North Central State College

HLC ID 1844

AQIP: AQIP Pathway Systems Appraisal   Visit Date: Not Set

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1 - Reflective Overview

The first section of the System's Appraisal Feedback Report is the Reflective Overview. Here the team provides summary statements that reflect its broad understanding of the institution and the constituents served. This section shows the institution that the team understood the context and priorities of the institution as it completed the review.

In the Reflective Overview, the team considers such factors as:

1. Stage in systems maturity (processes and results).
2. Utilization or deployment of processes.
3. The existence of results, trends and comparative data.
4. The use of results data as feedback.
5. Systematic improvement processes of the activities each AQIP Category covers.

Instructions for Systems Appraisal Team

During this stage of the Systems Appraisal, provide the team's consensus reflective overview statement, which should be based on the independent reflective overviews written by each team member. The consensus overview statement should communicate the team's understanding of the institution, its mission and the constituents it serves. Please see additional directions in the Systems Appraisal procedural document provided by HLC.

Evidence

Established in 1968 by the Ohio Department of Higher Education, North Central State College (NCSC) is a non-profit, two-year college. The main campus of NCSC is co-located with, but a separate entity from, a regional campus of The Ohio State University. NCSC has four additional locations serving over 3800 students, with Early College students accounting for the most recent enrollment growth and 30% of current student population. NCSC's Board of Trustees consists of three governor-appointed members and six locally appointed members. Over 70 associate degree and certificate programs are offered, multiple transfer degrees and customized workforce training programs are also offered.

The College highlighted that enrollment in degree programs has recently declined. The College notes that 18% of the enrollment is in online/hybrid courses, and the College is approved to offer all of its programs online. A new scholarship program, "tuition freedom," is expected to help overall enrollment. This program aligns with its strategic goal of access. The College has to additional student goals: success and resources. Beyond its focus on strategic goals, the College participates in Achieving the Dream and the AACC Pathways program.

The College is an early adopter of AQIP, joining in 2004, and has submitted three systems portfolios. Given that, the College has completed a number of AQIP Action projects. The reviewers recognize the College has undergone significant changes in the academic calendar conversion from quarters to semesters and in changes to 100% performance based funding.

Category 1:

The college assesses itself as being at the systematic level of maturity for assessment due to continued challenges in applying assessment results to make changes in curriculum, in-class instruction, and coordination with student services. Concerning academic program design, academic program quality, and academic integrity, North Central State College assesses itself as being at the systematic level of maturity. Curriculum integrity/consistency/quality has been a focus for the Chief Academic Officer since the conversion from quarter to semester system in 2012. Program Quality is rated as systematic due to challenges in keeping student services areas updated on program changes. The evidence presented in the systems portfolio supports that the college is primarily systematic in this category.

Category 2:

North Central State College has results in meeting the needs of students and stakeholders. The institution noted that its maturity level varies primarily from systematic to aligned. Its improvements in this area are its most significant since its last systems portfolio in 2011. North Central State College has focused on strategies that address retention, persistence and completion and have made progress in this area. This is due in part to administrative and state government focus. The mission of the institution has shifted from multiple goals and strategies to a specific mission to elevate educational attainment for the communities served. The institution rates themselves as between systematic and aligned. They are working on an internal database for capturing student complaint information, analyzing trends, and making changes as a result of consistent review. The institution reports that it has a strong system in place for identifying and acting upon student and other stakeholder needs. The College's mission is fundamental to all institutional planning. The evidence presented in the systems portfolio supports that the college is primarily systematic in this category.

Category 3:

The institution has a hiring process that includes a review of all open positions before they are filled. Employee evaluation is systematic and professional development is available. Employee recognition is an area that the institution believes it still requires additional focus. Exit interviews are conducted and reviewed. Recent fiscal constraints have limited the level of compensation for employees requiring the institution to become more creative and purposeful in other recognition efforts and benefits to attract and retain quality faculty and staff. The evidence presented in the systems portfolio supports that the college is primarily systematic in this category, with some reactive processes and results.

Category 4:

North Central State College utilizes Carver model of policy governance for the board of trustees, and the subsequent embedding of quality, consistent training for board members. Shared governance practices are used in institutional decision-making. Integrity and ethical behavior is a priority and

issues are handled swiftly and as transparently as possible. The College president has narrowed the planning focus to those areas that are most important to the mission and culture of the institution. The mission is central to all planning activities. The College states that specific, understandable, and relevant data are utilized as a part of strategic planning. The evidence presented in the portfolio reveals a primarily systematic maturity level, with some reactive responses.

Category 5:

The College experienced significant financial difficulties since the last system portfolio. However, the College's strategy in controlling cost has resulted in increased information sharing and reduced silos. North Central State College utilizes key data points throughout its decision-making process. The College weathered some major financial challenges well; in part, because of the use of appropriate data to make good decisions. The State of Ohio required all state-funded institutions to undertake some cost saving efficiency measures. This required North Central to review and make changes to make some processes more efficient. The college's IT/IR created a report structure for all levels of management. The college rates itself as systematic to aligned in this area in part due to processes associated with resource management. The evidence presented in the portfolio supports that the College is at the systematic level. Processes could be more clearly articulated.

Category 6:

The College reports that all of their planning and cost-saving/efficiency measures have helped to bring the institution to a place where the focus is narrower and addresses what is most important to the college's quality journey and its strategic priorities. The institution's culture is based upon being a continuous quality institution. The College rates itself as aligned. The evidence in the systems portfolio supports the maturity level of systematic.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

2 - Strategic Challenges Analysis

Strategic Challenges are those most closely related to an institution's ability to succeed in reaching its mission, planning and quality improvement goals. Review teams formulate judgments related to strategic challenges and accreditation issues through careful analysis of the Institutional Overview and through their own feedback provided for each AQIP Pathway Category. These findings offer a framework for future improvement of processes and systems.

Instructions for Systems Appraisal Team

Strategic Challenges may be identified on the Independent Category worksheets as the review progresses. The team chair will work with the team to develop a consensus Strategic Challenges statement based on their independent reviews. Please see additional directions in the Systems Appraisal procedural document provided by HLC.

Evidence

Strategic Priorities:

The College continues to work on a centralized approach and deployment for a complaint system, yet it does not yet have a centralized approach for gathering and aggregating complaint data. The College should be aware that a complaint process that includes making systematic changes based on complaint data is required in Federal Compliance.

The College identifies Human, Fiscal, and Physical, and Technological as the pillars for guiding, allocating and assigning resources. Although the budget development process using zero budgeting was discussed, it is not clear how resource allocations are assigned to achieve organization goals and how educational purposes are optimized. Also unclear is how faculty and staff are deployed to ensure effective utilization of the human capital.

 The College is currently an AQIP Pathway institution. As the College continues its CQI journey, the College may want to consider if this pathway best serves the institution.

Strategic Issues by Category

Category 1:

1. Data collection is evident for the College's assessment of its CWOs and program assessment.

The College is encouraged to continue its assessment processes, continue its data analysis, and continue to make improvements aligned to these data.

Category 2

1. The College uses a variety of surveys to gauge student engagement and satisfaction. The College is encouraged to continue use these data to make improvements. The College is expected to have a developed and deployed process for student complaint data. The College is encouraged to exam this area for deployed processes and results.

Category 3

1. As the College continues to offer opportunity to employees the College is encouraged to consider how external training and development opportunities can enrich all employees.

2. The College provides information on its current state. Yet, processes could be further developed. The College is encouraged to continue to consider its key process, measures, and targets for Valuing Employees.

Category 4:

1. The College may need to strategically exam the influence of state legislative and governor intervention in practices, processes and programs at NCSC.
2. The College provides an ad hoc approach to training for ethical behavior and integrity. The College may want consider its outcomes than plan an approach that can be deployed that is focused on these outcomes.

Category 5:

1. As NCSC continues to move forward technology and campus-level facility decisions, the College may need to consider specific outcomes aligned to performance measures.
2. The College is encouraged to clearly document its processes. Evidence was presented, but the processes aligned to evidence could be more clearly articulated. For example, process questions were frequently addressed as one unit versus part a, b, c, etc.

Category 6:

1. The College self-reports that it is considering its pathway options. The College is encouraged to consider a pathway that is aligned with its culture and meets institutional needs.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

3 - Accreditation Evidence Screening Summary

Systems Appraisal teams screen the institution's Systems Portfolio evidence in relation to the Criteria for Accreditation and the Core Components. This step is designed to position the institution for success during the subsequent review to reaffirm the institution's accreditation. In order to accomplish this task, HLC has established linkages between various Process and Results questions and the Criteria's Core Components. Systems Appraisal teams have been trained to conduct a "soft review" of the Criteria/Core Components for Systems Portfolios completed in the third year of the AQIP Pathway cycle and a more robust review for Systems Portfolios completed in the seventh year. The formal review of the Criteria and Core Components for purposes of reaffirming the institution's accreditation through the comprehensive evaluation that occurs in the eighth year of the cycle, unless serious problems are identified earlier in the cycle. As part of this Systems Appraisal screening process, teams indicate whether each Core Component is "strong, clear, and well-presented," "adequate but could be improved," or "unclear or incomplete." When the Criteria and Core Components are reviewed formally for reaffirmation of accreditation, peer reviewers must determine whether each is "met", "met with concerns", or "not met".

The full report documents in detail the Appraisal team's best judgment as to the current strength of the institution's evidence for each Core Component and thus for each Criterion. It is structured according to the Criteria for Accreditation and the Systems Appraisal procedural document. Institutions are encouraged to review this report carefully in order to guide improvement work relative to the Criteria and Core Components.

Immediately below the team provides summary statements that convey broadly its observations regarding the institution's present ability to satisfy each Criterion as well as any suggestions for improvement. Again, this feedback is based only upon information contained in the institution's Systems Portfolio and thus may be limited.

Instructions for Systems Appraisal Team

In this section, the team should create summary statements/suggestions for improvement for each of the Criteria for Accreditation.

Evidence

Summary Statement: Criterion 1

North Central State College has a stated mission statement that is accessible and known to stakeholder groups. The institution;'s mission is available and current. As an open access, two year institution the College offers both transfer and career/technical courses which are aligned to the mission. Still, NCSC may want to consider how to articulate its role in a diverse society. The institution does not appear to have a clear process or aligned activities to address this.

Summary Statement: Criterion 2

NCSC operates with integrity in its financial, academic, and support services functions. Policy appears to be set at the correct level and involves stakeholder input in moving forward with ethical and responsible conduct. The Board of Trustees exercises appropriate oversight and the president oversees daily operations and appropriate levels of administration and staff responsibility.

Summary Statement: Criterion 3

As a comprehensive community college, NCSC's degree programs are appropriate to higher education. The College has completed a credentialing process for faculty and staff. Still, the College admits challenges in program level assessment. In addition, the College has the opportunity to ensure the appropriateness of its general education programing by designing and completing a process that will yield data for decision-making. The College also has the opportunity to engage its faculty and students in scholarship that moves forward its programs as aligned to the mission of the institution. The College has the opportunity to create professional development plans for faculty that include continued acquisition of discipline knowledge and continued engagement in effective teaching. The College's evidence statements did not directly address effective teaching. The evidence included demonstrated support for student learning which comes from effective teaching to some extent. However, the portfolio would have been strengthened by direct discussion how effective teaching is defined, assessed and improved.

Summary Statement: Criterion 4

As an Achieving the Dream school, NCSC has committed institutional resources to retention, persistence, and completion. NCSC is beginning to evaluate the success of its graduates indirectly through faculty and community feedback surveys but needs more robust direct measures of success for its graduates. The institution does demonstrate a commitment to educational achievement and improvement through on-going assessment but it acknowledges that the analysis of the college wide outcome trends has been weak and may not be easily used for making improvements. In addition, the institution is just beginning its co-curricular assessment and this should be a priority.

Summary Statement: Criterion 5

NCSC's governance structure demonstrates evidence of collaboration among the Board of Trustees, the President, and cabinet-level administration. Further evidence of alignment among deans and other administrations is apparent. Budget officers are required to align requests to one of the three main goals. The evidence included focused on ENDs Policy Metrics, Student Access and emerging program data, available resources, and student success. State comparison metrics are shared. NCSC has been very successful in obtaining significant grant and external funding demonstrating partnerships and programs to meet area needs.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

4 - Quality of Systems Portfolio

In this System Appraisal, peer review teams should acknowledge any work that the institution has begun toward addressing the Criteria for Accreditation and the Core Components. The more focused analysis remains on the AQIP Categories and the institution's evidence related to the Process (P), Results (R), and Improvement (I) questions. In cases where there was HLC follow-up stemming from the institution's previous reaffirmation review, the institution may request closer scrutiny of those items during this Systems Appraisal.

Instructions for Systems Appraisal Team

Because it stands as a reflection of the institution, the Systems Portfolio should be complete and coherent, and it should provide an open and honest self-analysis on the strengths and challenges facing the institution. In this section, the peer review team provides the institution with constructive feedback on the overall quality of the Systems Portfolio, along with suggestions for improving future Systems Portfolio submissions.

Evidence

Quality of Systems Portfolio

It would be beneficial for the institution to address each item in the portfolio separately versus combining responses for multiple processes and results. Peer reviewers found that it is not in the college's best interest to combine Results and Interpretation (summary, comparison, interpretation) because the core item response is not evident.

The College may find it beneficial to complete a final edit of the entire document. For example, an edit of the entire document may have prompted the College to delete the punctuation mark of "?" in response to category item 5P2A and evidence response 5.A.1.

The reviewers encourage the institution to clearly articulate its processes. Often, the institution reported "what" it was accomplishing; however, "how" the process was accomplished or the activities and/or primary stakeholders that lead to results could have been improved.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

5 - AQIP Category Feedback

The Systems Appraisal Feedback Report addresses each AQIP Category by identifying strengths and opportunities for improvement. Through detailed comments, which are tied to the institution's Systems Portfolio, the team offers in-depth analysis of the institution's processes, results and improvement efforts. These comments should be straightforward and consultative, and should align to the maturity tables. This allows the team to identify areas for improvement and recommend improvement strategies for the institution to consider.

I - Helping Students Learn

Focuses on the design, deployment, and effectiveness of teaching-learning processes (and on the processes required to support them) that underlie the institution's credit and non-credit programs and courses.

Instructions for Systems Appraisal Team

In this section, the team should provide a consensus narrative that focuses on the processes, results and improvements for Common Learning Outcomes, Program Learning Outcomes, Academic Program Design, Academic Program Quality and Academic Integrity.

Independent Category Feedback for each AQIP Category from each team member should be synthesized into an in-depth narrative that includes an analysis of the institution's processes, results and quality improvement efforts for each category. Wording from the Stages in Systems Maturity tables for both processes and results should be incorporated into the narrative to help the institution understand how the maturity of processes and results have been rated. The narrative should also include recommendations to assist the institution in improving its processes and/or results. It is from this work that the team will develop a consensus on the Strategic Challenges analysis, noting three to five strategic issues that are crucial for the future of the institution. Please see additional directions in the Systems Appraisal procedural document provided by HLC.

Evidence

Category 1: Helping Students Learn

1.1: Common Learning Outcomes

1P1	
Process	**Comments on Process Maturity and Improvement**

Aligning common outcomes to the mission, educational offerings and degree levels of the institution	**Aligned:** North Central State College (NCSC) has a well-defined **aligned** process that link common outcomes to its mission of student success. Measures include retention, persistence and graduation rates as well as graduates' knowledge, skills and abilities. Data are reviewed by the assessment committee and the President's Cabinet and shared with committees and employees. External feedback is gathered annually from community leaders on both technical and soft skills needed for graduates.
Determining common outcomes	**Aligned:** NCSC has an **aligned** process in determining common outcomes. They review them every two years and conduct regular workshops. The Assessment Committee has an established working relationship with faculty to ensure that the work is meaningful and feedback is provided.
Articulating the purposes, content and level of achievement of the outcomes	**Aligned:** NCSC's overall processes are **aligned**. The outcomes are articulated in multiple publications including syllabi, catalog, master matrix, learning and management system and shared with advisory committees and appropriate stakeholder groups.
Incorporating into the curriculum opportunities for all students to achieve the outcomes	**Aligned:** The college-wide outcomes are assessed by faculty and monitored by the Assessment Committee, Academic Services Office, CAO and the Division Deans. The outcomes are communicated to faculty and staff twice a year during in-service meetings. The curriculum maps shows the number of common learning outcomes that are assessed in each program. The College accommodates students with disabilities through the Specialized Services Office to ensure that all students are supported. The processes are **aligned**.

Ensuring the outcomes remain relevant and aligned with student, workplace and societal needs	**Systematic:** NCSC has a **systematic** process in ensuring outcomes remain relevant with student, workplace and societal needs. These activities include input from relevant communities who benefit from students who leave with relevant credentials and skills The college has an opportunity to ensure that the process continue to be more explicit and repeatable so that the outcomes remain relevant to students, workplace, and societal needs
Designing, aligning and delivering cocurricular activities to support learning	**Reacting:** NCSC has **reacting** processes to support co-curricular activities. It is unclear how the college evaluates the co-curricular activities. The college has an opportunity to develop explicit, repeatable processes to design, align and deliver co-curricular activities that support student learning and link to its common outcomes There is also an opportunity to gather feedback from students on current offerings to determine satisfaction, relevance, and importance.
Selecting tools, methods and instruments used to assess attainment of common learning outcomes	**Systematic**: Assessments have been incorporated into the College's learning management system and rubrics selected based on established AACU rubrics. Multiple years of data have been completed with the opportunity for additional analysis and identification of trends. The college has the opportunity to move from **systematic** to the next level of process maturity by evaluating the effectiveness of its new system and tools for attainment of the common learning outcomes.
	Systematic:

Assessing common learning outcomes	North Central State College employs a **systematic** process to engage faculty in the assessment process. It rolled out the use of the VALUE rubric and expanded systematically from there; thereby providing faculty with regular training and opportunities to collaborate and norm the rubrics. The college acknowledges an opportunity to improve its use of the resulting data of student attainment of common learning outcomes for improvement.
Other identified processes	

1R1	
Results	**Evaluation of Results and Systems Improvement**
Summary results of measures (including tables and figures when possible)	**Systematic**: Results of rubrics have been shown from 2013-2017, yet analysis of major changes or use of the data appear weak and changing regularly based on faculty input. Since the College admits that the results are skewed, opportunity exists for improved data collection, and results that would inform decision and improvement. This would move the level from **Systematic** to a higher level of maturity.
Comparison of results with internal targets and external benchmarks	**Reacting**: There were unclear comparison of results with internal targets and external benchmarks which demonstrates **reacting** level of maturity.
Interpretation of results and	**Reacting**: The use of data and interpretation of results have been limited

insights gained	to **reacting** due to faculty changing courses, philosophy and response to state-required outcome measures on performance funding.

1I1
Team Comments
NCSC has made progress in identifying common outcomes and providing opportunities for input from stakeholders. The College provides a list of improvements and those improvements are centered on the process of assessment and deploying the process.

1.2: Program Learning Outcomes

1P2	
Process	**Comments on Process Maturity and Improvement**
Aligning program learning outcomes to the mission, educational offerings and degree levels of the institution	**Reacting:** NCSC did not respond to this area but there is work being done on the institutional outcomes as indicated in subsequent responses. However, the effort varies greatly by program and lacks consistent strategies, outcomes, and analysis of data. This is a **reacting** level of process maturity.
	Systematic: North Central State College states that individual programs are

Determining program outcomes	at varying levels of maturity but are making improvements in using assessment data. The college reviewed learning outcomes in 2012 and in 2014 due to response to state department of higher education changes. Individual programs review their outcomes based upon external agencies' needs, such as specialized accreditation.
Articulating the purposes, content and level of achievement of these outcomes	**Systematic:** The College lists where the program level outcomes are published and the frequency of updates.
Ensuring the outcomes remain relevant and aligned with student, workplace and societal needs	**Systematic**: NCSC has a process that is **Systematic** in meeting student, workplace, and societal need. Programs are allocated time during each semester's in-service to work on defined questions related to student outcomes. Using a systematic approach to track discussions and changes and related data will help with informed decision-making. Departments are required to meet with advisory committees twice per year.
Designing, aligning and delivering cocurricular activities to support learning	**Systematic**: The college has a number of co-curricular opportunities which are mostly student clubs that are related to their academic experience. Although it uses a variety of assessment strategies, the college might benefit by identifying a common consistent, and uniform approach to assessing the impact of co-curricular activities for better decision-making regarding program changes. This would move the institution from **systematic** to a higher level of maturity.

Selecting tools, methods and instruments used to assess attainment of program learning outcomes	**Systematic**: NCSC utilizes varying tools and methods to assess the attainment of program learning outcomes. The college acknowledged that the Assessment Committee temporarily suspended feedback on tools used and data gathered in fall 2015 to focus on training and feedback surrounding each department's analysis of trends they observed in their outcomes assessment. The College continues to work on these processes and has included internal tools and external tools.
Assessing program learning outcomes	**Systematic**: The College reports that it assess all programs that meet a minimum threshold of enrollment using PAR (program assessment reports). This process is **systematic** and completed on an annual basis. Opportunity exist for the college to describe program review, when it occurs and how the results are used for improvement.
Other identified processes	

1R2	
Results	**Evaluation of Results and Systems Improvement**
Overall levels of deployment of the program assessment processes within the institution (i.e., how many programs are/not assessing program goals)	**Systematic**: NCSC tracks the programs that have submitted their Program Assessment Report (PAR). The College reported that 100% of the programs submitted their PAR.

Summary results of measures (including tables and figures when possible)	**Systematic**: The College report findings from programs and uses the same approach for programs. Departments also report data.
Comparison of results with internal targets and external benchmarks	**Systematic**: The College acknowledged that its PARS are created internally and quantitative external bench-marking is not available. External benchmarks for programs that have specialized accreditation or licensing are being utilized.
Interpretation of assessment results and insights gained	**Systematic**: The College assesses students' achievement of program learning outcomes. The College has a faculty driven process in which the results are used to make improvements. The College recognizes that this is a process that continues to inform meaning dialogue and substantive changes will result from evidence.

1I2
Team Comments
North Central State College has worked on the process for developing and reporting on programmatic learning outcomes. There appears to be a process in place for meaningful data collection that can be used to improve the quality of student learning.

1.3: Academic Program Design

1P3	
Process	**Comments on Process Maturity and Improvement**
Identifying student stakeholder groups and determining their educational needs	**Systematic**: The College identifies that the needs of the students are first and this is signified by the inclusion of student success in one of its three pillars of the College's Strategic Plan. The College also serves students at additional locations and uses advisory committees to stay abreast of student groups and their educational needs. The College reports that it uses several systems to ensure development of programs that support curriculum development and program review. For example, the College process includes uses data from EMSI to support education programming.
Identifying other key stakeholder groups and determining their needs	**Systematic**: NCSC identified other key stakeholder groups. The College identified a pilot process. The College processes using college-wide advisory committees that include local employers.
Developing and improving responsive programming to meet all stakeholders' needs	**Systematic:** The college follows a **systematic** 3-year plan of activities to evaluate the value of all academic and service departments. However, it is unclear how off campus programs are reviewed in light of growing numbers in Early College.
Selecting the tools, methods and instruments used to assess the currency and effectiveness of academic programs	**Systematic:** NCSC has a **systematic** process for selecting the tools, methods and instruments that uses quantitative external benchmarks, such as licensure pass rates, program accreditation appraisals and job placement rates to assess the currency and effectiveness of its programs. It supplements this data with internal assessment data but acknowledges that this data is less accurate than the external data. The institution could benefit from a tool that yields data that may be analyzed and deployed in a systematic, predictable approach.

Reviewing the viability of courses and programs and changing or discontinuing when necessary	**Systematic:** North Central State College utilizes a **systematic** process of a variety of activities to review the viability of its courses and programs, including committee meetings, annual review by president's staff and assessment of allocation data. The College might benefit beyond CTE programs by evaluating and ensuring that these multiple activities with varied frequency yield results that can be easily analyzed and interpreted to inform decision regarding all programs.
Other identified processes	

1R3	
Results	**Evaluation of Results and Systems Improvement**
Summary results of assessments (including tables and figures when possible)	**Systematic:** The College provided multiple measures of assessment of results. Overall results vary and appeared **systematic**. The College may consider more direct measures for academic program design and its ability to meet student needs.
Comparison of results with internal targets and external benchmarks	**Systematic**: Comparison of results are reported. The College has recognized successes, barriers, and and areas of improvement.
	Systematic:

Interpretation of results and insights gained	The College does provide an interpretation for each data set listed. The institution is encouraged to consider collective insights among all data sets.

1I3
Team Comments
North Central State College has a program review process that assesses both academic and non-academic areas. Technical programs have advisory committees and Perkins data that helps to identify student and program needs. The CSI may provide some good information for helping students persist; but at this point in the pilot. The institution gathers data, and the data sets seem to inform decision making.

1.4: Academic Program Quality

1P4	
Process	**Comments on Process Maturity and Improvement**
Determining and communicating the preparation required of students for the specific curricula, programs, courses and learning they will pursue	**Systematic**: Faculty with input from Advisory committee and with data of institutions with similar program, state and accrediting body standards, and the curriculum mapping are avenues utilized for ensuring curriculum that is well developed in terms of prerequisite knowledge, efficient flow of learning, and of value for professional/citizenship needs. The information is communicated by the faculty, staff, and administrators and available on the website, the curriculum repository, the catalog, the student information system, as well as print marketing material. NCSC is at a **systematic** level of maturity and it would be beneficial to have adjuncts included.

Evaluating and ensuring program rigor for all modalities, locations, consortia and dual-credit programs	**Aligned**: The institution has **aligned** process for monitoring rigor across modalities and assuring faculty credentials are met by those teaching dual enrollment. Using Quality Matters to evaluate online courses is a good practice in maintaining quality. Faculty credentialing for Credit College Plus courses equate to those of full-time faculty with controls on textbooks, course delivery methods, assessments, and outcomes in place.
Awarding prior learning and transfer credits	**Systematic**: The Registrar's Office and academic services office with the input from divisional deans evaluate prior learning and transfer credits. NCSC policies related to prior learning assessment are communicated to faculty/staff/students With the recent update of the policies related to prior learning assessment, it would take time for the institution to assess the impact of the update. The process appeared **systematic**.
Selecting, implementing and maintaining specialized accreditation(s)	**Reacting**: The institution has a **reacting** process for selecting, implementing and maintaining specialized accreditations. There is a listing of specialized accreditations, however it is unclear on the process for selecting, implementing and maintaining specialized accreditations. Moreover, the list provided makes it difficult to determine where specialized accreditation is held or a simple membership or affiliation.
Assessing the level of outcomes attainment by graduates at all levels	**Reacting**: Opportunity exists for the College to describe how it assesses the level of outcomes attainment by graduates at all levels.
Selecting the tools, methods and instruments used to	**Reacting**: The College admits it has variance in its process and tool selection. The college values accreditation and external credentialing. The College reports that this is tracked by

assess program rigor across all modalities	department and that the services of institutional research are employed to facilitate this tracking activity. The selection process is **reacting**.
Other identified processes	

1R4	
Results	**Evaluation of Results and Systems Improvement**
Summary results of assessments (including tables and figures when possible)	**Systematic**: The summary is provided in narrative form by reporting how the college moved forward after 2013, using one goal per academic year. With 100% participation, the faculty deployed one assessment and used one VALUE rubric. More results became available each semester and year.
Comparison of results with internal targets and external benchmarks	**Systematic**: Results with internal targets and external benchmarks are reported primarily from IPEDS data. The College recognized the need to improve this area. The College acknowledges that this "limited" their "use of external bench-marking."
Interpretation of results and insights gained	**Systematic**: IPEDS comparisons are being set and measured. The College noted areas of improvement from multiple surveys and reports.

Comments	

North Central State College understands the need to assess programs and learning outcomes and has developed some structures to make this happen. NCSC recognizes barriers and self-reports that it has been addressing these barriers since 2015.

1.5: Academic Integrity

1P5	
Process	**Comments on Process Maturity and Improvement**
Ensuring freedom of expression and the integrity of research and scholarly practice	**Aligned**: Academic freedom is addressed by policy and through the collective bargaining agreement. It is appropriate for a community college environment. The college has a current AQIP project on integrity within programs, courses, and services. The process is **aligned**.
Ensuring ethical learning and research practices of students	**Aligned:** NCSC has a well-developed and **aligned** process for ensuring ethical learning and research practices of students. The student code of conduct is published in the college catalog and spells out student rights and responsibilities. The appeal process is delineated and required federal policies and statements are in place.
Ensuring ethical teaching and research practices of faculty	**Aligned**: Expectations for faculty performance and involvement are part of the collective bargaining agreement, and students have recourse if they feel their rights have been violated. The college has an active IRB committee to consider research proposals. Faculty are evaluated against consistent standards on a regular rotation. The process is **aligned**.
	Reacting:

Selecting the tools, methods and instruments used to evaluate the effectiveness and comprehensiveness of supporting academic integrity	NCSC identified several tools, methods and instruments selected to evaluate the effectiveness and comprehensiveness of supporting academic freedom. It is unclear how the institution selects those tools and measures to accomplish its goals. It would be beneficial to have the process well defined for this area. The process appeared **reacting**.
Other identified processes	

1R5	
Results	**Evaluation of Results and Systems Improvement**
Summary results of measures (including tables and figures when possible)	**Reacting**: Reporting of results were minimal and **reacting** with limited action needed by the institution. Perhaps it would benefit the institution to maintain a comprehensive complaint process aside from those reaching the level of CAO to ensure that institutional decision and improvement are based on complete data.
Comparison of results with internal targets and external benchmarks	**Reacting**: No comparison data provided resulting in **reacting** level.
Interpretation of results and insights gained	**Reacting**: No interpretation of results and insights gained are included in the report submitted. This is **reacting** level of maturity.

1I5
Team Comments
Limited research is conducted at NCSC but ethical standards appear to be in place to move forward as opportunities present themselves for additional human subject research. The College lists improvements but these are limited to activities because the college does not provide results that can be analyzed and used to make data driven decisions.

Category 1 Summary Statement
NCSC provided examples of how they are utilizing initiatives like Achieving the Dream or HLC guidance to improve common, program and academic assessments and demonstrate responsiveness to rapidly changing local and state mandates. Programs are at various maturity levels in terms of assessment.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

II - Meeting Student and Other Key Stakeholder Needs

Focuses on determining, understanding and meeting needs of current and prospective students and other key stakeholders, such as alumni and community partners.

Instructions for Systems Appraisal Team

In this section, the team should provide a consensus narrative that focuses on the processes, results and improvements for Current and Prospective Student Needs, Retention, Persistence and Completion, Key Stakeholder Needs, Complaint Processes, and Building Collaborations and Partnerships.

Independent Category Feedback for each AQIP Category from each team member should be synthesized into an in-depth narrative that includes an analysis of the institution's processes, results and quality improvement efforts for each category. Wording from the Stages in Systems Maturity tables for both processes and results should be incorporated into the narrative to help the institution understand how the maturity of processes and results have been rated. The narrative should also include recommendations to assist the institution in improving its processes and/or results. It is from this work that the team will develop a consensus on the Strategic Challenges analysis, noting three to five strategic issues that are crucial for the future of the institution. Please see additional directions in the Systems Appraisal procedural document provided by HLC.

Evidence

Category 2: Meeting Student and Other Key Stakeholder Needs

2.1: Current and Prospective Student Needs

2P1	
Process	**Comments on Process Maturity and Improvement**
Identifying underprepared and at-risk students, and determining their academic support needs	**Systematic** North Central State College systematically collects information about the needs of at-risk students, through surveys, focus groups, and other institutional data. The information is reviewed and presented contextually to student success teams, deans, president's cabinet, faculty and advisors. Interventions are developed based upon this information. An example is the upgraded "Gateway Services" concept designed to deepen the personalized focus through the enrollment process. It is unclear how regularly this process occurs or when it is evaluated for efficacy. The College has an opportunity to move to an aligned level of maturity by defining the timing and systematic utilization of the process.

Deploying academic support services to help students select and successfully complete courses and programs	**Systematic** NCSC has a well defined process map for student intake and provides an enrollment checklist for students to move through the entry process. Placement tests are given in Math and English and shared with students and advisors. It is unclear whether students are required to enroll in the level at which they test. The College would benefit from processes that address key goals and strategies, and share lessons learned among institutional units.
Ensuring faculty are available for student inquiry	**Reacting** Faculty are required to have a minimum of four office hours per week and post availability on their office and on syllabi. There is no clear indication of how these hours on-campus impact intervention strategies used for student success. The institution may consider if availability of faculty is meeting student need.
Determining and addressing the learning support needs (tutoring, advising, library, laboratories, research, etc.) of students and faculty	**Systematic** The College relies heavily on survey data from Flashlight, CCSSE, and SSI (added in 2016-17) to determine student support needs. Results have been utilized to make changes in how students move through the system (STAR) and are advised, and how they are offered tutoring, TRIO services, and other support. The institution would benefit from a more deliberate process for individual student progress and support.
Determining new student groups to target for educational offerings and services	**Reacting** NCSC has informal processes in place for reviewing and reacting to community input regarding target groups, and has placed significant focus on the high school market (CCP) as it is identified as a state-wide growth area. The institution would progress to a more systematic level of maturity through the development of consistent processes that are utilized on a regular basis to identify and make decisions about additional potential new targets.
Meeting changing student needs	**Systematic** The College has a documented system of data gathering and analysis to identify student needs and changes over time. Changes such as using the CSI and STAR in advising have been a direct result of information gathered. There does not appear to be a documented process for review and analysis after a change is made to determine how useful it was in meeting student success goals.
Identifying and supporting student subgroups with distinctive needs (e.g.,	**Systematic** NCSC has identified key student subgroups and provides examples of processes used to determine specific needs of a subgroup, including veterans and distance students, and the growing high school early college population. It is not as clear how support services are adapted for these specific

seniors, commuters, distance learners, military veterans)	needs, assessed for effectiveness, and sustained over time. The institution will be able to be further align student support when it has processes in place for clearly identifying, tracking, and making changes as needed.
Deploying non-academic support services to help students be successful	**Systematic** The College deploys services for students by providing internal resources and partnering with external stakeholders who have a vested interest in meeting student need. The institution would benefit from developing proactive processes to identify needs and linking students to support services.
Ensuring staff members who provide academic and non-academic student support services are qualified, trained and supported	**Systematic** The College referenced 3P1 for the processes for ensuring staff members who provide non-academic student support services are qualified, trained and supported. However, 3P1 focuses on both faculty and staff and does not provide a direct response to this question. The staff are also afforded internal training and in-service days.
Communicating the availability of non-academic support services	**Aligned** NCSC has a variety of tools that communicate non-academic support services to students. The tools include the college catalog, student handbook, the website, and various social media accounts and internal postings on campus. The College also communicates these services to students during the on-boarding process. The recent implementation of Ellucian GO may help to communicate actively with students.
Selecting tools, methods and instruments to assess student needs	**Systematic** NCSC implemented a process map that identifies how tools and assessments are to be investigated and deployed following initial identification of a need. It may be helpful for NCSC to document how current assessments or tools are evaluated or discontinued.
Assessing the degree to which student needs are met	**Aligned** The College relies on internal and external surveys to assess the degree to which student needs are met. Instruments are clearly defined in the process map. It might benefit the institution to continue to assess each survey to ensure it yields results that are useful for improvement and that annual administrations of each survey are necessary.
Other identified processes	

2R1	
Results	**Evaluation of Results and Systems Improvement**
Summary results of measures (including tables and figures when possible)	**Systematic** SSI results indicate the level of student satisfaction with the College. Orientation survey data indicates that students agree or strongly agree that the orientation is providing them with information to better prepare them for their first term in college. NCSC has the opportunity to expand how other assessments are being used or whether they need to be continued if not analyzed or used regularly.
Comparison of results with internal targets and external benchmarks	**Systematic** North Central State College has analyzed the survey data presented and compared its results to national peers, when available. Their students are less satisfied than national peers, especially males, minorities and part-time students. NCSC students have higher than average levels of outside responsibilities than peers. However, since few clear benchmarks and metrics have been identified and utilized, it is difficult to see how the institution uses this data to improve performance.
Interpretation of results and insights gained	**Systematic** The College has made changes to processes and practices based upon results of these surveys. The institution has an opportunity to move to an aligned level of maturity by using these data to track performance on institutional goals and communicate results broadly across the institution.

2I1
Team Comments
The College is implementing changes that are sometimes aligned to its processes and results. Examples include discontinuing classes at an outreach center due to low enrollment, changes in orientation and the first year experience course, rubric/process for identifying new student groups, and a focus on academic advising and support. While some of the improvements could be derived from the data, some do not appear to be data informed. The College will benefit from a more integrated process that is tied directly to goals and institutional outcomes and metrics.

2.2:Retention, Persistence and Completion

2P2	
Process	**Comments on Process Maturity and Improvement**
Collecting student retention, persistence and completion data	**Aligned** North Central State College has established a strategic priority related to student success. Two steering committees oversee the enrollment and student success processes. The institutional research office regularly collects retention, persistence and completion data. This data is shared with the student success teams and the president's cabinet for action.
Determining targets for student retention, persistence and completion	**Systematic** The College indicates that it uses internal data and factors to establish persistence and completion goals, and then describes the use of external indicators to formulate the goal. The college would benefit by developing explicit, repeatable, measurable processes linked to its strategic goals.
Analyzing information on student retention, persistence and completion	**Systematic** Retention data is shared with faculty and used at multiples levels of the organization to prioritize and strategize ways to improve. It is difficult to determine from the portfolio review how the data are consistently shared, reviewed, and used to make informed decisions that lead to strategy changes. The College would benefit from a clearly defined process for analyzing student retention, persistence and completion data against established goals and metrics.
Meeting targets for retention, persistence and completion	**Reacting** NCSC engages in several activities aimed at improving retention, persistence and completion such as first year experience course and streamlining of developmental education by reducing pre-requisites. However, it is unclear what the process is for meeting targets, how often progress is assessed, or how information is shared across the institution.
Selecting tools, methods and	**Systematic** The College uses its standard data collection tools to analyze student success. It includes the student information system, IPEDS, HEI, AdvsorTrac and CCSSE. The College

instruments to assess retention, persistence and completion	also has a Trio grant and utilizes the required reporting to address this area. The institution would evolve to a higher level of maturity by clearly identifying the most appropriate indicators and related tools that would provide stronger, institution-specific results.
Other identified processes	

2R2	
Results	**Evaluation of Results and Systems Improvement**
Summary results of measures (including tables and figures when possible)	**Systematic** NCSC has focused on course completion data and shows impressive comparison to other Ohio institutions in completion gateway courses. The College addresses overall retention data as well as classroom level retention data.
Comparison of results with internal targets and external benchmarks	**Systematic** Although the College results showed an increase in course-level success, program success, and for other student groups such as Pell students and minority students (as included in ENDS Policy Metrics – Factbook Draft Success Strategic Goal), and shared a chart with results from gateway courses for the state of Ohio, internal targets or comparisons were not apparent in the material submitted.
Interpretation of results and insights gained	**Systematic:** Results are collected and these results are the topic of meetings at the departmental and institutional level. The College continues to make use of these data.

2I2	

Team Comments
The College has implemented improvements that are aligned with its concentration and strategic focus on retention, persistence and completion. The improvements involved multiple stakeholders and range from improvements at the course level through the program level, as well as student support service level. It will be important to develop strategies to assess the impact of the various initiatives and to make appropriate changes to continue to enhance student success.

2.3:Key Stakeholder Needs

2P3	
Process	**Comments on Process Maturity and Improvement**
Determining key external stakeholder groups (e.g., alumni, employers, community)	**Systematic** The College uses two surveys, employer and advisory board, to gather external stakeholder feedback. However, these surveys do not appear to determine who key stakeholders are. The College indicates it uses various measures for determining stakeholder needs.
Determining new stakeholders to target for services or partnership	**Systematic** The president's cabinet uses institutional data and policy reviews to identify targeted new stakeholders. However, it is unclear from the example provided how the recent combination of all program advisory committee information provides a global picture of their needs and helps determine new stakeholder groups.
Meeting the changing needs of key stakeholders	**Reacting** The College provided an example of meeting student needs by focusing on College Credit Plus students who are now 33 percent of the College's student population. While growth is documented, it does not describe an overall institutional process for meeting the changing needs of stakeholders in general.
Selecting tools, methods and instruments to assess key stakeholder needs	**Reacting** The process map utilized in selecting tools is embedded in the systems portfolio. However, it is unclear how the process map has resulted in selecting effective tools to assess key stakeholder needs.

Assessing the degree to which key stakeholder needs are met	**Systematic** The College provides a basic process for assessing short-term as well as long-term needs. The result of the short-term needs assessment is generally a change in process, policy, or procedure. It is not readily apparent that there is a consistent formal process for the long-term assessment.
Other identified processes	

2R3	
Results	**Evaluation of Results and Systems Improvement**
Summary results of measures (including tables and figures when possible)	**Systematic** NCSC provides results from various surveys completed by multiple stakeholder groups ranging from staff, external advisory groups, students, and faculty. The institution is steadily increasing is some areas, but not in all. The College did not provide a summary of its varied data and may benefit from looking at these results by stakeholder group and determining focused areas of improvement.
Comparison of results with internal targets and external benchmarks	**Reacting** It is unclear how the data was used to compare internal targets and external benchmarks.
Interpretation of results and insights gained	**Reacting** It is unclear how the data was interpreted to provide insights.

2I3
Team Comments
North Central State College indicated multiple changes and possible improvements that were tied back to results and feedback. In response to advisory committee feedback, the College has included a new assessment outcome focused on professional and soft skills.

The College has focused on internal communication, including a shared governance structure which requires two-way communication from all members of the committee and to their constituents. Much of the improvement information focuses on the employee stakeholders which is important, but not comprehensive.

2.4: Complaint Processes

2P4	
Process	**Comments on Process Maturity and Improvement**
Collecting complaint information from students	**Systematic** The College follows a long-standing process at the institutional level and the department level, for addressing student complaints. The institution documents how the complaints are received, however it is not clear how trends are identified or complaints reviewed to determine patterns and needed change. The institution recognizes the need for a more systematic approach to communicating the process to students and would benefit from a more structured approach in gathering and acting upon student complaints.
Collecting complaint information from other key stakeholders	**Aligned** The College has processes for collecting complaints from other key stakeholders such as alumni, advisory committees and employers through surveys. Employee surveys provide for internal input.
Learning from complaint information and determining actions	**Systematic** The College uses data from the Student Satisfaction Inventory and student focus groups to guide its actions. However, the SSI is a student satisfaction survey and while it can identify areas for improvement of services, it is not a direct measure of complaints. Most recently, the College developed an action project and a "customer service" committee related to this area. The institution has the opportunity, through this action project, to achieve a higher level of maturity in its processes.

Communicating actions to students and other key stakeholders	**Reacting** The College indicates it uses an in-house tool to centralize complaints. It is unclear what the process is for communicating actions, and if this process is measureable, repeatable and reviewed.
Selecting tools, methods and instruments to evaluate complaint resolution	**Reacting** Cost and unknown demand determined the selection of a tool to centralize the system for complaint resolution. There is no information on how the tool will function and be utilized in decision-making. The College has an opportunity to select tools, methods, and instruments to analyze complaint resolution with the aim of identifying areas of concern and planning for improvements.
Other identified processes	

2R4	
Results	**Evaluation of Results and Systems Improvement**
Summary results of measures (including tables and figures when possible)	**Reacting** The College provided complaint log information from departments and results from SSI. Two examples of complaint logs (business and liberal arts) were shared, though it remains unclear if these is widely used by all areas including Credit Plus and distance students. These data sets were not summarized. The limited number of complaints was explained by the threshold needed to rise to a formal complaint.
Comparison of results with internal targets and external benchmarks	**Reacting** The College did not provide a direct response to this question.
Interpretation of results and insights gained	**Reacting** The College did not provide a direct response to this question.

2I4
Comments
Some improvements have been identified and tied back to results from complaints by students and faculty. However, the majority of improvements identified are focused on removing student barriers and faculty communication with students, which is not a direct response to this question.   A centralized tool has been approved by the president's staff for possible implementation, but it is unclear what the tool's capabilities are and how it will be utilized in informed decision-making. The institution is using an Action Project to focus on this area and it could help them define their processes and results.

2.5: Building Collaborations and Partnerships

2P5	
Process	**Comments on Process Maturity and Improvement**
Selecting partners for collaboration (e.g., other educational institutions, civic organizations, businesses)	**Reacting** The College relies on executive leadership to cultivate partnerships and there is no identified process for identifying and building partners. In addition, employees' presence at meetings and events generate opportunities for collaborations. The College has sought and received substantial grant funding but it is unclear what process is used to tie grant requests to strategic initiatives. The College has an opportunity to operate via generally understood, repeatable and documented processes that make the goal of these activities explicit, measurable and subject to improvement.
Building and maintaining relationships with partners	**Systematic** The institution builds relations through the planning process at the cabinet level. Although the systems portfolio states how the College builds relationships with partners, it does not discuss how those partnerships are identified and maintained for the benefits of all partners.
	Systematic The College assesses the effectiveness of

Selecting tools, methods and instruments to assess partnership effectiveness	partnerships based upon the educational, economic and political impacts they have on its service region. The College has an opportunity to clearly articulate the tools, methods and instruments used and to align these criteria to explicit goals and targets.
Evaluating the degree to which collaborations and partnerships are effective	**Systematic** NCSC uses a variety of indirect measures to evaluate effectiveness: grant dollars, advisory board feedback, number of events, and surveys. The College has an opportunity to move to an aligned level of maturity by linking these measures to its institutional priorities, setting clear targets, and developing more direct measures of effectiveness
Other identified processes	

2R5	
Results	**Evaluation of Results and Systems Improvement**
Summary results of measures (including tables and figures when possible)	**Reacting** The College has partnerships with area K-12 schools for Tech Prep, dual enrollment and middle school programing. It also partners with other institutions of higher education in the region, including articulation agreements with universities and an innovation grant with another community college. NCSC provided a summary of each partnership but there were no results for the assessment of these partnerships.
Comparison of results with internal targets and external benchmarks	**Reacting** The College provides comparison information in narrative form. No internal targets or external benchmarks were provided as the results were primarily narrative
Interpretation of results and insights gained	**Reacting** The College has several partnerships but the assessment data for the partnerships were not provided.

2I5
Comments
The College's mission supports the importance of partnerships and the institution has worked to develop them. Due to shrinking state resources, new performance funding, and decreasing demographics, the College will want to continue to expand the agreements and collaborative interactions with many partners. Now that several agreements are in place, NCSC has the opportunity to begin assessing the effectiveness and sustainability of these agreements to demonstrate maturity.

Category 2 Summary Statement
North Central State College is primarily at the systematic level of maturity in meeting student and key stakeholder needs. The College has a commitment to serving a broad range of stakeholders in Ohio and has been addressing significant change in demographics and State mandates. This has provided the opportunity to further examine partnerships and external grant opportunities to expand in meeting various stakeholder needs. The College has initiatives that have resulted in gains in student retention, persistence, and completion. The College has practices, policies, and processes that are driven at the strategic level to ensure students are placed first in all its practices. The College's focus on students is also evidenced in its ability to ensure continued resources to support student-centered practices, through the garnering of grants, particularly Title III grants and reallocation of resources. The College continues to work on a centralized approach and deployment for a complaint system. The College needs to ensure that their processes related to tracking and acting upon student complaints comply with federal mandates. The College relies on internal and external surveys to assess the degree to which student needs are met. It would benefit from formal assessment of each survey to ensure it yields results that are useful for improvement.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

III - Valuing Employees

Explores the institution's commitment to the hiring, development, and evaluation of faculty, staff and administrators.

Instructions for Systems Appraisal Team

In this section, the team should provide a consensus narrative that focuses on the processes, results and improvements for Hiring, Evaluation and Recognition and Development.

Independent Category Feedback for each AQIP Category from each team member should be synthesized into an in-depth narrative that includes an analysis of the institution's processes, results and quality improvement efforts for each category. Wording from the Stages in Systems Maturity tables for both processes and results should be incorporated into the narrative to help the institution understand how the maturity of processes and results have been rated. The narrative should also include recommendations to assist the institution in improving its processes and/or results. It is from this work that the team will develop a consensus on the Strategic Challenges analysis, noting three to five strategic issues that are crucial for the future of the institution. Please see additional directions in the Systems Appraisal procedural document provided by HLC.

Evidence

Category 3: Valuing Employees

3.1: Hiring

3P1	
Process	**Comments on Process Maturity and Improvement**
Recruiting, hiring and orienting processes that result in staff and administrators who possess the required qualification, skills and values	**Aligned** The College follows a standard hiring process that includes Human Resources and relevant stakeholders. All positions have required skills, credentials, and values associated with them. Faculty hiring is based on Ohio Department of Higher Education, Higher Learning Commission, and specialized program accreditation guidelines, and procedures outlined in the collective bargaining agreement.
	Aligned Faculty credentials have been reviewed and consistent

Developing and meeting academic credentialing standards for faculty, including those in dual credit, contractual and consortia programs	between CCP and on campus faculty with faculty development plans in place to address needs.Faculty hiring is based on Ohio Department of Higher Education, Higher Learning Commission, and specialized program accreditation guidelines, and procedures outlined in the collective bargaining agreement.
Ensuring the institution has sufficient numbers of faculty to carry out both classroom and non-classroom programs and activities	**Systematic** Several offices may provide input on the number of faculty assigned to specific disciplines, course fill rates, and track student needs for instruction. The college has an opportunity to more clearly define a process to ensure it has sufficient staffing to carry out classroom and non-classroom activities.
Ensuring the acquisition of sufficient numbers of staff to provide student support services	**Reacting** NCSC has utilized a benefit package strategy in the absence of competitive salary and wages to attract and retain staff.The College does not provide a direct answer the question. Instead, the college provides activities and benefits for student support staff.
Tracking outcomes/measures utilizing appropriate tools	**Reacting** The College does not provide a direct answer the question. Instead, the college provides activities, surveys, and data points that are collected.
Other identified processes	

3R1	
Results	**Evaluation of Results and Systems Improvement**
	Reacting The results of the three year quality survey tracked were not provided, and the College did not provide results

Summary results of measures (including tables and figures when possible)	aligned to its hiring processes reported in 3P1. The College appeared to focus on the rural and economically depressed service location rather than gathering data that would be utilized for improvement.
Comparison of results with internal targets and external benchmarks	**Reacting** The College gathers information regarding faculty credentials and diversity. The results are not presented in a meaningful way that would allow peer reviewers to know the internal targets and external benchmarks.
Interpretation of results and insights gained	The College did provide comparison data for diverse hiring. Informal methods are used to address identified concerns. It is not clear how results are reviewed and utilized to inform change.

3I1
Team Comments
Due to financial constraints, the President's staff has taken an active role in personnel hiring and recruiting processes in addition to Human Resources from a compliance standpoint. Benefit packages are a priority and the College has pursued some changes such as joining the health insurance collective to improve the cost and availability. Developing strategic goals, metrics, and benchmarks will help the institution to measure how well they are achieving what is most important to them in the hiring and training of employees.

3.2: Evaluation and Recognition

3P2	
Process	**Comments on Process Maturity and Improvement**
Designing performance evaluation systems for all employees	**Systematic** At its last Strategy Forum, NCSC developed a systematic evaluation and professional development process. Faculty and staff participate in self-assessment annually and supervisors conduct period reviews during the probationary period. Assessment of the evaluation system could assist the institution in moving to the next level of maturity.
Soliciting input from and communicating expectations to faculty, staff and administrators	**Reacting** The College follows a series of scheduled events that include all-campus sessions for reporting, smaller sessions for providing input. It is not clear how information from the campus quality survey is reviewed and acted upon.
Aligning the evaluation system with institutional objectives for both instructional and non-instructional programs and services	**Aligned** Faculty contract and staff evaluations incorporate factors of importance to the college mission and objectives. Staff evaluation is annual with performance appraisal and professional development components. Faculty also do an annual report on how they have improved their pedagogy. The report has defined parameters that address service to the student, the college and the community.
Utilizing established institutional policies and procedures to regularly evaluate all faculty, staff and administrators	**Aligned** The college describes and established process that is deployed and shared with faculty and staff. Faculty are on probationary status for the first three years and evaluated annually. Staff has an annual evaluation and professional development plan.
	Reacting The College's benefit system is comprehensive and reviewed regularly. The College

Establishing employee recognition, compensation and benefit systems to promote retention and high performance	refers to recognition events in its description of Promoting employee satisfaction and engagement. The college has an opportunity to develop explicit, repeatable and measurable processes to boost retention and encourage high performance among its employees.
Promoting employee satisfaction and engagement	**Systematic** The College provides a list of activities and events. Some events appear to be scheduled and happen on a regular, predictable schedule.
Tracking outcomes/measures utilizing appropriate tools	**Systematic** A variety of methods are used including student feedback and evaluation of instruction to track faculty/staff efficacy in addition to regular probationary evaluations of new staff and faculty. The student surveys SSI and CCSSE are student-input surveys. The college may be referring to these as indirect measures of employee evaluation and recognition; however, these data may be difficult to disaggregate by employee or employee group beyond faculty and student services staff.
Other identified processes	

3R2	
Results	**Evaluation of Results and Systems Improvement**
	Reacting Program reviews provide some results data. The data

Summary results of measures (including tables and figures when possible)	provided is both qualitative and quantitative. Although data are presented, these data are difficult to align in meaningful ways to the activities described in 3P2.
Comparison of results with internal targets and external benchmarks	**Reacting** Some measures are tracked and tools utilized, however very little information is documented.
Interpretation of results and insights gained	**Reacting** No meaningful interpretation of results and insights gained is provided.

3I2
Comments
Employee recognition and data gathering to assess the effectiveness of the current process appears to be important. The College is also working to publicly recognize employees in print and at in-service days. The College provides a list of improvements that are not easily aligned to the results provided in 3R2. Without clear targets and performance data, improvements are not aligned to institutional performance.

3.3: Development

3P3

Process	Comments on Process Maturity and Improvement
Providing and supporting regular professional development for all employees	**Systematic** The College lists activities that provide professional development for all employees on a scheduled basis. The College admits that providing external professional development has been tumultuous due to financial constraints. It appears that the college engages in a series of activities and events and would benefit from developing explicit, repeatable processes in this area.
Ensuring that instructors are current in instructional content in their disciplines and pedagogical processes	**Systematic** NCSC provides professional development for faculty. Regular advisory board meetings help ensure program faculty are current in their instructional content. The college would benefit from clarifying equivalent processes for liberal arts and science faculty.
Supporting student support staff members to increase their skills and knowledge in their areas of expertise (e.g. advising, financial aid, etc.)	**Systematic** The College provides internal topic-specific professional development as well as programs during in-services that are coordinated by a campus wide committee of faculty and staff. The process would benefit by having training events or mechanisms for professional development that are external to the college.
Aligning employee professional development activities with institutional objectives	**Systematic** The College reports developing training plan for academic advisors. The employee evaluation identifies both performance appraisal and professional development strengths and opportunities as they relate to the institutional objectives. The institution would benefit from a consistent and repeatable approach for all professional development activities.
	Systematic The College provides a list of internal tracking measures. A more direct approach to

Tracking outcomes/measures utilizing appropriate tools	assessing the value of professional development activities would help the institution leverage dollars and other resources in this area. Also, It has an opportunity to develop robust measures that can be benchmarked and evaluated against peer institutions.
Other identified processes	

3R3	
Results	**Evaluation of Results and Systems Improvement**
Summary results of measures (including tables and figures when possible)	**Reacting** The results provided do not provided insight into summarizing the activities associated with 3P3.
Comparison of results with internal targets and external benchmarks	**Reacting** No comparison of results with internal targets and external benchmarks was included in the report provided.
Interpretation of results and insights gained	**Reacting** No interpretation of results and insights gained was included in the report provided.

3I3
Comments

The institution mentions some of the challenges in assuring that faculty are current and well trained in their areas. Faculty evaluations have been updated to include service to students, program, profession, college and community. Transition and Student Services areas recently revised training program for advisors and includes job shadowing and regular training with periodic review to gauge efficacy of training. Assessing employees' needs and determining the appropriate recognition method could assist the College in its effort to ensure fairness in evaluation across all departments and utilize the appropriate recognition that could retain high quality employees.

Category 3 Summary Statement

North Central State College has a system in place for hiring new employees and has worked to reconcile declining resources with the needs for faculty and staff to support its student success priority. The College reports activities that appear to be sporadic and centered on tradition versus considering how to best use its internal resources to promote training aligned to institutional priorities. The College does have a program for training advisors. The College also relies 3rd party accreditation and external advisory boards for program revision input. There are few benchmarks, measurable outcomes, and assessments that can lead to improvements in this area. Clearly articulated processes and measures for evaluation would aid the college in improving in the category of Valuing People.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

IV - Planning and Leading

Focuses on how the institution achieves its mission and lives its vision through direction setting, goal development, strategic actions, threat mitigation, and capitalizing on opportunities.

Instructions for Systems Appraisal Team

In this section, the team should provide a consensus narrative that focuses on the processes, results and improvements for Mission and Vision, Strategic Planning, Leadership and Integrity.

Independent Category Feedback for each AQIP Category from each team member should be synthesized into an in-depth narrative that includes an analysis of the institution's processes, results and quality improvement efforts for each category. Wording from the Stages in Systems Maturity tables for both processes and results should be incorporated into the narrative to help the institution understand how the maturity of processes and results have been rated. The narrative should also include recommendations to assist the institution in improving its processes and/or results. It is from this work that the team will develop a consensus on the Strategic Challenges analysis, noting three to five strategic issues that are crucial for the future of the institution. Please see additional directions in the Systems Appraisal procedural document provided by HLC.

Evidence

Category 4: Planning and Leading

4.1: Mission and Vision

4P1	
Process	**Comments on Process Maturity and Improvement**
Developing, deploying, and reviewing the institution's mission, vision and values	**Systematic:** Board of Trustees annually review overarching mission, vision and values that have remained relatively unchanged, though new presidential tenure and directives from state have operationalized mission through three goals of access, success and resources. It is unclear how or how often the campus and other stakeholders review the mission, vision and values.
Ensuring that institutional actions reflect a commitment to its values	**Aligned:** NCSC completes KPIs and reviews state and community needs, strategic enrollment patterns, trends analysis, current and future employment opportunities while regularly communicating with stakeholders to align activities with values of the organization. Budget development is based on the mission, vision, and values with data shared college-wide.

Communicating the mission, vision and values	**Systematic:** Traditional and non-traditional means of communicating the mission, vision and values are used including print and visual communications and in-service meetings.
Ensuring that academic programs and services are consistent with the institution's mission	**Systematic:** State initiatives have refocused programs to align to industry standards and external credentials and the program review process assists NCSC to ensure this happens. According to information provided, NCSC focuses primarily on CTE programs and places less emphasis on non-CTE programs.
Allocating resources to advance the institution's mission and vision, while upholding the institution's values	**Systematic:** The College budget development process includes efforts to tie budget requests to institutional and departmental priorities. NCSC indicates that the process is not as strong as it needs to be and will undergo some changes in the coming year.
Tracking outcomes/measures utilizing appropriate tools (e.g. brand studies, focus groups, community forums/studies and employee satisfaction surveys)	**Systematic:** Internal and external stakeholders are included in assessment methods to track outcomes through student focus groups, in-service and advisory board discussions and SSI results.

4R1	
Results	**Evaluation of Results and Systems Improvement**
Summary results of measures (including tables and figures when possible)	**Reacting:** Survey data from students and community members are provided and NCSC appears to react to that feedback. However, there is no clear indication of goal establishment, benchmarks nor outcome assessments. It is difficult to align to the activities described in 4P1.
Comparison of results with internal targets and external benchmarks	**Reacting:** No internal nor external benchmarks are provided. SSI is used for a limited external comparison, but no benchmark established. NCSC should develop measures that can be benchmarked and compared either with peer institutions or internal trends.

| Interpretation of results and insights gained | **Reacting:** It is unclear who interprets results and how priority is set to determine next steps for improvement. |

4I1
Comments
NCSC has made improvements including professional/soft skill assessment as a new outcome based on student and faculty input. Teaching continues as a monthly topic for division meetings and teams have been created to implement additional improvements in the near future. Improvements are not easily aligned to the limited results of 4R1. Without clear targets and performance data, improvements are not based on institutional performance.

4.2: Strategic Planning

4P2	
Process	**Comments on Process Maturity and Improvement**
Engaging internal and external stakeholders in strategic planning	**Reacting:** While the institution indicates that there is broad involvement by both internal and external stakeholders in the strategic planning process, it is unclear whether there is truly a process for gathering feedback, determining priorities, developing actions, and assessing those action. The only reference in the portfolio talks about numerous meetings, which, in itself, does not constitute a process.
Aligning operations with the institution's mission, vision and values	**Systematic:** NCSC has specific goals and teams working to implement KPI-issues relating to the institution's strategic planning. To sustain a systematic process, this recent implementation will need time to mature to determine if the results are meaningful.
	Systematic: Major decisions regarding programs, budget and

Aligning efforts across departments, divisions and colleges for optimum effectiveness and efficiency	personnel are reported to be aligned with strategic goals. The institution may benefit from more clearly reporting on alignment at all levels of the organization and a more formal process to document alignment.
Capitalizing on opportunities and institutional strengths and countering the impact of institutional weaknesses and potential threats	**Reacting:** A variety of initiatives are listed that have been completed due to a SWOT analysis. It is unclear whether the college evaluated these opportunities through strategic focus or if it is more reactionary to options presented.
Creating and implementing strategies and action plans that maximize current resources and meet future needs	**Reacting:** NCSC has targeted dual credit students with scholarship and programming to potentially impact outcomes of retention and completion. The college has the opportunity to move to a higher level of maturity by developing explicit, repeatable and measurable processes to create, implement and assess strategies and action plans.
Tracking outcomes/measures utilizing appropriate tools (e.g. achievement of goals and/or satisfaction with process)	**Systematic:** Institutional Research office has developed and reported on facts related to goals of access, success and resources and distributed that information widely to many stakeholders.

4R2	
Results	**Evaluation of Results and Systems Improvement**
Summary results of measures (including tables and figures when possible)	**Reacting:** NCSC provides results of alignment with strategic goals as provided by state and college stakeholders, specifically in the areas of resources, grants and efficiencies. Although data are presented, it remains difficult to align with the processes described in 4P2.
Comparison of results with internal targets and external benchmarks	**Reacting:** The College has state level comparative data. It is unclear how the institution is connecting results to processes. It is difficult, in most cases, to see the connection to specific initiatives and strategic goals. The College has the opportunity

	to dedicate resources to its interpretation of its data.
Interpretation of results and insights gained	**Reacting:** It is unclear how grant funding results have been interpreted for planned changes nor insights gained for future improvements.

4I2
Comments
NCSC has strategic goals that are communicated regularly. Improvements are listed but do not seem to be tied to specific processes or results shared earlier in the strategic planning category. The state has set targets for Ohio institutions, yet it is unclear how they are linked to the College's strategic planning, innovations, or improvements in institutional performance.

4.3: Leadership

4P3	
Process	**Comments on Process Maturity and Improvement**
Establishing appropriate relationship between the institution and its governing board to support leadership and governance	**Aligned:** The roles of the governing board and CEO and internal stakeholders appear clear. The process has deployed since 2010 through adoption of the Carver Model of Policy Governance.
Establishing oversight responsibilities and policies of the governing board	**Systematic:** The College has established policies and board roles for oversight that guide its work. It is unclear how state legislative or governor's influence may be impacting the institution.

Maintaining board oversight, while delegating management responsibilities to administrators and academic matters to faculty	**Systematic:** The role of CEO as leading all levels of the institutions is clear and within the governance model adopted by the Board. It is unclear how academic matters are delegated to faculty.
Ensuring open communication between and among all colleges, divisions and departments	**Aligned:** Campus quality surveys are conducted regularly and communicated with stakeholders. The ENDS policies are the basis for all communication and planning within the committee structure. The Cabinet, comprised of 18 members, has primary responsibility for facilitating communication within their departments and divisions. The institution would benefit from a more clearly articulated plan that demonstrates that communication strategies are effective.
Collaborating across all units to ensure the maintenance of high academic standards	**Reacting:** It is unclear how leadership is influencing high academic standards.
Providing effective leadership to all institutional stakeholders	**Reacting:** The process described focuses on horizontal communication and channels. However, the answer provided does not address how this alone provides for effective leadership.
Developing leaders at all levels within the institution	**Systematic:** Professional development has been encouraged at a local, state and national level even with constraints on fiscal resources for such training. NCSC could document greater maturity by clarifying how individuals are selected for professional development and alignment with a formal succession plan for leadership development.
Ensuring the institution's ability to act in accordance with its mission and vision	**Systematic:** The Board ENDS provide the direction for strategic goals and departmental activities. The resource allocation model includes criteria for alignment with mission, vision and strategic priorities. It is unclear if the process is repeatable.
Tracking outcomes/measure utilizing appropriate tools	**Reacting:** The College has a process in place for reviewing or adding polices. This does not provide a mechanism for tracking and assessing approved activities and initiatives.

4R3	
Results	**Evaluation of Results and Systems Improvement**
Summary results of measures (including tables and figures when possible)	**Reacting:** Respectable awards and board retention are reported and quantitative results, but little evidence of why awards were earned was documented. The college would benefit from developing measures to gauge its effectiveness in planning and leadership.
Comparison of results with internal targets and external benchmarks	**Reacting:** Competitive awards and recognitions were earned, but no comparison of results with targets or benchmarks were presented or reported.
Interpretation of results and insights gained	**Reacting:** Results of awards are given, yet opportunity exists for data that could enable the College to enhance its leadership processes.

4I3
Comments
Multiple examples are given related to promoting communication and development of leadership at NCSC. However, it remains unclear how improvements are tied to processes and what data are collected to guide these improvements. Planning and assessing initiatives would help to guide future direction for the institution.

4.4: Integrity

4P4	
Process	**Comments on Process Maturity and Improvement**
	Systematic : NCSC has policies and procedures in place to

Developing and communicating standards	communication integrity standards through electronic media, new employee orientation and regular meetings. It is unclear how the effectiveness of the communication in relation to standards is assessed as part of a formal process.
Training employees for and modeling ethical and legal behavior across all levels of the institution	**Systematic:** Formal and informal training, along with enforcement of ethical and legal standards are reported to be occurring. The institution would benefit from clarifying the extent of embedment of the training and modeling of ethical behavior across the entire institution and how often this process is reviewed.
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.	**Aligned:** Multiple institutional, state and federal policies are established and reported to be followed including annual ethics training and legal symposiums. Fiscal audits are completed regularly.
Making information about programs, requirements, faculty and staff, costs to students, control, and accreditation relationships readily and clearly available to all constituents	**Systematic:** NCSC displays regional accreditation and standard information on the website and in printed materials. It is unclear how costs of programs are shared with stakeholders except through program reviews. The College has the opportunity to develop processes to measure effectiveness of communication methods.

4R4	
Results	**Evaluation of Results and Systems Improvement**
Summary results of measures (including tables and figures when possible)	**Systematic:** Fiscal audits are regularly completed and reviewed. IRB is used for research and program details shared with Job and Family Services providers.
Comparison of results with internal targets and external benchmarks	**Reacting:** No comparison results provided, nor internal targets or external benchmarks reported.

Interpretation of results and insights gained	**Reacting:** Sharing of results seem more a result of state requirements than intentional institutional planning or useful insights that lead to improvement.

4I4
Comments
Improvements are listed for financial resources and economic viability of the institution. It is unclear how results are measured and interpreted to intentionally choose what improvements to complete.

Category 4 Summary Statement
NCSC's open access mission is supported by three strategic priorities of access, success and resources. The mission, vision and values of the institution have been reviewed and remain stable. The Board follows the Carver Model of Governance which articulates the roles and responsibilities of the Board and delegation to the CEO/President. NCSC has gained local, state and national positive recognition in several areas of leadership and reporting of efficiencies to the State of Ohio. Regular training regarding ethical practices and audits of fiscal resources assist in maintaining a culture of integrity. The results of the category remain difficult to find and interpret in order to tie to improvements shared.   Without clear targets and performance data, improvements may not align to institutional performance.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

V - Knowledge Management and Resource Stewardship

Addresses management of the fiscal, physical, technological, and information infrastructures designed to provide an environment in which learning can thrive.

Instructions for Systems Appraisal Team

In this section, the team should provide a consensus narrative that focuses on the processes, results and improvements for Knowledge Management, Resource Management and Operational Effectiveness.

Independent Category Feedback for each AQIP Category from each team member should be synthesized into an in-depth narrative that includes an analysis of the institution's processes, results and quality improvement efforts for each category. Wording from the Stages in Systems Maturity tables for both processes and results should be incorporated into the narrative to help the institution understand how the maturity of processes and results have been rated. The narrative should also include recommendations to assist the institution in improving its processes and/or results. It is from this work that the team will develop a consensus on the Strategic Challenges analysis, noting three to five strategic issues that are crucial for the future of the institution. Please see additional directions in the Systems Appraisal procedural document provided by HLC.

Evidence

Category 5: Knowledge Management and Resource Stewardship

5.1: Knowledge Management

5P1	
Process	**Comments on Process Maturity and Improvement**
Selecting, organizing, analyzing and sharing data and performance information to support planning, process improvement, and decision making	**Systematic:** The college's IR and IT departments coordinate on selecting, organizing, analyzing and sharing data. The IR director has primary responsibility for coordinating processes and vetting requests to determine alignment with the college's strategic priorities. It uses a "ticket system" and multiple data custodians are identified to ensure data integrity and consistency of daily operations for data collection. The college is challenged in its capacity to produce information to drive decision-making due to its lack of a data warehouse and reduction in staff.
Determining data, information, and performance results that units and departments need	**Systematic:** The institution is generating significant data, but has resource limitations in terms of assuring data provided addresses the information needs of units and is appropriate for departmental planning. Wherever possible, it consolidates metrics and uses data collected and analyzed for multiple

to plan and manage effectively	audiences. Its use of SQL Reporting Services allows end-users to access key data elements in real time. However, it is difficult to see how the data is connected to informed decision-making.
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	**Systematic:** NCSC lists key reports and managers/sources of those reports so stakeholders can find out who is responsible for collection and reporting of certain data. Fact books of MEANS are also created and shared widely. NCSC has identified a need for additional training of all departments on understanding the data collected. How these data are used to measure operational effectiveness that leads to improvements or planning is not included in the information submitted.
Ensuring the timeliness, accuracy, reliability and security of the institution's knowledge management system(s) and related processes.	**Aligned:** The College has processes to ensure the accuracy, reliability and security of institutional knowledge. The data centers use Ellucian that is designed with security, accessibility, scalability, recovery and reliability. Internal processes driven by IT are in place to ensure reliability and security of knowledge management systems and includes monthly meetings of ERP "Power Users" facilitated by IT, password security, and restricted wireless access.
Tracking outcomes/measures utilizing appropriate tools (including software platforms and/or contracted services)	**Systematic:** NCSC tracks at the internal and external level. The College tracks program data, data that assist the college in determining its internal efficiencies, and data for state reporting,

5R1	
Results	**Evaluation of Results and Systems Improvement**
Summary results of measures (including tables and figures when possible)	**Systematic:** The College has internal reports and responds to state and national Achieving the Dream data requirements.

Comparison of results with internal targets and external benchmarks	**Systematic:** Some of the College's supporting documents show identified peer groups for certain data points, but are there few clearly defined internal and external benchmarks and related metrics.
Interpretation of results and insights gained	**Systematic:** Benchmarks were written about and comparison made to other institutions. The College recognizes improvements in its comments.

5I1
Team Comments
In response to its last systems appraisal feedback, the college made progress in building its capacity in knowledge management, specifically in its ticketing system; however, North Central State College recognizes that this is an area that needs additional work. They have implemented some new strategies such as the ticketing process for IT data requests. They have started to develop some predictive analytics. They have identified additional strategies for improvement.

5.2: Resource Management

5P2	
Process	**Comments on Process Maturity and Improvement**
Maintaining fiscal, physical and technological infrastructures sufficient to support operations.	**Systematic:** The College reports a processes for to securing and maintaining the necessary human, fiscal, and physical and technological resources.

Setting goals aligned with the institutional mission, resources, opportunities and emerging needs.	**Systematic:** The Colleges reports it has evidence so that its goal setting supports mission, resource allocation supports reaching goals, and addresses emerging needs. The College is encouraged to consider the frequency of this process and the activities included in the process.
Allocating and assigning resources to achieve organizational goals, while ensuring that educational purposes are not adversely affected.	**Systematic:** The College identifies Human, Fiscal, Physical and Technological as the pillars for guiding allocating and assigning resources. The zero budgeting was discussed.
Tracking outcomes/measures utilizing appropriate tools	**Systematic:** Although outcomes are measured by the physical accomplishments and the dollars generated or spent, the tools utilized were not clear to the review team.
Other identified processes	

5R2	
Results	**Evaluation of Results and Systems Improvement**
Summary results of measures (including tables and figures when possible)	**Systematic:** The College shows significant success in applying for and receiving grants that have provided additional resources to the institution. It is unclear how grants applied for and received can be sustainable for meeting future institutional goals and priorities. The College has maintained its fiscal position and regularly adds to its reserve. Many upgrades have occurred, but there is little information on how they tie to goals and are assessed for effectiveness.
Comparison of results with internal targets and external benchmarks	**Systematic:** The College reported grants that were funded and has increased its reserves by 31%. The state fiscal composite ratio is 4.0 (up from 2.7 in four years prior).
	Systematic: The College recognizes that is has made progress and it must continue to focus on its resources and initiatives on

Interpretation of results and insights gained	areas that address student need, technological needs, staffing needs, and value added return to the institution.

5I2 Team Comments
The College is working on continued fiscal responsibility and technology improvements. Articulating the processes that yielded these improvements will move the College forward in ensuring that resources are allocated in ways that improve student success and institutional accountability. The institution is relying heavily on grants, which is not uncommon for many two-year institutions. These grants are used to help fund projects. The College acknowledges the downside of its reliance on grants to fund operations and innovations. As such it is seeking a tool to examine the benefits to applying for specific grants.

5.3: Operational Effectiveness

5P3

Process	**Comments on Process Maturity and Improvement**
Building budgets to accomplish institutional goals	**Systematic:** The institution has a process in place for developing and monitoring budgets and tying budgets to student success or access goals. The budget process requires input from each department and constituents. All departments are asked to prioritize budget requests in alignment with the mission of student success or access.
Monitoring financial position and adjusting budgets	**Systematic:** The College has a process for monitoring budgets at various levels, including the Board of Trustees.

Maintaining a technological infrastructure that is reliable, secure and user-friendly	**Systematic:** NCSC seems to maintain adequate technological infrastructure that provides reliability, security and is user-friendly. The College reports that part of the ability for maintaining a reliable infrastructure is the sharing of resources with partners, such as Ohio State University.
Maintaining a physical infrastructure that is reliable, secure and user-friendly	**Systematic:** The College reports that it has an abundance of space because enrollment for on-campus students continues to decline. In reaction to declining enrollments, physical space is shared with OSU.
Managing risks to ensure operational stability, including emergency preparedness	**Systematic:** NCSC identifies three main areas of risk: human, financial, and cyber. It systematically addresses its risks through partnership with other institutions, acquisition of grants, and cost cutting measures, and IT staffing.
Tracking outcomes/measures utilizing appropriate tools	**Systematic:** The College reports that outcomes are tracked by accomplishments in human, fiscal, and cyber security measures.
Other identified processes	

5R3	
Results	**Evaluation of Results and Systems Improvement**
Summary results of measures (including tables and figures when possible)	**Systematic:** The College provides positive comments concerning its financial health and its ability to avoid cyber-attacks. The College has a balanced budget and its ratio has increased from 2.7 to 4.0.
Comparison of results with internal targets and external benchmarks	**Systematic:** The College reports positive trends and five independent audits.
	Systematic: The College reports "solid' financial assessment"

Interpretation of results and insights gained	even after the "turbulence caused by the reduction in funding from the state" and the loss of enrollment.

5I3

Comments

IT and Facilities departments operate in conjunction on nearly every project. Technology upgrades are planned. Safety training is being implemented. The college has maintained its financial health despite changes in the state funding model to 100% focus on success instead of access. Articulating the processes that yielded these improvements will move the College forward in ensuring that resources are allocated in ways that improve student success and institutional accountability. The College provides evidence, but processes are not clearly articulated to reviewers.

Category 5 Summary Statement

Overall North Central State College is at the systematic stage for maturity for Category 5. The College has maintained its fiscal stability during a time of cuts in higher education and has generated significant grant funding and worked to diversify their student populations. The College has made changes to its information technology infrastructure in an effort to improve the administrative system and the availability and accuracy of data for decision-making. It generates significant data. Safety and security of systems appear to be adequate and meet the needs of the institution. Resources are shared with Ohio State University.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

VI - Quality Overview

Focuses on the Continuous Quality Improvement culture and infrastructure of the institution. This category gives the institution a chance to reflect on all its quality improvement initiatives, how they are integrated, and how they contribute to improvement of the institution.

Instructions for Systems Appraisal Team

In this section, the team should provide a consensus narrative that focuses on the processes, results and improvements for Quality Improvement Initiatives and Culture of Quality.

Independent Category Feedback for each AQIP Category from each team member should be synthesized into an in-depth narrative that includes an analysis of the institution's processes, results and quality improvement efforts for each category. Wording from the Stages in Systems Maturity tables for both processes and results should be incorporated into the narrative to help the institution understand how the maturity of processes and results have been rated. The narrative should also include recommendations to assist the institution in improving its processes and/or results. It is from this work that the team will develop a consensus on the Strategic Challenges analysis, noting three to five strategic issues that are crucial for the future of the institution. Please see additional directions in the Systems Appraisal procedural document provided by HLC.

Evidence

Category 6: Quality Overview

6.1: Quality Improvement Initiatives

6P1	
Process	**Comments on Process Maturity and Improvement**
Selecting, deploying and evaluating quality improvement initiatives.	**Aligned:** Representative committees and the president's cabinet are the main vehicles by which CQI and AQIP initiatives are discussed and decided upon. The college organizes committee membership to include all constituents on campus and to have representation on the president's cabinet and aligns its committees with the strategic priorities of access, success and resources. NCSC informally collects feedback on its efficacy by means of focus groups, clicker polls, in-service surveys, and meetings.
Aligning the Systems Portfolio, Action Projects,	**Systematic** The College provides some evidence of aligning all aspects of their quality program. Action projects relate back to institutional goals and are vetted by the president's cabinet. The

Comprehensive Quality Review and Strategy Forums	Systems Portfolio does not, for the most part, address how everything comes together to support the institution's priorities.
Other identified processes	

6R1	
Results	**Evaluation of Results and Systems Improvement**
What are the results for continuous quality improvement initiatives?	**Systematic:** The College identified in narrative form the implementation and success of a number of quality initiatives.

6I1
Team Comments
The executive team has been involved with all CQI initiatives which has provided a consistent CQI message. The college is considering options to reduce the number of CQI initiatives based on available resources. The college is to be cautioned about the impact reduction that CQI efforts could have on its quality improvement culture.

6.2: Culture of Quality

6P2	
Process	**Comments on Process Maturity and Improvement**
Developing an infrastructure and providing resources to support a culture of quality	**Systematic**: The college uses embedded structures to ensure the focus on CQI. Examples include centralization of policy making. Broad representation from the president's cabinet, CAO and ALO is also essential to assessment and curriculum committees. CQI committees report regularly to divisions of cabinet. Further, it indicated that the chairs of each of the standing committees have both responsibility and authority to manage committees and report to supervisors. How resources are provided to support a culture of CQI was not discussed.
Ensuring continuous quality improvement is making an evident and widely understood impact on institutional culture and operations	**Systematic:** NCSC has embarked upon a number of structural changes, and participated in numerous strategy forums, and AQIP projects. The institution provided examples of how it makes CQI initiatives widely understand and institutionalized within its culture .
Ensuring the institution learns from its experiences with CQI initiatives	**Systematic:** The college states that every CQI activity has evaluation and reflection embedded in it and that these reflection times are built into the timelines of the activities. In addition, the college submits several reports to external stakeholders, such as AtD, for feedback. The college has an opportunity to coordinate these activities across the institution and share insights broadly.
Reviewing, reaffirming, and understanding the role and vitality of the AQIP	**Systematic:** The college has engaged in numerous discussions over the years about whether to remain in AQIP. Currently, NCSC engages in several large, external initiatives focused on student success. The college acknowledges that any change

Pathway within the institution	would require extensive assessment and introspection.
Other identified processes	

6R2	
Results	**Evaluation of Results and Systems Improvement**
What are the results for continuous quality improvement to evidence a culture of quality?	**Systematic** NCSC documents some improvement in selected metrics such as the number of students served, graduation and success in remedial coursework. The institution may achieve higher levels of maturity by systematically defining the related goals, benchmarks and outcomes and reviewing data over time.

6I2
Team Comments
The state's funding model change has created several challenges for NCSC but has forced the college to focus on implementing strong student success initiatives to sustain itself. NCSC has focused on building relationships with high schools to increase dual-enrollment programs, worked to increase faculty engagement in the working of the college and restructure student services to provide additional support to its students.

Category 6 Summary Statement
Ohio state's decision to go to 100% performance funding and conversion to semester format have challenged the college to maintain its CQI focus. Still, NCSC has processes for selecting, deploying and evaluating quality improvement initiatives that involve various internal constituents. Despite the vast amount of external/state changes and challenges reported by NCSC the institution has remained engaged in continuous improvement and driving that culture of quality to all levels of the organization. NCSC has been recognized by numerous external organizations for recent work on pathways in addition to advising and leadership initiatives that have been implemented.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

1 - Mission

The institution's mission is clear and articulated publicly; it guides the institution's operations.

1.A - Core Component 1.A

The institution's mission is broadly understood within the institution and guides its operations.

1. The mission statement is developed through a process suited to the nature and culture of the institution and is adopted by the governing board.
2. The institution's academic programs, student support services, and enrollment profile are consistent with its stated mission.
3. The institution's planning and budgeting priorities align with and support the mission. (This sub-component may be addressed by reference to the response to Criterion 5.C.1.)

Rating

Clear

Evidence

The overarching mission, vision, and values of the college have remained steady over the past decade from the perspective of being a comprehensive community college providing technical terminal associate degrees and transfer degrees to baccalaureate universities. However, the strategic focus, and the manner or statements through which the college communicates its mission, vision, and values have changed to reflect the evolving needs of the community and the State of Ohio, with an annual review by the Board of Trustees.

The college is an open access, two-year institution, historically focused on technical education, to provide advanced skills and licensure for graduates, who largely reside in Richland, Ashland, and Crawford counties.

The mission was operationalized through access, success, and resources. The institutional budget is specifically built around the mission, vision, and values.

Program offerings have expanded in response to changing demographics, and statewide agendas promoting a comprehensive community college model which also includes transfer preparation for advanced degrees.

The college's mission is informed by community needs. It is next refined by state and federal mandates and available resources.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

1.B - Core Component 1.B

The mission is articulated publicly.

1. The institution clearly articulates its mission through one or more public documents, such as statements of purpose, vision, values, goals, plans, or institutional priorities.
2. The mission document or documents are current and explain the extent of the institution's emphasis on the various aspects of its mission, such as instruction, scholarship, research, application of research, creative works, clinical service, public service, economic development, and religious or cultural purpose.
3. The mission document or documents identify the nature, scope, and intended constituents of the higher education programs and services the institution provides.

Rating

Clear

Evidence

The college communicates its mission, vision, and values through a variety of media including the website, the catalog, ancillary materials, and meeting agendas. External constituencies, staff, faculty, and students have been engaged in systematic dialogue to refine and focus the college's vision. The institution clearly articulates its mission through multiple documents which include the Strategic Plan.

The institutional research department works closely with the president and the president's staff to monitor trends, strategic enrollment patterns, current employment opportunities for students, and future employment growth areas. Data are shared.

The institution's commitment to the mission is displayed through communication of the values on a consistent basis, employee evaluation of institutional efforts to realize the mission, and encouraging widespread participation in strategic and budget planning.

The mission documents the scope and how it services the institution. Additionally the Strategic Plan identifies how the mission is integrated with the overall functions of the institution.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

1.C - Core Component 1.C

The institution understands the relationship between its mission and the diversity of society.

1. The institution addresses its role in a multicultural society.
2. The institution's processes and activities reflect attention to human diversity as appropriate within its mission and for the constituencies it serves.

Rating

Clear

Evidence

The institution demonstrates it fulfills its role in a multi-cultural society through employer and community relationships. Also, advisory groups help shape interaction with stakeholders such as apprenticeships.

The College collects information from students, employers, and employees to make changes to student learning outcomes. The College is encouraged to identify new and emerging student groups as result of these data collected.

Advisory committees for technical programs and advisory groups in some of the other locations help to identify student needs. The president's annual advisory meeting gathers some qualitative information about constituent needs.

The institution does not have a clear process and documented activities in regards to human diversity. Clearer definitions on diversity would assist the institution in this sub-component.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

1.D - Core Component 1.D

The institution's mission demonstrates commitment to the public good.

1. Actions and decisions reflect an understanding that in its educational role the institution serves the public, not solely the institution, and thus entails a public obligation.
2. The institution's educational responsibilities take primacy over other purposes, such as generating financial returns for investors, contributing to a related or parent organization, or supporting external interests.
3. The institution engages with its identified external constituencies and communities of interest and responds to their needs as its mission and capacity allow.

Rating

Clear

Evidence

The mission focuses on access, student success and providing resources to serve the needs of students.

The College mission, vision and strategic goals are appropriate for a comprehensive community college.

The institutional budget is specifically built around the mission, vision, and values.

Strategic initiatives support the focus on teaching and learning and serving the community.

The President conducts an annual advisory committee session to gather feedback from key external constituents.   The institution demonstrates outreach by securing grants, and participating in local, state, regional, and national meetings and initiatives.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

2 - Integrity: Ethical and Responsible Conduct

The institution acts with integrity; its conduct is ethical and responsible.

2.A - Core Component 2.A

The institution operates with integrity in its financial, academic, personnel, and auxiliary functions; it establishes and follows policies and processes for fair and ethical behavior on the part of its governing board, administration, faculty, and staff.

Rating

Clear

Evidence

The College's board of trustees delegate ethical and legal mandates to the CEO.

The College has policies that address ethics and integrity. These are in included in a policy manual that is available on the College's website, and these policies serve as the basis for all departmental communication related to integrity standards.

The Human Resources Department coordinates orientation for all employees which includes review of legal guidelines, ethical standards and policies.

The board has an ethical code of conduct policy (#0230, #1103 paragraph e). This policy complies with the Attorney General requirement. Board members and the College President are trained annually on topics that include conflict of interest, public contracts and nepotism, gifts and things of value, confidentiality, and post term restrictions.

The board has a Global Executive Limitations Policy (#0400) related to ethical, legal, and processes by the president. Furthermore College policy 16-23 paragraph B states that employees and board members must, at all times, abide by protections to the public embodied in Ohio's ethics laws, as found in Chapters 102 and 2921 of the Ohio Revised Code (R.C.), and as interpreted by the Ohio Ethics Commission and Ohio courts.

The College follows federal guidelines for conducting ethical financial operations. Annual

independent audits are conducted. The audit has had no findings for the reporting period, and all reports are available to the public.

All policies, handbooks, and Title IV questions are reviewed by the Ohio Attorney General's office before any formal publication, or action is taken.

Members of the board of trustees and the executive team attend annual ethics training and legal symposium provided by the Ohio Attorney General's office.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

2.B - Core Component 2.B

The institution 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.

Rating

Clear

Evidence

NCSC displays the regional accreditation documentation on the website.

All fees are documented online in the college catalog, on the student interface of the SIS system, as well as printed on student registration documents.

ISBN numbers for textbooks are recorded on all syllabi and are verified when submitted to the curriculum committee.

Total program costs are available on the Richland, and Crawford county Job and Family Services site. The college displays these program costs, updated annually on its website.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

2.C - Core Component 2.C

The governing board of the institution is sufficiently autonomous to make decisions in the best interest of the institution and to assure its integrity.

1. The governing board's deliberations reflect priorities to preserve and enhance the institution.
2. The governing board reviews and considers the reasonable and relevant interests of the institution's internal and external constituencies during its decision-making deliberations.
3. The governing board preserves its independence from undue influence on the part of donors, elected officials, ownership interests or other external parties when such influence would not be in the best interest of the institution.
4. The governing board delegates day-to-day management of the institution to the administration and expects the faculty to oversee academic matters.

Rating

Clear

Evidence

The institution's process for policy development and currency is the first step to keeping the entire institution headed in the same direction. With policies approved through Cabinet with full representation from all college constituents and committees, this structure assures the implementation of the process.

Executive limitations and board delegation policies are used to make sure outside entities are not affecting the decision making process.

The Board of Trustees implemented the Carver Model of Policy Governance in 2009, and received extensive training on it in 2010. This model requires consistent active engagement of the board, the community, and the CEO, and is divided into four institution policy categories. The Carver Model specifies that the President is the sole employee of the Board of Trustees, emphasizing the primacy and responsibility of this position. The Board of Trustees equates CEO performance organizational performance.

The Board's ENDS policies are the basis for all communication and planning that takes place within the committee structure on campus. This establishes a clear focus from the board on the desired outcomes of the 'owners' of the institution. The continuous emphasis on the Ends enables all communication and strategic activities to be understood as they are passed down the chain, or moved up the chain, for appropriate action.

The college has a number of policies that address vision and mission. It displays that commitment through its budget allocation / human resource funding and employee promotions. This is mainly accomplished by ensuring that the mission and all related policies and procedures be available for review, open to comment, and on a schedule to be updated regularly.

The Board of Trustees implemented the Carver Model of Policy Governance in 2009, and received extensive training on it in 2010. This model requires consistent active engagement of the board, the community, and the CEO, and is divided into four institution policy categories.

The President uses the President's Cabinet, which is advised by feedback from all of the college standing committees, to communicate, direct and implement the College strategic plan.

Along with the committee chairs, the Deans, through the Academic Council, ensure that key information is communicated horizontally across academic divisions, vertically upward to the President, Vice Presidents as well as to faculty and staff in each of their divisions. Faculty also report on their committee activities at the individual division meetings.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

2.D - Core Component 2.D

The institution is committed to freedom of expression and the pursuit of truth in teaching and learning.

Rating

Clear

Evidence

College policy number 3357:13-14-02 addresses academic freedom and is congruent with Article III of the faculty collective bargaining agreement; updated 08/23/17, it outlines the parameters of freedom of expression on the part of faculty at North Central State College.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

2.E - Core Component 2.E

The institution's policies and procedures call for responsible acquisition, discovery and application of knowledge by its faculty, students and staff.

1. The institution provides effective oversight and support services to ensure the integrity of research and scholarly practice conducted by its faculty, staff, and students.
2. Students are offered guidance in the ethical use of information resources.
3. The institution has and enforces policies on academic honesty and integrity.

Rating

Clear

Evidence

Integrity in human subject research at the College is guided by federal guidelines outlined by the Office of Health and Human Services, with institutional oversight through the Academic Services office and the Institution Review Board (IRB). The Academic Services office communicates with all levels of the institution on matters pertaining to the IRB.

Student academic misconduct is addressed in the academic misconduct policy which is published annually in the college catalog/student handbook. Additionally the college is committed to integrity at all levels in the institution as evidenced by the comprehensive set of ethics policies, which are set to be reviewed every three years. Furthermore, policies are reviewed by the Attorney General Office when changes are made.

Any complaint of faculty academic misconduct is taken seriously and referred to the division dean's office. Clear student complaint policies and processes are outlined in the college catalog, on the web, and in orientation. Also, students can routinely evaluate faculty to provide supervisors feedback on the course.

The college has policies related to academic freedom, computer usage, conflict of interest, as well as student and faculty conduct. NCSC has clear written student conduct policies address ethical student behavior in their courses and research.The institution demonstrated that it is committed to acting with integrity and its conduct is ethical and responsible through its policies and procedures.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

3 - Teaching and Learning: Quality, Resources, and Support

The institution provides high quality education, wherever and however its offerings are delivered.

3.A - Core Component 3.A

The institution's degree programs are appropriate to higher education.

1. Courses and programs are current and require levels of performance by students appropriate to the degree or certificate awarded.
2. The institution articulates and differentiates learning goals for undergraduate, graduate, post-baccalaureate, post-graduate, and certificate programs.
3. The institution's program quality and learning goals are consistent across all modes of delivery and all locations (on the main campus, at additional locations, by distance delivery, as dual credit, through contractual or consortial arrangements, or any other modality).

Rating

Clear

Evidence

Curricular decisions are reviewed by an established curriculum committee.

The Curriculum Handbook presents documented processes for review of courses and assures curriculum is consistent between on campus and Early college student populations.

Accreditation & Affiliations lists ensures those specialized programs are meeting current performance levels to retain accreditation and specialized affiliation statuses.

Flashlight survey results indicate learning goals are consistent across modes of delivery and all locations.

The college has established student learning outcomes for the general education courses.

Using Quality Matters and other tools has made the quality and learning goals consistent among all modes of delivery.

College-wide outcomes are listed on all syllabi as well as on the college website and the catalog. The

College indicates that all certificate and associate degree programs assess each college-wide outcome at the mastery level at least once within the program.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

3.B - Core Component 3.B

The institution demonstrates that the exercise of intellectual inquiry and the acquisition, application, and integration of broad learning and skills are integral to its educational programs.

1. The general education program is appropriate to the mission, educational offerings, and degree levels of the institution.
2. The institution articulates the purposes, content, and intended learning outcomes of its undergraduate general education requirements. The program of general education is grounded in a philosophy or framework developed by the institution or adopted from an established framework. It imparts broad knowledge and intellectual concepts to students and develops skills and attitudes that the institution believes every college-educated person should possess.
3. Every degree program offered by the institution engages students in collecting, analyzing, and communicating information; in mastering modes of inquiry or creative work; and in developing skills adaptable to changing environments.
4. The education offered by the institution recognizes the human and cultural diversity of the world in which students live and work.
5. The faculty and students contribute to scholarship, creative work, and the discovery of knowledge to the extent appropriate to their programs and the institution's mission.

Rating

Clear

Evidence

The college-wide outcomes are communicated in a variety of ways, including faculty and staff updates during in-service meetings on the trends of student achievement in the five college-wide outcome categories and through faculty communication with their advisory committee. College-wide outcomes are listed on all syllabi. Still, how the College assesses the appropriateness of general education program is not clear.

College-wide outcome applicability to North Central State College's mission and vision is revisited by the assessment committee at least every two years; changes made are informed by evolving employer/transfer institution needs.

The college-wide learning outcomes for all graduates were determined by an inter-academic and student support services assessment committee in the fall of 2003. The core skills outlined in the college-wide outcomes (called the five 'C's for a number of years - Communication, Critical Thinking, Computation, Culture and Community, Computer Literacy) are applicable to NCSC's mission and vision.

College-wide outcomes are listed on all syllabi (master syllabi are standardized, stored in a secure repository, updated through a curriculum committee process ~~outlined later in this chapter~~, and used consistently across curricula), as well as on the college website and the catalog. All certificate and associate degree programs must assess each college-wide outcome at the mastery level at least once within the program. The incorporation of curriculum opportunities for students to achieve the college wide outcomes is mandatory for all programs on campus.

All academic and non-academic programs are on a three-year program review rotation. Outcomes are assessed according to established rubrics.

All academic departments meet monthly with their Assistant Dean to discuss scheduling, student success needs and curricular issues. Twice yearly faculty are required to meet with their program advisory committees, supervised by the Assistant Dean.

Faculty are given an average of 4 hours of group time during college-wide meetings, with all of their colleagues to focus solely on the following:

- The relevance of program outcomes to workforce needs
- The alignment of course outcomes with program outcomes
- The alignment and achievement of various program outcome benchmarks with external licensure requirements.
- The alignment of program outcomes with the credential level to be achieved
- The alignment of outcomes to the mission of a 2-year public institution focused on job readiness and undergraduate transfer.

The Specialized Services Office ensures accommodation for all students requesting assistance. Additionally, the office communicates regularly with faculty through email and personal phone calls to encourage the identification of students who may have a need for accommodation but have not registered with the office.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

3.C - Core Component 3.C

The institution has the faculty and staff needed for effective, high-quality programs and student services.

1. The institution has sufficient numbers and continuity of faculty members to carry out both the classroom and the non-classroom roles of faculty, including oversight of the curriculum and expectations for student performance; establishment of academic credentials for instructional staff; involvement in assessment of student learning.
2. All instructors are appropriately qualified, including those in dual credit, contractual, and consortial programs.
3. Instructors are evaluated regularly in accordance with established institutional policies and procedures.
4. The institution has processes and resources for assuring that instructors are current in their disciplines and adept in their teaching roles; it supports their professional development.
5. Instructors are accessible for student inquiry.
6. Staff members providing student support services, such as tutoring, financial aid advising, academic advising, and co-curricular activities, are appropriately qualified, trained, and supported in their professional development.

Rating

Clear

Evidence

The institution analyzes how faculty are assigned to particular divisions. Also, they compare themselves to other institutions to benchmark their staffing levels. The college has a diversity goal for employees and uses national diversity sources to announce job vacancies. The College identifies specific credentials, skills, and values with a grade level system for non-faculty positions. Positions are classified based upon knowledge, job controls and complexity, and physical environment. Each position has an education requirement that is based on grade level placement.

The HR director surveys his colleagues across institutions in determining placement in relation to pay grade, possible starting salaries and any new credentialing information that may have been missed by the original hiring manager, as needed.

The College has a well-developed position review and hiring process. It has job descriptions that reflect the responsibility of the position and reflect appropriate credentials.

The Academic Divisions, President's staff, Human Resources, and the office of Institutional Research

may provide input into number of faculty assigned to particular disciplines, number of students allowable per course section, and track the ebb and flow of student needs for both on-ground and online instruction.

Faculty workload is guided by the needs of the students and the parameters of the collective bargaining agreement.

The institution monitors academic credentials and conducted an audit in Fall 2017 to be in compliance.

Faculty hiring is based on Ohio Department of Higher Education, Higher Learning Commission, and specialized program accreditation guidelines, as well as the processes and procedures outlined in the collective bargaining agreement.

The institution has a composite chart of required credentials for every teaching area. Adjunct faculty, regardless of where or now they teach, are held to the same standards. An annual audit is completed to assure that faculty meet credentials for the area in which they instruct.

The process for oversight of dual credit/consortia/contractual operations is identical to on-campus process. College Credit Plus faculty are assigned to the supervision of the assistant dean/dean and course coordinator for the classes they teach. An annual audit for college credit plus (CCP) as well as full time faculty is performed by each division, and academic services, assisted by the Human Resources office CCP faculty development plans are tracked throughout the year.

External credentialing certifications in the curriculum provides important insight into quality and relevance of the teaching that is happening in our technical program classes. The state of Ohio move to 100% success funding includes the requirement that all submitted "technical certificates" must aligned with an industry credential.

Results of Student Evaluation of Instruction are shared with faculty. Faculty are evaluated according to a schedule. Faculty are provided summative evaluation information which includes methods of how to improve teaching and a professional development plan, if necessary. Goals for the next year are included, and these goals are aligned with strategic goals.

Workshops, advisory boards, and conferences assist the institution in professional development. Also, faculty participate in various activities to stay current in their discipline. Although faculty participate in professional development aligned to discipline knowledge, it is not clear if faculty participate in professional development aligned to assessment of student learning.

Departmental advisory boards consisting of employers and community members from surrounding counties meet with Deans, Assistant Deans, and Faculty twice annually to review curriculum content, keep faculty abreast of trends, and suggest improvements. The institution needs to ensure a process to ensure faculty are current in their skill sets.

As part of the CBA, faculty are required to offer 4 hours per week of availability in their office or normal classroom where they teach, as well as carry a load of advisees from their programs. Many faculty members go beyond these basic engagement times and offer their services to students in the form of group facilitators for special interest groups on campus, mentors for individual students, and advisors for career/job placement.

Faculty display accountability in this area by displaying their office hours every term on their personalized master syllabi, and their door calendars.

NCSC has programs and processes in place to serve its students, particularly those who need special support and assistance in achieving their academic goals.

All employees receive at least two hours of on-boarding from the HR office on various institutional policies, culture, benefits, and required forms. Specific training in areas of expertise are normally coordinated at the department level by the employee and the supervisor with a focus on the main objectives of the college; access, success, and resources.

Tuition reimbursement program affords most employees the opportunity to gain desired development with additional salary compensation once completed with training. The college hosts two in-service days each year for all employees to keep current with college activities, and gain training in a variety of salient topics for higher education professionals.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

3.D - Core Component 3.D

The institution provides support for student learning and effective teaching.

1. The institution provides student support services suited to the needs of its student populations.
2. The institution provides for learning support and preparatory instruction to address the academic needs of its students. It has a process for directing entering students to courses and programs for which the students are adequately prepared.
3. The institution provides academic advising suited to its programs and the needs of its students.
4. The institution provides to students and instructors the infrastructure and resources necessary to support effective teaching and learning (technological infrastructure, scientific laboratories, libraries, performance spaces, clinical practice sites, museum collections, as appropriate to the institution's offerings).
5. The institution provides to students guidance in the effective use of research and information resources.

Rating

Clear

Evidence

The college has a variety of support personnel for students, including Academic Liaisons, Success Coaches, TRIO staff, Faculty advisors as well as board members and student organizations such as Phi Theta Kappa, Student Government, and the Honors program. The college established a Welcome Johnny and Jane Home Project by training volunteers to listen to military veterans to help them overcome personal challenges, and have more supportive environment on campus. Through collaboration with co-located OSU-Mansfield University, a room has been designated for student veterans to socially interact and support one another.

NCSC partners with The Ohio State University Mansfield to offer psychological counseling services free of charge to all of our students. In addition, The Ohio State University Mansfield supported events may include NCSC students.

The college has student success interventions, such as mediated course drop, guided pathways to success, and developed meta majors. But the College does not address how effective teaching is aligned to courses or programs in the pathways.

The institution has strategies in place to determine the needs of at risk students and to provide

appropriate support services. NCSC uses data from the Flashlight survey, CCSSE, SSI, and the NCCBP to assess student need.

The college offers a wide range of non-academic support services. These support services are not limited to at-risk students. The college has a TRIO program, tutoring, embeds tutors into courses, and places tutors in Health Sciences at optimum times for student services.

The college upgraded its "Gateway Services" concept by providing all the points of contact for enrollment in one building (one stop), and deepening the personalized focus through the enrollment process.

The College uses the STAR system to notify students and advisors when they are off track and to communicate academic progress and other successes.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

3.E - Core Component 3.E

The institution fulfills the claims it makes for an enriched educational environment.

1. Co-curricular programs are suited to the institution's mission and contribute to the educational experience of its students.
2. The institution demonstrates any claims it makes about contributions to its students' educational experience by virtue of aspects of its mission, such as research, community engagement, service learning, religious or spiritual purpose, and economic development.

Rating

Clear

Evidence

Co-curricular programs are aligned with the mission and coordinate between academic and non-academic programs.

The college has participated in several co-curricular initiatives to foster leadership development as well as promote alignment between program outcomes and co-curricular activities. The students are engaged in significant hours of community service.

The College's creation of Honors has contributed to the educational experience. Piloted in spring 2014, the honors projects focus on one or more of the following LEAP identified skills areas: Critical thinking, Research integrity, Character development, and Leadership and Global Awareness.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

4 - Teaching and Learning: Evaluation and Improvement

The institution demonstrates responsibility for the quality of its educational programs, learning environments, and support services, and it evaluates their effectiveness for student learning through processes designed to promote continuous improvement.

4.A - Core Component 4.A

The institution demonstrates responsibility for the quality of its educational programs.

1. The institution maintains a practice of regular program reviews.
2. The institution evaluates all the credit that it transcripts, including what it awards for experiential learning or other forms of prior learning, or relies on the evaluation of responsible third parties.
3. The institution has policies that assure the quality of the credit it accepts in transfer.
4. The institution maintains and exercises authority over the prerequisites for courses, rigor of courses, expectations for student learning, access to learning resources, and faculty qualifications for all its programs, including dual credit programs. It assures that its dual credit courses or programs for high school students are equivalent in learning outcomes and levels of achievement to its higher education curriculum.
5. The institution maintains specialized accreditation for its programs as appropriate to its educational purposes.
6. The institution evaluates the success of its graduates. The institution assures that the degree or certificate programs it represents as preparation for advanced study or employment accomplish these purposes. For all programs, the institution looks to indicators it deems appropriate to its mission, such as employment rates, admission rates to advanced degree programs, and participation rates in fellowships, internships, and special programs (e.g., Peace Corps and Americorps).

Rating

Clear

Evidence

The Program Review Manual documents what is reviewed.   Program reviews are conducted for all programs on a three-year rotation.

Credit evaluation is the responsibility of the academic services officer and is completed according to the Ohio State transfer system and institutional requirements. The prior experience credit policy was recently updated.

The transfer system is endorsed by the State of Ohio. The College uses the TES system to manage transfer information.

Decisions regarding course content, credit, and pre-requisites are handled by the faculty and the curriculum committee with administrative review.

The institution follows guidelines to ensure faculty are qualified, dual credit courses are equivalent to college courses, and student learning is the same for all modalities. Adjunct credentialing audit & textbook, assessment, outcomes and evaluation of dual credit instructors/courses are equal.

The specialized accreditation is appropriate to the educational purposes and mission of the institution. The list of specialized accreditation and affiliations along with trend pass rates includes programs appropriate for associate degree educational purposes.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

4.B - Core Component 4.B

The institution demonstrates a commitment to educational achievement and improvement through ongoing assessment of student learning.

1. The institution has clearly stated goals for student learning and effective processes for assessment of student learning and achievement of learning goals.
2. The institution assesses achievement of the learning outcomes that it claims for its curricular and co-curricular programs.
3. The institution uses the information gained from assessment to improve student learning.
4. The institution's processes and methodologies to assess student learning reflect good practice, including the substantial participation of faculty and other instructional staff members.

Rating

Clear

Evidence

The college has defined goals for student learning of general education requirements and standard rubrics by which these are assessed. Program assessment is as process continues to evolve.

The evidence of assessment of student learning is included. The College acknowledged that the analysis of the college wide outcome trends could be more readily used for making improvements.

College has detailed curriculum maps which map VALUE rubrics to the College Wide Outcomes (CWO) at the course level and has data on mean score for each of the CWOs over several semesters. The college has been modifying the process for collecting samples to assess each term and has set thresholds for meeting the outcomes. In latest year sampled, the average score met the threshold for all 5 outcomes. The college does not clearly describes next steps or what improvements it made with the CWO assessment data.

The College provides program data and plans for improvement.

NCSC has stated goals for student learning and effective processes (effective in that they are collecting and analyzing data and reviewing and revising processes for improvement); the institution assesses achievement of learning outcomes for **curricula** programs; NCSC looks to be using information gained from assessment to improve student learning for program outcomes but it is unclear if they are doing it for course outcomes or VALUE rubrics; and processes and methodologies are reflective of good practices and has wide participation of faculty and administration.

NCSC is just beginning to develop **co-curricular** goals. Goals are limited to leadership and there is no apparent process for assessing student learning of these goals. It appears to be a series of events and activities aimed at promoting leadership skills for students.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

4.C - Core Component 4.C

The institution demonstrates a commitment to educational improvement through ongoing attention to retention, persistence, and completion rates in its degree and certificate programs.

1. The institution has defined goals for student retention, persistence, and completion that are ambitious but attainable and appropriate to its mission, student populations, and educational offerings.
2. The institution collects and analyzes information on student retention, persistence, and completion of its programs.
3. The institution uses information on student retention, persistence, and completion of programs to make improvements as warranted by the data.
4. The institution's processes and methodologies for collecting and analyzing information on student retention, persistence, and completion of programs reflect good practice. (Institutions are not required to use IPEDS definitions in their determination of persistence or completion rates. Institutions are encouraged to choose measures that are suitable to their student populations, but institutions are accountable for the validity of their measures.)

Rating

Clear

Evidence

Since 2013, student retention, persistence, and completion have been a strategic focus. The institutional research office is responsible for internal data collection. The College sets its targets according to internal previous patterns. The College believes that cohort and competitive entry programs should have different goals than overall college retention, persistence, and completion goals.

The College relies on data from sister institution retention achievements, grant compliance retention rates, AtD participation targets, institutional history, and faculty analysis to develop goals and plans.

Surveys conducted by IR indicate NCSC tracks retention and completion data for the Ohio Department of Education as part of their mandatory funding policies. Additionally participation in AtD initiatives have emphasized additional measures relating to setting goals and measuring results.

Retention rates within specific programs are improving. Student Success Teams have been established to address student retention.

Course success from 2015-2017, persistence rates by department and participation in CCRC research studies are examples of renewed focus on completion and student success.

The institution reports a 6% increases in program students from who have been advised.   At the institutional level, retention has improved by 3%. However, the improvements made as warranted by data are not reported.

The institution lists tools such as Ellucian- Colleague student information system, Advisor Trac, IPEDS & HEI, CCSSE, student focus groups, and faculty evaluations for collecting data. The methods of analysis are briefly explained in the report and are limited to examples from a Title III external reviewer.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

5 - Resources, Planning, and Institutional Effectiveness

The institution's resources, structures, and processes are sufficient to fulfill its mission, improve the quality of its educational offerings, and respond to future challenges and opportunities. The institution plans for the future.

5.A - Core Component 5.A

The institution's resource base supports its current educational programs and its plans for maintaining and strengthening their quality in the future.

1. The institution has the fiscal and human resources and physical and technological infrastructure sufficient to support its operations wherever and however programs are delivered.
2. The institution's resource allocation process ensures that its educational purposes are not adversely affected by elective resource allocations to other areas or disbursement of revenue to a superordinate entity.
3. The goals incorporated into mission statements or elaborations of mission statements are realistic in light of the institution's organization, resources, and opportunities.
4. The institution's staff in all areas are appropriately qualified and trained.
5. The institution has a well-developed process in place for budgeting and for monitoring expense.

Rating

Clear

Evidence

Faculty/Staff/Administrator provide input on the human resource needs in their areas. This input is included in planning discussions and has helped inform president's staff of the needs while allowing a more focused application of human resources to areas of high strategic importance.

Changing demographics and enrollment patterns has led to a surplus of space on campus. This surplus has caused a re-evaluation of vast amounts of campus space. Part of the ability to maintaining a reliable infrastructure is the sharing of resources with partners. The college shares resources as a co-located campus with The Ohio State University (OSU). The College also has a Memorandum of Understanding (MOU) with OSU-OCIO to share internet bandwidth between both campuses.

The zero-budget activity is set to be repeated in the next fiscal year, to re-calibrate budgets for possible inclusion of innovations. However, this is dependent upon the new state budget allocation that will be communicated in Spring 2018.

In 2013, NCSC instituted new processes for collecting and analyzing data that would lead to thoughtful allocation of available resources to achieve goals and maintain supporting infrastructure.

Fiscal audits were positive and although major changes have occurred in state funding allocations, the

college is making needed changes to meet or exceed most efficiency goals and remain solvent.

Every 6 months, the CFO and the president's staff review current budget surplus or shortfall going into Spring Semester for necessary adjustments. Surplus funds have been used to replenish reserves.

State funding in Ohio has moved to a 100% success model and the allocations are not as stable or easily predicted. Thus, new innovations funding are centered on current mission/vision needs. Most innovations at this stage are funded by temporary or long-term grants, with specific short term goals, that seek to integrate CQI activities into current processes without depending upon outside funding that may not be available in the future.

The budget review cycle and program review cycles seem appropriate for alignment with mission and goals. Regular fiscal audits, Board of Trustee review and reporting to the State level assist in demonstrating fiscal viability. Technological, physical, and human resources are in place to provide higher educational opportunities and fulfil their mission.

Internal Professional Development agendas showed evidence of ensuring qualified staff and faculty are hired and continue to be provided opportunities to learn and develop in their positions.

The majority of external professional development of faculty is driven by the requirements of accredited programs and the collective bargaining agreement which includes specific language for funding. There has been over 20% decrease in funding for professional development, especially for non-faculty employees. This reduction has been compensated by providing extensive internal training during convocations, in-service days, division meetings, open forum and inviting external speakers on topics related to student enrollment, student success, and campus safety.

Program reliance on grants may be a concern if no sustainability plan is created to keep or maintain new programs and services after the life of the grants.

At the strategy forum in Lisle, Illinois in February, 2013 the College outlined a resource allocation process which, contributed to the alignment of resources toward the strategic goals of student access and success. Monthly, the Board of Trustees monitors our financial status including revenues, expenses, reserve, cash flow, and comparison to previous years.

The College has stopped the automatic funding of positions when vacancies occur. All positions, short of the presidency are re-examined for relevancy and possible restructuring.

In FY 2013, the Controller's office and the CFO reset all budgets to 'zero'. Each budget manager was called upon to conduct a series of meetings with their staff/faculty to focus on three levels of budget priority: essential operations, mission-focused items, and areas of growth requests. Excel worksheets were distributed to all managers and compiled with accompanying narratives which were the basis for budget interviews.

After the budget reset in 2013, budgets are rolled over from year to year, reviewed annually, and mid

fiscal-year adjustments are made. New items are added to budgets when initiatives are identified that will significantly move the strategic plan forward.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

5.B - Core Component 5.B

The institution's governance and administrative structures promote effective leadership and support collaborative processes that enable the institution to fulfill its mission.

1. The governing board is knowledgeable about the institution; it provides oversight of the institution's financial and academic policies and practices and meets its legal and fiduciary responsibilities.
2. The institution has and employs policies and procedures to engage its internal constituencies—including its governing board, administration, faculty, staff, and students—in the institution's governance.
3. Administration, faculty, staff, and students are involved in setting academic requirements, policy, and processes through effective structures for contribution and collaborative effort.

Rating

Clear

Evidence

The aligning of activities at the deans, directors, vice presidents, and president level is more focused than in previous years. There is knowledge related to the institution's overall mission or direction across the college. Mission and strategic direction discussions happen consistently in all administrative meetings and in departmental meetings.

The Board of Trustees implemented the Carver Model of Policy Governance in 2009, and received extensive training on it in 2010, which was alluded to in the previous portfolio. This model requires consistent active engagement of the board, the community, and the CEO, and is divided into four institution policy categories.

The governance model recognizes the role and authority of the College President as being the Chief Executive Officer and directly responsible to the Board of Trustees for the effective leadership and efficient management of the institution.

All stakeholders are engaged by the president and the president's staff through a series of meetings. These meetings with external stakeholders include dinners and community surveys. These external stakeholders are invited to give input on strengths, weaknesses, opportunities, threats and trends that impact the community.

Committee structure allows for collaboration and communication between departments and divisions to align efforts.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

5.C - Core Component 5.C

The institution engages in systematic and integrated planning.

1. The institution allocates its resources in alignment with its mission and priorities.
2. The institution links its processes for assessment of student learning, evaluation of operations, planning, and budgeting.
3. The planning process encompasses the institution as a whole and considers the perspectives of internal and external constituent groups.
4. The institution plans on the basis of a sound understanding of its current capacity. Institutional plans anticipate the possible impact of fluctuations in the institution's sources of revenue, such as enrollment, the economy, and state support.
5. Institutional planning anticipates emerging factors, such as technology, demographic shifts, and globalization.

Rating

Clear

Evidence

Alignment is demonstrated in the description, and resulting action and key performance indicators of the strategic goals (access, success, resources) and associated sub-goals and activities within the strategic plan.

The budget process specifically indicates that managers must integrate each of their annual budget requests with at least one of the college's stated strategic goals- Access, Success, or Resources.

The Board is focused on aligning the budget with the mission of the institution.

Strategic planning at North Central State College is finalized at the president's staff and cabinet level.

The College has dedicated resources to growing the dual credit population. As a result, as an incentive to persist and finish after completing dual credit, the College offers free-tuition to students who continue full-time after completing dual credit. The College acknowledges that this could pose a fiscal threat and is working to create revenue streams to cover these costs.

The College is dedicating resources to secure grant funding. The College has secured over $15 million in grant dollars in the last several years.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

5.D - Core Component 5.D

The institution works systematically to improve its performance.

1. The institution develops and documents evidence of performance in its operations.
2. The institution learns from its operational experience and applies that learning to improve its institutional effectiveness, capabilities, and sustainability, overall and in its component parts.

Rating

Clear

Evidence

The college conducts an annual strategic planning process that assist in a SWOT analysis and continuous improvement processes. Additionally, many action projects have contributed to the overall performance of the institution. This process is new and the reviewers were not able to find evidence that it will be repeatable or sustainable. The College has engaged in several student success initiatives and has seen success in its completion agenda.

NCSC has been an AQIP institution for many year and states it has a culture of continuous quality improvement. Ohio's decision to go to 100% performance funding and conversion to semester format have challenged the college to maintain its CQI focus. Due to resource constraints and external commitments, the college has considered the value to continuing with the AQIP pathway.

Interim Monitoring (if applicable)

No Interim Monitoring Recommended.

Review Dashboard

Number	Title	Rating
1	Reflective Overview	
2	Strategic Challenges Analysis	
3	Accreditation Evidence Screening Summary	
4	Quality of Systems Portfolio	
5	AQIP Category Feedback	
I	Helping Students Learn	
II	Meeting Student and Other Key Stakeholder Needs	
III	Valuing Employees	
IV	Planning and Leading	
V	Knowledge Management and Resource Stewardship	
VI	Quality Overview	
1	Mission	
1.A	Core Component 1.A	Clear
1.B	Core Component 1.B	Clear
1.C	Core Component 1.C	Clear
1.D	Core Component 1.D	Clear
2	Integrity: Ethical and Responsible Conduct	
2.A	Core Component 2.A	Clear
2.B	Core Component 2.B	Clear
2.C	Core Component 2.C	Clear
2.D	Core Component 2.D	Clear
2.E	Core Component 2.E	Clear
3	Teaching and Learning: Quality, Resources, and Support	
3.A	Core Component 3.A	Clear
3.B	Core Component 3.B	Clear
3.C	Core Component 3.C	Clear
3.D	Core Component 3.D	Clear
3.E	Core Component 3.E	Clear
4	Teaching and Learning: Evaluation and Improvement	
4.A	Core Component 4.A	Clear
4.B	Core Component 4.B	Clear
4.C	Core Component 4.C	Clear
5	Resources, Planning, and Institutional Effectiveness	
5.A	Core Component 5.A	Clear

5.B	Core Component 5.B	Clear
5.C	Core Component 5.C	Clear
5.D	Core Component 5.D	Clear

Review Summary

Conclusion

Overall Recommendations

Criteria For Accreditation
Clear

Sanctions Recommendation
Not Set

Pathways Recommendation
Not Set

No Interim Monitoring Recommended.