assessment processes within the institution (i.e., how many programs are/not assessing program goals)**

The deployment of program assessment is extensive across campus with 96% of programs having complete assessment plans including a planning context description with mission alignments, two student learning competencies, and two operational outcomes. However, there is variation in the frequency that programs respond to peer-review comments and report evaluation data that verify student achievement of competencies/outcomes. The Institutional Effectiveness Department (IE) monitors academic assessment activity annually and reports the amount of variation to Academic Affairs. The [most recent report](#) shows that 44% of plans responded to internal peer review comments, 64% of plans reported data findings, and 96% of plans were complete.

### **1R2b. Summary results of assessments (include tables and figures when possible)**

The assessment results of each academic program are reported in the data summary section of the LCCC assessment plans (55 plans from 49 programs), which are maintained in the Campus Labs assessment management system. The following four academic assessment plans are representative of the template design and planning content that appears in the majority of plans for learning competencies: [English AA](#) (from the School of Arts and Humanities), [Business and Finance/Accounting AS](#) (School of Business and Technical Studies), [Diagnostic Medical Sonography AAS](#) (School of Health Sciences and Wellness), and [Natural Sciences AS](#) (School of Math and Sciences).

Most health science programs prepare students for licensure or certification. The most recently available [pass rates](#) are quite strong.

As stated earlier, the assessment plan's operational outcomes support the success of student learning. An example operational outcome from [Business and Finance/Accounting](#) shows the success of LCCC students transferring to the University of Wyoming.

### **1R2c. Comparison of results with internal targets and external benchmarks**

The College's assessment plan template includes a target-related section named Expected Level of Learning Performance (see any above assessment plan). Each academic program sets an internal target for each learning competency and each operational outcome; targets are reviewed annually by faculty on the SLA subcommittee of Academic Standards to ensure integrity.

Assessment plan standards require programs to report data demonstrating student achievement of planning targets. In 2018, 64% of programs reported data (see report referenced in 1R2a).

The College's program review process uses a peer-review rating rubric to determine patterns of strengths and weakness for the institution. It establishes an average of 3.0 on a four-point scale for program performance on each section of program review quality standards as an internal target (see [Agriculture rubric 2018](#)). In recent years, programs on average have performed above 3.0 on all self-study sections except continuous improvement of student learning (see [table 1R2b](#)).

#### **1R2d. Interpretation of assessment results and insights gained**

The deployment of the College's assessment planning process is broad, including all academic programs. However, there remains significant variance among programs in responding to internal review comments and in reporting of data summaries and accounts of improvements. Continuous improvement of student learning remains one of the lowest performing sections in program review and performs below the college target for success (see [peer-review rubric ratings](#)).

The continuous improvement process for program competencies/outcomes is now better aligned through integration of MCOR, annual assessment, Baseline survey tool, and program review that yield institutional rankings for 50 plus College standards. Integration includes robust data resources such as KPIs and Tableau dashboards (see [Criminal Justice Pre-Law](#)) that appear in program review self-studies and faculty use for analyzing student learning performance.

#### **1I2. Based on 1R2, what process improvements have been implemented or will be implemented in the next one to three years? (4.B.3)**

The College's continuous improvement processes have generated multiple improvements to programs' annual assessment of learning competencies/outcomes through peer review of program reviews and assessment planning and its program review procedure. Based on faculty feedback after the first year of the current program review process (2014-2015), the College organized a faculty ad-hoc committee to revise the self-study template, vastly reducing jargon, clarifying standards, and reducing duplication of effort. Additionally, the IE Department formally gathers feedback from faculty each year to continuously improve the process. Based on what program faculty have learned from program review experiences over the last four years, they developed several action plans ([see example](#)) to strengthen program assessment plans and improve student learning (4.B.3).

From four years of program review experience, faculty in many programs have realized that they were not evaluating their program-level learning competencies effectively by using only institutional competency rubrics. Many faculty are beginning to design program-specific rubrics or instruments to more accurately measure student achievement of program learning competencies.

Through the College's participation in AACC's Pathways 2.0 project, the "must-have" [Course and Program Competencies](#) (pg. 4) team is developing plans for strengthening the methodology, resources and training for academic program learning assessment. Learning assessment will become a more integral part of the development of a College pathway for student attainment of learning competencies.

## 1.3 - Academic Program Design

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Academic Program Design focuses on developing and revising programs to meet stakeholders' needs. The institution should provide evidence for Core Components 1.C. and 4.A. in this section.

### 1P3: PROCESSES

Describe the processes for ensuring new and current programs meet the needs of the institution and its diverse stakeholders. This includes, but is not limited to, descriptions of key processes for the following:

- Identifying student stakeholder groups and determining their educational needs (1.C.1, 1.C.2)
- Identifying other key stakeholder groups and determining their needs (1.C.1, 1.C.2)
- Developing and improving responsive programming to meet all stakeholders' needs (1.C.1, 1.C.2)
- Selecting the tools, methods and instruments used to assess the currency and effectiveness of academic programs
- Reviewing the viability of courses and programs and changing or discontinuing when necessary (4.A.1)

### 1R3: RESULTS

What are the results for determining if programs are current and meet the needs of the institution's diverse stakeholders? The results presented should be for the processes identified in 1P3. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of assessments (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### 1I3: IMPROVEMENT

Based on 1R3, what process improvements have been implemented or will be implemented in the next one to three years?

## Responses

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### 1P3a. Identifying student stakeholder groups and determining their educational needs

The College's primary process for identifying student stakeholder groups and determining their educational needs is its onboarding process. Beginning with the admissions application, student

needs are determined through indicators such as high school grade point average, ACT test scores, program-specific requirements, and [placement exams](#) for mathematics and reading/writing courses. Advisors assist students in choosing a program of study that meets their educational needs and goals. Students may self-identify statuses (such as first-generation, low income, veteran, or disabled) to determine additional educational needs during the onboarding process or at any time during their LCCC enrollment. Secondly, the scholarship application process also identifies student groups and determines students' educational needs, based on such indicators as single parent status, athletic recruitment, and residency status. Finally, the College employs a variety of processes designed to determine and meet students' educational needs based on enrollment status (full-time, part-time, online, etc.) and stakeholder subgroups. [Figure 1P3-1](#) shows different student stakeholder sub-groups, their expectations, and methods to determine their educational needs.

These processes result in the College serving diverse student groups, as befits an open-access institution. LCCC students represent a wide spectrum of socio-economic status, age, cultural background, parenthood status, race, employment status and educational attainment. LCCC actively seeks to engage diverse groups of prospective students through recruiting events hosted by state and local agencies, including Wyoming Department of Workforce Services, F.E. Warren Air Force Base Education Center, and the City of Cheyenne (**1.C.1, 1.C.2**).

Student educational needs information is communicated and evaluated through a collaborative process to ensure that relevant areas (e.g., program faculty, advisors, and student services staff) have the resources to meet those needs. The College is in the process of selecting a student success technology solution, such as Civitas or EAB Navigate, to facilitate information-sharing, to provide predictive analytics to strengthen stakeholder need determination, and to establish a systematic process to analyze student need information.

### **1P3b. Identifying other key stakeholder groups and determining their needs (1.C.1, 1.C.2)**

LCCC's process to identify other key stakeholder groups and determine their needs aligns with and promotes the College's [mission](#), which is, in part, "to enrich the communities we serve through activities that stimulate and sustain a healthy society and economy." (**1.C.1**) Through its mission components, LCCC has identified three primary stakeholder groups: other educational institutions, the external community, and governmental entities.

The key process for determining stakeholder needs uses their input through a variety of mechanisms, including articulation meetings and agreements with regional higher educational institutions. Stakeholder input is also gathered through program advisory boards, comprised of community and educational partners, business and industry representatives, and/or external subject matter experts (SMEs); accrediting bodies; and professional and community organizations. Additionally, the College hosts a variety of forums, including face-to-face needs analysis meetings, focus groups, community events, and participation in state and local community development initiatives. [Figure 1P3-2](#) summarizes other key stakeholder groups, their expectations, and the processes used to determine their needs (**1.C.2**).

### **1P3c. Developing and improving responsive programming to meet all stakeholders' needs (1.C.1, 1.C.2)**

LCCC's process for developing responsive programming to meet all stakeholders' needs is established by its [Program Development and Approval Procedure](#). LCCC's process adheres to the Wyoming Community College Commission (WCCC) program criteria. (The WCCC has statutory responsibility to approve all programs at Wyoming community colleges and ensure that programs align with the interests of the State of Wyoming). The program development process includes (1) the identification of the stakeholder need to be addressed through the processes described above, (2) the establishment of program goals and student learning outcomes (competencies), (3) research on similar programs in the region as well as across the nation to inform the structure and operation of the proposed program, (4) the identification of resources that will be required in the program, (5) submission of the program proposal to internal and external groups for approval, and (6) implementation of the program.

The College's processes for evaluating and improving programming to meet stakeholder needs are embedded in the related program review process, which is governed by [Academic Program Review Procedure 10.2P](#). Through this process, faculty demonstrate their program's [Response to Stakeholder Needs](#) and describe relevant continuous improvement strategies. The evidence derived from, and actions taken as a result of program review, ensure that academic programs remain relevant and effective towards meeting the stakeholder needs and contribute to the long-term sustainability of the College.

As an open access, comprehensive community, LCCC's role is to meet the needs of its service area, while ensuring its students can successfully navigate an ever-changing, diversifying community. Through the engagement of stakeholders, in both program development and improvement as described above, LCCC ensures that its programming provides equitable opportunities for all to participate, and more importantly to succeed, both in the classroom and after graduation. For specific examples of this in action, please see section 1P2e, designing co-curricular activities (1.C.1, 1.C.2).

### **1P3d. Selecting the tools, methods and instruments used to assess the currency and effectiveness of academic programs**

LCCC's processes for selecting the methods and instruments used to assess the currency and effectiveness of academic programs incorporate best practices, the College's Key Performance Indicators (KPIs), and the program review process, while leveraging tools and systems adopted at the state level. These processes support the College's strategic plan, which includes the development of technology-based mechanisms to capture and analyze assessment data to inform continuous improvement of teaching practices.

Best practices are adhered to in the collaborative processes used to choose other tools to assess the currency and effectiveness of academic programs. Subject Matter Experts (SMEs) are consulted to identify effective tools, and faculty and staff participate in professional development opportunities to stay current with tools, methods, and instruments that are available for academic effectiveness assessment. Current tools include Canvas and Campus Labs modules (referenced

above) for data collection and Tableau dashboards that enable LCCC to make impactful, evidence-based decisions.

Each KPI has [multiple performance measures](#). Measure results are analyzed annually to produce an institutional report card grading the College's annual performance. The companion [annual program analysis](#) incorporates applicable KPI measures (e.g., graduation and course success rates) disaggregated at the program level to evaluate individual program performance. Each program-level measure result is assigned a quintile ranking; measure rankings are aggregated to produce overall performance rankings for each program.

Through the program review process, faculty must articulate their program's processes for [designing and maintaining curriculum](#), including how they maintain currency. Faculty also analyze the [program analysis results](#) (KPIs) and develop improvement strategies. Peer-reviewers rate these sections using a rubric that provides program-specific scores on sustaining currency and effectiveness of programs (4.A.1).

### **1P3e. Reviewing the viability of courses and programs and changing or discontinuing when necessary (4.A.1)**

LCCC's process to review the viability of courses and programs and to change or discontinue when necessary is established by the [Academic Standards Committee \(ASC\) Procedure](#). This predominately faculty committee promotes and maintains high academic standards that lead to student success in courses and programs at LCCC consistent with its overall mission. Specifically, the ASC oversees the development, review, modification and discontinuation of programs and curricula, as well as the assessment of student learning in a manner that recognizes the interconnected nature of these functions within the college.

Additionally, the College uses a combination of evaluative processes, [program review](#) and annual program analysis data, to test the viability of programs. For example, in 2017-2018, the dean of Business, Agriculture, and Technical Studies discontinued the Homeland Security and Process Technology programs based on weak performance on program review and the [Academic Program Prioritization Method](#). The prioritization method relies heavily on program-level KPI measures and produces a scatter plot to represent overall program health. The discontinued programs were in the lower left quadrant of the scatter plot, indicating low value (program demand) and low efficacy (effectiveness and efficiency). Included in the decision to discontinue these programs was a review of industry trends, consultations with industry partners and a large local employer, as well as an analysis of enrollment numbers (4.A.1).

### **1R3a. Summary results of assessments (include tables and figures when possible)**

Results of the [2016-17 program analysis](#) (the most recent available) ranked 48 programs based on their performance against four key performance areas: participation, success, learning environment, and efficiency. The analysis produces percentile scores for each program. The IR program analysis dashboard ([Figure 1R3a-1](#)) shows specific measure results at the institutional level (filterable by program). A review of these results indicates that 79.10% of students were successful overall in all courses during academic year 2017-2018, a 0.56% increase over 2016-

2017. The number of declared majors during 2017-2018 was 6,152, an increase of 60 over the 2016-2017. The average number of credits to completion decreased by 1.99 credits for 2017-18 graduates compared to 2016-17; the average time to completion in years remained level for the last three academic years with little variation for the same cohort.

The [Academic Program Review Rubric](#) presents the overall average peer-review ratings of the eight programs that were reviewed during for the 2017-2018 program review cycle. The eight programs averaged 3.02 on a four-point scale for section II.A.2a, which addresses how programs sustain rigor and relevancy in the curriculum and respond to stakeholder needs. The institutional target for the program review rubric is 3.00. In section II.C.3a, which addresses how programs use stakeholder feedback to adjust curriculum, the average score was 2.97. Finally, in section II.C.3b, examples of how gathered stakeholder feedback was used to improve or revise the program's curriculum since the previous review, the average rating was 3.28.

### **1R3b. Comparison of results with internal targets and external benchmarks**

The 2017-2018 program analysis dashboard (tableau) reveals some comparative data for the seven Wyoming community colleges (see example [number of completions by college](#)). LCCC had the most completions among the colleges in 2017-18 with 812.

For the 2016-2017 academic year, [eight programs were analyzed](#) using the program review process. Performance is based on program analysis using the KPI indicators, which uses a five-point scale where one is the lowest quintile rating and five is the highest. Programs that have section averages below three, typically are expected to analyze those areas for improvement.

Regarding peer-review rubric ratings for program review, an overall average of 3 is the internal target for each program review section. Based on the results presented above (2017-18), the College met this target for sections II.A.2a and II.C.3b but fell short for section II.C.3a.

The peer-review rating system is locally developed, so external benchmarks are unavailable. The College will incorporate additional applicable benchmarks from the institutional KPI system in the future.

### **1R3c. Interpretation of results and insights gained**

LCCC's annual program review process measures the effectiveness of its academic programs against four overall objectives:

1. Generate data to measure how well academic programs are contributing to the achievement of the college's mission.
2. Establish a cycle of planning and reassessment to ensure continuous improvement in the College's programming.
3. Collect objective input and processes to guide future planning for improvement.
4. Develop actionable plans for program improvement.

In December 2017, the third [Academic Program Review Annual Report](#) (pg. 3) was released to the Board of Trustees (BOT). The report confirmed the College was making strong progress toward its program review objectives. The faculty's capacity to provide meaningful self-evaluation has increased, and the feedback given to the program review process is becoming more robust with each cycle. In addition, faculty have embraced the relationship between assessment planning, strategic data gathering, and action planning, and now see these processes as mutually supportive in achieving the College's mission.

**1I3. Based on 1R3, what process improvements have been implemented or will be implemented in the next one to three years?**

One of the more significant improvements for processes to manage academic program design was the implementation of a new LCCC program review process in 2014-15 and a subsequent revision of the self-study template by faculty in spring 2016. The template includes academic standards expected of all programs that include how responsive programs are to stakeholders when designing their curriculum and how programs relate to their stakeholders to sustain currency and rigor of the curriculum. When programs discover program weaknesses from reviews, they establish action plan goals that strengthen service to stakeholders for added viability. A 2015 Program Development and Approval Procedure, 2.3.1P formalized program responsiveness to stakeholder needs in the design of new programs. The 2017 scatter plot data presentation improved the evaluative analysis of all academic programs to better determine their viability; it relies on the characteristics of effectiveness, efficacy, and value. The College has recently reviewed two vendors (Education Advisory Board-EAB and Civitas) and is considering purchasing a student-facing platform offering scalable guidance to each student with online advising that offers real time interactions with students and early alert data. These data would provide another access point for learning stakeholder needs and improve the timeliness of responding to those needs by adjusting programming accordingly.

## 1.4 - Academic Program Quality

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Academic Program Quality focuses on ensuring quality across all programs, modalities and locations. The institution should provide evidence for Core Components 3.A. and 4.A. in this section.

### **1P4: PROCESSES**

Describe the processes for ensuring quality academic programming. This includes, but is not limited to, descriptions of key processes for the following:

- Determining and communicating the preparation required of students for the specific curricula, programs, courses and learning they will pursue (4.A.4)
- Evaluating and ensuring program rigor for all modalities, locations, consortia and dual-credit programs (3.A.1, 3.A.3, 4.A.4)
- Awarding prior learning and transfer credits (4.A.2, 4.A.3)
- Selecting, implementing and maintaining specialized accreditation(s) (4.A.5)
- Assessing the level of outcomes attainment by graduates at all levels (3.A.2, 4.A.6)
- Selecting the tools, methods and instruments used to assess program rigor across all modalities

### **1R4: RESULTS**

What are the results for determining the quality of academic programs? The results presented should be for the processes identified in 1P4. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of assessments (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### **1I4: IMPROVEMENT**

Based on 1R4, what process improvements have been implemented or will be implemented in the next one to three years?

## **Responses**

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### **1P4a. Determining and communicating the preparation required of students for the specific curricula, programs, courses and learning they will pursue (4.A.4)**

The College's process for determining and communicating the preparation required of students for the specific curricula, programs, courses and learning they will pursue relies on the student

placement procedure, the Master Courses of Record (MCOR) procedure, and on individual programs with closed admission or special accreditation requirements that specify student preparation.

The College revised its student placement process for math and English courses using faculty SMEs and IR research for 2016-17 (when COMPASS was discontinued). A [2018 IR study](#) (pg. 20) confirmed that the College's new placement process had predictive value and revealed that a higher proportion of students were getting through college level courses. [Placement](#) now initially relies on high school GPA, followed by ACT scores and subject-based tests (ALEX for math and McCann for English). Many students requiring placement are advised to take a college level course along with a developmental co-requisite course. Admissions staff communicate this process to students through its [LCCC Website](#) and its mandatory orientations. The Website also informs students about orientation and advising resources.

Program faculty SMEs, their advisory committees and specialized accrediting or industry criteria determine course competencies and their rigor and identify pre-requisites. College faculty document and share pre-requisites with other LCCC faculty through the MCOR process. A comprehensive communication network informs students of pre-requisites and course sequencing. It includes mandatory student orientation, the required freshman seminar, the [Student Handbook](#), the College's [catalog](#) (course sequencing of programs, prerequisites, [placement testing](#)), mandatory holistic advising for students, the course schedule and course syllabi (4.A.4).

Specific requirements for entry into select-admission programs are determined by program faculty in consultation with external accrediting agencies, advisory boards, employers, and/or other SMEs. This process ensures that course-based and discipline-based competencies are identified to inform preparatory activities prior to application. Preparation information is communicated through program-specific informational materials such as the [Nursing Admissions Package](#) (specifically pages 1 and 7) and through advising and program-specific orientation (4.A.4).

#### **1P4b. Evaluating and ensuring program rigor for all modalities, locations, consortia and dual-credit programs (3.A.1, 3.A.3, 4.A.4)**

The College evaluates and ensures program rigor for all modalities, locations, consortia, and dual credit programs through its course management (MCOR) and quality assurance processes. Individual course rigor is documented in the [Course Competencies](#) (pg. 3) section of each MCOR. MCORs are located in and communicated through the online software CurrIQnet. All instructors, regardless of course modality and location, must use the same course MCOR, instructing to the established common course competencies and completing the identified common course assessments.

The College ensures and evaluates common rigor across all modalities and locations using its program review quality assurance process, specifically [self-study section II.B.3](#) (*Student Learning Competencies are Consistent Across All Instructors and All Modalities*, pg. 6). Internal peer-review teams evaluate programs' evidence for this self-study section and rate compliance to

the academic standard using the program review rubric. Quality assurance includes special accreditation reviews (e.g., nursing or dental hygiene and others), which further reinforce evaluation of rigor across modalities in all locations but does not substitute for LCCC program review. Both program review and special accreditation link rigor to stakeholder feedback (advisory boards and clinical site supervisors) (3.A.1, 3.A.3, 4.A.4).

Dual/concurrent enrollment is further evaluated utilizing [National Center for Concurrent Enrollment Partnerships](#) (NACEP) standards. NACEP accreditation annual reporting ensures program rigor for all dual-credit programming. LCCC assigns lead instructors who work with high school instructors to ensure courses taught in the high school align with college course competencies and rigor (see [NACEP Standards](#), pg.4) (3.A.1, 3.A.3, 4.A.4).

#### **1P4c. Awarding prior learning and transfer credits (4.A.2, 4.A.3)**

LCCC's process for awarding prior learning and transfer credits is articulated in [Transfer of Credit Procedure 3.18P](#) (pg. 2) and administrated by the Registrar's Office. The process for transfer of credit (from all sources) includes (1) students submitting official copies of transcripts, (2) Office of the Registrar determining course equivalencies (if necessary), and (3) transcript evaluations completed for students (4.A.3). Procedure 3.18P describes the evaluation procedure for transfer credit from regionally accredited post-secondary institutions, transfer credit from international post-secondary institutions, credit for military experience, and prior learning assessment (PLA) credit. The LCCC Technical Studies AAS degree awards credit for completion of specified federal apprenticeship programs (4.A.2).

PLA credit is awarded through several mechanisms, including examinations, portfolios, demonstrations, or program-specific methods as determined by faculty and the Registrar. Experiential-learning based credit awards may not exceed 25% of the required credits for any degree. Students must be admitted and enrolled at LCCC in a degree program or credential to be eligible for PLA credit (4.A.2). Prior-learning credit criteria are communicated to all stakeholders in the [LCCC Catalog](#), available online. Lists of acceptable scores for CLEP, AP, and IB and their equivalencies are available from the Testing Center and in the catalog.

#### **1P4d. Selecting, implementing and maintaining specialized accreditation(s) (4.A.5)**

The College process for selecting, implementing and maintaining specialized accreditation relies on the needs of its stakeholders, students and regional employers. Most programs in the School of Health Sciences and Wellness have acquired special accreditation with the institution's support for this reason.

The College supports successful program implementation and maintenance of special accreditation that often includes (1) ensuring personnel align with accreditation requirements; (2) ensuring program content, rigor, assessment and outcomes align; and (3) aligning delivery location and modalities with accreditation standards. LCCC sustains program accreditation by providing infrastructure, technology, funding required equipment needs through methods like course/program fees, staffing to meet accreditation criteria, and continuous improvement resources such as assessment processes. The College communicates its accreditations to future

students and the public through its [website](#) and its [catalog](#). The College facilitates annual reporting and regular accreditation reviews to ensure continuous improvement. The Institutional Effectiveness Department monitors special accreditation activity and maintains a [documentation of accreditation statuses](#) (4.A.5).

#### **1P4e. Assessing the level of outcomes attainment by graduates at all levels (3.A.2, 4.A.6)**

The College uses its continuous improvement process (common course assessment, annual assessment planning, and academic program review) to assess competency and outcomes attainment at all levels. See 1P1h, assessing common learning outcomes, and 1P2g, assessing program learning outcomes, for details on assessment of competencies/outcomes attainment.

The College offers transfer-oriented associate degrees and career/technical education (CTE) degrees and certificates. The [College's General Education Procedure](#) (pg. 3) articulates the general education learning competency requirements for transfer degrees (27-28 credits for A.A. and A.S.) and for CTE degrees and certificates (15 credits). Additionally, the continuous improvement processes (annual assessment and program review) require programs to align their learning competencies with the applicable LCCC mission components (3.A.2).

Program-specific operational outcomes are assessed in the online Campus Labs planning module where programs report student achievement of learning competencies and display achievement of operational outcomes, which often include completion rates, matriculation rates and employment monitoring using program-specific employee surveys. Health and Wellness programs report job placement rates in these assessment plans (see 1R4a) and on their program websites. Overall institutional student outcomes such as course success rates, completion rates, and transfer matriculation rates are reported as KPI scores (see [2017-18 Report Card](#), parts B, C and D) (4.A.6).

#### **1P4f. Selecting the tools, methods and instruments used to assess program rigor across all modalities**

The College assesses academic program rigor using its quality assurance tools and processes. These include the MCOR process, annual assessment planning, program review, alumni surveys, and individual program stakeholder surveys, often sent to advisory committee members. The College established its MCOR process through feedback from faculty and leadership and research of other institutions. The MCOR, which must be approved by the predominately faculty Academic Standards Committee, establishes academic rigor levels for course additions or modifications; all faculty must follow MCOR rigor guidelines regardless of modality or location. The faculty-developed program review self-study template has sections devoted specifically to [evaluating rigor](#) equally across all modalities. Many academic programs use advisory committees where members and clinical supervisors are surveyed for feedback on sustaining rigor across all modalities. (See sections 1P1h and 1P2g for tool selection to assess learning competencies.)

#### **1R4a. Summary results of assessments (include tables and figures when possible)**

The College provides the following data results for the Academic Program Quality processes. The College administers a Graduation Exit Survey to gather student perceptions on items such as preparation (see [Q-15](#)), which displays a strong positive rating. A 2018 IR study confirmed the success of the College's new placement procedure (see 1P4a for study). The program review process includes internal peer-review rubric ratings of self-studies sections that include evaluating rigor for programming across all modalities and locations (see Academic Program Review Rubric, [II.B.3a](#) (pg. 2)). Institutional Effectiveness maintains a [Special Accreditation Report](#) that displays accreditation activity.

Results of the [Graduation Exit Survey](#) (pg. 17-19) show the majority of respondents are very confident of their abilities related to institutional learning competencies. Health science, programs have high [Licensure/Certification Pass Rates](#). KPI measures for degrees awarded, transfer performance, matriculation, and job placement display in its [2017-18 Report Card](#) (see parts B, C and D. Some programs report data on employment of graduates in their operational outcomes in assessment plans and in their program review self-studies. For example, the Auto Body program included the following statements in its program review: "Feedback from advisory members who have hired graduates has been positive. Results from phone surveys of employers of Auto Body graduates done by the NATEF evaluation team have ranked high."

#### **1R4b. Comparison of results with internal targets and external benchmarks**

The College rated above the institutional target of 3.0 (four-point scale) for course rigor across all modalities and locations (self-study item-II.B.3a) listed on the [Academic Program Review Rubric](#) (scores are averages for all programs completing program review in 2016-17). The National Community College Benchmark Project (NCCBP) shows the College performing at 62% of its peers for student transfer and completion (see [Transfer and Completion data](#)). The College's [2017-18 KPI Report Card](#) contains benchmarks and internal targets for transfer (B.1.c, B.2.b) and after transfer (C.4.a, C.4.b) performance. The College matches the FY 18-19 targets for all items except B.1.c. in 2018. For workforce In-field Job Placement Rate D.3, the College trails behind its FY 18-19 target by only 3 percentage points, but has made significant gains recently. However, the D.3 job placement data rely on the College' alumni survey, which has a low response rate. The NCCBP does not offer benchmarks for job placement.

#### **1R4c. Interpretation of results and insights gained**

After some years of mixed results on the College's placement procedure, recent adjustments in placement methods, especially for English, have resulted in higher course success rates. Math success rates have remained level over time (see [Developmental Course Success Rates](#)). Program review evaluation confirms that the institution's processes are meeting performance targets on sustaining rigor across modalities and locations. The College has sustained its special program accreditations without interruption over the review period. Program outcomes for graduates continue to be a challenge for the College as reliable data for job placement remain elusive. Although the College developed an MOU with the Wyoming Department of Employment to access wage record data, privacy requirements limit the usefulness of these data. The College is unsatisfied with performance on completion rates and transfer rates, which, in part, motivated the

College to participate in AACC Guided Pathways 2.0; improvement strategies will be implemented by 2020. (See 1I4 below for more about this project.)

**1I4. Based on 1R4, what process improvements have been implemented or will be implemented in the next one to three years?**

In 2016-17, the English program switched to a co-requisite model for student placement to a developmental education pathway. Most students placing into developmental reading/writing are encouraged to take a developmental-level concurrently with the college-level composition course; course success rates confirm that this has improved student success. The College improved its administration of the math placement testing, obtaining higher student participation.

In spring 2016, faculty redesigned the program review self-study template, which streamlined and improved that process. Some health and wellness programs have begun using the College's annual assessment process to reinforce their compliance with special accreditation assessment standards.

Communication of preparation requirements has evolved over the four years with technology advances so that students can now register online for courses. Information is now more accessible for students, including prerequisites listed in course schedules and course sequencing displaying in the online catalog. The College has reviewed two vendors (Education Advisory Board-EAB and Civitas) and is considering purchasing a student-facing platform offering scalable guidance to each student with online advising that offers real time interactions involving preparation information and tracking of student degree obtainment activity as they move through their pathways.

Major process overhauls are anticipated because of the Pathways 2.0 initiative. Pathways is addressing planning, implementation and evaluation with the "goal to improve rates of college completion, transfer, and attainment of jobs with value in the labor market — and to achieve equity in those outcomes." Pathways is focusing resources and planning towards aligning degree pathways and certificates with career/educational goals early during students' enrollment at LCCC to improve completion, including resources (internships) that enable students to make successful transitions from college to employment. Data resources, including graduates' outcomes, will be strengthened to inform success of the pathways.

## 1.5 - Academic Integrity

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Academic Integrity focuses on ethical practices while pursuing knowledge. The institution should provide evidence for Core Components 2.D. and 2.E. in this section.

### 1P5: PROCESSES

Describe the processes for supporting ethical scholarly practices by students and faculty. This includes, but is not limited to, descriptions of key processes for the following:

- Ensuring freedom of expression and the integrity of research and scholarly practice (2.D., 2.E.1, 2.E.3)
- Ensuring ethical learning and research practices of students (2.E.2, 2.E.3)
- Ensuring ethical teaching and research practices of faculty (2.E.2, 2.E.3)
- Selecting the tools, methods and instruments used to evaluate the effectiveness and comprehensiveness of supporting academic integrity

### 1R5: RESULTS

What are the results for determining the quality of academic integrity? The results presented should be for the processes identified in 1P5. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures where appropriate)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### 1I5: IMPROVEMENT

Based on 1R5, what process improvements have been implemented or will be implemented in the next one to three years?

## Responses

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### 1P5a. Ensuring freedom of expression and the integrity of research and scholarly practice (2.D, 2.E.1, 2.E.3)

The College's processes to ensure freedom of expression and the integrity of research and scholarly practice include policies and procedures for guidance and uses communication mechanisms to ensure knowledge of College standards and expectations. LCCC defines academic freedom in its [catalog](#): "The College recognizes the rights of all students to engage in discussion, to exchange thought and opinion, and to speak, write, or publish freely on any subject, in accordance with the guarantees of federal and state constitutions." For example,

student editors and managers are free to develop their own editorial policies and news coverage in the institution's print and online media *Wingspan* (2.D). Academic integrity includes: creating and expressing one's own ideas in coursework, acknowledging all sources of information, completing assignments independently or acknowledging collaboration, accurately reporting results when conducting research including lab work, and honesty during exams (2.E.3). LCCC communicates these expectations for students, faculty, and staff through the catalog, student handbook, institutional procedures, and other publications.

To manage free expression and research integrity, the College uses the [Student Discipline Adjudication Procedure](#) (pg. 3), [Student Code of Conduct Procedure](#) (pg. 3), and [Student Rights and Responsibilities Procedure](#) to define the rights and responsibilities for free expression and academic integrity. Faculty employ software tools, such as Respondus and Turnitin, to verify the authenticity of student work. The Respondus LockDown Browser restricts students' ability to access websites, take screenshots, access external resources, or print exams while online assessments are occurring (2.E.1, 2.E.3).

### **1P5b. Ensuring ethical learning and research practices of students (2.E.2, 2.E.3)**

LCCC's process for ensuring ethical learning and research practices among students is governed by institutional procedure, specifically Student Rights and Responsibilities and the Student Code of Conduct (referenced above). Faculty explain their expectations for academic integrity in their class syllabi (standard for all syllabi). Students are afforded due process when a question of academic dishonesty arises. This is outlined in the Student Discipline Adjudication Procedure 3.16, which includes concerns related to harassment, academic dishonesty, instructional design or delivery, intellectual bias, and matters of free speech (2.E.3).

Additionally, human subjects' research is governed by LCCC's [Institutional Review Board](#) (IRB), (pg. 2) which reviews research protocols to ensure ethical treatment of study participants. While most student research falls under the class assignment exemption of 45 CFR part 46, LCCC's student research courses guide students through a pro forma IRB process, and any student assignment posing more than greater risk is reviewed by the IRB with a faculty advisor acting as sponsor. If required, LCCC has an agreement with UW's Institutional Animal Care and Use Committee proposal process to ensure ethical research on animals.

Ludden Library's online [LibGuides](#) provides information on available online databases, research assistance, copyright guidelines, plagiarism policies, and citation help. Library staff also offer students [online guidance](#) on the ethical use of information sources and assist them in using appropriate databases to facilitate learning and research (see [interactive fair use Web page](#)). The library's KIC document scanner relates fair use standards to users. The College's institutional competencies for general education include information literacy, which includes a rubric trait specific to ethical use of research (see [Reasoning: Information Literacy Rubric](#)) (2.E.2).

### **1P5c. Ensuring ethical teaching and research practices of faculty (2.E.2, 2.E.3)**

The College's process for ensuring ethical teaching and research practices among faculty has several components, including policy and procedures, training, and in-service events. The IRB,

referenced above, reviews and approves faculty research proposals to ensure the ethical treatment of human subjects. The library resources referenced above are available to employees as well as students. Online resources inform faculty of the fair use standards for entering content to their online shells in Canvas. All employees, including faculty, complete annual Title IX training, which delineates appropriate and ethical student/teacher interactions. The MCOR procedure allows the College to establish standardized curriculum using a peer-review method; the adoption of MCORs assure consistency across all sections and modalities for all courses (2.E.2).

LCCC's faculty development and evaluation processes also ensure ethical teaching and research practices. During their first year of employment, all full-time faculty participate in the First Year Faculty Experience. Training topics include student-centered learning, pedagogical best practices, and College policy and procedure, as well as current resources pertaining to these topics. Participants must observe their colleagues teaching and are observed by academic leadership. Participants also demonstrate a teaching strategy to their peers, perform action research, and begin the creation of continuing contract portfolio artifacts.

Deans conduct annual faculty performance evaluations, which may include class observation and syllabi review. Anonymous student feedback, collected through course evaluations, is incorporated into the evaluation. Through this process, deans monitor teaching and research to ensure ethical practices. IR staff ensure faculty observe ethical research guidelines when assisting them with survey development (2.E.3).

#### **1P5d. Selecting the tools, methods and instruments used to evaluate the effectiveness and comprehensiveness of supporting academic integrity**

The College's process for selecting tools, methods, and instruments to evaluate the effectiveness and comprehensiveness of supporting academic integrity aligns with the policy and procedure discussed above and leverages established reporting and monitoring systems. The College uses Maxient to manage student discipline cases. [Complaint Procedure 9.7P](#) (pg. 2) requires a central and predictable storage and maintenance of complaints and outcomes using Maxient, a web-based system that was historically used for student conduct and campus safety incident reporting. Staff preparing the procedure examined current practices of the various offices that traditionally receive complaints and determined its suitability. Integrity software such as Respondus LockDown Browser and Turnitin were selected several years ago by faculty and recommended to Information Technology for purchase. Both tools are currently embedded in the LMS. The usage and satisfaction are considered annually during the College's budget review process. The MCOR procedure is run by the Academic Standards Committee with strong faculty representation. The College uses its Academic Program Review to further evaluate the curriculum for academic integrity (sustaining rigor and currency across all modalities and locations).

The College developed its IRB process in 2009 and its [application](#), which is available on the campus portal, is being updated to align with the Common Rule guidelines coming into effect in January 2019. The new IRB administrator will be participating in professional development (Advances in Ethical Research conference) in November 2018 to update LCCC knowledge of

best practices and to review training options to replace the discontinued NIH Human Subject training.

Procedures the College implemented to sustain processes to manage freedom of expression and integrity of research (see 1P5a and b) determine other tools or methods. College procedures are developed by Cabinet leadership who work with campus stakeholders for feedback and conduct studies to confirm direction; draft procedures must go to faculty and staff campus wide for electronic consultative feedback. In 2015 the College's Academic Standards Committee selected a standard phrase for all course syllabi as the instrument for informing and enforcing the guidelines on student plagiarism.

### **1R5a. Summary results of measures (include tables and figures where appropriate)**

Violations of the Student Code of Conduct are reported in Maxient. Forty-three (43) academic integrity violations were reported to the Maxient database in 2017-18. Of these, 39 cases represent first-time violations and four were repeating offenders. Second-time offenders are required to take the Academic Integrity Seminar.

In AY 2017-2018 there were seven applications to the IRB (two exempt, four expedited, and one full review). In the first half of AY 2018-2019 there have been four applications for IRB review (one exempt, one declined due to LCCC resource usage, and two expedited based on home institutional IRB approval). LCCC has never suspended any IRB-approved research because of inappropriate conduct.

### **1R5b. Comparison of results with internal targets and external benchmarks**

LCCC has not yet established internal targets or identified external benchmarks for measures used to evaluate the effectiveness and comprehensiveness of supporting academic integrity. Neither the National Community College Benchmark Project nor Voluntary Framework for Accountability (VFA), in which the College participates, does not offer items on academic integrity. Using the above data as a baseline, the College will monitor future years for trends and attempt to improve above this baseline measure of 43 violations.

### **1R5c. Interpretation of results and insights gained**

The Student Life Office manages the communication of students' rights and responsibilities and administers the enforcement of the Student Code of Conduct that results in relatively few violations. The policies and procedures that help manage freedom and integrity plus due process are working reasonably well. The Institutional Review Board (IRB) oversight has been managed well in the past with low research activity, but requests are slowly beginning to rise. Therefore, the Office of Sponsored Awards and Compliance is expanding its professional development and preparing for the implementation of the Common Rule in January. It is preparing to add IRB training resources for both faculty and IRB committee members to make up for the termination of free NIH training. The College plans work to strengthen its data reporting, perhaps with qualitative research tools or addition of survey items in the Graduate Exit survey to obtain

student perceptions on the effectiveness of freedom and integrity processes. For faculty, Human Resources should explore adding curriculum and research integrity items to its employee survey.

**1I5. Based on 1R5, what process improvements have been implemented or will be implemented in the next one to three years?**

The College is currently updating and streamlining IRB processes and materials. Specifically, LCCC will strengthen monitoring and evaluation of approved research to ensure ethical conduct in preparation for the Common Rule in 2019 and with a view toward the continuing federal shift toward broader Responsible Conduct of Research requirements. Comprehensive IRB training is being developed and will be implemented by Fall 2019. Institutional Research will re-examine the Graduate Exit Survey in 2019-2020 and consider adding items related to academic freedom and integrity for curriculum and research. In addition, staff in Sponsored Awards and Compliance has developed draft procedures on conflict of interest that include integrity guidelines for faculty research and scholarship.

The Ludden Library is working with the Online Proctoring Committee, along with the University of Wyoming, the Wyoming Department of Education and the seven community colleges, to identify and implement an online proctoring solution, so all students will have access to the same experience.

## **Category Two Introduction: Meeting Student and Other Stakeholder Needs**

LCCC continues to focus on serving its students and community, continually examining its practices and the needs of the community as enrollment has declined little by little since 2012. This decline mirrors community college enrollment nationally but is nonetheless concerning. As enrollment has declined, the College has taken hard looks at the needs of its students and key community stakeholders to refocus on student completion and efficiency of its programs and services institution-wide. The College has been responsive to the needs of its students and other key stakeholders through its continuous review of its student services, annually examining how well high impact practices implemented over the past five years serve student needs and implementing practice improvements. Relationships with stakeholders such as the University of Wyoming (UW), the Department of Workforce Services (DWS), and local economic development organizations have enabled the College to lead such state-wide efforts as program articulations with UW, partnering to provide apprenticeship education, and developing plans to reinvigorate the work force through programming and funding for returning adult students.

Leadership at LCCC has been stable in key areas such as the president and the vice president of student services now for six years, in contrast to the prior years of upheaval. This stability has resulted in the design and building of the Clay Pathfinder Building around a new service model for Student Services that highlights a true one-stop for student and visitor assistance. The one-stop model leads to more efficient processing of student information, better use of technology, and streamlining of many of the systems students most often interact with as they move through their education. While the new building, new service model, and stable leadership have improved student lives markedly, the College has embarked upon Guided Pathways 2.0 with the AACC to more comprehensively examine and design all programs, services, and student experiences to remove barriers so that students can more predictably find careers of interest to them in the region.

Challenges have continued in areas of student advisement and student engagement. LCCC's Guided Pathways 2.0 addresses both challenges; one Guided Pathways team is focused on bringing the advising model to full maturity, while a second team is developing essential student experiences that purposely integrate student engagement elements. Stronger relationships with key stakeholders such as DWS, UW, and local employers will be imperative as LCCC helps fuel the economic diversification of its corner of the state of Wyoming.

The College views its process maturity in Category Two as aligned, and its reporting of results as more systematic.

## 2.1 - Current and Prospective Student Need

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Current and Prospective Student Need focuses on determining, understanding and meeting the academic and non-academic needs of current and prospective students. The institution should provide evidence for Core Components 3.C. and 3.D in this section.

### **2P1: PROCESSES**

Describe the processes for serving the academic and non-academic needs of current and prospective students. This includes, but is not limited to, descriptions of key processes for the following:

- Identifying underprepared and at-risk students, and determining their academic support needs (3.D.1)
- Deploying academic support services to help students select and successfully complete courses and programs (3.D.2)
- Ensuring faculty are available for student inquiry (3.C.5)
- Determining and addressing the learning support needs (tutoring, advising, library, laboratories, research, etc.) of students and faculty (3.D.1, 3.D.3, 3.D.4, 3.D.5)
- Determining new student groups to target for educational offerings and services
- Meeting changing student needs
- Identifying and supporting student subgroups with distinctive needs (e.g., seniors, commuters, distance learners, military veterans) (3.D.1)
- Deploying non-academic support services to help students be successful (3.D.2)
- Ensuring staff members who provide non-academic student support services are qualified, trained and supported (3.C.6)
- Communicating the availability of non-academic support services (3.D.2)
- Selecting the tools, methods and instruments to assess student needs
- Assessing the degree to which student needs are met

### **2R1: RESULTS**

What are the results for determining if current and prospective students' needs are being met? The results presented should be for the processes identified in 2P1. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### **2I1: IMPROVEMENT**

Based on 2R1, what process improvements have been implemented or will be implemented in the next one to three years?

## Responses

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### **2P1a. Identifying underprepared and at-risk students, and determining their academic support needs (3.D.1)**

The College utilizes the [intake process](#) and advisement to identify at-risk and underprepared students. The intake process includes various inter-related sub-processes including [placement](#), new student orientation, and advising. The placement process determines students' readiness for college-level math, reading, and writing and needs for academic support services. Advisors review each student's information and systematically connect at-risk students with student support programs and appropriate courses. For example, students with academic deficits are guided to utilize free tutoring services (3.D.2), others who identify as military veterans are connected with the College's veteran's affairs liaison and Student Veterans Association (SVA) chapter. In addition, TRiO staff receive regular reports identifying first-generation students who may be eligible for those programs and services. Additionally, the [orientation](#) and [advising processes](#) offer students opportunities to self-identify as academically underprepared or at-risk so they may be connected with appropriate support services (e.g., tutoring, disability support services, etc.) (3.D.1).

### **2P1b. Deploying academic support services to help students select and successfully complete courses and programs (3.D.2)**

LCCC deploys academic support services to help students select and successfully complete courses and programs through the aligned processes of mandatory orientation, student success course, and advisement. Through orientation (offered at various times, modalities, and locations), students access resources that enable them to make informed selections of programs and courses. Orientation also provides students with information on other academic support services to help them successfully complete courses and programs, such as the tutoring provided by the Learning Commons. In addition, all credential-seeking students at LCCC are required to enroll in a student success course, *Introduction to College Success*, which solidifies information introduced in orientation and connects new students with faculty in their programs. This course incorporates learning activities to connect students to campus resources, conduct career exploration, choose a program of study, and develop an academic plan. Advisement is guided by an [Advising Syllabus](#) that illustrates the in-depth intake process, the ongoing support that students receive, and the institutional goal of each student having his/her full academic plan mapped out by the end of the first semester (3.D.2).

### **2P1c. Ensuring faculty are available for student inquiry (3.C.5)**

LCCC's process to ensure that faculty are available for student inquiry is through required faculty office hours. This requirement is established by [Policy 2.18](#) and [Procedure 2.18P](#) on full-time faculty workload, which require faculty to maintain regular and distributed office hours. Many faculty utilize both physical, on-campus office hours and virtual office hours through technology. Instructor office hours and additional contact information are mandatory components of each [course syllabus](#), which students, regardless of course delivery mode, access

from within the learning management system (LMS) which also contains an embedded messaging tool students and faculty use to communicate. In addition, [Employee Email Policy 8.1](#) and [Procedure 8.1P](#) require faculty to respond to email within two business days, thus ensuring that students have access to faculty for inquiry (3.C.5).

### **2P1d. Determining and addressing the learning support needs (tutoring, advising, library, laboratories, research, etc.) of students and faculty (3.D.1, 3.D.3, 3.D.4, 3.D.5)**

LCCC utilizes a placement process described above (2P1a and 2P1b), advisement, and faculty feedback (3.D.1) to address learning support needs. As mentioned above, LCCC's holistic advising requires credential-seeking students to meet with assigned advisors prior to course registration each term. The advising process identifies and addresses student needs through completion of an [academic plan](#), which serves as map for program completion, successful transfer, and job placement. Students are [surveyed](#) to assess their satisfaction with advising (3.D.3). Faculty feedback includes required mid-term grade reporting (accessible to students and advisors), reporting by faculty of concerns for students that affect learning such as housing, hunger, family stresses, changes in behavior; and collaborations between faculty, advisors, and Library and Learning Commons staff.

Library and Learning Commons staff (available on campus and remotely in real time) provide students and faculty with support to effectively use research and information. The Learning Commons services, available on both campuses and online, provide course-specific tutoring and writing and communication coaching. [Online information](#) about these services ensures equitable access for online-only students (3.D.5).

LCCC provides students and faculty with modern and efficient technology to support teaching and learning through its technology procurement process that ensures regular, periodic hardware and software upgrades (see 5P3c). Information Technology Services (ITS) staff research, purchase, maintain, and manage an array of learning software, including online tutoring resources, lecture capture software, and the LMS. ITS also provides an effective [portal](#) to deliver business and learning resources needed by students and employees.

Faculty self-identify learning support needs through instructional practices, and additional needs are identified through annual evaluation cycles. Changes in technology, institutional initiatives, or curriculum also generate needs for additional faculty skills and knowledge. The College's [Center for Excellence in Teaching](#) (CET) ensures that faculty, including adjuncts, receive planned (First Year Faculty Experience) and just-in-time training relevant to current technological infrastructure and active teaching and learning techniques (3.D.4).

### **2P1e. Determining new student groups to target for educational offerings and services**

The College has a three-component process for determining new student groups to target for educational offerings and services: (1) gathering feedback from a network of external agencies such as the Veterans Association, Chamber of Commerce, and Wyoming Department of Workforce Services; (2) conducting needs assessments (surveys, focus groups, and interviews)

with internal and external stakeholders; and (3) utilizing academic advisory committees consisting of representatives from college faculty, the community, and industry.

### **2P1f. Meeting changing student needs**

LCCC provides student leadership opportunities to communicate changing needs through inclusion of students in formal decision-making groups. Student Government Association (SGA) officers meet frequently with members of the President's Cabinet, which serves to make student concerns visible to the College's executive leadership and provides a mechanism for the President's Cabinet to gain insight into the effects their decisions have or could have on the student body. SGA representatives also serve on [College Council](#) (pg. 3), LCCC's shared governance body. The Board of Trustees created a board position of Student Ex-Officio Trustee, appointed by the SGA. LCCC utilizes advisory committees for food service, bookstore, athletics and recreation, and residence life that equitably represent LCCC's student body and employee constituencies. The Student Veterans Task Force, [established in spring 2018](#), will meet twice annually to ensure student veteran issues are understood and addressed. Finally, the president annually works with the SGA and the student honor society to hold a student town hall meeting at which any student can bring suggestions, criticisms, and complements for executive and mid-level leaders for the College to hear and later [address](#).

Results of this student engagement are communicated to stakeholders through agendas and minutes, the student handbook, and SGA meetings and forums. [Agendas and minutes](#) are available online through the College's website.

### **2P1g. Identifying and supporting student subgroups with distinctive needs (e.g., seniors, commuters, distance learners, military veterans) (3.D.1)**

Processes for identifying student subgroups with distinctive needs are described above in 2P1a and in 1P3a and 1P3b. Processes for supporting these subgroups are described below (3.D.1).

For students with disabilities, Disability Support Services provides reasonable accommodations according to each student's disability and the requirements of the program or service being accessed. The [DSS Student Handbook](#) (pg. 7), along with staff, guides students in obtaining the accommodations needed. Additionally, adult returning students, under an Adult Promise scholarship, receive enhanced case management through advisors to assist with unique challenges.

LCCC partners with F.E. Warren Air Force Base to link the College's strategic plan with the USAF Mission Support Education function. This partnership provides the opportunity to meet educational goals through flexible class scheduling, computerized testing opportunities, and general education classes. The Student Veterans Task Force, SVA, and a veterans and family lounge are also sources of support for students with military affiliation.

LCCC supports online students through several systems, including online orientation, tutoring, and library resources. The College adopted a new LMS in 2018 to better support students' online learning needs, including 24/7 help support. This LMS, used by Wyoming school districts, the

University of Wyoming, and Wyoming community colleges, facilitates students transitioning from service area high schools and other higher education institutions to LCCC.

Other distinct student group needs are identified through interactions such as the annual student town hall meetings mentioned in 2P1f. For example, in one such meeting, students requested more gender-neutral restrooms, so all single rest room signage was changed from single gender to neutral.

### **2P1h. Deploying non-academic support services to help students be successful (3.D.2)**

LCCC's deploys non-academic support services through [enrollment procedures](#), advisement case management, current best practices, and literature for supporting students. Connections and referrals are coordinated through advising and the CARE team for counseling, campus food pantry, housing, on campus child care, and community resources. Other non-academic support services include advising, financial aid and scholarships, mental health counseling, health clinic, disability services, residence life, conduct and grievance processes and support, as well as programming to promote wellness, fitness, and personal connections. Most services are available to students remotely and at the satellite campus in Laramie as well.

Additionally, the College has implemented the Student Hub, a single point of contact for current and prospective students to access information on support services available. The Student Hub staff are well-versed in matters of admissions, financial aid, and student records, and are additionally trained to provide information on all academic and non-academic support services.

LCCC's multi-disciplinary CARE (Campus Assessment Response and Evaluation) Team is responsible for assessing, evaluating, and responding to reports of individuals who present disruptive or concerning behavior. The [CARE Team](#) collects (through an online reporting tool) and evaluates reports of concerning behaviors, then recommends support services and interventions to resolve crises (3.D.2).

### **2P1i. Ensuring staff members who provide non-academic student support services are qualified, trained, and supported (3.C.6)**

LCCC's [hiring process](#) ensures that staff who provide non-academic support services are qualified, trained, and supported (see 3P1a and 3P1c). For every position, hiring managers and Human Resources staff collaborate to develop a position description that includes minimum and preferred qualifications and required knowledge, skills, and abilities. Position descriptions are developed in accordance with accreditation requirements, industry standards, and institutional culture, and are updated prior to vacancy announcements or as necessary. The hiring process includes candidate vetting through background and reference checks, work history verification, and educational attainment/transcript evaluation. New hires are trained and supported through both college- and departmental-level orientation processes. LCCC provides ongoing support through professional development funds for continuing education and conference attendance, discounted institutional tuition, and tuition assistance [benefits](#) (pg. 6) for all benefited employees (3.C.6).

### **2P1j. Communicating the availability of non-academic support services (3.D.2)**

LCCC's process for communicating the availability of non-academic student support services uses several components: new student orientation, the Student Hub, the College's website, flat screen monitors located throughout campus, individual office outreach and direct referral by advisors and faculty. New student orientation and the Hub are described in subsections 2P1b and 2P1h. The College's [website](#) includes descriptions of available services and contact information. The online [Student Handbook](#) (pg. 4) includes service descriptions and contact information (3.D.2). Each support unit reaches out to students and the college community through various means, including texting apps, pushing notifications in the student information system, faculty training, advising intake meetings, electronic and physical bulletin boards, email, the myLCCC portal, the LMS, social media, and face-to-face programming throughout the year.

### **2P1k. Selecting the tools, methods and instruments to assess student needs**

LCCC's process to select tools, methods, and instruments to assess student need is embedded in the College's [KPI system](#) (discussed in depth in section 5P1b - see KPI manual), which utilizes multiple measures identified as indicators of its effectiveness in various areas. Staff regularly review relevant literature, best practices, and nationally available instruments (such as the [Community College Survey of Student Engagement](#) (CCSSE) and the [Survey of Entering Student Engagement](#) (SENSE) that measure student engagement with key high impact practices. While these specific tools were chosen through a statewide adoption process, the College used an RFP process when adopting Campus Labs as a tool for housing assessment information. Campus Labs includes a survey tool that is used extensively to assess student satisfaction and student needs. (See [here](#) and [here](#) for examples.)

### **2P1l. Assessing the degree to which student needs are met**

The process for assessing the degree to which student needs are met consists of two aligned systems. As discussed elsewhere, the institutional KPI system contains several measures of the College's effectiveness in supporting student academic success. The College has implemented an [annual functional assessment process](#) (see Section II) to evaluate the effectiveness of key functions outside of academic programs. Assessing the degree to which student needs are met is embedded in this process, including identification of key stakeholders, measurement and analysis of results, sharing results with institutional leadership, and planning for improvement in meeting students' (stakeholders') needs. Further, CCSSE and SENSE surveys, a graduate survey, and an annual student town hall meeting all assess various elements of student needs being met.

### **2R1a. Summary results of measures (include tables and figures when possible)**

Student satisfaction and engagement KPI measures show generally positive [results](#). The majority of respondents (88.80%) to the most recent alumni survey (2016-17 graduates) were satisfied or very satisfied with programs and services, and 23.11% of respondents to the most recent administration of CCSSE (spring 2017) were very satisfied. Additionally, 95.2% of alumni survey respondents indicated they had achieved their educational goals at LCCC. CCSSE results

on benchmark items were also positive, with average scores from 2.29 to 2.68 on a four-point scale.

Results are also available for various functional areas. Two examples are presented.

The advising center implemented a student survey in spring 2018, asking students to rate several items on a five-point scale, with [generally positive results](#). The average responses ranged between 3.44 and 3.92.

LCCC's TRiO Student Support Services (Trio SSS) grant program also showed positive outcomes, as detailed in its most recent [annual report](#) (pg. 2, see table).

### **2R1b. Comparison of results with internal targets and external benchmarks**

As noted in the [Student Satisfaction KPI](#), five of eight student satisfaction and engagement measures had results meeting internal targets. For two of the three measures that did not, results showed improvement from the prior year. Six of the seven measures that have external benchmarks had results meeting or exceeding that benchmark.

For the Advising Center Student Survey, an average rating of 3.5 is the minimum expectation while an average rating of 4.0 is the target. In the initial results, the minimum expectation was exceeded for six of the seven survey items. However, the 4.0 target was not met. Since this is an internally developed survey, external benchmarks are not available.

The TRiO program met all grant objectives (external targets) for 2015-16 and 2016-17.

### **2R1c. Interpretation of results and insights gained**

In analyses of student satisfaction and engagement measures, most results were relatively stable over the six-year period. There was some volatility between 2013-14 and 2015-16, most likely due to significant changes the College was undergoing during that period. More recent results appear to be on a positive trend, which may indicate that changes to student services processes (such as advising and the Student Hub implementation) are having the desired effect.

The Advising Center reestablished its assessment system, including an annual student satisfaction survey, in 2017-18. The baseline results show that center staff are meeting performance expectations in three areas: basic advising skills, helpfulness in appointments, and concern for students.

TRiO met or exceeded grant objectives for academic year 2016-2017, with notable improvement from 2015-2016, during which it fell shy of meeting two of the outcomes. During 2016-2017, TRiO improved both the persistence and academic standing rates by 4% and the graduation rate by 6%. The program made the most improvement in the graduation and transfer rate, which increased by 12%.

**2I1. Based on 2R1, what process improvements have been implemented or will be implemented in the next one to three years?**

Based on [CCSSE results](#) and Pathways goals, the Advising Center is making three changes that will improve advising and increase CCSSE scores. The first requires advising for all degree seeking students every semester. The aim is to increase CCSSE baseline rate of 58% (pg. 6) meeting with an advisor prior to registration. The second adds faculty advisors to the advising model. The current CCSSE rating of student-faculty interaction of 52% (pg. 3) should improve with these changes. Third, LCCC is evaluating vendors of Student Management Systems for purchase. This technology enhancement for student case management should improve many CCSSE ratings of student engagement, support for learners (45%) (pg. 3), and the use of skills labs (11%) (pg. 5).

The TRIO program implemented several improvements based on the 2015-16 results to improve student outcomes:

- In 2016-17, TRIO advisors became the academic advisor of record for all program participants, providing them with access to more tools and authority to provide holistic support.
- TRIO staff adopted a proactive, structured approach to advising. Students and their advisors engage monthly.
- TRIO now utilizes the National Student Clearinghouse Student Tracker service to more reliably measure the transfer rate of graduating participants.

TRIO planned improvements, aligned with Advising Center goals, include developing a completed academic plan with an anticipated graduation date for every active participant.

## 2.2 - Retention, Persistence, and Completion

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Retention, Persistence and Completion focuses on the approach to collecting, analyzing and distributing data on retention, persistence and completion to stakeholders for decision making. The institution should provide evidence for Core Component 4.C. in this section.

### **2P2: PROCESSES**

Describe the processes for collecting, analyzing and distributing data on retention, persistence and completion. This includes, but is not limited to, descriptions of key processes for the following:

- Collecting student retention, persistence and completion data (4.C.2, 4.C.4)
- Determining targets for student retention, persistence and completion (4.C.1, 4.C.4)
- Analyzing information on student retention, persistence and completion
- Meeting targets for retention, persistence and completion (4.C.1)
- Selecting the tools, methods and instruments to assess retention, persistence and completion (4.C.4)

### **2R2: RESULTS**

What are the results for student retention, persistence and completion? The results presented should be for the processes identified in 2P2. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### **2I2: IMPROVEMENT**

Based on 2R2, what process improvements have been implemented or will be implemented in the next one to three years? (4.C.3)

## Responses

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### **2P2a. Collecting student retention, persistence and completion data (4.C.2, 4.C.4)**

LCCC has two formal processes for collecting data on student retention, persistence, and completion. The first is embedded in the College's KPI system, which includes setting of performance indicators and associated measures that focus on institution-level effectiveness outcomes, including specific persistence/retention and completion measures. The data for these

measures resides in Colleague and is extracted, analyzed and communicated through the Office of Institutional Research.

The second process uses the College's Program Annual Analysis (PAA) method, developed to determine the current health of the institution's academic programs. This method measures the relative performance of LCCC's programs of study and is a central aspect in the College's program review process. The [measures](#) of key performance areas such as, efficiency, efficacy, and value have been identified (4.C.2, 4.C.4).

#### **2P2b. Determining targets for student retention, persistence and completion (4.C.1, 4.C.4)**

LCCC has a systematic process, incorporated into its KPI system, for determining annual internal improvement goals (targets) for student success (retention, persistence, and completion) measures using statistical modelling that incorporates trend data for continuous improvement. A variety of sources are used for external comparison (benchmarks) including Integrated Post-Secondary Educational Data System (IPEDS), National Community College Benchmark Project (NCCBP), Community College Survey of Student Engagement (CCSSE), and the Wyoming Community College system (4.C.1, 4.C.4).

In addition, LCCC's Board of Trustees set an aggressive student success goal, aligned with Goal/Focus 1 in the College's strategic plan, to increase the credentials awarded by LCCC five percent each year through 2022.

Program-specific improvement targets are established by faculty through program review and assessment processes (see sections 1.3 and 1.4).

#### **2P2c. Analyzing information on student retention, persistence and completion**

LCCC has two systematic processes for analyzing information on student retention, persistence and completion. The first is the College's academic program review process, LCCC's annual process for analyzing student success trend data for specific programs utilizing PAA (referenced above) data. For each measure in that system, program results are scored using quintiles (i.e., scores of 1 to 5). Institutional Research (IR) staff provide both student success results and scores to faculty and deans annually. When a program of study is undergoing review, faculty analyze the information and develop strategies for improvement of low-scoring results.

At the institutional level, results are analyzed in the annual process of updating the KPI system data. The College produces an annual report card that provides grading and trend analysis on the performance indicators and associated measures. The analysis and the report card are shared with the college community at the annual convocation in the president's [State of the College address](#) (pg. 14). Institutional outcomes provide additional context for program-level analysis. Additionally, KPI and other retention data are analyzed by the Learning Leadership Team, which includes both academic and student services campus leaders.

#### **2P2d. Meeting targets for retention, persistence and completion (4.C.1)**

LCCC's process for meeting performance targets for student persistence, retention, and completion is through its academic program and service/support function review systems. Mentioned above, as part of these processes, data are provided and analyzed, and then utilized to develop annual assessment as well as longer-term improvement plans for the programs and functions. These plans guide the continuous improvement work of the units (4.C.1).

In addition, the College uses its strategic plan process to guide institution-wide action for improvement in student success, such as persistence and completion. The first goal, the focus of LCCC's strategic plan, identifies strategies for improving student progress and success. These strategies, but results that didn't move metrics as much as desired led to LCCC's participation and [case statement](#) in the American Association of Community Colleges (AACC) Guided Pathways 2.0 Initiative.

#### **2P2e. Selecting the tools, methods and instruments to assess retention, persistence and completion (4.C.4)**

LCCC's tools for assessing completion, persistence, and retention are selected and developed through a systematic collaborative process. The Associate Vice President for Institutional Effectiveness works with teams of faculty, staff, and administrators to develop definitions and methodologies for program review consistent with the College's mission and strategic priorities. Program review measures are aligned with measures used in the College's KPI system, which were developed by cross-functional action teams led by IR staff, who ensure that measure definitions align with good practice, based on commonly accepted national standards as well as research on community college student success (4.C.4).

#### **2R2a. Summary results of measures (include tables and figures when possible)**

Institutional-level student retention, persistence, and completion KPI measure results for [2017-18](#) show slight improvement over 2016-17 results for five of the eight measures. In particular, 2017-18 [completions](#) increased significantly from the prior year.

In addition, as part of the College's involvement in AACC's Guided Pathways 2.0 initiative, the College assesses progress, retention and completion data. [Pathways metrics](#) show some improvement for the most recent data.

[Program-level data](#) show three year average fall-to-spring persistence rates ranging between 22% (Diagnostic Medical Sonography) and 93% (Nursing), while fall-to-fall persistence rates vary between 22% (Diagnostic Medical Sonography) and 83% (Theatre).

#### **2R2b. Comparison of results with internal targets and external benchmarks**

The KPI data presented above include internal targets and identified external benchmarks. Most recent results met the internal target for three of the eight measures. The external benchmark was met for three of six measures.

While the number of completions increase significantly in 2017-18, it fell short of the ambitious five percent (5%) goal established by the Board of Trustees.

Internal targets and benchmarks have not been established for program-level persistence measures.

### **2R2c. Interpretation of results and insights gained**

LCCC's persistence and graduation rates have increased over the last four years. Best practices and improvements undertaken by academic programs and support services have resulted in incremental increases in these and other KPI measures (see 2I2 for examples of improvements). However, LCCC's internal targets and benchmarks are ambitious. LCCC has determined that more sweeping changes are necessary to make larger gains in retention, persistence, and graduation, including disaggregating student data to identify achievement gaps by student demographics.

Program faculty and LCCC peer reviewers use the quintile scores in the program review process (a score of 5 represents results in the highest 20 percent of all programs) to identify best practices among all LCCC programs and areas for improvement at the academic program level. Support services, such as Advising and Tutoring, perform annual functional assessments that evaluate their impact on retention, persistence, and completion and identify institutional strategies.

### **2I2. Based on 2R2, what process improvements have been implemented or will be implemented in the next one to three years? (4.C.3)**

LCCC wants to achieve greater gains in student retention, persistence, and completion. This is the driving force behind joining AACC Guided Pathways 2.0 and undertaking major process changes to bring the Pathways model to scale by fall 2020.

Many improvements the College and specific academic programs have implemented over several years support the Pathways model and the research that recommends community colleges clarify the path for students, help students get on a path, help students stay on a path, and ensure students are learning (4.C.3):

- A curriculum overhaul was undertaken for 2015-16 to increase on-time graduation. Programs were capped at 64 credits and programs were mapped out by semester, leading to a decrease in time-to-graduation across the College.
- Mandatory holistic advising, orientation, and ending late registration have all been implemented and have positively impacted retention and persistence.
- Support services, such as Advising and Tutoring, have recently established processes to perform annual functional assessments that evaluate their impact on retention, persistence, and completion and identify institutional strategies for improvement.

Additionally, IR staff developed a [Tableau dashboard](#) to enable faculty and administrators to more deeply analyze annual program analysis data.

Planned improvements include:

- The development of a Pathways metrics dashboard to enable more in-depth analysis of data through disaggregation by gender, age, ethnicity, and other characteristics to better understand achievement gaps going forward.
- The development of a KPI evaluation system to determine which measures are valuable, need revisions, and whether the weighting system is valid and reliable. This process will include broad input from campus stakeholders.

## 2.3 - Key Stakeholder Needs

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Key Stakeholder Needs focuses on determining, understanding and meeting needs of key stakeholder groups, including alumni and community partners.

### 2P3: PROCESSES

Describe the processes for serving the needs of key external stakeholder groups. This includes, but is not limited to, descriptions of key processes for the following:

- Determining key external stakeholder groups (e.g., alumni, employers, community)
- Determining new stakeholders to target for services or partnership
- Meeting the changing needs of key stakeholders
- Selecting the tools, methods and instruments to assess key stakeholder needs
- Assessing the degree to which key stakeholder needs are met

### 2R3: RESULTS

What are the results for determining if key stakeholder needs are being met? The results presented should be for the processes identified in 2P3. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### 2I3: IMPROVEMENT

Based on 2R3, what process improvements have been implemented or will be implemented in the next one to three years?

## Responses

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### 2P3a. Determining key external stakeholder groups (e.g., alumni, employers, community)

LCCC uses three major processes to determine key external stakeholder groups: strategic planning, academic program review, and non-academic function assessment.

LCCC's strategic planning process includes an [environmental scanning phase](#), through which the College systematically collects and assesses relevant information to understand the environment in which it currently exists and perhaps expects to exist in the future. Through the [academic program review process](#) (pg. 6), faculty identify and respond to program stakeholder needs. Stakeholder involvement is an expected component of this process, as shown in the

[Academic Program Review Procedure 10.2P](#) (pg. 3). Similarly, external stakeholders of non-academic functional areas are determined through the new [function assessment process](#); wherein functional area staff identify stakeholders and their stakeholder needs. Both Academic Program Review and Function Assessment processes are peer-reviewed, providing quality assurance to the processes for determining key external stakeholder groups.

### **2P3b. Determining new stakeholders to target for services or partnership**

The College's processes for identifying new stakeholder groups to target for service or partnership vary widely, but in general share four components: (1) engaged communications (partnerships and meetings), (2) information gathering (surveys and evaluations), (3) data analysis and (4) outreach. The process for determining and engaging with key stakeholder groups is described in more detail in 1P3. See [Figure 1P3-2](#) for a listing of LCCC Key Stakeholders, their expectations, and how the College engages them to ensure their needs are met.

### **2P3c. Meeting the changing needs of key stakeholders**

Local advisory groups communicate their needs to the College through a systemized process. Cheyenne Leads (the Cheyenne-Laramie County Corporation for Economic Development) and ENDOW (Economically Needed Diversity Options for Wyoming) communicate stakeholder needs to the College President. The President then works with his cabinet members to determine how to best meet those needs, and appropriate programs are identified or developed.

The [Advisory Committee Handbook](#) (pg. 5) guides the process for determining and meeting external stakeholder needs at the program-level. Continual assessment of stakeholder needs ensures LCCC's programs and offerings are meeting those needs. Monitoring changing stakeholder needs involves targeted conversations with stakeholder groups and the use of other qualitative data to inform decisions. Purposeful planning based on information gathered ensures that the College is anticipating needs and providing efficient and innovative solutions, programs and services. For example, information collected through a [February 2017 focus group](#) (pg. 3) of local employers and other stakeholders demonstrate the need for a Certified Administrative Professional credential.

### **2P3d. Selecting the tools, methods and instruments to assess key stakeholder needs**

Tools are selected based on the variety of contexts that exist across the institution in which stakeholder needs are assessed. Within the RFP process and the selection of Campus Labs, for instance, a robust survey tool was required. The proven CCSSE Focus Group Tool Kit has been chosen for use when focus groups are appropriate. Other tools such as face to face meetings with focused agendas are also used when opportunities such as advisory meetings town halls are available.

### **2P3e. Assessing the degree to which key stakeholder needs are met**

LCCC assesses the degree to which stakeholder needs are met through the peer-reviewed program review and function assessment processes (see 2P3a). Functions and programs identify

stakeholders, articulate the relationship with the stakeholder, and the method(s) of assessment. Stakeholder feedback (see 2P3d) is incorporated into assessment processes to continuously improve programs and services. Assessment methods include both formative (e.g., advisory committee and focus group minutes) and summative (e.g., KPI reports, various stakeholder surveys and evaluations, annual Alumni Survey, workforce related credentials/graduates produced) measures. [This table](#) presents examples of external stakeholders and feedback mechanisms identified by three functions within the School of Outreach and Workforce Development through the function assessment process.

### **2R3a. Summary results of measures (include tables and figures when possible)**

LCCC's KPIs, reported and analyzed annually, include several measures relevant to meeting stakeholder needs, as shown in [this table](#). These measures indicate ways in which LCCC is meeting stakeholder needs or responding to indicated demand (such as measure B2a for local school districts with concurrent enrollment, and E2 for the community with non-credit life enrichment) in various areas across the College.

Employment outcome results from LCCC's 2016-2017 Alumni Survey provide an assessment of whether the College adequately prepared graduates for their professions. [The results](#) indicate the extent to which LCCC is meeting perceived student needs in their chosen post-graduation vocations.

Results from newly implemented function assessment are not yet available.

### **2R3b. Comparison of results with internal targets and external benchmarks**

As demonstrated on the KPI data, the College is currently above our internal target for four of the seven related measures. Of the three measures that have external benchmarks, one (number of businesses served) met that target.

Targets for other measures will be established through the new function assessment process after functions have analyzed baseline data.

### **2R3c. Interpretation of results and insights gained**

Through the peer-reviewed program review and function assessment processes (detailed throughout this subcategory), the College continues to make strides in formalizing and systematizing the process of requiring stakeholder input during all steps of decision making to ensure that the College offers programs and services that meet the needs of the intended stakeholders. As these processes become embedded in LCCC's culture, more robust trend data will allow for more in-depth assessment leading to continuous improvement.

### **2I3. Based on 2R3, what process improvements have been implemented or will be implemented in the next one to three years?**

In the time since the last Systems Portfolio was submitted, improvements have been made including the launch of the peer-reviewed Function Assessment and Program Review processes to ensure continuous improvement efforts are infused throughout the College. This process should be mature in three years.

Qualitative changes should also be considered here. All academic programs are now required to form Program Advisory Committees, which are designed in part to create a formal feedback loop with stakeholders. As programs develop or strengthen these committees, feedback is resulting in programmatic change. In academic year 2017-2018, the College added an AAS degree in Technical Agriculture Operations based on stakeholder feedback gathered through the agriculture programs advisory committees and the demand for such a degree program in the local workforce.

Planned improvements include:

- Implementing regular environmental scanning to assess community needs,
- Strengthening use of program advisory committees through new program development and the formal review process for existing programs,
- Diversifying advisory groups and focus groups to ensure broad representation of the community, and
- Improving and streamlining processes for creating advisory groups and for documenting their meetings.

## 2.4 - Complaint Processes

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Complaint Processes focuses on collecting, analyzing and responding to complaints from students or key stakeholder groups.

### 2P4: PROCESSES

Describe the processes for collecting, analyzing and responding to complaints from students and stakeholder groups. This includes, but is not limited to, descriptions of key processes for the following:

- Collecting complaint information from students
- Collecting complaint information from other key stakeholders
- Learning from complaint information and determining actions
- Communicating actions to students and other key stakeholders
- Selecting the tools, methods and instruments to evaluate complaint resolution

### 2R4: RESULTS

What are the results for student and key stakeholder complaints? The results presented should be for the processes identified in 2P4. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### 2I4: IMPROVEMENT

Based on 2R4, what process improvements have been implemented or will be implemented in the next one to three years?

## Responses

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### 2P4a. Collecting complaint information from students

LCCC's process for collecting complaint information (other than grade appeals) from students is established by [Policy 9.7](#) and [Procedure 9.7P](#), which provide avenues for students to communicate complaints and outline complaint resolution processes. Student complaints may be made in person, via phone or e-mail, or online using the [Complaints and Grievances Form](#) on the LCCC website. Complaints are documented, categorized, and managed in a centralized complaint management system, Maxient. Additionally, online complaints may be submitted on

the [Public Relations web page](#) and the [LCCC homepage](#). Complaints received through any means are routed to the appropriate office for review, documentation, and resolution.

The process specifically for grade-related student complaints is established by [Policy 2.16](#) and [Procedure 2.16P](#).

#### **2P4b. Collecting complaint information from other key stakeholders**

LCCC's process for collecting complaint information from other key stakeholders is identical to the process for students. Formal and informal complaints from other key stakeholders may be received via website feedback forms, phone calls, in person conversations, and emails. Minor issues are resolved at the lowest level possible at the discretion of the office that receives them, informal and formal complaints from key stakeholders are entered into Maxient, ensuring compliance with [Policy 9.7](#) and [Procedure 9.7P](#). Complaints are routed through Maxient to the individual(s) responsible for addressing the complaint and documenting a resolution.

#### **2P4c. Learning from complaint information and determining actions**

Referenced above, Policy 9.7 and Procedure 9.7P also establish the process for learning from complaint information and determining actions. The College uses Maxient to collect, categorize, route, and manage all complaints centrally. With complaints management now fully centralized, the College has the ability to objectively analyze complaint information and to address larger campus issues systematically. This process is based on continuous assessment principles to create a holistic system of using complaint information to drive improvements that are intentional and contribute to alignment of programs and services to meet needs.

#### **2P4d. Communicating actions to students and other key stakeholders**

Referenced above, Policy 9.7 and Procedure 9.7P also establish the process for communicating actions to students and other key stakeholders. Specifically, the policy and procedure include how complaints will be logged, timelines for addressing issues, the individuals responsible for addressing complaints, and how results are communicated to the complainant. The procedure further details the assessment and evaluation of complaints to contribute to continuous improvement.

#### **2P4e. Selecting the tools, methods and instruments to evaluate complaint resolution**

Referenced throughout this section, Policy 9.7 and Procedure 9.7P require a central and predictable storage and maintenance of complaints and outcomes using Maxient, a web-based system that was already used for student conduct and campus safety incident reporting. The tool selection process tool included an examination of current practices of the various offices that traditionally receive complaints as well as a review of other available products; this is the College's standard process for selecting software tools. (See sections 5.2 and 5.3.)

#### **2R4a. Summary results of measures (include tables and figures when possible)**

Since 2014, the College has been utilizing Maxient to maintain and track complaints. A [summary of data](#) regarding complaints received from August 2014 to August 2018 identifies the following information: date complaints were received, campus location where complaints occurred, the nature of the complaint, actions taken to address and resolve the complaint, the date complaint cases were closed, and whether or not complaints filed violated College policy.

#### **2R4b. Comparison of results with internal targets and external benchmarks**

At this time no internal or external benchmarks have been identified; however, complaint numbers have decreased over time. Over the past four academic years, the College received, on average, seven complaints. Because reporting, documenting, and categorization of complaints have not been consistent across all complaint avenues, benchmarking would not have been valuable. With the new consistency built into reporting, documenting and categorizing internal benchmarking will be possible.

#### **2R4c. Interpretation of results and insights gained**

As more complaints are logged and more College entities use Maxient for tracking and documentation, the College has a clearer picture of complaints and resolution than ever before. Reporting and documenting have improved. In most cases, however, the volume of complaints in any single area is not of a size, and varies by so much each year, that overall systemic problems have not been identified for rectification. Given increased opportunities for students and stakeholders to submit complaints, the College has received fewer reports over time.

#### **2I4. Based on 2R4, what process improvements have been implemented or will be implemented in the next one to three years?**

Recent process improvements include (1) fully utilizing Maxient to document, manage, and assess informal and formal complaints, and (2) providing systematic internal and external training to employees impacted by complaint processes to improve utilization of this database.

Improvements to be implemented in the next one to three years include:

- Strengthening and systematizing analysis of complaint information so that more institutional learning is realized. The Office of Institutional Effectiveness will assist in these efforts.
- Establishing internal benchmarks to monitor the effectiveness of the complaint processes.

## 2.5 - Building Collaborations and Partnerships

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Building Collaborations and Partnerships focuses on aligning, building and determining the effectiveness of collaborations and partnerships to further the mission of the institution.

### 2P5: PROCESSES

Describe the processes for managing collaborations and partnerships to further the mission of the institution. This includes, but is not limited to, descriptions of key processes for the following:

- Selecting partners for collaboration (e.g., other educational institutions, civic organizations, businesses)
- Building and maintaining relationships with partners
- Selecting the tools, methods and instruments to assess partnership effectiveness
- Evaluating the degree to which collaborations and partnerships are effective

### 2R5: RESULTS

What are the results for determining the effectiveness of aligning and building collaborations and partnerships? The results presented should be for the processes identified in 2P5. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### 2I5: IMPROVEMENT

Based on 2R5, what process improvements have been implemented or will be implemented in the next one to three years?

## Responses

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### 2P5a. Selecting partners for collaboration (e.g., other educational institutions, civic organizations, businesses)

LCCC's process to identify and select partners for collaboration is grounded within its model of continuous improvement. This model incorporates the rigorous assessment of institutional effectiveness in mission attainment as well as strategic and institutional planning. The College's mission and the four foundational elements of the comprehensive community college (academic preparation, transfer preparation, workforce development, and community development) drive the College to stay connected to and collaborative with partners in each of these domains (e.g.,

K12, four-year institutions, businesses, and community-based organizations). The College uses these pillars as bases for establishing partners.

The process for selecting partners for collaboration is also guided by [Goal 2](#) (pg. 14) of LCCC's strategic plan: "Strengthen relationships and connections with key community partners, such as K12, UW, other four-year institutions, and business and industry to improve student transitions between educational entities and into the workforce," underscoring the need for partnerships with those specific entities. Additionally, the College's participation in the local economic development organizations, such as the local Chamber of Commerce and Cheyenne Leads (the College President sits on the Board of Directors for both organizations) enables LCCC to proactively develop partnerships to meet emerging needs for new programs, to provide scholarships for students, and to create employment pathways for students.

### **2P5b. Building and maintaining relationships with partners**

The process for building and maintaining partnerships relies on stakeholder engagement and open communication. Engagement and communication means, which may be formal or informal, include regularly scheduled meetings, phone or e-mail conversations, participation in community organizations, and formal events. Additionally, the College encourages employees to connect with their state, regional, and national professional peers. Through these connections, opportunities for articulations, joint purchasing of strategic software, and policy changes have been realized. The LCCC Foundation is key in building and maintaining partnerships for certain financial and other resources that specifically impact students, building projects, and strategic initiatives.

### **2P5c. Selecting the tools, methods and instruments to assess partnership effectiveness**

The process for selecting tools and methods to assess partnership effectiveness is to align with desired partnership outcomes. Specific tools and measures vary according to the type and purpose of the partnership being assessed. Both formative and summative tools are used, including surveys, monitoring reports, achievement of partnership milestones, the College's KPIs, and other evaluative instruments. [Figure 2P5-1](#) provides examples of various partnerships formed and how the effectiveness of those partnerships is measured.

### **2P5d. Evaluating the degree to which collaborations and partnerships are effective**

Referenced above, the College's process to evaluate the effectiveness of partnerships includes both summative and formative assessment. Summative evaluation of partnership effectiveness is predominantly grounded in the College's KPIs. For example, the proportion of transfer students who successfully matriculate to the University of Wyoming (UW) measures the effectiveness of program articulation agreements with the University. Formative evaluation utilizes process-related metrics such as the achievement of partnership milestones. For program partnerships with UW, for example, formative evaluations include the number of signed program articulation agreements and the numbers of students progressing through these programs of study.

### **2R5a. Summary results of measures (include tables and figures when possible)**

The annual KPI report card includes several measures of overall partnership effectiveness, shown in [Table 2R5](#). Most of these measures show positive results for 2017-18, as compared with previous years.

The [Wyoming Community College Commission's Annual Partnership Report](#) catalogs partnerships that Wyoming community colleges established and maintained for each fiscal year, providing additional evidence of process effectiveness for building and maintaining partnerships. In addition to total number of partnerships, the report provides information for ten major partnerships for each college during the academic year. [LCCC's ten partnerships](#) selected for inclusion range from educational programming featuring academic program articulations with the University of Wyoming to regional development with the Career Fair, which is co-hosted with the State of Wyoming Department of Workforce Services/Cheyenne Workforce Center.

The annual report on new student transfers to UW, provided to LCCC by UW's Office of Institutional Analysis, is an example of effectiveness results for a specific partnership (referenced above in 2P5d). The data provided include a [Headcount of Transfers to UW Colleges](#), as well as [Retention & Graduation of Degree-Seeking Transfers from the Community Colleges Entering with 30 or More Credit Hours](#) and [60 or More Credit Hours](#).

#### **2R5b. Comparison of results with internal targets and external benchmarks**

[Table 2R5](#) includes internal targets (improvement goals), established systematically through annual KPI analysis, and external benchmarks. (External benchmarks have not been identified for all KPI measures.) As shown, internal targets were met for nine of the fifteen measures. Results for four of the five measures with identified external benchmarks met those goals.

Internal targets and external benchmarks have not been systematically established for other process measures.

#### **2R5c. Interpretation of results and insights gained**

Analysis of the available results indicates that most partnership processes are having the desired impact on student success and progress toward their educational goals. Many of the measures that have negative trends are impacted by enrollment, which has been declining across the College (as well as the Wyoming community college system as a whole). These measures need to be reviewed to determine whether or not they remain relevant; some may be replaced by more direct measures as the newly implemented function assessment process (mentioned throughout this portfolio) becomes embedded in LCCC's culture of continuous improvement.

#### **2I5. Based on 2R5, what process improvements have been implemented or will be implemented in the next one to three years?**

As mentioned throughout this portfolio, LCCC is participating in AACC's Guided Pathways 2.0. Through this participation, the College is strengthening partnerships with local K12 school districts so that students have a more seamless transition from local area high schools to LCCC

programs. Additionally, LCCC has built better connections with UW through formal program articulation agreements and a general education articulation agreement to improve success for students transferring to the University. Furthermore, LCCC has become accredited by the National Alliance of Concurrent Enrollment Programs (NACEP) to enhance concurrent/dual enrollment partnerships with local school districts.

Planned improvements include:

- Strengthening academic program advisory processes and updating the accompanying program advisory committee handbook to ensure that these processes operate effectively. This will include identifying more direct measures of process effectiveness.
- Establishing internal targets and identifying appropriate external benchmarks for existing process effectiveness measures.

### **Category Three Introduction: Valuing Employees**

LCCC continues to build an organization engineered to thrive in an uncertain future. Our processes associated with this category have clearly moved to an aligned level of maturity, however our results remain on the cusp between reactive and systematic. Through a commitment to shared governance and a climate of trust, LCCC is developing an effective, efficient, and entrepreneurial workforce with a tenacious dedication to continuous improvement. This work will culminate by finalizing strategies found primarily in Goal Three of the 2014 strategic plan.

LCCC is a values-based organization that lives by its mission and embodies a culture of transformation. Its focus on valuing employees remains at the forefront. Making LCCC an “Employer of Choice” has been a long-standing goal that now has new direction and focus. The Board of Trustees directed the President to develop and deploy a compensation system at LCCC that would be externally competitive, internally equitable, readily updated, easily understood, and fiscally responsible. As such, the classification and compensation study incorporated a market-based element to establish and maintain the most competitive salaries and total compensation package. The College continues to face challenges with competition from the private sector for employees in critical positions, so LCCC is focusing on hiring, developing, and retaining the best employees.

Implementing strategies recommended by the College Brain Trust in 2012, LCCC has established a strong HR team with professional credentials who maintain their currency in the ever-changing fields of benefits, recruitment, compensation, legal issues, and talent management. The annual employee satisfaction survey indicates that the College is moving in the right direction for valuing its employees.

As LCCC finalizes the implementation of the classification and compensation model, the College is shifting to its next major HR focus area of developing and implementing an automated performance management process. A robust performance evaluation model will aid in the accurate and consistent performance assessment of its people, enabling specific employee improvement within current rolls and focused development toward the fulfillment of future roles as LCCC.

## 3.1 - Hiring

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Hiring focuses on the acquisition of appropriately qualified/credentialed faculty, staff and administrators to ensure that effective, high-quality programs and student support services are provided. The institution should provide evidence for Core Component 3.C. in this section.

### **3P1: PROCESSES**

Describe the process for hiring faculty, staff and administrators. This includes, but is not limited to, descriptions of key processes for the following:

- Recruiting, hiring and orienting processes that result in staff and administrators who possess the required qualification, skills and values (3.C.6)
- Developing and meeting academic credentialing standards for faculty, including those in dual credit, contractual and consortia programs (3.C.1, 3.C.2)
- Ensuring the institution has sufficient numbers of faculty to carry out both classroom and non-classroom programs and activities (3.C.1)
- Ensuring the acquisition of sufficient numbers of staff to provide student support services
- Tracking outcomes/measures utilizing appropriate tools

### **3R1: RESULTS**

What are the results for determining if recruitment, hiring and orienting practices ensure effective provision for programs and services? The results presented should be for the processes identified in 3P1. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### **3I1: IMPROVEMENT**

Based on 3R1, what process improvements have been implemented or will be implemented in the next one to three years?

## Responses

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### **3P1a. Recruiting, hiring and orienting processes that result in staff and administrators who possess the required qualification, skills and values (3.C.6)**

LCCC strives to be a regional “employer of choice;” its recruiting and hiring processes attract and select individuals who possess the required qualifications, skills and values to support the

College's strategic vision and mission. The Institution clearly defines recruiting and hiring processes through policies and procedures, primarily [Hiring and Recruitment Procedure 6.1.2P](#) (pg. 2). The hiring process begins with a review of the position description to ensure that it effectively articulates a summary of key responsibilities, essential duties, required and preferred education and experience, knowledge, skills, abilities, and physical requirements. The completed position description forms the basis of the job announcement.

The College utilizes various sources, including [its own website](#), for recruiting and advertising. Frequently used sources include Indeed.com, higheredjobs.com, the Wyoming Department of Workforce Services, LinkedIn, Higher Education Jobs, Glassdoor, and local, state, and regional newspaper ads, as well as industry-specific resources relevant to the position being recruited. Recruitment is conducted outside regionally or nationally as determined by the position being filled. To gain access to large numbers of candidates, the College participates in various job fairs and networking events. For critical fill positions, the College works with academic search consulting companies to recruit prospective candidates.

The screening phase of the hiring process begins with applicants submitting an [online application](#) and supporting materials. Applications meeting minimum standards outlined in the job announcement are then reviewed by screening committee members who use position-specific rubrics to evaluate applicants. Screening committees are cross-functional members selected to provide a broad lens on every position and applicant; employees must complete a comprehensive screening committee member training before serving in this capacity. After reviewing application materials, screening committees select candidates for initial and then final on-campus interviews. Candidates are again evaluated using position-specific rubrics to ensure consistent, objective selection of finalists. For higher profile positions, the screening process includes open forums so that all interested campus community members may provide input. The screening process also includes reference checks and criminal background checks to reaffirm that all candidates under consideration possess the required qualifications and values (3.C.6).

LCCC's employee orientation processes have several components. First, all new fulltime employees meet with the HR Benefits Specialist for a one-on-one orientation of benefits within the first few days of employment. Subsequent meetings ensure employees have a thorough understanding of benefits offered and choices available. Second, all new employees attend formal orientation modules that provide crucial tools for early success in their employment tenure, present opportunities to meet key personnel across campus, and establish new employee cohorts, which encourage broad engagement across campus. Specific orientation topics include key HR processes and policies, Title IX reporting requirements, campus safety and emergency preparedness, travel procedures, contracting and purchasing, LCCC's organizational structure and history, guidelines for working with students, information about key institutional contacts and available resources and other pertinent topics (3.C.6).

### **3P1b. Developing and meeting academic credentialing standards for faculty, including those in dual credit, contractual and consortia programs (3.C.1, 3.C.2)**

The College's process for developing and meeting academic credentialing standards for faculty, including those in dual credit, contractual and consortia programs is established in [Minimum](#)

[Faculty Qualifications Policy 2.7](#) and [Procedure 2.7P](#) (pg. 4). All faculty (full-time and adjunct) must provide official transcripts demonstrating their highest degree earned before being hired (3.C.1).

Faculty credentials are established by faculty members within their respective disciplines in conjunction with their respective deans. These credentials are then reviewed by the Academic Leadership Team (ALT). Once the credentials are agreed upon, a faculty credential manual is created. The faculty role in the development of these guidelines is critical to assure the credentials meet expectations and to consider any alternative credentials and/or experiences.

High school faculty teaching concurrent enrollment (CE) courses are evaluated as adjunct faculty and must meet LCCC's requirements for minimum faculty qualifications as outlined in Procedure 2.7P (3.C.2). LCCC provides new CE instructors with discipline-specific training that includes pedagogy, course philosophy, assessment criteria, and administrative responsibilities. Annual discipline-specific professional development activities and ongoing collegial interactions ensure CE instructors stay current in their discipline.

### **3P1c. Ensuring the institution has sufficient numbers of faculty to carry out both classroom and non-classroom programs and activities (3.C.1)**

To ensure the College has sufficient numbers of classroom faculty, academic deans regularly review enrollment reports determining demand for specific courses and hire adjunct faculty accordingly. Adjunct faculty have access to training and resources to ensure they are prepared to teach. The College regularly conducts comparative analyses on its faculty numbers with its peer institutions for benchmarking and assurance purposes. When new programs and courses are developed, the initiators identify needs for new full-time faculty positions. The recruiting and hiring process described above is used to meet the identified need (3.C.1).

LCCC uses program chairs, directors, and coordinators to ensure non-classroom faculty responsibilities are met. These key personnel are released from some of their teaching obligations. Other non-classroom responsibilities are met through service on committees, such as Academic Standards. There is also a provision to release faculty, other than those referenced already, so that they may meet non-classroom needs. The VPAA has a discretionary number of release hours to be allocated per institutional initiative. Faculty generally serve on committees for a limited time. This service to the College enables LCCC to meet the essential non-classroom needs without having to hire additional faculty (3.C.1).

### **3P1d. Ensuring the acquisition of sufficient numbers of staff to provide student support services**

The College utilizes two processes to ensure the acquisition of sufficient numbers of staff to provide student support services: requests to fill vacancies and new position requests. When vacancies occur, the hiring manager submits a [Request to Fill Vacancy](#) and position description to the President's Cabinet. Hiring Managers use the form to justify on-going needs or request reallocation of the position if the need has changed. Cabinet will either approve or disapprove the

request, based on institutional need and the availability of resources. Upon approval, the recruiting and hiring processes described above can begin.

The new position request process also ensures sufficient numbers of support staff to meet student needs. As part of the annual budget development process, supervisors who have identified new needed positions submit a [New Position Request Form](#) documenting that need and demonstrating how the position supports college priorities. New position requests are prioritized through HR with input from College Council, the College's shared governance body, to ensure consistent approval practices. When a new position is approved, the supervisor then follows the recruiting and hiring processes.

### **3P1e. Tracking outcomes/measures utilizing appropriate tools**

LCCC's recruitment and hiring processes have recently been revised; outcomes, measures and appropriate tools were implemented through this revision process. Measures to determine recruitment and hiring process effectiveness that are currently tracked include candidate quality, hiring costs, time to fill vacancies, and return on advertising. Additionally, several outcomes are tracked to measure the effectiveness of new employee orientation. Tools used to measure attainment of these outcomes include pre- and post-tests, participant questionnaires, and follow-up three months after hire date.

The College monitors outcomes related to adequacy of instructional and non-instructional staffing by using National Community College Benchmarking Project and IPEDS data.

### **3R1a. Summary results of measures (include tables and figures when possible)**

[Applicant Pool Tracker](#) data show that 90% of applicants met minimum qualifications for the relevant position for 2015-2017. FY 2018 average [time-to-fill in weeks](#) shows an average of 11 weeks. The majority of new employees indicate satisfaction with new employee orientation on both the [end-of-orientation satisfaction survey](#) and the [three-month follow-up survey](#).

The College monitors human resources using comparisons with other Wyoming institutions for [faculty](#), [student support staffing](#), and [non-instructional staff](#).

### **3R1b. Comparison of results with internal targets and external benchmarks**

LCCC is in the process of developing internal targets for the measures used to ensure recruiting and hiring processes remain robust and provide the College with the talent needed to progress toward becoming an "employer of choice." External benchmarks are not available for internally developed measures.

The College utilizes the NCCBP and IPEDS data for the seven Wyoming community colleges as our benchmarks for adequacy of instructional and non-instructional staffing. Internal targets, for example, faculty-to-student ratios are established as part of the [KPI system](#).

### **3R1c. Interpretation of results and insights gained**

Survey results show LCCC is effectively attracting qualified job applicants. New employees are generally satisfied with the new hire orientation and find the information presented useful; they are able to apply the information received after three months of employment. This indicates the orientation is achieving the desired results.

For staffing, the College performs at the middle range of the seven Wyoming colleges, with instructional staff located at the higher end and non-instructional staff at the middle.

**3I1. Based on 3R1, what process improvements have been implemented or will be implemented in the next one to three years?**

Recent improvements include:

- Completed redesign of the recruitment and hiring process.
- Screening committee training to ensure that LCCC operates in a non-discriminatory, confidential, and fair recruiting and hiring environment. Beginning in January 2015, employees must complete the training to serve on a screening committee.
- Developed and implemented screening committee tools to ensure consistency in that process.
- Developed robust, competency-based screening questions to ensure job-relevant content during interviews to select the best qualified candidates in terms of performance and fit.
- Revised HR Policies and Procedures to consistently define processes and practices.
- Implemented new employee orientation program for all full-time employees and revised materials based on participant feedback.

Planned improvements for the next one to three years include expansion of the new employee orientation to include part-time employees and the identification of more robust outcomes and tools, including internal targets, to measure the effectiveness of the recruitment and hiring process.

## 3.2 - Evaluation and Recognition

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Evaluation and Recognition focuses on the assessment and recognition of faculty, staff and administrators' contributions to the institution. The institution should provide evidence for Core Component 3.C. within this section.

### **3P2: PROCESSES**

Describe the processes that assess and recognize faculty, staff and administrators' contributions to the institution. This includes, but is not limited to, descriptions of key processes for the following:

- Designing performance evaluation systems for all employees
- Soliciting input from and communicating expectations to faculty, staff and administrators
- Aligning the evaluation system with institutional objectives for both instructional and non-instructional programs and services
- Utilizing established institutional policies and procedures to regularly evaluate all faculty, staff and administrators (3.C.3)
- Establishing employee recognition, compensation and benefit systems to promote retention and high performance
- Promoting employee satisfaction and engagement
- Tracking outcomes/measures utilizing appropriate tools

### **3R2: RESULTS**

What are the results for determining if evaluation processes assess employees' contributions to the institution? The results presented should be for the processes identified in 3P2. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### **3I2: IMPROVEMENT**

Based on 3R2, what process improvements have been implemented or will be implemented in the next one to three years?

## Responses

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### **3P2a. Designing performance evaluation systems for all employees**

LCCC's current evaluation system was established in 1989. Per the College's [Strategic Plan](#) (pg. 12), LCCC is currently developing a new performance management process. Doing so requires aligning employee job performance with meaningful, role-focused competency models that foster shared understanding and establish clear expectations across LCCC, providing employees with more consistent performance feedback, enabling better coaching on the part of supervisors, and allowing for better institutional tracking and reporting of employee performance.

LCCC's process for designing the performance management system includes four primary phases:

1. **Initial planning** includes obtaining executive direction on the purpose and requirements of the new system, soliciting subject matter input on performance management content and process development (e.g., internal experts, State of Wyoming HR Division), and establishing a committee of key employee stakeholder group representatives.
2. **Content/process development** includes conducting research on effective behavior-based performance management models; identifying appropriate performance management models based on research, institutional needs, and employee competency requirements; developing corresponding performance management system processes; identifying an appropriate online performance management platform; refining the performance process and evaluation model to include specific behavioral content; confirming performance process, content, evaluation, and system requirements (with committee input); obtaining executive approval for implementation; and revising performance management system policy and procedure (to include consultative feedback process).
3. **System development/configuration** includes establishing a system implementation timeline with milestones, configuring initial administration platform and data tracking mechanism(s), identifying appropriate system access channel (e.g., employee intranet), configuring user access and structure, importing performance content in alignment with system configuration, and testing systems' usability and acceptance.
4. **Training & Implementation** includes developing a project communication plan, performance management system support materials for administrators, and performance management system training and materials for users; initiating the project communication plan; training employees and managers; implementing the performance management system; evaluating the system, incorporating end-user feedback; and making improvements to the system as necessary.

### **3P2b. Soliciting input from and communicating expectations to faculty, staff and administrators**

The College's two primary processes for communicating expectations to faculty, staff and administrators and soliciting their input are the new employee onboarding process and the annual employee evaluation process. During the onboarding process, supervisors review position descriptions with new employees and clearly communicate their expectations. At the same time, new employees may provide input, ask questions, and offer suggestions.

The second process is the annual employee evaluation/performance management process. A primary objective of the process is to foster open, productive communication between employees

and supervisors. This two-way communication ensures position- and employee-specific expectations are clearly communicated.

The evaluation process includes a series of structured, interactive steps. At the beginning of the evaluation cycle, the supervisor and employee meet to discuss performance expectations and goals. Both bring ideas to the meeting, which results in agreed-upon annual performance goals, aligned with the division and the College's strategic goals, and plans to accomplish those goals. The two reconvene at the mid-year review to discuss progress, any changes that have transpired, new projects that have arisen, etc. The cycle ends with the supervisor and employee meeting again to formally finalize the evaluation. At each step, goals and expectations are documented using an evaluation form that is submitted to HR and added to the employee's personnel file upon completion of the annual cycle.

### **3P2c. Aligning the evaluation system with institutional objectives for both instructional and non-instructional programs and services**

Performance management provides employees a solid understanding of success in their respective roles and how that contributes to the attainment of LCCC's mission, Strategic Plan, and other institutional objectives (e.g., instructional or operational). The process the College uses to ensure this alignment is through detailed position descriptions and the establishment of annual performance goals integrated into the overall employee evaluation process.

Position descriptions at the College delineate the employee's core responsibilities and essential functions, including performance expectations with respect to LCCC's Mission, Vision, and Core and Aspirational Values. These are foundational to the successful accomplishment of long-term institutional goals and help frame strategies as outlined in LCCC's [Strategic Plan](#). In performance discussions with their direct reports, LCCC managers tie individual employee performance goals to the bigger picture and to help employees understand how their specific job performance contributes to overarching, institutional objectives. In these discussions, all LCCC employees are made aware of their responsibility for behaving in strict alignment with its Core and Aspirational Values and for advocating for the College's Mission on a consistent basis.

### **3P2d. Utilizing established institutional policies and procedures to regularly evaluate all faculty, staff and administrators (3.C.3)**

LCCC's process for utilizing established institutional policies and procedures to regularly evaluate all faculty, staff and administrators is delineated in [Employee Evaluation Procedure 4150](#). HR staff communicate with supervisors throughout the year to ensure consistent performance management. They distribute necessary forms and provide supervisor resources for completing the annual evaluation as well as a semi-annual progress review. HR collects completed evaluation forms and monitors progress and compliance through the number of completed evaluations received.

Specific to faculty, LCCC has an established process of classroom observations. Every semester, Deans observe the instructional methods of the faculty, then meet with them to review their observations and discuss any issues; the faculty member may respond to any questions or

concerns. Deans also review student course evaluations each semester and discuss any concerns with faculty. Furthermore, faculty are required to establish annual performance goals, which deans review semi-annually for progress. Attained goals are replaced by new targets as part of the annual goal-setting conversation (3.C.3). Absent the classroom observations, the evaluation process is the same for all other categories of employees and is described in greater detail in section 3P2b above.

### **3P2e. Establishing employee recognition, compensation and benefit systems to promote retention and high performance**

The College establishes employee recognition, compensation and benefit systems to promote retention and high performance through internal collaboration and external consultation. In alignment with Board of Trustee's policy, aided by external expertise, LCCC has developed a system that is externally competitive, internally equitable, readily updated, easily understood, and fiscally responsible. Through 20 information sessions, HR solicited employee expectations for a compensation system and communicated goals, progress, and aspects of the system. Employee input was also collected utilizing an online assessment, completed by full-time employees and their supervisors, which detailed job functions, education and experience requirements, and necessary knowledge, skills and abilities for all full-time positions. An external consultant evaluated each position's classification and compensation based on these assessments.

The study revealed that employees wanted a system that recognized performance as well as longevity, competed with market compensation, and provided opportunity for educational advancements. It also revealed in many areas that the College had fallen behind market and industry standards for compensation based on the old system that did not consider market influence beyond initial hiring, adversely impacting LCCC's ability to recruit and retain employees.

This work resulted in innovative system where positions are now assigned to one of six broad classifications and a job-specific market range within that classification. This creates an adaptable system that greatly improves the College's ability to respond to changing market influences, process cost of living adjustments, as well as respond to turnover, industry changes, and College needs. When fully operational, the new system will also provide employees the ability to advance across their band through longevity increments, educational advancements, and performance results.

LCCC is currently executing a multi-year phased implementation of this new system and is improving tracking, data, and metrics reporting that will be essential for the full and efficient operation of the system. [Figure 3P2e-1](#) illustrates the College's plan for future employee progression/advancement through assigned bands.

The College hosts an annual Employee Recognition Reception to honor employees who reach longevity milestones along with special awards for Faculty of the Year, Adjunct Faculty of the Year, Classified Staff of the Year, and Professional Staff of the Year. LCCC also honors retirees at this reception, highlighting their careers and presenting them with farewell gifts. Other

departments use this forum to present Disability Services Above and Beyond Awards and CARE Team awards for individuals who have gone out of their way to care for students.

In addition to State of Wyoming benefits, LCCC offers some supplemental benefits, including short-term disability (100% employer paid), additional life and long-term disability (75% employer paid) and an Employee Assistance Program (EAP) (100% employer paid). Also, the College contributes 15.65% of an employee's gross earnings to retirement. The College includes targeted benefits training in new employee orientation sessions and in basic supervisor's training. This helps inform employees and supervisors about all aspects of benefits.

### **3P2f. Promoting employee satisfaction and engagement**

LCCC believes the three key drivers to sustained employee engagement are clear direction, sense of belonging, and license to succeed. The College's commitment to shared governance, employee development, and performance management supports and nurtures these three key employee engagement areas, providing employees clear direction and recognition of their contributions which make them feel valued and engaged. They also offer employees input into their personal growth and development, as well as into the Institution's most significant work, enabling them to feel a genuine license to succeed and tendency toward more passion and engagement. Such passionate and engaged employees are more likely to model the LCCC Mission and behave according to its Core Values.

LCCC's processes to promote employee satisfaction and engagement are also grounded in its commitment to create a collegial, professional, and safe environment for its employees. Its shared governance systems offer numerous opportunities for employees to actively engage in operations and setting the direction of the Institution. The College also promotes employee satisfaction by providing all employees with tools needed to successfully perform their duties, as well as training and development opportunities, with salary adjustments for those attaining educational milestones. These employee development initiatives are delivered individually and in groups, and can be tailored to specific settings or needs. Opportunities also exist for both lateral and upward movement within the organizational structure.

### **3P2g. Tracking outcomes/measures utilizing appropriate tools**

The primary process LCCC uses to assess employee satisfaction, engagement, communication of expectations, performance management, etc., is the LCCC Employee Experience Survey (prior to academic year 2017-2018, the College used the Ruffalo Noel-Levitz College Employee Satisfaction Survey). This survey is administered annually to all employees of the College. The survey itself includes numerous items that directly pertain to employee engagement and satisfaction. More specifically, the survey assesses areas such as how satisfied employees are with the communication of job responsibilities, how supervisors help employees improve, how employees' input is used to improve the College, and overall employee satisfaction.

In addition to employee surveys, the College's KPI system includes a [Campus Climate](#) (pg. 2) performance indicator that incorporates measures pertaining to employee satisfaction, employee grievances and complaints, and employee retirement and departure rates.

### **3R2a. Summary results of measures (include tables and figures when possible)**

[Table 3R2-1](#) presents the results on the new LCCC Employee Experience Survey items that pertain directly to employee engagement and satisfaction. These data have been converted to a five-point scale to allow for comparison with the historical results on relevant CESS items, presented in [Table 3R2-2](#).

### **3R2b. Comparison of results with internal targets and external benchmarks**

[Table 3R2-3](#) presents the benchmark data on items pertaining to employee engagement and satisfaction used by LCCC from a comparison group of institutions. Internally, the improvement targets are simply to see improvements on an annual basis until at which time we surpass the national benchmarks. From there, internal targets for the new Employee Experience Survey will be established; initial data will be used to develop targets in the following years.

### **3R2c. Interpretation of results and insights gained**

LCCC is making sustained progress in all areas pertaining to employee satisfaction, engagement, guidance, and development. Throughout this portfolio, similar results are presented that demonstrate the year-over-year improvement in the results on the employee satisfaction/experience surveys on a variety of items. Employee satisfaction, engagement, and recognition follow these trends as well, in some areas producing significant improvements in just the time since our last Systems Portfolio.

Despite this progress, LCCC still falls short of national benchmarks in many of these areas. However, the national benchmarks have remained relatively flat or declined in some cases. Thus, if LCCC continues its progress, it is on the path to be a pacesetter for these areas in the future.

### **3I2. Based on 3R2, what process improvements have been implemented or will be implemented in the next one to three years?**

The College recognizes it has significant work in developing and assessing its performance management processes. The College is actively seeking assistance from professional organizations and other institutions to aid in this work. LCCC has reached out to the other six Wyoming community colleges to learn about their performance management process. The seven Wyoming community college HR directors meet monthly to discuss performance management, employee development, and related issues.

Described above (3P2b), LCCC has recently launched a process to design a new performance management process. The existing process, while functional, is outdated and not aligned with the cultural or strategic focus of the College.

As part of the new system's design, LCCC recently partnered with the State of Wyoming to implement an online platform for performance evaluations and associated correspondence. This leading-edge technology allows for efficient and easy system access and enables accurate performance evaluations based on real-time information and feedback. Participants can readily

track performance, and supervisors can generate useful feedback reports as needed. Performance content is based on a robust competency model that encompasses all employee classification levels and major job functions. This platform standardizes performance measurement for employee groups, thus strengthening the evaluation system.

Also described above (3P2e), the College is in the final stages of implementing a significantly revised compensation and classification system to improve retention as well as recruitment.

Finally, the College is significantly reforming its HR information system (HRIS) and establishing improved measures for monitoring performance along with systems and tools to more effectively collect, warehouse, and analyze these data. LCCC recently hired a HRIS Specialist charged with strengthening these processes, resulting in improved communication with employees. An example of this improved communication is the monthly HR Newsletter, which provides pertinent information about HR-related initiatives.

## 3.3 - Development

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Development focuses on processes for continually training, educating and supporting employees to remain current in their methods and to contribute fully and effectively throughout their careers at the institution. The institution should provide evidence for Core Components 3.C. and 5.A. in this section.

### **3P3: PROCESSES**

Describe the processes for training, educating and supporting the professional development of employees. This includes, but is not limited to, descriptions of key processes for the following:

- Providing and supporting regular professional development for all employees (3.C.4, 5.A.4)
- Ensuring that instructors are current in instructional content in their disciplines and pedagogical processes (3.C.4)
- Supporting student support staff members to increase their skills and knowledge in their areas of expertise (e.g. advising, financial aid, etc.) (3.C.6)
- Aligning employee professional development activities with institutional objectives
- Tracking outcomes/measures utilizing appropriate tools

### **3R3: RESULTS**

What are the results for determining if employees are assisted and supported in their professional development? The results presented should be for the processes identified in 3P3. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### **3I3: IMPROVEMENT**

Based on 3R3, what process improvements have been implemented or will be implemented in the next one to three years?

## Responses

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### **3P3a. Providing and supporting regular professional development for all employees (3.C.4, 5.A.4)**

LCCC uses several processes for providing and supporting regular professional development for all employees, who represent the College's greatest resources through their diverse talents and

strengths. Tuition waivers and reimbursement form one such process. Employees may take an unlimited number of classes at LCCC at a reduced cost of \$10 per credit hour. Through a reciprocal agreement with the University of Wyoming, employees also receive tuition waivers for coursework. College procedure allows tuition reimbursement for relevant coursework completed at other institutions. Any benefitted employee can participate in these programs and gain knowledge and skills to contribute fully and effectively to the College (3.C.4, 5.A.4).

LCCC also provides professional development and training programs for all employees. These opportunities include the annual administrative assistant's professional development conference, the Certified Public Manager (CPM) program, and in-service sessions at the start of each semester (5.A.4). Additionally, the Center for Excellence in Teaching (CET) provides a rigorous, purposeful development program for new faculty as well as ongoing faculty development opportunities on a wide variety of topics, including emerging technologies, pedagogy, and instructional best practices. The CET develops and delivers in-service training to reach all faculty, including adjuncts, and staff at the start of each semester (3.C.4).

The College also supports regular professional development through funding processes. Many departments have funds specifically allocated to professional development. Additionally, the President's Cabinet manages a pool of professional development funds to supplement departmental funds; any employee may apply for funding from this pool (see 3P3d below) (3.C.4, 5.A.4).

### **3P3b. Ensuring that instructors are current in instructional content in their disciplines and pedagogical processes (3.C.4)**

To ensure that instructors are current in instructional content in their disciplines and pedagogical processes, LCCC offers faculty professional development opportunities through the CET. Opportunities include funding to attend professional conferences, symposiums, and presentations and campus-coordinated pedagogy workshops related; online resources (including current research, new tools, and trends) are available to all faculty through the LMS. Faculty are encouraged to share knowledge and skills gained from conferences and symposiums through campus presentations, which the CET facilitates (3.C.4).

### **3P3c. Supporting student support staff members to increase their skills and knowledge in their areas of expertise (e.g. advising, financial aid, etc.) (3.C.6)**

LCCC supports student services support staff members to increase their knowledge and skills in their areas of expertise through processes similar to those described above. Student Services departments provide regular training and support through a variety of avenues, such as weekly department meetings, one-on-one mentoring, training to improve effectiveness of technology support systems, inter-departmental meetings, and encouraging and funding participation in local, regional, and national professional development. Student services staff frequently participate in annual meetings of professional associations such as NASPA – Student Affairs Administrators in Higher Education, Association of College and University Housing Officers, Association on Higher Education and Disability, American Association of College Counseling, National Association for Behavior Intervention Threat Assessment, ATIXA Title IX Investigator

and Coordinator Training, and Rocky Mountain Association of Collegiate Registrations and Admissions Officers, among others (3.C.6).

### **3P3d. Aligning employee professional development activities with institutional objectives**

LCCC has decentralized and centralized processes for funding professional development, both of which require rationale aligning requests with institutional objectives. In the decentralized process, the College aligns employee professional development activities with institutional objectives through the annual budgeting process. When participating in this process, many units include department-specific professional development funds in their requests. All budget requests must include a rationale demonstrating support of the College's mission and alignment with institutional priorities.

LCCC uses a centralized professional development fund process, managed by the President's Cabinet, to supplement departmental budgets and to allow the College to take advantage of opportunities that arise between budgeting cycles. Any employee may apply for professional development funds; applicants must demonstrate how they will advance the College's strategic goals. The process begins with the employee completing [the application](#), which is reviewed by the employee's supervisor. The supervisor then forwards it to the President's Cabinet for consideration. If the request meets strategic objectives and funding is available, the request is approved.

### **3P3e. Tracking outcomes/measures utilizing appropriate tools**

LCCC tracks employee satisfaction with professional development through the [Employee Experience Survey](#) (pg. 4). The survey was developed in-house in spring 2018 to provide more useful and actionable information to support the College's efforts to make LCCC a regional employer of choice. Prior to academic year 2017-2018, the College used the Ruffalo Noel-Levitz College Employee Satisfaction Survey (CESS) to assess various aspects of employee satisfaction, including the availability of professional development. Although this tool has provided a consistent framework for assessment, as well as national benchmarking, LCCC desired something that would more purposefully focus on understanding, alignment, and efficacy in building the College's culture. This led to the design and implementation of the current LCCC Employee Experience Survey.

Both surveys include items that directly pertain to professional development for LCCC employees. More specifically, the survey employee satisfaction items on the adequacy and availability of professional development opportunities.

### **3R3a. Summary results of measures (include tables and figures when possible)**

[Figure 3R3a-1](#) presents the results on the new LCCC Employee Experience Survey items that pertain directly to employee development. These data have been converted to a five-point scale to allow for comparison with the historical results on relevant CESS items, presented in [Figure 3R3a-2](#).

### **3R3b. Comparison of results with internal targets and external benchmarks**

Internally, LCCC established the goal of at least 80% of employees responding favorably to items on the new LCCC Employee Experience Survey. Initial results met this goal on four of the eight items related to professional development processes. Because this is an internally developed instrument, external benchmarks are not available.

[Figure 3R3b-1](#) presents historical benchmark data on CESS items pertaining to professional development. Internal improvement targets are simply to increase satisfaction each year until LCCC surpasses the national benchmarks.

### **3R3c. Interpretation of results and insights gained**

The results above show that LCCC has made sustained progress in areas pertaining to employee satisfaction with training and professional development. Unfortunately, LCCC still falls quite short of national benchmarks in both areas. Training results are not surprising as an HR development position has only recently been established. In addition, 2016 budget reductions and tight budgets since then have led to reduced professional development opportunities, compared with previous years when more funding resources were available.

### **3I3. Based on 3R3, what process improvements have been implemented or will be implemented in the next one to three years?**

To improve development processes, LCCC has employed an HR Development (HRD) Specialist who designs, develops, and delivers training to LCCC employees to improve the overall professionalism and skill-sets of employees. The HRD Specialist also provides professional consultation to leaders and employees concerning employee development needs and opportunities, and designs a variety of assessments to better align employees' efforts with institutional priorities.

As mentioned above, the College developed and implemented the annual Employee Experience Survey to improve collection of stakeholder feedback on employee development processes and needs. Additionally, formative assessments for the effectiveness of professional development systems were developed and employee feedback about specific training and development endeavors is formally collected at these events.

## **Category Four Introduction: Planning and Leading**

Over the past seven years, the College has transformed from a reactive to an aligned institution as it pertains to our planning and leading processes, and in some instances to full integration. Likewise, LCCC has made a similar jump from reactive to systematic regarding our results, and examples of areas leaning to alignment, yet others that have not fully moved from reacting. Leveraging feedback on LCCC's 2010 and 2014 Systems Portfolios, the Institution has taken major steps in developing, strengthening and integrating processes that guide its planning and leadership towards higher levels of mission attainment.

Based on appraisal feedback, an interdisciplinary team from the College participated in a Strategy Forum in the spring of 2012 where they charted the path for a massive quality improvement initiative that would establish an organization-wide approach to continuous improvement. This work set the stage for the development and/or refinement of processes pertaining to leadership, strategic and operational planning, resource allocation, structure for organizational operations, inclusiveness and engagement of individuals (shared governance), and the assessment of program, function, and institutional effectiveness.

The collective efforts of that team, and many across the College, resulted in the LCCC Model of Continuous Quality Improvement (CQI) that now ensures the integration of essential processes required for a quality culture. The model originates and terminates with the Institution's mission statement and values. These are further expanded to drive the development of the College's envisioned future (vision) and the Institution's Strategic Plan, from which a cycle of continuous improvement is regularly implemented. The cycle includes both formative and summative evaluation, followed by different levels of organizational planning, supported by strategic resource allocation, which launches the implementation of planned actions. Upon completion, the cycle repeats. Review and validation of the mission and values occur within a regular cycle associated with the College's strategic planning process further explained in this section.

The College's mission statement serves as its ultimate public purpose and is augmented by employees' agreement on how they behave while working towards attainment of that purpose – LCCC's core and aspirational values. Achievement of these is then assessed through a series of summative KPIs and accompanying measures. The KPIs include both effectiveness (output) indicators as well as efficiency (process) indicators aligned to the foundations of the mission. The performance assessment of these areas is a critical element in informing the development of the vision statement, Strategic Plan, and downstream planning and actions.

## 4.1 - Mission and Vision

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Mission and Vision focuses on how the institution develops, communicates and reviews its mission and vision. The institution should provide evidence for Core Components 1.A., 1.B. and 1.D. within this section.

### 4P1: PROCESSES

Describe the processes for developing, communicating and reviewing the institution's mission, vision and values, and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Developing, deploying, and reviewing the institution's mission, vision and values (1.A.1, 1.D.2, 1.D.3)
- Ensuring that institutional actions reflect a commitment to its values
- Communicating the mission, vision and values (1.B.1, 1.B.2, 1.B.3)
- Ensuring that academic programs and services are consistent with the institution's mission (1.A.2)
- Allocating resources to advance the institutions mission and vision, while upholding the institution's values (1.D.1, 1.A.3)
- Tracking outcomes/measures utilizing appropriate tools (e.g. brand studies, focus groups, community forums/studies and employee satisfaction surveys)

### 4R1: RESULTS

What are the results for developing, communicating and reviewing the institution's mission, vision and values? The results presented should be for the processes identified in 4P1. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### 4I1: IMPROVEMENT

Based on 4R1, what process improvements have been implemented or will be implemented in the next one to three years?

## Responses

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**4P1a. Developing, deploying, and reviewing the institution's mission, vision and values (1.A.1, 1.D.2, 1.D.3)**

The College has a systematic and inclusive process for the development, deployment, and review/update of the Institution's mission statement, core and aspirational values, and vision. This process is integrated in part within the College's strategic planning process (see 4P2 for more information).

Briefly, the College conducts a comprehensive strategic planning process every five to seven years. The planning process is guided by the College's commitment to shared governance (see [Policy 1.1.5](#)) and begins with the organization of a strategic planning team comprised of individuals representing all internal constituencies at the College (e.g., the Trustees, executive team, faculty, staff, etc.). The purposeful composition of the team ensures the engagement of all voices within the campus community. Its work leads to recommendations for the President, then from the President to the Board of Trustees for their approval and adoption (**1.A.1**).

This first stage of the College's strategic planning process is designed to accomplish three distinct objectives: (1) validate the Institution's mission statement; (2) consider the [College's value statements](#), determining whether they represent values fitting of the College for its future and whether the Institution has capacity to embody those values; and (3) develop an envisioned future, or vision statement, for the College, informed by environmental scanning. The work to accomplish these objectives ensures the planned actions of the Institution (through the implementation of a [strategic plan](#)) are aligned with the over-arching purpose of the College. Thus, the College recognizes, and verifies, that its role is to serve its community, and it does so through the deployment of its resources into programs and services that meet identified needs (**1.D.2, 1.D.3**).

#### **4P1b. Ensuring that institutional actions reflect a commitment to its values**

As illustrated by [LCCC's continuous improvement model](#), the mission, vision, values, strategic plan goals, and outcomes identified through institutional key performance indicators strategically drive the College's work. Therefore, the primary process through which the Institution ensures its actions reflect a commitment to what it values is through the purposeful integration of these elements into macro- and micro-level processes used to facilitate the work of the Institution.

The Institution has gone to great lengths to ensure its mission, vision, values, strategic plan goals and key performance indicators (KPI's) are integrated into major institutional processes that determine substantive action of the organization. [Figure 4P1-1](#) identifies some of the key processes that have purposefully incorporated what the Institution values into the decision-making/action components of the processes; most of these processes are described in greater detail elsewhere within this Portfolio.

#### **4P1c. Communicating the mission, vision and values (1.B.1,1.B.2, 1.B.3)**

LCCC, starting with the Board of Trustees, the President, and the executive leadership, has committed to the process of ensuring the mission, vision, and value statements are communicated through all of the primary and most visible communication channels of the Institution. Thus, at LCCC, you will find the College's mission, vision, and values communicated in written form across many venues and in many formats (**1.B.1**). For example:

- The Board of Trustees are the ultimate stewards of the College's mission, vision, and values. Their primary mechanism for setting their expectations is through policy, and they have established [Board Policy 1.1.3](#) to communicate their commitment to the mission, vision and values of the Institution.
- The College's mission, vision and values are highlighted on their own web-page (see [Mission, Vision and Values](#)).
- The mission, vision, and value statements are included in the College's [Strategic Plan](#) (pg. 6).
- The President's Cabinet (the College's executive team) has adopted a process of incorporating the mission statement in their primary communications, such as including the mission in the signature block of every email sent by Cabinet members. This has become a College-wide practice.
- Part of the 360 Feedback Process used to evaluate President's Cabinet members, individuals are asked to assess how well the executive team demonstrates an understanding and commitment to the College's mission, vision and values.

To connect day-to-day activities, the College has aligned the mission to the four primary pillars of the comprehensive community college (academic preparation, workforce development, transfer preparation, and community development). These pillars accompany the mission statement in the primary public documents articulating the mission – the Board of Trustees policy, the Strategic Plan, the website, the college catalog, etc. **(1.B.1)**. These elements have become core themes of LCCC's mission statement, helping to further explain the various aspects of its mission in more recognizable areas of its work **(1.B.2)**.

Lastly, these themes help to drive the College's work—with an emphasis on serving students. While the College's taxing district, municipal and county boundaries, service area, and even state boundaries are all well established, LCCC recognizes that, as an open-access institution, people come to it from many different areas. Once they come, they become LCCC students, and the College is committed to helping transform their lives **(1.B.3)**.

#### **4P1d. Ensuring that academic programs and services are consistent with the institution's mission (1.A.2)**

The College uses several processes for ensuring that academic programs are consistent with the Institution's mission. The first is the process for developing and approving new academic programs. This process is established in Procedure [2.3.1P: Program Development and Approval](#). Program development and approval is also contingent on proposed programs meeting the parameters within [Policy 2.1](#), on degrees and certificates, and the accompanying [Procedure 2.1.1P](#) (pg. 2). Section 5.0 within the procedure specifically requires that academic programs meet the College's mission statement by thorough alignment with the four foundational elements of the comprehensive community college referenced above. (See 1P3 for more information on program development and approval processes.) **(1.A.2)**.

Additionally, LCCC ensures that academic programs and services are aligned with the Institution's mission through the comprehensive review processes – academic program review and service/support function review. This process ensures that approved programs and

service/support functions do not deviate from being mission-centric over time after they have been approved. The academic program review process is established by [Procedure 10.2P](#). As stated in the procedure's section 5.0, "Academic program review generates knowledge about how well academic programs are contributing to the attainment of the College's mission. (See 1P3 and 1P4 for more information.)"

The College has recently established a comprehensive non-academic program (also referred to as service/support functions) review process. Non-academic programs are those areas of the College structured to deliver a unique set of services, support functions, or student learning/development experiences that support the institutional mission. As denoted in [Procedure 10.3P](#), which directs the process, the primary purpose of non-academic program review is to determine how well non-academic programs are supporting LCCC's mission. (See 5P1 for more information.)

The College's budget development and approval process (described below) also ensures that academic programs and services are consistent with the Institution's mission. All academic and student support services must demonstrate how they support LCCC's mission and strategic priorities when requesting budget allocations.

#### **4P1e. Allocating resources to advance the institutions mission and vision, while upholding the institution's values (1.D.1, 1.A.3)**

The College has mature, integrated processes through which it plans, assesses institutional effectiveness, and allocates resources towards continuous improvement. This continuous improvement model was described in more detail in the opening of this section. One component of this process is the College's [budget development and allocation process](#).

To ensure the involvement and broaden the participation of faculty, staff, and students in this key process, the College Council (LCCC's Shared Governance group) established the Budget Resource Allocation Committee (BRAC). This committee plays a crucial role in ensuring shared governance and alignment of institutional resources with mission attainment. In addition, the College's Budget Process Advisory Committee (BPAC) continually assesses the budget allocation process to ensure its continuous improvement in aligning resource allocation with mission attainment.

The budget process incorporates two primary sub-processes to ensure that alignment with the College's mission, vision, KPIs, and Strategic Plan is central to resource allocation determinations. The first is within the general fund allocation for operating budgets. Units must provide rationale and justification for budget requests illustrating how they will contribute to the improvement of the College's KPIs while advancing the Strategic Plan, both of which stem from the College's mission as illustrated above (1.D.1). These [documents](#) illustrate the allocation of the FY19 operating budget resources to the College's Strategic Plan goals and KPIs (1.A.3).

The second sub-process is in the allocation of new resources. LCCC considers these opportunities for new investment – investment in people (human resources), equipment (capital resources), or other external products and services, all of which support the Institution's mission.

All requests for new capital or operating investments must go through an objective, rigorous application and review process, facilitated by the BRAC. Requests for new human resources go through a similar process, facilitated by HR (see 3P1). In both cases, requests must include a rationale demonstrating how they will help the Institution fulfill its mission, primarily by linking the request to Strategic Plan and KPIs. Proposals are prioritized using rubrics that give higher scores to those that demonstrate strong alignment with mission components. (1.A.3).

#### **4P1f. Tracking outcomes/measures utilizing appropriate tools (e.g. brand studies, focus groups, community forums/studies and employee satisfaction surveys)**

The primary process LCCC uses to assess the efficacy of communication of and engagement with the College's mission, vision, and values statements is the Employee Experience Survey prior to FY18 (2017-2018 academic year, the College has deployed the Ruffalo Noel-Levitz College Employee Satisfaction Survey). The Employee Experience Survey is administered on an annual basis to all employees of the College. One section of the survey is focused on the topic of Ambassadorship, which LCCC has defined as employees understanding and abiding by the Vision, Mission, and Values. More specifically, this process assesses the extent that employees believe people on the campus genuinely believe in the mission, the College and employees use the mission as a guide when making decisions, that employees have been provided a detailed explanation of the meaning and importance of the College's core and aspirational values, and that supervisors serve as a role model for LCCC values.

Additionally, the College has incorporated the communication of the mission, vision and value statements into a variety of other processes on campus. For example, the College offers a comprehensive new employee orientation process. Integrated within the orientation are [purposeful exercises](#) to communicate and create awareness and understanding of these elements with new employees. Similarly, at all training (e.g., supervisory training, etc.) participants are provided with [printed materials](#) communicating LCCC's values. The College captures and evaluates data of how effective these processes are in accomplishing this goal.

#### **4R1a. Summary results of measures (include tables and figures when possible)**

In the Spring of 2013, the College launched a comprehensive strategic planning process, described briefly above. This resulted in an update to the College's Mission Statement, the development of new Core and Aspirational Values, and a new vision statement for the College.

The mission, vision, and value statements were distributed in draft form to the entire campus at the Fall 2013 convocation and delivery of the State of the College Address. Feedback was gathered from the campus community on the proposed changes and addressed in the final versions. The Board of Trustees approved the new mission, vision and value statements on September 18, 2013.

LCCC uses its surveys of employee engagement and satisfaction to assess how well it is integrating the mission, vision, and values into the cultural fabric of the Institution. For example, the Ruffalo Noel-Levitz CESS asked specific questions in this regard. [Table 4R1-1](#) presents relevant historical results.

[Table 4R1-2](#) presents the most recent results, using the new LCCC Employee Experience Survey; the table includes a conversion of the College's six-point scale to a five-point scale for comparison to historical data.

#### **4R1b. Comparison of results with internal targets and external benchmarks**

LCCC's model of continuous improvement necessitates the establishment of improvement goals for major indicators. Thus, internal targets are generally as simple as: to see continuous improvement each year until a benchmark is met. Where available, the College uses external benchmark data to determine how it is performing compared to peer institutions or state, region, or national averages. Illustrated in the previous tables, LCCC has made sustained, and steady improvement in its survey items, showing the desired improvement since 2010.

The Ruffalo Noel-Levitz CESS provides mean scores for an institutional comparison group (see [Table 4R1-3](#)). LCCC has consistently lagged behind the comparison group averages. However, two important results are worth noting. First, LCCC has made year-over-year improvements with double-digit percent increases while the comparison group mean has remained flat. Second, in 2018 LCCC appears to have reached the national means for nearly all items.

#### **4R1c. Interpretation of results and insights gained**

LCCC is making sustained progress in the integration of the Institution's mission, vision, and value statements. It is evident the integration of these elements within and alignment across major institutional processes, combined with the purposeful allocation of institutional resources, have increasingly placed LCCC's purpose at the heart of the Institution and its people. The College is committed to continuing its efforts to institutionalize the mission, vision and values, with the goal of being the pacesetter when compared to national benchmarks.

#### **4I1. Based on 4R1, what process improvements have been implemented or will be implemented in the next one to three years?**

LCCC has integrated the mission, vision, and values within its major institutional processes. In addition, College leaders have been expected to demonstrate their commitment to the mission, vision and values in their work and behaviors, with an emphasis on communication. These efforts have produced positive results. However, the College recognizes that more closely aligning these mission elements with the individual roles of its employees will lead to more integration of these elements in all systems and processes.

To that end, the College is working on two specific process improvements:

1. The integration of mission and values criteria within the employee recruitment and hiring process. LCCC realizes it can more purposefully screen and select candidates for employment who demonstrate an alignment with the mission and values; and
2. As part of the strategic plan, the College is designing a robust performance evaluation model (system) that will aid in the accurate and consistent performance assessment of

employees enabling specific employee improvement within current roles and focused on the demonstration of institutional values and achievement of the mission.

## 4.2 - Strategic Planning

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Strategic Planning focuses on how the institution achieves its mission and vision. The institution should provide evidence for Core Components 5.B. and 5.C. in this section.

### 4P2: PROCESSES

Describe the processes for communicating, planning, implementing and reviewing the institution's plans and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Engaging internal and external stakeholders in strategic planning (5.C.3)
- Aligning operations with the institution's mission, vision and values (5.C.2)
- Aligning efforts across departments, divisions and colleges for optimum effectiveness and efficiency (5.B.3)
- Capitalizing on opportunities and institutional strengths and countering the impact of institutional weaknesses and potential threats (5.C.4, 5.C.5)
- Creating and implementing strategies and action plans that maximize current resources and meet future needs (5.C.1, 5.C.4)
- Tracking outcomes/measures utilizing appropriate tools (e.g. achievement of goals and/or satisfaction with process)

### 4R2: RESULTS

What are the results for communicating, planning, implementing and reviewing the institution's operational plans? The results presented should be for the processes identified in 4P2. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### 4I2: IMPROVEMENT

Based on 4R2, what process improvements have been implemented or will be implemented in the next one to three years?

## Responses

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### 4P2a. Engaging internal and external stakeholders in strategic planning (5.C.3)

Mentioned briefly in 4P1, the College utilizes a systematic, comprehensive, and inclusive process for strategic planning, which occurs every five to seven years. The planning process is

guided by the College's commitment to shared governance and begins with the organization of a strategic planning team comprised of individuals representing all internal constituencies at the College (e.g., the Trustees, executive team, faculty, staff, etc.). Team members are purposefully selected to ensure the engagement of all voices within the campus community.

The strategic planning process also purposefully engages external stakeholders through the environmental scanning component (5.C.3). Environmental scanning is a process that systematically collects and assesses relevant information to understand the environment in which the College currently exists and expects to exist in the future. Environmental scanning brings key external stakeholders into the strategic planning process, including representatives from K12, four-year institutions, the business sectors and business-related organizations, municipal government, higher-education coordinating bodies, and state government. They engage in the process by answering questions regarding the direction in which their organizations are headed; the challenges, opportunities, goals and aspirations that their organizations have for the next three to five years; and how LCCC can help their organizations, the community and state succeed.

The College then crafts its strategies and plans based on the analysis of this information. Thus, environmental scanning is one of the most essential first-steps in the strategic planning process.

#### **4P2b. Aligning operations with the institution's mission, vision and values (5.C.2)**

The College deploys operations to help sustain and improve the Institution's overall efficacy in meeting its mission. To ensure this, LCCC uses its service and support function assessment process. A service or support function is an institutional action or activity that is designed to achieve a specific purpose in alignment with the College's mission. As part of this process, each service and support function at the Institution has an articulated purpose (reason for its existence) that includes its alignment with the LCCC Mission, Vision, and Values, specific indicators and outcomes for what it is intended to specifically accomplish and identified stakeholders (5.C.2).

This process ensures that not only are the College's primary operational functions aligned with its mission, vision and values, but that they are continuously improving in their own efficacy, resulting in overall institutional improvement towards mission attainment.

#### **4P2c. Aligning efforts across departments, divisions and colleges for optimum effectiveness and efficiency (5.B.3)**

LCCC is committed to the active involvement of all internal College constituencies in the governance of the Institution through an ongoing participative process of [shared governance](#). This system begets accompanying policies, procedures, and practices under which all major institutional constituencies contribute to, and participate in, the major decisions determining the direction and operation of the Institution (5.B.3).

The College facilitates shared governance through a variety of processes, but the most central to this is the [College Council](#), a representative body designed to ensure the College is effectively and efficiently achieving the institution's mission and strategic plan priorities. College Council's

purposes include: (1) educating the college community regarding the processes, deliberations, and outcomes of the Council; (2) establishing College policies and procedures; (3) conducting institutional planning; (4) guiding the strategic and annual allocation of resources to improve institutional effectiveness; and (5) evaluating the performance and effectiveness of the institution. Collectively, these purposes form the foundation of the College's model of continuous improvement.

Two other processes are worth mentioning here as well. The first is the College's consultative feedback process. This process, predominantly used for the review and approval of policies and procedures (see [Procedure 1.2.11P](#)), is also utilized to garner cross-campus feedback on major changes to the Institution, such as the establishment of a new strategic plan. The consultative feedback process disseminates the proposed new/amended policy, procedure, or document to the entire campus community for review and input.

The second process is that of developing and deploying strategic plan strategies. Mentioned previously, the strategic plan goals and strategies are integrated into process for institutional planning and resource allocation. But these strategies are also designed to develop and encourage interdisciplinary, cross-departmental collaboration. Through the collaborative strategic planning process, Institution-wide goals are established with accompanying strategies that require or encourage interdisciplinary teams to work on their implementation and evaluation.

#### **4P2d. Capitalizing on opportunities and institutional strengths and countering the impact of institutional weaknesses and potential threats (5.C.4, 5.C.5)**

The College's strategic planning process incorporates elements to ensure the Institution is capitalizing on opportunities and institutional strengths, while countering the impact of institutional weaknesses and threats. Specifically, the processes of environmental scanning (discussed above) and assessing strengths, weaknesses, opportunities, and threats (SWOT) ensure this is occurring.

Environmental scanning informs the Institution about both internal and external factors that may be currently impacting the College or are likely to impact it in the future. It is during this stage that the Institution gathers a sound understanding of its current capacity as well as external factors that may likely influence the Institution such as enrollment trends, demographic shifts, funding, economic changes, etc. Through the environmental scan and the SWOT analysis, LCCC identifies critical issues, draws conclusions and articulates assumptions about the future to inform systematic and integrated strategic planning (5.C.4, 5.C.5).

#### **4P2e. Creating and implementing strategies and action plans that maximize current resources and meet future needs (5.C.1, 5.C.4)**

LCCC's strategic planning process ensures that the College creates and implements strategies and action plans that maximize current resources and meet future needs. This process culminates in the establishment of a few broad, over-arching goals that LCCC hopes to accomplish. Strategic goals then drive operational strategies and unit-specific objectives. This continuity

ensures that the Institution's work and resources focus in areas that help accomplish those things identified as critical to more fully attain its mission.

As stated previously, the Institution's assessment practices and resource allocation processes integrate the Strategic Plan goals and operational strategies, and call for identification of other objectives from campus units to ensure Institutional effort and resources are allocated to those areas focused on helping the College meet its mission (5.C.1). As a reminder, the environmental scanning component of the planning process considers the current state of LCCC's own efficacy through the internal analysis and assessment of the College's KPIs as well as the external influences impacting the Institution currently or in the future (5.C.4).

#### **4P2f. Tracking outcomes/measures utilizing appropriate tools (e.g. achievement of goals and/or satisfaction with process)**

LCCC utilizes three primary processes for assessing its strategic planning process's efficacy, i.e., how well the process engages the campus community and how well the Institution achieves its strategic goals. The first is through assessing employee engagement in, understanding of, and commitment to the strategic planning process itself. This is accomplished through the annual employee satisfaction and engagement surveys described previously.

The second process is a formative evaluation process to assess strategic plan achievement, implemented in Fall 2015. In a similar fashion to the process used for strategic plan development, the College utilizes an inclusive group to track mid-plan progress on plan goals and strategies. For this evaluation process, the group is comprised of individuals who are most closely associated with the actions, activities and specific outcomes being assessed.

Finally, LCCC utilizes strategy-specific assessments to evaluate progress on strategic plan goals. These are typically summative in nature. For example, Goal 1 of the current strategic plan is to "increase the number of students earning high-value credentials by reinventing the College's programs and services to be designed for 21st century learners and aligned to drive the economic and social futures of Southeastern Wyoming". The Board of Trustees has emphasized this goal by passing a resolution to increase the number of credentials earned by LCCC students by five percent each year through 2022. A specific mechanism, charting annual credentials awarded, has been established to track progress towards this goal.

#### **4R2a. Summary results of measures (include tables and figures when possible)**

Results are presented in accordance with the three primary processes used by LCCC to assess efficacy of its strategic planning activities. First, [Table 4R2-1](#) presents results of the past employee surveys items pertaining to institutional planning.

Second, the strategic plan evaluation process resulted in the production of the 2016 Strategic Plan Progress Report, which provides formative [progress assessment](#) (pg. 11) on the implementation of plan goals and strategies.

Third, as mentioned previously, LCCC has developed specific tracking tools for the strategic plan goals and strategies. None is more important than the [completions tracking](#) report that has been established to assess progress towards the achievement of Goal 1 and the Trustee's completion goal. In addition, the College tracks the [number and type of credentials awarded](#).

#### **4R2b. Comparison of results with internal targets and external benchmarks**

Similar to the results and trends with the comparisons provided in section 4.1, it is clear that LCCC is making substantial progress on improving the engagement of employees and their satisfaction with the planning process at the College. And while increases in these results far outpace that of the [national comparison data](#), LCCC still lags behind that benchmark.

The strategic plan progress assessment is primarily a formative one and has no external benchmarks. However, during the 2015 refresh, LCCC had the internal target of having 30 percent progress completed (10 percent per year since the plan's 2013 implementation and anticipating three years until the plan's 2020 completion by the progress report's publication). The vast majority of the plan's goals and activities were well beyond that target and remain ahead of schedule at this writing.

As provided above, the completions tracking report incorporates the Trustees' goal as the College's target. Since tracking began, the College has exceeded that target twice.

#### **4R2c. Interpretation of results and insights gained**

The Institution continues to make progress and improvements across many domains, including its institutional planning. Illustrated in the results above, the College's employees are seeing increased alignment between the Institution's goals and objectives and its mission, feeling more involved in the planning processes, and satisfied that LCCC plans carefully. Although LCCC still falls below its national benchmarks on these measures, it is worth noting that while these benchmarks have remained flat (in one case actually decreasing), LCCC has made sustained growth.

Similarly, the progress the Institution has made on the advancement of its strategic plan is nothing short of amazing. As LCCC enters plan year six, the vast majority of its strategies have been or are nearly completed. More importantly, the Institution is seeing progress on its primary goal of student completions. It is worth noting that while LCCC has only exceeded the internal target (the Board of Trustees' completion goal) in two of the past five years, the College has had the five highest years for credentials awarded in its history during this time, while it has experienced enrollment declines. Moreover, the trend for student completions is back on an upswing and appears to be closing the gap towards the Trustees' goals.

#### **4I2. Based on 4R2, what process improvements have been implemented or will be implemented in the next one to three years?**

LCCC has entered the final two years of its strategic plan. To help the College and the campus community continue its progress towards completion of the plan, LCCC has developed a third

supplement to the plan titled [Focus](#), which focuses the remaining strategic plan work on three key areas:

1. Student Success
2. Inside LCCC
3. Campus Transformation

While the second and third focus areas reiterate the final elements of LCCC's strategic plan, the first consolidates the remaining work from Goal 1 and Goal 2 of the original 2013 plan and incorporates the College's significant Guided Pathways work. LCCC's participation in the [American Association of Community College's Guided Pathways 2.0](#) has provided a mechanism to bring these various "high impact practices" into coherence and essentially demonstrate integration of LCCC's work over the past year into a vastly improved and effective student experience at the College.

## 4.3 - Leadership

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Leadership focuses on governance and leadership of the institution. The institution should provide evidence for Core Components 2.C. and 5.B. in this section.

### 4P3: PROCESSES

Describe the processes for ensuring sound and effective leadership of the institution, and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Establishing appropriate relationship between the institution and its governing board to support leadership and governance (2.C.4)
- Establishing oversight responsibilities and policies of the governing board (2.C.3, 5.B.1, 5.B.2)
- Maintaining board oversight, while delegating management responsibilities to administrators and academic matters to faculty (2.C.4)
- Ensuring open communication between and among all colleges, divisions and departments
- Collaborating across all units to ensure the maintenance of high academic standards (5.B.3)
- Providing effective leadership to all institutional stakeholders (2.C.1, 2.C.2)
- Developing leaders at all levels within the institution
- Ensuring the institution's ability to act in accordance with its mission and vision (2.C.3)
- Tracking outcomes/measures utilizing appropriate tools

### 4R3: RESULTS

What are the results for ensuring long-term effective leadership of the institution? The results presented should be for the processes identified in 4P3. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### 4I3: IMPROVEMENT

Based on 4R3, what process improvements have been implemented or will be implemented in the next one to three years?

## Responses

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#### **4P3a. Establishing appropriate relationship between the institution and its governing board to support leadership and governance (2.C.4)**

At LCCC, the Board of Trustees has established a strong model of governance and leadership through which the Institution establishes the appropriate Board/institutional relationships. The process places policy in the domain of the Board of Trustees; the Board expects the President to establish administrative procedures that demonstrate how the Board's policy expectations are realized through the actions of the Institution.

LCCC's model of policy and procedure governance is operationalized through LCCC's [online policy library](#). The first chapter includes the Board's [governance philosophy](#), as well as key policies and procedures that establish expectations pertaining to governance and leadership. The College's commitment to [shared governance](#) and its process for [policy and procedure development](#) have been described earlier in this portfolio. In addition, the expectations of key roles and [responsibilities for the President/CEO](#) are defined in this section of the manual (2.C.4).

Finally, the College has established two evaluation processes to ensure both the Board and the President/CEO operate effectively, with the expected separation of powers. These processes include the annual [Board Self-Evaluation](#) and the annual [Evaluation of the President/CEO](#).

#### **4P3b. Establishing oversight responsibilities and policies of the governing board (2.C.3, 5.B.1, 5.B.2)**

As mentioned above, the Institution's process for establishing oversight responsibilities and policies of the governing board is its model of policy and procedure governance. The Board of Trustees adopts and adheres to Board policies that set the context for their governance. It is the Board's expectation that the President will establish and maintain effective and efficient administrative procedures to ensure the College's actions are in alignment with Board policy. The Board's series of governance policies, which include references to applicable Wyoming State Statute, clearly provide the foundation for the role and responsibilities of the Board of Trustees.

The Board's various policies, and the accompanying administrative procedures, range from department- or program-specific to College-wide. Whether program-specific or institutional in nature, all policies bear the imprimatur of the College and therefore require diligent review and official approval. Across this spectrum of policies and procedures, the Board is committed to ensuring collective input and shared governance in the development and approval of all policies and procedures regardless of the scope, intent and applicability (5.B.1). This intent is realized through the [College Council](#), the primary shared governance body of the Institution, and is central to the Institution's [policy development, review, and approval processes](#).

The Board of Trustees is knowledgeable about the Institution and provides the appropriate oversight of the College's fiscal and academic policies. Board policies form the basis of the processes to ensure this remains intact. For example, the Board's [Policy 1. 2.5](#) sets the overall responsibilities of the Board, including the responsibility for fiscal oversight and approval of the annual budget, for developing and maintaining written governing policies that address the

broadest levels of all organizational decisions and situations, for ensuring it meets legislative requirements, and for assessing organizational performance.

Subsequent Board policies further enforce the adherence to these responsibilities (5.B.2). Within its governance policies, the Board of Trustees has established a [Code of Ethics and Standard of Practice](#) and a [Conflicts of Interest](#) policy, which outline the expectations for how the Board should function. A central component of the Board's standards of practice is the commitment of the Board to demonstrate loyalty to the interests of the ownership, unconflicted by loyalties to staff, other organizations, or any personal interests as consumers of the College's services. Members of the Board of Trustees are also subject to the requirements established by Wyoming Legislation for addressing conflicts of interest. Those requirements include, but are not limited to, refraining from voting on or participating in any manner in any contract, rule or procedure in which the member (or his or her relative) has a substantial pecuniary interest and refraining from disclosing or using confidential information for personal gain in any matter before the Board of Trustees (2.C.3).

#### **4P3c. Maintaining board oversight, while delegating management responsibilities to administrators and academic matters to faculty (2.C.4)**

Through its [Delegation of Authority](#) process, the Board of Trustees delegates to the President the executive responsibility for administering policies adopted by the Board and executing all Board decisions requiring administrative action. The President, at his/her discretion, chooses the means through which these responsibilities are met. The President may delegate any powers and duties entrusted to him/her by the Board, but is specifically responsible to the Board for the execution of such delegated powers and duties (2.C.4).

#### **4P3d. Ensuring open communication between and among all colleges, divisions and departments**

Rooted in the Board of Trustee's commitment to shared governance described previously, LCCC believes in utilizing collaborative, interdisciplinary teams in the operations and governance of the Institution. None is more important to ensuring open communication across the entire college community than the College Council. Mentioned previously, and described in further detail in 4P1, the College Council serves as the primary shared governance group of the Institution and is charged with providing broad, two-way communication and feedback regarding issues of major organizational importance. The very design of the Council ensures connections to divisions and departments, as well as to and across all major constituency groups.

LCCC has established other bodies that help ensure open communication and collaborative problem solving. One such group is the College's Learning Leadership Team (LLT), comprised of key managers and directors at the Institution, such as directors from critical functional units (e.g., student services, public relations, etc.) and academic deans. The LLT, co-chaired by the Vice Presidents of Academic Affairs and Student Services, is focused on open, cross-institutional communication and collaborative problem solving for continuous improvement in the Institution's operations.

#### **4P3e. Collaborating across all units to ensure the maintenance of high academic standards (5.B.3)**

LCCC is committed to ensuring high academic standards are developed and maintained across the academy, as evidenced by the Board's [Academic Standards Policy](#). This is accomplished through the [Academic Standards Process](#) that establishes a like-named committee. The Academic Standards Committee's (ASC) primary function is to promote and maintain high academic standards, consistent with the College's overall mission, leading to student success. The ASC approves programs and curricula offered by the College that are relevant to identified community needs, have student learning outcomes comparable with curricula from peer institutions, are aligned with the entrance expectations for students' next step (e.g., next course level, transfer to a four-year curriculum, job entry, etc.), and are designed to promote student success. The ASC oversees the development and modification of programs, curricula, and student learning assessment in a manner that recognizes the interconnected nature of these functions within the College.

The ASC has broad, inclusive membership, and is jointly chaired by a faculty member and an academic dean. It includes individuals predominantly from instruction and academic affairs, as well as administrators and student services staff. The committee has various subcommittees (Program Review, General Education, and Student Learning Assessment, etc.) that further engage the campus community (5.B.3).

#### **4P3f. Providing effective leadership to all institutional stakeholders (2.C.1, 2.C.2)**

The College provides effective leadership to all stakeholders through its focus on its mission, vision, values, and achievement of its strategic plan priorities, evidenced throughout this category's responses. Mission, vision, values and strategic priorities have been designed and communicated to demonstrate that any and all stakeholders may assist the Institution to attain its goals and to continuously improve effectiveness towards meeting its mission. Although the Board of Trustees partners in many of the processes described herein, Trustees understand the Board's autonomous role and that it is solely responsible for preserving and enhancing the mission (2.C.1). The College balances the operationalization of activities that are inclusive, collaborative, and engage all major constituencies with a focus on objective analysis of needs and performance, allowing the Board to act in a way that considers interests of the internal and external community when making their decisions (2.C.2).

#### **4P3g. Developing leaders at all levels within the institution**

LCCC is committed to the development of institutional leaders from all major employee constituencies within the College. To this end, the College has developed its own professional development programs and has invested significant resources to support employee engagement in externally provided professional development opportunities (e.g., national conferences, continuing education programs, etc.). In addition, the College boasts a strong employee tuition waiver benefit, detailed in the [Employee Benefits Procedure](#) (pg. 5), that allows College employees at all levels to pursue college courses, certificates, and degrees at LCCC, at the University of Wyoming, or upon approval, at other institutions of higher learning.

LCCC also develops student leaders through a variety of avenues. Prior to Fall 2014, Student Government Senators, Student Ambassadors, Resident Assistants, and Campus Activity Board members were all trained independently and by the sponsors of those programs. To better utilize LCCC resources and share training that is beneficial to all student leaders, LCCC implemented the *Student Leadership Institute* in August 2014. Training includes topics such as communication, personality styles, team building, chaos management, critical thinking, suicide awareness certification, Title IX, FERPA, CPR certification, event planning and promotion, business skills, and diversity/sensitivity, as well as content specific to students' individual campus jobs.

#### **4P3h. Ensuring the institution's ability to act in accordance with its mission and vision (2.C.3)**

As evidenced within this section, the College has integrated and objective processes for developing its mission, vision, values, and strategic and operational plans, and for embedding within these processes shared governance that by design is inclusive of internal and external constituencies. Although this design is built upon the foundation of interpersonal relationships and actions, the very objectivity of these processes and their focus on the mission, performance measures, and strategic plan goals force the Institution, collectively and as individuals, to act in accordance with the mission and vision of the College. These actions occur at all levels, including the Board of Trustees, which has policy and processes (refer 4P3b above) to ensure its decisions are evidence-focused on how to best serve the Institution's mission and free from undue influence not in the best interest of the College or its mission (2.C.3).

#### **4P3i. Tracking outcomes/measures utilizing appropriate tools**

LCCC tracks outcomes related to the governance and leadership of the institutions through the annual employee satisfaction and engagement surveys process described previously. These surveys include specific items that gauge employee satisfaction with and awareness of many aspects related to governance, leadership, and communication at LCCC.

#### **4R3a. Summary results of measures (include tables and figures when possible)**

[Table 4R3-1](#) presents results of the past employee surveys items pertaining to governance, leadership, and communication. Most recently, mean employee satisfaction was approximately 3 (on a 5-point scale) for these items.

#### **4R3b. Comparison of results with internal targets and external benchmarks**

LCCC is making substantial progress on improving all item results pertaining to leadership at the College, as shown by the trends presented above. Stated in other areas within this category, the internal targets for LCCC are to see improvement in these items each year until, at which time we meet or exceed the national benchmarks. Increases in these results far outpace the [national comparison data](#), which are trending downward. While LCCC still lags behind national benchmarks, that gap is narrowing each year.

### **4R3c. Interpretation of results and insights gained**

The Institution continues to make progress and improvements across many domains, including its processes for leadership, governance, and communication. Illustrated in the results above, the College's employees are increasingly satisfied with the leadership and communication at LCCC. Although LCCC still falls below its national benchmarks on these measures, like in previous sections and results, LCCC has made substantial, sustained growth while the national benchmarks have actually decreased.

### **4I3. Based on 4R3, what process improvements have been implemented or will be implemented in the next one to three years?**

In all honesty, LCCC has not tried to implement any significant improvements in the area of leadership and communication. Rather, the College is working to allow its existing processes to mature across all generations of employees and stakeholders. While things the Institution is working on as part of its strategic plan will accelerate this maturity (e.g. Guided Pathways efforts, finalizing a competency-based employee development and performance management system, etc.), the College believes it is on the right path. LCCC is seeing improvements each year that will be sustained as it continues to adhere to the processes explained throughout this section.

## 4.4 - Integrity

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Integrity focuses on how the institution ensures legal and ethical behavior and fulfills its societal responsibilities. The institution should provide evidence for Core Components 2.A. and 2.B. in this section.

### **4P4: PROCESSES**

Describe the processes for developing and communicating legal and ethical standards and monitoring behavior to ensure standards are met. In addition, identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Developing and communicating standards
- Training employees and modeling for ethical and legal behavior across all levels of the institution
- Operating financial, academic, personnel and auxiliary functions with integrity, including following fair and ethical policies and adhering to processes for the governing board, administration, faculty and staff (2.A.)
- Making information about programs, requirements, faculty and staff, costs to students, control, and accreditation relationships readily and clearly available to all constituents (2.B.)

### **4R4: RESULTS**

What are the results for ensuring institutional integrity? The results presented should be for the processes identified in 4P4. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### **4I4: IMPROVEMENT**

Based on 4R4, what process improvements have been implemented or will be implemented in the next one to three years?

## Responses

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### **4P4a. Developing and communicating standards**

The College has high expectations for the ethical behavior and conduct of all individuals associated with the Institution. LCCC establishes standards for ethical behavior and adherence to

legal matters through the Board of Trustees policy and procedure [governance model](#). As described in Section 4.3, the Board adopts and adheres to policies that set the context for their governance. The Board expects the President to establish and maintain effective and efficient administrative procedures, developed within an environment embracing shared governance, to ensure the College's actions align with Board policy. The Board's [code of ethics and standards of practice policy](#) provides the foundation, and the President establishes administrative procedures to ensure these standards are carried out in the operations of the Institution.

The Board's policy on [Policy Development and Approval](#) and its accompanying [procedure](#) establish a rigorous, inclusive process through which the Board ensures broad, two-way communication regarding the Institution's practices, grounded in the ethical conduct and appropriate legal practices. Policy and procedure development, review, and recommendation to the President and the Board is one of the key processes of the College Council (described previously) and helps facilitate the College's commitment to shared governance. Policies and procedures are published publicly online in the [College's Policy Library](#).

#### **4P4b. Training employees and modeling for ethical and legal behavior across all levels of the institution**

LCCC develops legal and ethical behavior within the College's workforce through a robust offering of human resource development programs. For example, all new College employees participate in a new employee orientation program that, among other things, orients new employees to College policy and procedure including employee conduct (see [Policy 6.10](#) and [Procedure 6.10P](#) (pg. 2)), standards of practice, relevant legal parameters (e.g., Family Educational Rights and Privacy Act [FERPA]), etc.

Many other employee training programs also support legal and ethical behavior of employees. For example, all employees must complete a screening committee certification program before being allowed to serve on new employee search committees. This training includes expectations for conduct, confidentiality, and ethical participation in the recruitment and hiring processes of the Institution. Ethical behaviors and legal parameters are also covered in the mandatory LCCC basic supervisory training and Title IX training.

In addition to formal training, employees see ethical leadership modeled daily by administrators. Described previously within this section and in section 4P3 (Leadership) above, the Board of Trustees has adopted a code of ethics and standards of practice that they model and that they expect the College's executive leadership to model on a continual basis. This expectation for ethical and legal behaviors by the Board and its senior leadership is assessed annually through the Board's evaluation process as well as the 360° Feedback process incorporated into the annual performance evaluations of the President and President's Cabinet members. The 360° Feedback process includes an entire section devoted to integrity and trust.

#### **4P4c. Operating financial, academic, personnel and auxiliary functions with integrity, including following fair and ethical policies and adhering to processes for the governing board, administration, faculty and staff (2.A.)**

LCCC operates ethically and with integrity in its academic, financial, human resources, and auxiliary functions. The College has Board Policies and Administrative Procedures established for these areas, as well as many program or unit-level guidelines that ensure these functions operate with integrity (2.A.). The process for establishing the policies and procedures has been explained in greater detail previously within this systems portfolio.

For example, a variety of Board Policy and Administrative Procedures pertain to the fiscal and human resources operations of the College. These include the various sub-processes associated with accounting functions, auditing of the Institution's financial statement, investments, employment practices, etc. These examples can be found on the [College's Policy Library](#) under the [Finance](#) and [Human Resources](#) sections. Similar suites of policies and procedures exist for academics and other operational areas of the Institution.

**4P4d. Making information about programs, requirements, faculty and staff, costs to students, control, and accreditation relationships readily and clearly available to all constituents (2.B.)**

The College presents itself clearly and completely to its students and to the public with regard to its programs, requirements, faculty and staff, costs to students, control, and accreditation relationships through official outward-facing (public) institutional communication systems. The College's website, printed materials, and interpersonal communication processes (e.g., orientation, advising, etc.) contain all information the public needs to understand these items.

For example, the College provides a [compliance and consumer information webpage](#) with comprehensive information regarding the costs and institutional effectiveness as well as links to accreditation information. In addition the College's [catalog](#) and portal, [MyLCCC](#), provide information employees and students need to make informed decisions and provide sound advising. Also, the College routinely distributes information about school calendar deadlines, requirements for admission or registration, financial obligations, and other items of importance through digital announcements, press releases, video messages, radio messages, and digital message boards around campus.

In totality, the College has been effective in presenting itself clearly and completely to its students and to the public with regard to its programs, requirements, faculty and staff, costs to students, control, and accreditation relationships (2.B.).

**4R4a. Summary results of measures (include tables and figures when possible)**

LCCC employee surveys include custom items related to legal and ethical behaviors at the College. [Table 4R4-1](#) presents relevant historical results from the Ruffalo Noel-Levitz College Employee Satisfaction Survey (CESS). On three of the four items, respondents gave a rating of approximately 4 on a 5-point scale.

In addition, the College monitors and tracks a variety of other outcomes pertaining to institutional compliance with legal and ethical expectations. Examples include:

- LCCC continues to have clean financial audits demonstrating compliance with the fiduciary legal expectations for its operations. More specifically, in the last audit, no deficiencies in internal control over compliance were identified and considered to be material weaknesses (see 5R3a for a [copy of the letter](#), p. 56 and 60).
- Responses from the 360° Feedback component of President's Cabinet members' annual evaluations on areas on integrity/trust and policy compliance/application have most respondents indicating that Cabinet members meet or exceed expectations for these areas.
- Similarly, the [2018 results](#) from the President's 360° Feedback process show he meets or exceeds expectations of most respondents on integrity, trust and leadership.
- LCCC's Human Resources department conducts new employee orientations multiple times per year. Over the past three years alone, 109 (roughly 290 percent) of all employees have gone through this program.
- HR also tracks the total number of employee infractions of ethical use policies and, in the past three years, there has not been a single violation that led to disciplinary action.
- Since 2014, the College has had just two formal complaints filed with the Office of Civil Rights or the Equal Employment Opportunity Commission. Both were resolved without findings (see [letter one](#) and [letter two](#)), while providing opportunities to improve LCCC's processes.

#### **4R4b. Comparison of results with internal targets and external benchmarks**

The College's internal target for employee survey items is simply to increase annually, especially with those referenced above as they are custom items LCCC includes in the survey, and thus they have no national benchmark. Establishing benchmarks for many of the other items the College monitors is problematic; in many ways the desired target or benchmark is zero. But overall, the College aspires that these items return few negative outcomes, and, if they do, the College works, with demonstrated success, to ensure they are resolved quickly and completely.

#### **4R4c. Interpretation of results and insights gained**

Similar to other results in this chapter, LCCC has witnessed significant gains in the responses on the employee satisfaction and engagement surveys. Also similar, the national comparison benchmarks have essentially remained flat during this same time period. LCCC still has some room to improve to reach or surpass the benchmarks; however, it is evident that the Institution is on the right path.

It is worth noting the substantial work LCCC has done since the previous systems portfolio on employee development processes and, more importantly, processes to handle challenges that may arise from its employees. This work has produced the results intended with few issues surrounding employee violation of legal or ethical expectations and rapid, successful institutional responses to those few issues that rise to the level of institutional response.

#### **4I4. Based on 4R4, what process improvements have been implemented or will be implemented in the next one to three years?**

LCCC is focused on three areas of improvements that pertain to specific processes intended to ensure the legal and ethical behavior of its employees and fulfill its societal responsibilities. These include the following:

Over the past few years, LCCC has invested heavily in the development of a robust process for mitigating and responding to issues of alleged harassment and/or sexual misconduct. Given the changing landscape with federal regulation and directives and the rise of the public awareness around campus safety, LCCC has been a leader in the design of a comprehensive structure and process for education, investigation, and response.

For example, LCCC has implemented mandatory Title IX training for all employee and all students, engendering an awareness of the duties to notify, identifying potentially concerning behaviors, their own conduct, etc. Likewise, the College has implemented an integrated process for Title IX investigations that include a trained, knowledgeable corps of Title IX investigators from all areas and employee classifications who are empowered to objectively investigate, report, and record the circumstances of Title IX cases. For the past five years LCCC has also been a leader in the region by hosting an annual Title IX Investigator training for regional higher education institutions. Finally, LCCC has improved significantly in its case management system allowing for better tracking and archiving of cases.

LCCC has also begun the early work to improve upon the policies, procedures, and processes for the education and reporting of both the Board of Trustees and all employees around their responsibilities to uphold integrity, standards of practice, and conflicts of interest. Although LCCC has had a good process in place for many years (referred to earlier in this section), complexities of external rules, regulations, and expectations, as well as advances in technology, provide the opportunity to improve how the College instills and complies with expectations for ethical behaviors and standards. Updated and/or new policies and procedures have been drafted and are in the consultative review and feedback stages. From there, education/training offerings will be developed and deployed, and improved systems for reporting, compliance monitoring, and response will be created.

Finally, and referenced in Chapter 6, a robust performance evaluation model (system) is being developed to aid in the accurate and consistent performance assessment of LCCC's people. This will enable specific employee improvement within current roles and competency-based, focused development toward the fulfillment of future roles at LCCC. Accomplishing this goal will require aligning employee job performance with meaningful, role-focused competency models in order to foster shared understanding and establish clear expectations across LCCC; providing employees with consistent performance feedback; enabling better coaching on the part of supervisors; allowing for better institutional tracking and reporting of employee performance across levels and groups; and tying employee development and performance assessment to function outcomes.

## **Category Five Introduction: Knowledge Management and Resource Stewardship**

During the last four years, the College has realized many visible advances through collaboration of Institutional Research (IR), Integrated Technology Services (ITS) and Administration and Finance (budget/plant operations). Furthermore, the College made good progress in advancing its processes' maturity levels, and it responded to several improvement opportunities identified in its 2014 Appraisal Feedback Report (stakeholder needs alignments, expanded benchmarking, and performance target identification).

The College has significantly increased its systematic usage of stakeholder feedback and integrated it into operational planning and process design. The Budget Process Advisory Committee regularly reports feedback-informed improvements to LCCC's College Council. Both ITS and IR operationalized advisory committees with broad College representation that help with planning and process improvement. ITS, IR, and Plant Operations implemented online project request formats. Administration and Finance, IR, and ITS initiated client satisfaction surveys. The College's electronic survey resource (Baseline) has realized steady gains in project volume over three years.

To expand user access to benchmarking resources, IR now offers a virtual office site dedicated to benchmarking data (e.g., National Community College Benchmark Project data). IR also provides comparative data with its Voluntary Framework for Accountability dashboard and access to the Wyoming central data warehouse.

LCCC vastly expanded its continuous quality initiative (CQI) infrastructure by adding a campus-wide annual assessment process for service and support functions (115 plans). This CQI initiative includes establishing operational outcomes based on identified stakeholders' needs, setting performance targets, and mapping processes.

ITS added several user-friendly technology solutions. It recently implemented a new campus portal system, improved video-conferencing (Zoom), helped operationalize a new LMS, and streamlined college email for students and employees (Office 365). Recent self-service applications improved online class registration and enabled employees to monitor operational budgets in real time.

The College completed a significant portion of the 2016 Campus Master Plan initiatives, including completion of two new buildings, a crossroads concept for student engagement, multiple renovations, and wayfinding enhancements. Building expansion was matched with efficiencies in fiscal management. Debt service monitoring/reporting efficiencies led to the refinancing of bond debt that achieved costs savings and better revenue stream alignment for improved fiscal operational stability.

To better manage physical risks, the College contracted with an external risk manager and initiated multiple safety programs. ITS dedicated a position to lead cybersecurity efforts and helped implement mandatory privacy security training for employees. LCCC implemented a data privacy plan using a committee of key data stewards to manage controls.

Capacity building for cybersecurity and data security has created alignments among the Registrar, Financial Aid, ITS, IR, and Sponsored Awards. Recent technology solutions (portal, Zoom, SharePoint) have encouraged collaboration that facilitates integration among units. Internal peer-review of functions assessment planning expands knowledge and transparency across functional areas and facilitates alignments. Self-service options and Tableau dashboards bring real-time data to users.

Knowledge and Resource Management processes are at the aligned level of the quality maturity matrix with some features of integration emerging. Results are largely systematic (archived, analyzed with trend data, and shared) with some pockets emerging at the alignment level.

## 5.1 - Knowledge Management

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Knowledge Management focuses on how data, information and performance results are used in decision-making processes at all levels and in all parts of the institution.

### 5P1: PROCESSES

Describe the processes for knowledge management, and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Selecting, organizing, analyzing and sharing data and performance information to support planning, process improvement and decision making
- Determining data, information and performance results that units and departments need to plan and manage effectively
- Making data, information and performance results readily and reliably available to the units and departments that depend upon this information for operational effectiveness, planning and improvements
- Ensuring the timeliness, accuracy, reliability and security of the institution's knowledge management system(s) and related processes
- Tracking outcomes/measures utilizing appropriate tools (including software platforms and/or contracted services)

### 5R1: RESULTS

What are the results for determining how data, information and performance results are used in decision-making processes at all levels and in all parts of the institution? The results presented should be for the processes identified in 5P1. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### 5I1: IMPROVEMENT

Based on 5R1, what process improvements have been implemented or will be implemented in the next one to three years?

## Responses

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**5P1a. Selecting, organizing, analyzing and sharing data and performance information to support planning, process improvement and decision making**

The College uses an overarching [Institutional Research \(IR\) meta-process](#) to practice knowledge management that informs decision-making, improvement, and planning across the College. First, based on its stakeholder feedback systems (further outlined in 5P1b), the IR department selects data and information to support planning, process improvement, and decision-making. Steps two and three ensure that reports and research are properly designed and that staffing and software resources are available to organize and analyze the selected data and information. Step four provides data and information sharing through a variety of mechanisms (described in 5P1c below). The final step, conducted as part of the IR department's annual planning and assessment, evaluates the effectiveness of this process and identifies areas for improvement.

### **5P1b. Determining data, information and performance results that units and departments need to plan and manage effectively**

The College's process for determining data, information and performance results that units and departments (stakeholders) need to plan and manage effectively has several components. The IR office continuously monitors the College's strategic planning and other mission-centered priorities to forecast the measures programs and units will need to demonstrate performance toward meeting those priorities (e.g., student completion) and provides large-scale access of these data ([KPIs](#)) to programs and units. Every [KPI measure](#) (pg. 8) has a rationale aligning it with an institutional priority or value statement.

For specific data/information requests, the IR department uses an iterative process that consists of communicating with project requesters to clarify their needs and develop a framework for the report/analysis, followed by contact with the requester after project delivery to determine if the need has been met or if refinements are required. This process is repeated until the project requester is satisfied. For broader Institution-wide input, the IR office has implemented an [annual survey](#), which includes items that address the needs of units and departments. Results are analyzed, with input from the [IR Advisory Council](#), to determine areas of unmet need and to develop process improvement strategies.

### **5P1c. Making data, information and performance results readily and reliably available to the units and departments that depend upon this information for operational effectiveness, planning and improvements**

The College uses a knowledge distribution process to make data, information and performance results readily and reliably available to the units and departments that depend upon this information for operational effectiveness, planning and improvements. It includes: 1) automatic delivery of monitoring reports to stakeholders' email accounts; 2) providing data resources at the [IR Virtual Office](#), accessible to all employees; and 3) maintaining publicly available [online information](#). Additionally, data visualizations using Tableau have recently been implemented to expand data access for [academic program analysis](#) (pg. 2) and [institutional competency assessment](#). IR has expanded programs' benchmarking opportunities through participation in the Wyoming Central Station (CSI), which enables programs to compare their performance to that of other Wyoming community colleges on metrics such as [course success rates](#). IR displays [benchmarking data resources](#) for users on its virtual office site.

Over the last four years, the College has more systematically integrated data into institutional decision-making through integrating KPI data into program review self-studies, which affect decisions about action-planning. Faculty and staff embed IR data into annual academic and non-academic function assessment plans that inform programming changes.

**5P1d. Ensuring the timeliness, accuracy, reliability and security of the institution's knowledge management system(s) and related processes**

Since 2014, the College has significantly strengthened its data governance structure, which ensures the timeliness, accuracy, reliability and security of the Institution's knowledge management system(s) and related processes. This structure includes a [Data Quality Committee \(pg. 2\)](#), responsible for creating, implementing, and maintaining data standards at the institutional level and resolving institutional-level data integrity challenges to ensure the highest possible level of data quality, accuracy, and consistency for reliable internal and external reporting. The Director of IR actively collaborates in the Data Governance/IR Council, which fills the same functions for the Wyoming community college system.

Information security is attained through the development, maintenance and continuous improvement of both technological and human systems. Responding pro-actively to the Gramm-Leach-Bliley Act (GLBA), the College recently developed a multi-faceted approach to build the Institution's data security capacity:

- LCCC formed the Privacy Protection and Information Security working group (financial aid, registrar, ITS, sponsored awards) to manage data security development and compliance at the College.
- The College adopted [IT Security Policy 8.6](#) to ensure the protection of institutional information and is developing a data breach policy.
- LCCC conducted three assessments ([Federal Financial Institutions Examination Council Cybersecurity Assessment-FFIEC](#), a Homeland Security assessment, and penetration testing by a private vendor) to identify security risks, and charged ITS staff with analyzing the results and implementing risk-mitigation strategies.
- The College implemented data security processes including monitoring e-mail content, deploying a cybersecurity incident reporting system, upgrading hardware, and including data security expectations in RFPs and license agreements.

Finally, the College protects its data resources, such as Colleague, with a backup system in case of crisis situations.

**5P1e. Tracking outcomes/measures utilizing appropriate tools (including software platforms and/or contracted services)**

The College has implemented an annual [function assessment and planning](#) (pg. 3) process to track outcomes/measures utilizing appropriate tools. Functional areas across the College, including IR and ITS, must establish outcomes for key functions (including software platforms and/or contracted services); identify stakeholders, processes, and measures related to those outcomes; analyze measurement results, including data trends; and plan for improvement. The

function assessment and planning process includes a peer review component as well as review by institutional leadership to ensure that outcomes and measures are appropriate for the identified processes.

Using the function assessment process, the following measures/outcomes are provided as examples with appropriate assessment tools:

- IR and ITS both have implemented stakeholder surveys and track project completion times.
- ITS monitors Help Desk user requests and collects user satisfaction feedback.
- ITS also monitors system planned (for maintenance) and unplanned down-time.
- To ensure server sustainability, the database administrator monitors server activity and investigates unusual occurrences.
- Finally, ITS uses the [Federal Financial Institutions Examination Council Cybersecurity Assessment-FFIEC](#) (pg. 60) to evaluate systems' security.

IR and ITS staff collaboratively monitor and resolve issues identified by the Wyoming CSI data quality assurance processes, with the goal of no data errors reported each month.

#### **5R1a. Summary results of measures (include tables and figures when possible)**

The IR Department piloted an annual survey to collect [stakeholder feedback](#) and evaluate the effectiveness of the above-described processes in June 2018. The majority of respondents agreed or strongly agreed with survey items, indicating general stakeholder satisfaction with IR processes. The IR department also collected information on on-time completion of ad hoc projects for FY2018. The majority (54%) were completed on time.

ITS reported a three-year average of 83 percent of [Support Desk requests](#) completed within five working days. FFIEC Cybersecurity Assessment results placed LCCC in the Minimal Inherent Risk Category and indicated that the College met the minimum Baseline Level of Cybersecurity Maturity for three of 30 domains. A recent external audit found the College in compliance with the GLBA data security requirements. (This was the first time LCCC's audit included these standards.)

Thus far, ITS and IR have been able to sustain the zero errors per month rate for the data submitted to the CSI. Other IR and ITS measure results will be available when the 2018-19 function assessment process is completed.

#### **5R1b. Comparison of results with internal targets and external benchmarks**

Beginning in Spring 2018, most of the College's non-academic functions maintain assessment plans (119) that contain outcomes and internal target descriptions, a remarkable increase of target setting over the 2014 portfolio performance. Although IR earned satisfaction ratings over 70%, its internal target of 80% agreement was unmet for any of the items on the IR stakeholder survey. External benchmarks are not available for these measures since the instrument was locally developed. The IR staff also value on-time completion and expect to deliver most (at least 90%)

projects by the requested delivery date. However, from the data collected in the ad hoc project management system, it appears that this expectation was unmet in FY2018.

While ITS reported that 83% of requests to the Support Desk were completed within five working days, it did not meet its internal target of 85%. The College expects to meet 100% of the FFIEC cybersecurity assessment standards; 2018 assessment results (3 of 30, 10%) fell short of this expectation. The College's performance on the FFIEC assessment must be in perspective; most institutions have not yet built the expected cybersecurity capacity.

LCCC continues to meet its internal target for zero error rates relating to Wyoming's CSI data quality assurance standard.

### **5R1c. Interpretation of results and insights gained**

Despite initial goals not being met, the majority of respondents to IR's internal survey gave positive feedback. There was a relatively low response rate (22%) for the initial survey; only 58 of these indicated any interaction with the IR department during fiscal year 2017-18. Because of the low response rate, the results cannot be generalized to the entire population of internal stakeholders. An analysis of the ad hoc project management data revealed that the data collected were insufficient to calculate the percentage of projects delivered by the requested date. (For IR staff, the project work continues after delivery; projects are not considered complete until documentation is created and stakeholders acknowledge that the delivered report/research answered their need.)

For ITS, the data show improvement in Support Desk request completion rates over the last three years, likely due in part to personnel training, professional development and an increased focus on closing tickets in a timely manner. The results could be influenced by a variety of factors including the complexity of reported issues/requests and the availability of resources. Further analysis and better data collection (i.e., categorize completion times by request type) are needed to determine the source of the delays and continuously improve performance.

### **5I1. Based on 5R1, what process improvements have been implemented or will be implemented in the next one to three years?**

To improve the collection of stakeholder feedback and gain better understanding of the results, IR staff plan to:

- Change the timing of annual survey so more stakeholders are on campus;
- Conduct focus groups and/or interviews with stakeholders to gain deeper insights into the results, especially in areas where the results fail to meet internal targets; and
- Increase campus stakeholder education efforts, including information on IR's mission, resources, and processes.

To improve ad hoc project management data, additional variables have been added to IR's project tracking system. Whenever the delivery date is not met, explanatory notes (technical issues, inadequate lead-time, clarification needed, etc.) will be included. Additionally, IR is

hiring an additional staff member to increase capacity and improve the on-time delivery rate for ad hoc projects.

ITS function assessment planning revealed that its Support Desk ticket system was too cumbersome, making data extraction and organization laborious and meaningful analysis difficult. A new system ([Samanage](#)) with better administrative controls and data analysis tools, was implemented in spring 2018. This new system also improves communication through client e-mail notification at key points (e.g., when a request is received, who is assigned to the request, etc.), and sends clients a satisfaction survey.

In response to the FFIEC cybersecurity assessment (see 5P1d), the College developed a privacy information security plan, created the Privacy Protection and Information Security (PPIS) working group of compliance owners, and identified an IT staff person to oversee cybersecurity development and manage the mitigation of the 27 areas that fell below the FFIEC standards. While these are improvements in themselves, these efforts are regularly producing additional improvements. For example;

- IT and Human Resources collaborated to implement Security Mentor, which delivers mandatory training to LCCC employees every other month,
- IT staff plan to implement e-mail warning messaging for e-mails coming from outside the institution, and
- Contract language is regularly updated to ensure third-party vendors follow cybersecurity best practices.

To improve knowledge management, LCCC has also:

- Implemented a new campus portal that makes data access more effective.
- Operationalized SharePoint on campus making shared document development more effective.
- Implemented Tableau, which allows the IR team to analyze, display and report on data that can be updated and delivered to stakeholders more easily and efficiently.
- Expanded bandwidth to improve online research.
- Expanded benchmarking resources by participating in the Voluntary Framework for Accountability (VFA); the VFA provides student progress and success metrics that are embedded in Guided Pathways 2.0 assessment.
- Collaborated with Wyoming's CSI, which makes comparative data accessible among all seven community colleges.

Finally, the College is considering purchasing a student-facing platform (such EAB-Navigate and Civitas) that offers scalable guidance to each student; online advising with real-time student-advisor interactions; collaboration tools for students, advisors, and faculty, and analytics modeling to improve student goal attainment, among other features.

## 5.2 - Resource Management

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Resource Management focuses on how the resource base of an institution supports and improves its educational programs and operations. The institution should provide evidence for Core Component 5.A. in this section.

### **5P2: PROCESSES**

Describe the processes for managing resources, and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Maintaining fiscal, physical and technological infrastructures sufficient to support operations (5.A.1)
- Setting goals aligned with the institutional mission, resources, opportunities and emerging needs (5.A.3)
- Allocating and assigning resources to achieve organizational goals, while ensuring that educational purposes are not adversely affected (5.A.2)
- Tracking outcomes/measures utilizing appropriate tools

### **5R2: RESULTS**

What are the results for resource management? The results presented should be for the processes identified in 5P2. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### **5I2: IMPROVEMENT**

Based on 5R2, what process improvements have been implemented or will be implemented in the next one to three years?

## Responses

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### **5P2a. Maintaining fiscal, physical and technological infrastructures sufficient to support operations (5.A.1)**

The College maintains fiscal, physical and technological infrastructures sufficient to support operations through several mechanisms, including its budget allocation processes, maintenance processes, the Campus Master Plan and the Information Technology Governance Committee (ITGC).

As shown in LCCC's [Budget Process Map](#) (pg. 2-3), budget allocation processes include numerous feedback mechanisms and community-driven oversight of allocations. Two committees, comprised of broad cross-functional representatives, develop and oversee budget processes. The Budget Process Advisory Committee (BPAC) defines and executes the process, while the Budget Resource Allocation Committee (BRAC) reviews proposed allocations to ensure budgeting criteria, including strategic plan alignment, are met. BRAC makes recommendation to College Council, LCCC's shared governance body, which also reviews proposed allocations for strategic plan alignment and to ensure sufficient fiscal resources to support operations (5.A.1).

The processes for maintaining the physical infrastructure fall largely within Plant Operations, which utilizes processes for three types of maintenance projects: major maintenance, minor maintenance, and preventative maintenance. While funding mechanisms and timeframes vary with the maintenance type, all three processes include regular identification and prioritization of maintenance needs using stakeholder input, staff expertise, and data collected in the Computer Maintenance Management System (CMMS) which allocates human/physical resources to manage recurring maintenance needs. Major maintenance is funded biennially through State of Wyoming processes; these projects are overseen by the state's Construction Management Division and the Board of Trustees' (BOT) Facilities and Finance Committee. Minor maintenance and preventative maintenance are internally funded through the annual budget allocation process, including one-time funding requests for minor maintenance (5.A.1) .

The College's [Campus Master Plan](#) includes current facilities usage and condition data as well as LCCC's vision for its future physical growth. The plan is developed and updated through a process that includes collecting internal and external stakeholder input through town-hall style meetings; proposed expansion displays; the College's shared governance structures, including College Council; and public BOT meetings. The campus master planning process is closely aligned with LCCC's strategic planning process and occurs every five years, following Wyoming Community College Commission requirements (5.A.1).

LCCC's ITGC, a cross-functional group established in 2016, developed the [ITS Strategic Plan, 2017-2020](#) to assist ITS with the technological infrastructure management. The ITS plan includes operational goals that define processes. For example, ITS annually audits student computing resources ensuring that no computer is over five-years old (the standard warranty period). ITS also monitors critical infrastructure and software solutions to ensure operational efficiency, including wired and wireless connectivity, systems to protect against malicious activities, security and access controls, and backup and data recovery solutions. ITS also utilizes service and maintenance agreements with vendors and has established hardware/software replacement cycles to maintain technological infrastructures sufficient to support operations. Finally, ITS monitors IT resources, such as computers and servers, and relates them to number of ITS staff with [comparisons with other Wyoming community colleges](#) (5.A.1).

The College demonstrates how it satisfies criterion 5.A.1 as it relates to human resources in categories 3P1c and 3P1d.

### **5P2b. Setting goals aligned with the institutional mission, resources, opportunities and emerging needs (5.A.3)**

The College's processes for setting goals that are aligned with the institutional mission, resources, opportunities and emerging needs are embedded in other key processes. The strategic planning process and campus master planning process, both driven by LCCC's mission, include stakeholder input and environmental scanning, which help the College to identify opportunities and emerging needs. These opportunities and needs then inform the goals established in plans. The Institution's budgeting process ensures that available resources are allocated in alignment to the mission and strategic goals.

Academic programs and functional areas set goals (outcomes) through annual assessment planning and five-year review processes. Through these processes, faculty and staff demonstrate area alignment with the College's mission, identify stakeholders and their needs, and establish outcomes based on those needs. Individual departments, such as Integrated Technology Services (ITS) develop strategic planning ([ITS Strategic Plan, 2017-2020](#)) responsive to advisory committees (Information Technology Governance Committee). Again, the budgeting process ensures alignment between goals, mission, and resources (5.A.3).

### **5P2c. Allocating and assigning resources to achieve organizational goals, while ensuring that educational purposes are not adversely affected (5.A.2)**

The College's annual budgeting and new position prioritization processes ensure that LCCC allocates and assigns resources to achieve organizational goals, while ensuring that educational purposes are not adversely affected. Through these processes, budget managers demonstrate how their budget requests, including new positions and one-time funding requests, support strategic plan goals. Both processes include review by various groups, including the College Council, to evaluate requests' alignment with the College's mission and goals. The College Council makes recommendations to the President, who then proposes the annual budget to the Board of Trustees (BOT); the BOT approves the budget. At each stage of the budgeting process, the groups involved evaluate the impact on both the College's mission and organizational goal achievement; these processes are intentionally designed to accomplish the objective of ensuring educational purposes are not adversely affected (5.A.2).

### **5P2d. Tracking outcomes/measures utilizing appropriate tools**

The College uses several mechanisms to track outcomes of its resource management processes. These include the [annual customer survey \(pg. 3\)](#) conducted by the Administration and Finance (A&F) Division to collect feedback on services and processes; the Colleague Financial System (CFS) to manage financial resources; the Computer Maintenance Management System (CMMS), which provides a focused, data-driven process for efficiently and effectively managing physical infrastructure (see [CMMS Location Cost Data](#)); and Visio (see [LCCC Student Account Process](#)), used by ITS to document and evaluate processes for managing technological resources.

Additionally, the College measures the effectiveness of many processes by the completion of related projects (e.g. major maintenance, software implementation, etc.). Other outcomes and

measures will be identified through the recently implemented function assessment planning process (see sections 5P1 and 2P3).

### **5R2a. Summary results of measures (include tables and figures when possible)**

Two years' worth of A&F [customer survey data](#) show stakeholders are generally satisfied with resource management processes overseen by this division.

[Table 5R2 – Resource Management Relational Table](#) provides detailed information on results for measures identified in 5P2d above, including recently completed projects. Some highlights are presented below:

- Completed 4,185 of 4,196 preventative maintenance work requests (99.8%) for 2017-18; of these, 75% were completed within seven days and 100% within 30 days.
- Completed two new buildings as well as several renovation projects in the Campus Master Plan.
- Improved physical infrastructure through several projects, including lighting upgrades, roof replacements, HVAC upgrades, and new exterior wayfinding signage.
- Implemented a new LMS and a new campus portal.
- Introduced a new building security system.
- Implemented a disaster recovery system for critical data.

### **5R2b. Comparison of results with internal targets and external benchmarks**

For the most part, internal targets are on-time project completion within allocated budget. Table 5R2 presented above shows that most physical and technological infrastructure projects have met or are on track to meet these targets.

Some targets have been established through function assessment planning. The preventative maintenance work order completion rate exceeded the target of 90%. Additionally, completion time met expectations (75% completed within seven days and 100% within 30 days).

Internal targets have not yet been established for the A&F survey results; however, data collected so far show year-to-year improvement on most items.

To monitor appropriate disbursement of revenue to its educational purposes, the College tracks its [expenditures by program](#) and compares it with other Wyoming community colleges. The College surpasses the state average for instruction and academic support for FY2017 (**5.A.2**).

The College moved towards its quality goals for expanded access, user friendliness, mobile application with the introduction of the new campus portal, Zoom, and Tableau (matches ITS strategic goals displayed in 5.2b).

Internal targets for other measures will be established through the function assessment process. Due to the nature of the measures used, external benchmarks are not available.

### **5R2c. Interpretation of results and insights gained**

As demonstrated by the results presented above, most resource management processes are working well and meeting College expectations. With respect to the budget process, LCCC identified the critical importance of stakeholder feedback mechanisms as well as a need for better tools for department budget managers.

Physical infrastructure projects have been completed at a faster pace than expected due to an increased focus on spending budgetary allocations. While these projects have been meeting College time and budget expectations, planned new buildings and aging current structures are creating an increased demand for resources that may affect target performance in the future.

Analysis of ITS projects and expectation identified the benefits of increased internal and external collaboration. Internal collaboration guides ITS staff in the selection and implementation of technology that better meets stakeholder needs and improves fiscal and staff resource management. Through collaboration with the state agencies, including other Wyoming community colleges, LCCC achieves savings and, more importantly, improves systems for student success. For example, the statewide K-20 implementation of Canvas represents an annual savings of \$55,000 for LCCC and offers students a common LMS, enhancing their ability to transition between Wyoming educational institutions.

### **5I2. Based on 5R2, what process improvements have been implemented or will be implemented in the next one to three years?**

Responding to stakeholder feedback, LCCC implemented several budget process improvements:

- Expanded timelines, allowing budget managers adequate time to prepare annual budget requests,
- Strengthened budgeting procedures for infrastructure needs, and
- Implemented the CFS self-service component, which provides tracking and reporting tools for budget managers. This increased transparency and improved department-level budget management.

Plant Operations leveraged the CMMS, which provides a focused, data-driven process for efficiently and effectively managing physical infrastructure processes, including scheduling projects, drafting inspection checklists, and producing guidelines to improve process consistency and reliability.

Planned improvements include:

- Developing an evaluation plan for the relationship between budget decision-making rubrics and the College's strategic plan.
- Implementing an electronic travel requisition/reimbursement process.
- Expanding feedback mechanisms to assess the effectiveness of A&F processes.
- Update the Campus Master Plan and identify areas for improvements.
- Renovate and expand the [Fine Arts building](#), adding a performance hall.

- Construct a new [Residence Hall](#).

## 5.3 - Operational Effectiveness

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Operational Effectiveness focuses on how an institution ensures effective management of its operations in the present and plans for continuity of operations into the future. The institution should provide evidence for Core Component 5.A. in this section.

### 5P3: PROCESSES

Describe the processes for operational effectiveness, and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Building budgets to accomplish institutional goals
- Monitoring financial position and adjusting budgets (5.A.5)
- Maintaining a technological infrastructure that is reliable, secure and user-friendly
- Maintaining a physical infrastructure that is reliable, secure and user-friendly
- Managing risks to ensure operational stability, including emergency preparedness
- Tracking outcomes/measures utilizing appropriate tools

### 5R3: RESULTS

What are the results for ensuring effective management of operations on an ongoing basis and for the future? The results presented should be for the processes identified in 5P3. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

- Summary results of measures (include tables and figures when possible)
- Comparison of results with internal targets and external benchmarks
- Interpretation of results and insights gained

### 5I3: IMPROVEMENT

Based on 5R3, what process improvements have been implemented or will be implemented in the next one to three years?

## Responses

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### 5P3a. Building budgets to accomplish institutional goals

The College's comprehensive [budget process](#) ensures that LCCC builds budgets to accomplish institutional goals. Through the annual process, overseen by the Budget Process Advisory Committee and the Budget Resource Allocation Committee (BRAC), budget managers align their proposed budgets with the Institution's strategic goals and key performance indicators. Proposed budgets are reviewed by BRAC to ensure goal alignment as well as adherence to other budget criteria (e.g., no budget increases at the division-level). BRAC makes budget

recommendations to the College Council, LCCC's shared governance group, which further reviews proposals for goal alignment and then recommends the budget to the President. The President works with his Cabinet to finalize the budget and presents it to the Board of Trustees (BOT). The BOT reviews the budget during three meetings before approving it for the fiscal year beginning in July.

### **5P3b. Monitoring financial position and adjusting budgets (5.A.5)**

The College monitors its financial position primarily through its budget/expenditure reporting process. The Budget Director posts monthly reports for all budget managers (department-, division-, and cabinet-level) who are expected to monitor allocated amounts and expenditures using the budget self-service tool. Budget managers also have access to the Colleague Financial System self-service module, which provides real-time budget and expenditure monitoring. Additionally, the BOT's Facilities and Finance Committee (FFC) receives and monthly institution-level reports, which it presents at public BOT meetings. This multi-level reporting process ensures continual monitoring of the College's financial position (5.A.5).

The College's standard practice is to not adjust institutional budgets once approved by the BOT. However, when extraordinary matters arise, a budget amendment process, guided by Wyoming Statutes 16-4-113 and 16-4-114, is used to present the amended budget for BOT approval. Cabinet members have the authority to reallocate funds within their areas to make department-level budget adjustment during the fiscal year when unanticipated needs arise, if the financial resources are available. This reallocation must continue to align with strategic goals.

### **5P3c. Maintaining a technological infrastructure that is reliable, secure and user-friendly**

LCCC has several processes for maintaining a technological infrastructure that is reliable, secure and user-friendly. ITS uses a review process for all technology purchases (hardware and software) to ensure they meet the College's equipment and software standards, adopted to promote reliability and user-friendliness. Responding to stakeholder input, LCCC implemented a more user-friendly portal enabling single sign-on for students and employees. ITS also uses an audit process to identify and replace student computer systems over five years old to improve reliability. Computer networks and storage solutions are regularly monitored and upgraded to further promote reliability.

To maintain technological infrastructure security, the College has implemented several [policies and procedures](#) for employees and students, strengthened the password requirements for students and employees accessing its networks; and implemented technology security training (Security Mentor) for all employees. LCCC recently completed cybersecurity assessment using a variety of tools (the Federal Financial Institutions Examination Council (FFIEC) Cybersecurity Self-assessment, Cyber Resilience Review and External Dependencies Management Assessment, and third-party penetration testing). ITS staff are developing additional processes to ensure security based on these assessment results. Finally, the College has implemented a software-based disaster recovery solution (Zerto) for critical data systems.

### **5P3d. Maintaining a physical infrastructure that is reliable, secure and user-friendly**

The College uses three annual processes (referenced in 5P2) to maintain a physical infrastructure that is reliable, secure, and user-friendly. While the processes focus on different maintenance types (major, minor, or preventative), they share common elements. The processes begin by soliciting campus feedback regarding user experiences to identify new maintenance needs. Staff expertise review these together with those previously identified, taking into consideration available resources, and develop a prioritized project list. For preventative maintenance, data collected using the Computer Maintenance Management System (CMMS) also informs identification and prioritization of proactive maintenance activities to increase infrastructure reliability.

### **5P3e. Managing risks to ensure operational stability, including emergency preparedness**

The College has implemented several processes for managing risks (fiscal, physical and/or technological) to ensure operational stability, including emergency preparedness.

Institutional debt is closely monitored to ensure pledged revenues are sufficient to service the debt. Debt service monitoring/reporting processes involve executing timely debt service payments, tracking developing revenues, forecasting future revenues, and reporting outcomes to the BOT and its FFC. This process has led to refinancing bond debt that achieved cost savings and better revenue stream alignment, improving fiscal operational stability.

To manage physical risks related to operational stability, the College has contracted with an external Risk Manager. Through this contract, LCCC has access to a variety of services to identify potential risks and implement structures and processes to manage those risks.

The College has developed an [Emergency Preparedness Plan](#) as well as emergency response plans for both the [Cheyenne Campus](#) and the [Albany County Campus](#); these plans are regularly reviewed and updated. Emergency preparedness/response processes include regular trainings for key personnel and a text/email alert system.

Technological infrastructure risk management is through the cybersecurity procedures, backup procedures, and disaster recovery structures addressed above.

### **5P3f. Tracking outcomes/measures utilizing appropriate tools**

The College tracks a wide variety of outcomes to measure the effectiveness of processes described above. The Administration and Finance (A&F) Division has implemented a customer survey to evaluate overall effectiveness of its processes and services, which include budgeting and plant operations. ITS, organized within the Institutional Effectiveness Division, also conducts regular customer surveys, such as classroom technology needs.

For budgeting processes, LCCC monitors institutional [budget allocations](#) to ensure that strategic goals and key performance indicators are supported proportionally. Additionally, three-year expenditure trends are monitored and used to adjust annual budget requests. As described above, monthly budget reports and the CFS self-service module reports are used to monitor the College's fiscal position. Debt service processes are measured by the College meeting its

obligations and by cost savings achieved through refinancing opportunities. Finally, audit results measure the Institution's financial health.

For many other processes described above, the College measures effectiveness through project milestones achievement and project completion. Regular reporting tracks these outcomes. For example, ITS measures vendor performance through regular reports and ongoing evaluation of services. Plant Operations staff maintain logs of identified major/minor maintenance projects to track approval, planning, and execution stages, as well as monthly preventative maintenance reports to assess progress and forecast emerging maintenance needs. The risk management contractor reports the accomplishment of key objectives detailed in the [scope of services](#). LCCC tracks crime statistics and security information through its annual Cleary Act report.

Other outcomes and measures will be identified through the recently implemented function assessment planning process (see sections 5P1 and 2P3).

### **5R3a. Summary results of measures (include tables and figures when possible))**

Recent A&F [customer survey results](#) indicate that stakeholders are generally satisfied with division process and services. The [budget allocation report](#) shows that funds have been allocated to support the four strategic plan goals.

[Table 5R3](#) summarizes other results for this section, including projects completed over the last few years. Examples include:

- Superior audit results (see [2017 Audit](#), p. 60) validate the sound and effective financial controls used by the College.
- Refinanced debt obligations resulted in \$1.6M savings in interest over debt term.
- Implemented disaster recovery solution (Zerto) to improve preparedness for malware attacks.
- 10% increase in renovation process customer satisfaction rating.
- Implemented RAVE text/email alert system.

### **5R3b. Comparison of results with internal targets and external benchmarks**

Internal targets have not yet been established of A&F customer survey results. However, overall results showed a modest gain in client satisfaction from 2017 to 2018. These data will be used to establish internal targets through function assessment planning.

Annual audits were successfully completed on time and within statutory requirements in each of the last three years. The College uses the federal Generally Accepted Accounting Principles to benchmark audit findings; the College achieved the highest finding of "Unqualified Opinion" in each year. For debt refinancing, the target is to achieve the best market interest rates available, which was accomplished.

Often ITS targets are defined by responsiveness levels (slow, medium, and timely) to stakeholder needs within budget constraints. ITS has been timely in matching campus stakeholder needs to

emerging technology solutions. For example, the adoption of a new campus portal (ClassLink) responded to stakeholder demand for a less cumbersome, single sign-on system. In most cases, ITS adopts the technology solutions at cost savings.

Improvements in maintenance project processes resulted in a 10% increase in renovation process satisfaction ratings, which exceeded the target of 5% gains.

Through LCCC's newly implemented function assessment planning process, functional areas are establishing operational targets for its functions. For example, one of its outcomes for the Maintaining Enterprise Software function sets a target of having 12 or less unexpected down times over a year's time. [Function assessment plan results](#) (pg. 4) show four unscheduled instances (totaling 271 minutes downtime), meeting the function's target.

### **5R3c. Interpretation of results and insights gained**

A&F Customer Survey results identified opportunities to create efficiencies in budget processes and to increase engagement in budget/expenditure monitoring. Additionally, the College has yet to fully incorporate these data into continuous improvement efforts. The survey results will provide baseline data for establishing improvement targets, strengthening function assessment plans.

The auditing process reconfirmed that internal controls, proper checks/balances, and diligent ongoing expenditure monitoring are critical to achieving desired results. Debt refinancing proved advantageous in developing significant College savings.

Overall, the process of matching technology adoption to stakeholder needs has produced effective management of ITS operations. Through function assessment planning, ITS is developing process mapping of its various functions, improving operational efficiencies.

Results from audits carried out by the College's insurance carrier revealed a need for the College to develop risk management strategies and programs that better engage campus employees in safety practices. In addition, assessment results from multiple emergency preparedness trainings conducted with the county and local law enforcement determined changes in College procedures.

### **5I3. Based on 5R3, what process improvements have been implemented or will be implemented in the next one to three years?**

Recent process improvements include:

- Strengthened internal controls processes including proper desegregation of duties, signature authority oversight, business purpose oversight, and documentation processes.
- Implemented self-service budget monitoring to increase engagement and transparency.
- Developed emergency response planning, including a command center structure, communication strategies, campus information resources, and key personnel training.
- Adopted a new campus portal (ClassLink) to increase user-friendliness of the system.
- Established a Safety Committee structure.

- Adopted a new LMS with 24/7 service for all users and added videoconferencing (Zoom).
- Hired a database administrator to improve system performance, minimize downtime, and improve reliability.

Planned process improvements include:

- Implement an evaluation plan for budget allocation alignment with institutional goals.
- Implement an electronic travel requisition/reimbursement process.
- Expand A&F division stakeholder feedback mechanisms.
- Update campus master planning.
- Successfully hire a permanent Risk Manager.
- Increase cybersecurity awareness and technological systems security.
- Improve responsiveness to stakeholders, fully identify function processes, and evaluate operational performance through function assessment planning.

## **Category Six Introduction: Quality Overview**

In many ways, the College is still recovering from an era of turmoil resulting from organizational unrest in its culture, its leadership, and its organizational structure. Yet, in 2012 the institution sought a new future. One grounded in authentic acceptance of some of the most brutal facts about the state of the College at that time. These included:

- LCCC was the largest of the Wyoming Community Colleges but was the worst performing by many measures such as graduation rates and course completions;
- Many of the College's facilities were dated and failing, with increasing deferred maintenance issues and, even in totality, not adequate to serve current and future students;
- There was a lack of instructional coherence with academic programs not designed for timely student completion or to assess student learning and development through them;
- Key aspects of the College's student services were on the brink of major compliance and operational issues and not fully integrated to serve students from a holistic perspective;
- Existing policies and procedures were applied inequitably, and several critical processes had extremely outdated policies or, worse, no policy or procedure at all;
- Employees were not being developed or managed to encourage growth and success within the primary roles and responsibilities needed by the Institution; and
- There were many strained relationships at the College – internally between employees, between the Trustees and Foundation Board, with the community, etc.

Once the Institution embraced and accepted these facts, a new platform for organizational reinvention and rebirth emerged. Today, the College is committed to promoting a culture of evidence that compels the Institution to continuously strive for greater efficacy while always seeking to transform students' lives through inspired learning. This is LCCC's commitment to quality.

Just two years shy of a decade of transformation, LCCC is notably a different place. There is no doubt the campus desired healing from those years of dysfunction – dysfunction that created internal and external strife, which distracted the College from what was most important – its students. Today, things have completely changed, and, as seen in Category 6, it has been the Institution's commitment to quality that has provided the foundation for this recovery.

Thus, as demonstrated within this category and throughout this Systems Portfolio, LCCC's institutional transformation is well underway. The foundation has been laid with quality philosophies grounded in policy; processes have matured and are established within administrative procedures, and cycles of assessment, planning, resource allocation, and implementation are integrated at all levels of the Institution. Some are formalized, while others are still informal and adapting. However, a culture of evidence is taking shape, and a dedication to honest analysis and hard work is in its early stages. These are all the pillars of quality.

LCCC's diligent work on quality improvement has led to processes at the alignment level on the quality maturity matrix, with some processes fully integrated. Results for this category are systematic and moving toward alignment.

## 6.1 - Quality Improvement Initiatives

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Quality Improvement Initiatives focuses on the Continuous Quality Improvement (CQI) initiatives the institution is engaged in and how they work together within the institution.

### 6P1: PROCESSES

Describe the processes for determining and integrating CQI initiatives, and identify who is involved in those processes. This includes, but is not limited to, descriptions of key processes for the following:

- Selecting, deploying and evaluating quality improvement initiatives
- Aligning the Systems Portfolio, Action Projects, Comprehensive Quality Review and Strategy Forums

### 6R1: RESULTS

What are the results for continuous quality improvement initiatives? The results presented should be for the processes identified in 6P1. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared.

### 6I1

Based on 6R1, what quality improvement initiatives have been implemented or will be implemented in the next one to three years?

## Responses

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### 6P1a. Selecting, deploying and evaluating quality improvement initiatives

LCCC defines quality initiatives as purposeful actions that build the Institution's capacity to integrate continuous quality improvement (CQI) within processes and produce better outcomes. At the micro-level (program or function), these are initiatives or projects intended to build capacity for specific programs or functions to better focus on CQI and produce better outcomes. At the macro-level (strategic) these are large-scale initiatives, often encompassing multiple projects that build institutional capacity to better integrate CQI within our culture and produce higher levels of outcomes leading to mission attainment.

To facilitate the selection, deployment, and evaluation of quality initiatives, LCCC has developed an [institutional model](#) of CQI that incorporates three primary processes. Through these processes, the College conducts quality improvement initiatives at the unit/program and institutional levels. The three processes include:

1. The Strategic Planning Process

2. The Academic Program Assessment and Review Process
3. The Service & Support Function Assessment and Review Process

All three processes have been described in greater detail earlier and throughout this portfolio. However, it is worth describing the common elements that exist across all three processes that demonstrate the deep integration of the CQI model at LCCC. First, all have individuals purposefully selected to guide and facilitate the processes, whether those are a diverse, representative group of individuals representing all constituencies for strategic planning, program faculty, or staff charged with overseeing specific service and support functions.

Second, all three processes incorporate the identification of a primary purpose, whether that be the mission of the Institution, the curricular outcomes of programs and courses, or the desired outcomes of the service and support functions. Tied to these purposes are indicators and measures that demonstrate the level of purpose achievement.

All three processes have identified stakeholders, and they engage these stakeholders through various feedback systems to inform the lead individuals. Feedback system examples include environmental scanning associated with the strategic planning process, the AQIP accreditation process that influences both strategic and operational planning processes at the academic and service/support function levels, and stakeholders' direct input through surveys, advisory boards, focus groups, etc.

Finally, all three processes incorporate short-cycle and long-cycle (or what LCCC refers to as annual assessment or strategic) planning elements. The long-cycle planning elements are most closely relevant to the AQIP definition of quality improvement initiatives as they tend to reside more at the macro-level, although some short-cycle plan goals are central to the LCCC model of continuous quality improvement. Planning elements (goals and objectives) are influenced by the assessment of performance on the indicators, feedback from stakeholders and feedback systems, and include evaluation plans.

### **6P1b. Aligning the Systems Portfolio, Action Projects, Comprehensive Quality Review and Strategy Forums**

One of the most influential feedback systems LCCC uses within its CQI processes is the AQIP pathway for institutional accreditation. The College believes that continuous improvement is a process, and accreditation is one very important way it validates how effective LCCC's CQI model is. Throughout this systems portfolio, it should be evident that the accreditation criteria, AQIP standards, and previous appraisal and action project feedback have heavily influenced how LCCC functions as an Institution and the quality improvement initiatives it has identified, shaped, and implemented. Thus, LCCC's process for aligning AQIP elements is through the CQI model described in the previous section.

Within this context, the College has developed a CQI system that uses the mission and strategic planning process to guide selection of long-cycle CQI projects. For example, strategic plan [goal one](#) (pg. 7) directed the formation of large-impact projects such as curriculum redesign and academic master planning that have evolved into the current Guided Pathways initiative.

Strategic plan [goal three](#) (pg. 12) led to the concept of the service/support functions review process that is becoming the third leg of LCCC's CQI model. Armed with this directive, the College utilized its most recent strategy forum to set the structure for the creation and implementation of the service and support function review process.

For another example, a common theme that ran through the Quality Check-Up Report (September 24, 2012) was the recommendation to sustain the reset for the commitment to CQI through the College's then newly launched CQI model and to make AQIP principles inherent in daily operations while instilling CQI into organizational design, operations and culture. The Report recommended that the new leadership direct, encourage and empower internal and external stakeholders ([see pp. 11-12](#)). In addition, it recommended that LCCC focus on assessment and oversight and eventually develop process mapping and offer staff development in processes.

This feedback helped inform the College's strategic planning in 2013, as well as the substantial work that was exerted to systematize many of the CQI processes that would be later assessed in the 2014 Systems Portfolio. The appraisal confirmed what the College knew, that it was moving from a reacting to a systematized level of maturity as an Institution. But it also affirmed what was embodied in the goals and strategies of the strategic plan, which has been a foundation of the continued work found in LCCC's action projects, focused on in the Strategy Forum, and the genesis for the processes and culture described in this systems portfolio. Through the purposeful design and integration of the CQI model and the alignment of AQIP elements, LCCC has clearly moved to an aligned level of maturity and is nearing that of institutional integration.

### **6R1. What are the results for continuous quality improvement initiatives?**

The College has worked consistently, vigorously, and with great discipline to become an integrated institution with high-functioning processes, programs, and services. Thus, one way to examine the results of CQI initiatives is to assess if LCCC is achieving its mission, accomplishing its goals within the Strategic Plan, and making improvements on what it values most. These results have been provided throughout this systems portfolio; it is evident LCCC is making sustained and significant progress (see 1R1a and 1R2b, for example).

Much of the work at LCCC since the last systems portfolio report has been on designing implementing, and institutionalizing processes that comprise its CQI model. One effective way of assessing the results of processes is by monitoring the activity they generate, for it is through the disciplined approach to this activity that initiatives are implemented and evaluated, programs and functions are improved, outcomes are achieved, and the mission is attained.

Since 2012, results, as assessed by process activity that have come through disciplined adherence to LCCC's CQI model, include the following:

#### Strategic Planning

- 25 of 56 strategic plan (2013-2020) strategies have been completed and are now part of the Institution's operations.

- Six significant Capital Construction projects are completed or in progress.
- More than \$95 million invested in the transformation of LCCC's physical environment.
- 105 College faculty and staff directly involved with Guided Pathways.

#### Academic Program Assessment and Review

- 41 academic programs have gone through full review cycles.
- 55 assessment plans established (113 learning competencies, 112 operational outcomes).
- 973 peer review comments (an average of 89 feedback comments per program) for 2016-17 cycle.
- 11 programs generated 45 best practices at a rate of 4.1 best practices per program.
- 11 reviews engaged 51 faculty members for 2016-17 cycle.

#### Service/Support Function Assessment and Review

- 105 people engaged in the development of planning content.
- 24 peer reviewers including 7 Cabinet members.
- 115 completed function assessment plans were peer-reviewed with feedback comments.

#### **6I1. Based on 6R1, what quality improvement initiatives have been implemented or will be implemented in the next one to three years?**

Although there are numerous micro-level quality initiatives in progress or planned for the near future, many of which are discussed throughout this portfolio, only those macro-level ones are shared here. Based on the results and definition offered above and denoted throughout this portfolio, LCCC is in the phase of "completing what we have started." Thus, the College's quality improvement initiatives at the macro-level that are in progress or planned for the next few years generally follow the three areas in the [FOCUS 2018-2020](#) refinement to the LCCC strategic plan. These include the following.

The Guided Pathways model is an integrated, institution-wide approach to improve student success based on intentionally designed, clear, coherent and structured educational experiences. LCCC is one of 13 community colleges in the nation that are participating in the American Association of Community Colleges Guided Pathways 2.0 project.

LCCC is developing a comprehensive and coordinated strategic enrollment management (SEM) planning process to identify enrollment goals aligned with the optimal recruitment, retention, and success of its students. SEM planning will focus on the effective integration of administrative processes, student services, curriculum planning, and market analysis to reach the College's student enrollment and completion goals in a constantly changing and competitive environment. This includes a SEM Readiness Assessment in AY 2018/2019 and SEM Master Planning in AY2019/2020.

With a focus on the future, and by aligning to current and emerging needs of our communities, state and nation, LCCC will develop a strategic academic program plan for the modification of existing degree and certificate programs and the addition of new. Environmental scanning tool

place in the summer of 2018, with employer/stakeholder engagement in the fall of 2018, and anticipated plan development and launch in the spring of 2019.

A robust performance evaluation model (system) will aid in the accurate and consistent performance assessment of LCCC's people, enabling specific employee improvement within current roles and competency-based, focused development toward the fulfillment of future roles at the College. Accomplishing this goal will require aligning employee job performance with meaningful, role-focused competency models in order to foster shared understanding and establish clear expectations across LCCC; providing employees with more consistent performance feedback and enabling better coaching on the part of supervisors; allowing for better institutional tracking and reporting of employee performance across levels and groups; and tying employee development and performance assessment to function outcomes.

The College has made substantial progress on its service/support function assessment and review process to help its support and service functions focus on continuous improvement. These efforts will be finalized and culminate in a comprehensive system to mirror that used for academic program offerings. Function identification and context have been completed, with baseline data gathering and initial improvement plans to be developed in spring of 2019. Multi-year comprehensive review process will be developed in the summer of 2019 and launched in AY 2019/2020.

## 6.2 - Culture of Quality

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Culture of Quality focuses on how the institution integrates continuous quality improvement into its culture. The institution should provide evidence for Core Component 5.D. in this section.

### **6P2: PROCESSES**

Describe how a culture of quality is ensured within the institution. This includes, but is not limited to, descriptions of key processes for the following:

- Developing an infrastructure and providing resources to support a culture of quality
- Ensuring continuous quality improvement is making an evident and widely understood impact on institutional culture and operations (5.D.1)
- Ensuring the institution learns from its experiences with CQI initiatives (5.D.2)
- Reviewing, reaffirming and understanding the role and vitality of the AQIP Pathway within the institution

### **6R2: RESULTS**

What are the results for continuous quality improvement to evidence a culture of quality? The results presented should be for the processes identified in 6P2. All data presented should include the population studied, the response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared.

### **6I2: IMPROVEMENT**

Based on 6R2, what process improvements to the quality culture have been implemented or will be implemented in the next one to three years?

## Responses

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### **6P2a. Developing an infrastructure and providing resources to support a culture of quality**

LCCC has embraced the foundational elements of CQI by focusing the Institution on rigorous assessment of institutional effectiveness, improvement planning based on evidence, resource allocation and implementation, and formative and summative evaluation, repeating the cycle. Integrated within this cycle is the College's belief in shared governance and inclusiveness across all levels of the Institution. This forms the infrastructure to support a culture of quality and continuous improvement at the College.

More specifically, LCCC utilizes four processes to develop infrastructure and provide resources that sustain the culture of quality at the College.

1. Integration of the CQI model in Major Processes – Throughout this Systems Portfolio, major institutional processes are described. Elements of the LCCC CQI model are integrated within them. For example, the incorporation of KPIs into various planning and resource allocation processes, strategic plan goals and strategies integrated within budget development process, operational planning, etc. In addition, the College has established an entire chapter in its policy manual focused on Continuous Improvement, which houses Board Policies and Administrative Procedures establishing major CQI processes.
2. Employee Development and Performance Assessment on CQI – LCCC has incorporated continuous improvement expectations into employee selection/hiring, as well as development processes. CQI is a building block in the draft employee competencies framework currently in development.
3. Proliferation of CQI Cycle (culture of evidence) – The College has been disciplined in its rhythm of CQI, leading by example with the review and update of strategic plan progress, the annual assessment of institutional effectiveness and release of the College’s Report Card at each fall convocation, and the difficult, yet concerted, effort to establish academic program review and the developing service/support function review processes.
4. Resource Allocation tied to CQI Initiatives – LCCC has made a formal commitment to allocate its financial resources to those areas that demonstrate a commitment to improvements leading to higher levels of efficacy. For example, new position requests and one-time fund requests are scored against criterion rubrics that incorporate CQI expectations and alignment with institutional mission and strategy.

Other recent institutional actions demonstrate the College’s commitment to developing and sustaining the infrastructure that supports the LCCC CQI model. These include the establishment of an Institutional Effectiveness Division that focuses on developing a culture of continuous improvement, creating an Institutional Projects office to house a new position for institutional project management, funding of a continuous improvement technology platform (Aquila - Campus Labs), data visualization software (Tableau), etc.

**6P2b. Ensuring continuous quality improvement is making an evident and widely understood impact on institutional culture and operations (5.D.1)**

Since publishing its first Systems Portfolio in 2010, LCCC’s quality transformation has been built on the foundation of disciplined, evidence-informed decision making, strategic allocation of resources, and clearly articulated processes. Prior to 2010, pockets of the Institution focused on continuous improvement, and some basic elements of an integrated cycle were at the institutional level; however, the culture and institutional operations were not clearly connected to this concept.

Today, the College openly assesses institutional, program, and function effectiveness and widely distributes documentation of the results. This is primarily illustrated through the annual assessment of institutional effectiveness and efficiency reported in the KPIs. Each year, during the fall state-of-the-college address, the President presents the College’s report card on these measures (5.D.1). They are objective, authentic, and pertinent to LCCC’s performance, and,

most importantly, they demonstrate a commitment to identifying areas where improvement is required.

In addition to the KPI system, other processes have been developed and implemented to ensure continuous improvement is evident at the College. For example, LCCC utilizes shared governance concepts through its Budget Resource Allocation Committee (BRAC) and incorporates rubrics that intentionally assess CQI initiatives in the rubric criteria, such as strategic plan strategies, academic and functions assessment planning, and program review when determining where to allocate funds and hire new positions.

Peer review is purposefully integrated within LCCC's actions and processes to further ensure CQI is impacting its culture and operations. These processes are designed to engender evaluative thinking and CQI knowledge by having peers provide feedback on academic program review, service/support function assessment, and the budget development and allocation processes. For example, each year, the BRAC recommends budget development process improvements to the College Council, a public and utilitarian display of the commitment to CQI.

### **6P2c. Ensuring the institution learns from its experiences with CQI initiatives (5.D.2)**

LCCC's CQI model, described in 6P1, is the process that ensures the College continually learns from its CQI initiatives. This model, with its accompanying processes (e.g., strategic planning, program review and assessment, function review and assessment) and systems (e.g., Aquila, project management, etc.), includes several feedback and evaluation components that inform the Institution and its employees of the successes and failures with CQI initiatives and the processes themselves. The outcomes of these efforts have engendered exploration and development of formal and self-evaluation methods. Thus, institutional learning is central to LCCC's CQI model (5.D.2).

The Institution has deployed a centralized, technology-based system, called "Aquila," to facilitate the documentation, review, and archiving of continuous improvement efforts. Through its planning module, the College has integrated its system for Strategic Plan strategy implementation, the review of academic programs and service/support functions, and the implementation of short-cycle and long-cycle improvement goals. This systematic generation of organizational learning ensures the gradual manifestation of an improvement culture.

Mentioned previously in this portfolio, the various processes for conducting planning, implementation and evaluation incorporate teams of individuals to manage, monitor, and review quality improvement projects. This broad involvement, coupled with the technology system to collect and archive quality initiative information, provides a body of knowledge with which the College continually engages to understand and learn from the various attempts it makes at continuous quality improvement (5.D.2).

For example, early in the implementation of the new program review process, the College learned that its self-study template required significant revision. Based on stakeholder feedback and process evaluation, a faculty-based committee redesigned the template during Spring 2017, with a much smoother implementation for reviews thereafter. In addition, the College is in the

process of revising and simplifying several of its quality standards for the new service/support functions assessment and review process based on feedback from employees who are involved in the early implementation.

Another example arose from the attempted implementation of an early alert system (Starfish) as part of a student retention CQI initiative. Even with utilizing LCCC's then new project management process, the Starfish implementation was painful; evaluation and feedback quickly led the College to its discontinuation. The post-mortem assessment by those involved identified the necessity for better understanding of underlying processes, as well as missing project management components. This awareness guided improvements in the project management structure, which has resulted in successful implementation of an admissions customer relations management system. The project management structure now underlies LCCC's Guided Pathways work.

### **6P2d. Reviewing, reaffirming and understanding the role and vitality of the AQIP Pathway within the institution**

Stated previously in 6.1, LCCC does not view AQIP as something it does. Rather, the College is committed to “doing” continuous quality improvement in all its work, and the AQIP Pathway is the process through which it validates how well its CQI model is functioning. Unfortunately, the Higher Learning Commission (HLC) has recently announced its plans to discontinue the AQIP Pathway. This decision requires that LCCC prepare to move to a new pathway. However, because LCCC has embraced a commitment to CQI, and, more importantly, has integrated CQI concepts and processes throughout the Institution, the very culture that the College has built will ensure that its understanding and commitment to CQI will survive this transition.

### **6R2. What are the results for continuous quality improvement to evidence a culture of quality?**

LCCC's transformation towards a culture of quality has been impressive. For example, LCCC has gone from laggard to leader among Wyoming community colleges. Today, the College leads the state in program articulation, has the first articulated general education program with the University of Wyoming, drives the colleges' legislative agenda, leads when partnering with the state system and its councils, champions the use of predictive data and analytics, leads the implementation of best practices, and much more.

Leadership has been a concern of the Board of Trustees and campus for some time. To see this, all one must do is read back through early iterations of our “Leading and Communicating” surveys and the Organizational Audit completed in 2011. Today we have one of the strongest executive leadership teams that exist in any community college in America. Are we perfect? No, not by any measure, but when you consider the caliber and commitment of the individuals who now hold executive and mid-level leadership positions at LCCC, we are truly positioned to continue driving change and improving student outcomes.

LCCC has been continually improving the rate at which students succeed in their educational pursuits. While graduation rates are still far too low, they, along with almost all other measures

of student success, are moving in the right direction. In the past six years, the College has had two record-setting graduating classes. Moreover, LCCC awarded more credentials in the past five years than at any other time in its history, while experiencing year-over-year enrollment declines. In addition, course completion rates have increased every year, illustrating that LCCC is becoming more effective in getting students to succeed in their coursework. Finally, for all success metrics used for Guided Pathways, LCCC's results outpace those of its cohort and, more importantly, are moving in the right direction.

The College has received national and local recognition for its innovation. Like its acceptance into the American Association of Community College's Guided Pathways 2.0 (one of just 13 institutions selected to be part of this program), LCCC is continually rising to the national stage for its efforts, innovations, and outcomes. The College also actively leads locally, within the community college "system," mentioned above, and within its community. From leadership in a local community planning effort, LCCC's active involvement in the Governor's economic diversification efforts, leadership on community and business organizations, and so many more, LCCC is stepping up and being recognized for it.

**6I2. Based on 6R2, what process improvements to the quality culture have been implemented or will be implemented in the next one to three years?**

Stated briefly above, the annual cycle of assessment results in the identification of areas for improvement in many of the CQI process and sub-processes. Thus, there are numerous improvements in these various processes each year. For example, as described earlier in this portfolio, after the initial roll-out of the academic program review process, primary stakeholders' feedback identified numerous areas for process improvement. A committee of faculty and other vested stakeholders was formed to implement significant improvements to the program review template, the calendar cycle, etc.

In addition, utilizing a 2015 Strategy Forum, the College established an action project to develop a service/support function (or non-academic program) review process. This work is well underway with the initial emphasis on articulating function purpose, mapping processes, identifying and engaging stakeholders, and establishing baseline data and benchmarks to assess current performance levels. This work proved useful in making strategic, objective decisions in 2016 when the College faced significant budget cuts in state appropriations.

Finally, and, likely the most significant improvement planned to further build a quality culture at LCCC, is the design and deployment of a college-wide continuous quality improvement professional development program for employees. While LCCC has made it well known that employees are expected to embrace CQI and illustrate an understanding, through action, of continuous improvement practices and process, it has not yet integrated a process for the formal development of CQI knowledge, skills, and abilities for all its employees. This CQI training program will be designed to help employees actively contribute to CQI in their current positions, while helping them develop those CQI competencies that are most desired in other positions at LCCC that they may be interested in pursuing.