Laramie County Community College

November 2010

Category Seven: Measuring Effectiveness

Processes

7P1, 7P2

LCCC selects, manages, and uses information and data based on accreditation requirements, federal reporting requirements, state reporting requirements, Board of Trustees reporting requirements, key performance indicators related to strategic goals, program-specific requirements for program accreditation, and program level goals. Typical distribution methods used are internal emails of summary results, posting to the college website, posting to EaglesEye, posting to a shared drive, or holding focus group sessions to share results with interested individuals. Examples of regularly reported data are outlined in Table 7P1-7P2 below.

Historically, decisions related to selecting, managing, and distributing data and performance information have been based on tradition and availability of data. As the institutional culture of continuous improvement evolves, the IR office is working with the QC to develop processes for regular review of how data is managed. This involves converting from a retrospective review to a forward-looking trend analysis to strengthen data-enhanced decision making.

<table>
<thead>
<tr>
<th>Data/Performance Information</th>
<th>Selection</th>
<th>Management</th>
<th>Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student learning outcomes assessment – Core Abilities (general education)</td>
<td>Selected by SLAC with input from faculty and LLT</td>
<td>SLAC, IR</td>
<td>Annual report posted on EaglesEye</td>
</tr>
<tr>
<td>Student learning outcomes assessment – program specific outcomes</td>
<td>Selected by program faculty</td>
<td>Program faculty</td>
<td>Annual report posted on EaglesEye</td>
</tr>
</tbody>
</table>
| Program Management/Review Data | Selected by LLT with input from IR | IR, deans | • Annually posted to shared drive for deans  
• Reported to LLT, PC, BOT as part of program review process |
| Ends Statements Reports | Selected by President with input from VPs and IR in response to reporting requirements of policy governance model | IR, Student Services | Five annual reports to BOT |
| CCSSE | Selected by Wyoming community colleges to support state reporting requirements | IR | Biannual forums, reporting to college community |
| Benchmark Indicators | Currently under development by action team and QC | | |
Table 7P1-7P2 Selection, Management, and Distribution of Data and Performance Information

<table>
<thead>
<tr>
<th>Data/Performance Information</th>
<th>Selection</th>
<th>Management</th>
<th>Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>NCCBP</td>
<td>Implemented to support and provide data for continuous improvement</td>
<td>IR</td>
<td>Annual online report beginning fall 2010</td>
</tr>
<tr>
<td>Enrollment Reports</td>
<td>Selected to meet state reporting and internal monitoring requirements</td>
<td>IR, Enrollment Management</td>
<td>End of semester reporting online, Monitoring registration by internal email to President’s Cabinet (PC)</td>
</tr>
<tr>
<td>Financial Reports</td>
<td>Reporting and auditing requirements and for internal monitoring</td>
<td>Administration and Finance</td>
<td>Monthly reports to budget managers, PC, and BOT</td>
</tr>
<tr>
<td>Licensure/Certification pass rates</td>
<td>Data reported for those programs requiring licensure/certification for employment</td>
<td>Health program directors</td>
<td>Annual reporting to state, BOT</td>
</tr>
<tr>
<td>Employee Climate Survey/Focus Survey</td>
<td>Initiated by QC to monitor campus climate</td>
<td>QC</td>
<td>Report distributed by email to college community</td>
</tr>
<tr>
<td>Graduate Survey</td>
<td>Selected to meet state reporting and internal monitoring requirements</td>
<td>IR</td>
<td>Annual report published online</td>
</tr>
<tr>
<td>External Program Accreditation/Approval</td>
<td>Accrediting/Approving Agency</td>
<td>Program directors and managers</td>
<td>Catalog, press releases, and advisory committees</td>
</tr>
<tr>
<td>UW Transfer Student Report</td>
<td>Data provided by UW Office of Institutional Analysis</td>
<td>IR, VPI</td>
<td>Internal reports</td>
</tr>
<tr>
<td>IPEDS Survey Data</td>
<td>National Center for Educational Statistics</td>
<td>IR</td>
<td>Internal reports</td>
</tr>
</tbody>
</table>

7P3

Historically, as noted above, department and unit needs related to the collection, storage, and accessibility of institutional data and performance information have been determined on the basis of tradition, availability of data, and ad hoc initiatives. As the institution further evolves its culture of continuous improvement, these disparate activities will be integrated into a more systematic approach.

The collection, storage, and accessibility of student data is performed according to state statute and using records management guidelines of the American Association of Collegiate Registrars and Admissions Officers (AACRAO), the Family Educational Rights and Privacy Act (FERPA) and industry related professional best practices. Employees of the College are assigned access to student data within the administrative database (Datatel Colleague) in accordance with job duties. Security class levels within Colleague are determined by the College’s systems administrator. Training and printed information on FERPA are provided annually to staff.

7P4

LCCC analyzes performance data at the institutional level in the following ways:

- The Board of Trustees (BOT) follows a policy governance model, and has a regular, annualized slate of monitoring reports, seventeen in total, which are spread throughout the calendar year.
The Wyoming Community College Commission requires reporting in alignment with the AACC core indicators. That report is also prepared and submitted annually.

The Student Learning Assessment Committee collects, analyzes and reports data on student learning outcomes as part of the College’s assessment plan and report.

The College participates in CCSSE data collection every 2 years, and now has data from two cycles.

Historically, campus climate surveys have been conducted on a crisis-driven ad hoc basis. As a result of the developing culture of continuous improvement, the College initiated a process of a general climate survey (fall semester) and follow-up focus survey (spring semester) in August 2009.

Final and point-to-point enrollment reports are generated regularly. Point-to-point reports are distributed internally, and final reports are submitted each semester to the Wyoming Community College Commission.

Dashboard Performance Indicators are being developed by an action team at the time of this writing.

While all of these activities occur and data are collected, analyzed and reported, the process of sharing and interpretation is less systematic. Monitoring reports submitted to the BOT are available to all staff, and to the public, via the College’s website. WCCC reports are available upon request to the IR office. CCSSE results and survey results are posted via email, and forum sessions are offered to members of the campus community to come together to discuss the results.

7P5

Historically, needs and priorities for comparative data and information have been determined by regulatory requirements or on an ad hoc basis. As discussed above, LCCC is transitioning to a culture of continuous improvement. As this process moves forward, the College will be aligning existing data sources with its strategic directions to provide comparative information to support decision making.

Within the organization, departments may identify needs for comparative data, such as conducting needs assessment studies for potential new programs, or locating workforce data both in Wyoming and nationally. Departments work with the IR office to take advantage of its resources, and criteria are created on a case-by-case basis. The IR office does its best to identify priorities for projects based upon institutional needs, if necessary as identified by President’s Cabinet.

7P6

After the recent adoption of the Strategic Plan, departments and units created operational plans for the 2010-2011 academic year. These plans have objectives and measures tied to the College’s strategic directions. Each area will report on the status of its objectives annually. As this process is fully implemented, the data and information gathered will inform the budgeting process. Finally, to complete the process loop, the data and information gathered will be included in the development of future operational plans and strategic plans.

In addition to the annual cycle described above, academic programs of study complete a five-year program review cycle. The data and information used in this cycle has been standardized by the LLT, in conjunction with the IR office. LLT also establishes the program review criteria, which are being aligned with the academic plan and the Strategic Plan. The criteria and data elements are reviewed annually.
The program review is presented to the LLT, President’s Cabinet, and the Board of Trustees. A similar process has implemented for selected instructional support areas. Finally, the Strategic Plan calls for the development and implementation of assessment/effectiveness plans for all departments (Goal 3.1).

7P7

All data and information systems at LCCC – Colleague, EaglesEye, ANGEL, network drives, shared drives, and email – are password protected. Further, the ITS department backs up all information on the network drives on a daily basis; Colleague is backed up on a daily basis as well. Taped back-ups of Colleague are stored in vaults both on campus (daily) and off campus (monthly). ITS monitors access to password protected systems, and access is limited to the functionality needed by job function. Permanent student records (transcripts) are maintained in both electronic and non-electronic formats and are stored in vaults on- and off-campus.

Individual departments are responsible for creating data entry timelines and accuracy checking systems to ensure their work meets the institution’s needs. The IR office and Enrollment Management division are developing a systematic “data scrubbing” process to ensure that data entry errors are identified and corrected in a timely manner.

Results

7R1

The College is moving forward in its efforts to regularly collect and analyze its performance and effectiveness.

The IR Office currently generates data related to enrollment, teaching loads, cost center breakdowns, etc. to the campus deans for inclusion in academic program reviews. Individual departments and divisions have used data generated from these sources to measure effectiveness through program evaluation. Another example is the New Student Profile generated by the IR Office for admissions planning efforts. However, these processes are internal and tied to specific departmental goals and not to institution-wide strategic goals. With the creation of a recent Action Project that will look at the development and use of institution benchmarks, it is anticipated that this effort will help the College to identify benchmarks, both internal and external, against which the results can be measured.

The College has also recently been working on identifying measures of institutional effectiveness, which are driven, in part, by the College’s system for information and knowledge management – in terms of using data available where possible to assess institutional performance.

7R2

While the College participates in a number of data-gathering initiatives, there is no formal process in place to assess the effectiveness of the data gathering and use in meeting the College’s mission and goals. The College has recently completed two projects that should contribute to improvement in this area. First, the College developed a Strategic Plan (adopted November 2009) which will be used to formulate data-enhanced decisions on program development, redesign, and budget. Second, the IR office has included within its operation plan for 2010-2011 a goal to develop a systematic approach to
data gathering, use, storage, and distribution. It is anticipated that these efforts, and others, will generate the evidence needed to fulfill this measure.

7R3

As mentioned previously, the College has no formal evaluation process. This makes it difficult to compare results to other institutions and organizations. LCCC anticipates that the efforts already developed (see items 1 and 2 in 7R2) along with additional actions projects resulting from this AQIP process will allow us to conduct meaningful comparisons. The Benchmark Action Project should provide comparisons of effectiveness against other institutions.

Improvements

7I1

As stated previously (see Table 7P1-7P2), the College, via an action project, has begun work in identifying core measures of institutional effectiveness, which will form that basis of a new institutional dashboard. That project, when completed, will be a significant step forward in the College’s ability to systematically assess its effectiveness.

At the program level, the Learning Leadership Team (VP and Deans) has worked with the IR office to refine that data elements collected and analyzed as part of the program review process. They have strengthened the data elements supporting review of retention data, which is receiving additional emphasis in program review. Further, the Student Learning Assessment Committee continues to move forward in systematizing the collection of student learning outcomes data, based on the core abilities, which will be incorporated into institutional measurements of effectiveness.

7I2

Much of the work in selecting processes for improvement is currently channeled through either President’s Cabinet or Quality Council. The Fall 2009 climate survey and the Spring 2010 focus survey yielded results that indicated a significant lack of knowledge on campus about what these two groups do, and further, concern about administration’s inclusion of appropriate staff in the decision making process. Those concerns have formed the basis for two new action projects, with the goal of improving communication, decision making, culture and processes at the College. The College’s evolving culture of continuous improvement will strengthen the identification of processes to improve and the setting of targets for improved performance results.