

Systems Portfolio
North Central State College

4/26/2018

1 - Helping Students Learn

1.1 - Common Learning Outcomes

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

1P1: PROCESSES

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

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

1R1: RESULTS

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

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

1I1: IMPROVEMENT

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

Responses

1P1a. Aligning common outcomes to the mission, educational offerings, and degree levels of the institution (3.B.1, 3.E.2)

Since 2013, the college has been evaluating its mission and strategic direction annually. Stable since that time is the mission focus on increasing student success. Measures used for evaluating the success of this component of the mission include retention, persistence, graduation rates, and graduates' knowledge, skills and abilities. Operationally this is coordinated, by the assessment committee and president's cabinet, examined in all standing committees, and communicated to all employees during fall convocation and spring in-service. Annually, the President holds community-wide meetings where community leaders are polled for their input into the most needed technical as well as “soft skills” for our graduates at both the certificate and degree levels.

The process for assessing outcomes has been steadily improving since 2013. The material used for the *validity* of outcomes discussion comes primarily from our advisory committee meetings, alumni surveys, external accreditor reports, and employer surveys. The *reliability* of these measures is ensured by consistent data collection in all courses identified for college-wide outcome assessment and the substantive conversation around trends.

The entire assessment process was deconstructed in 2013 and rebuilt around a simple framework that would allow 100% of the faculty to participate without onerous effort on their part, and would allow faculty to practice the most basic components of assessment for several years.

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

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 preceding year the original academic team, at the behest of the Chief Academic Officer launched the assessment committee, which originally focused on the assessment of program learning outcomes. As the 2002 academic year progressed team members, in conjunction with advisory committee input outlined possible college wide outcomes.

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) have stood the test of time. College-wide outcome applicability to our mission and vision is revisited within the assessment committee at least every two years; changes made are informed by changing employer/transfer institution needs. Thus far, changes have been [minimal](#), and have supported widespread engagement of the faculty. Our external constituencies have continued to affirm the outcomes as the most important skills for all of our graduates to possess. Additionally, as will be explained later, the inclusion of the professional skills assessment was added in direct response to community input.

The Assessment Committee is the driving force and the chief coordinator for continuous improvement in relation to college wide, as well as program learning outcomes. Thus, we will take time to explicate the relationship of the committee to the wider academic community on campus.

The current composition of the assessment committee is guided by the committee structure policy enacted by President Diab in the fall of 2014. The team must consist of two faculty members from each division, one academic dean, the CAO, and the director of Academic Services.

The purpose of the committee is to guide the assessment process, review submitted program outcome reports, offer feedback on the ability to assess the stated outcomes, as well as faculty analysis in the comments area of their reports.

The committee's work in relation to the six common outcomes is widespread. The committee is focused on guiding faculty to thoughtfully gather and apply data. This is a continual teaching and learning process for the committee itself. The members have committed to become on-campus experts in the field of the scholarship of teaching and learning assessment. Two times per year since 2013, the committee has conducted assessment workshops for faculty. Ongoing discussion surrounding current and proposed college wide outcomes has led to nuanced changes to the deployment of rubrics that have affected results. These changes will be discussed in the results section below.

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

Our college-wide outcomes are communicated in a variety of ways. Twice per year, faculty and staff are updated during in-service meetings on the trends of student achievement in the five college-wide outcome categories-oral/written are one category. Additionally faculty are required to communicate with their advisory committee twice annually, in part to ensure that not only are the program learning outcomes meeting the needs of employers, but that the college-wide outcomes are meeting community employers' needs. Finally, the president conducts community-wide advisory meetings to poll area employers on the skills most needed by our graduates; these polls are informed by the discussion of our current college-wide outcomes. Please see analysis of the president's most recent community [clicker survey](#). N=60

Since 2003, the agreed upon college-wide outcomes have been revisited formally college-wide, three times and have been updated to reflect changing employer and student needs. The ["Evolution of College Wide Outcomes"](#) table displays the outcome names and the updates.

College-wide outcomes are listed on all syllabi (master syllabi are standardized, stored in a secure repository, updated through 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 standard parameters are as follows: every semester when a faculty member teaches a course where one of the college-wide outcomes appear on the syllabus, that faculty member must deploy a college-wide outcome value rubric. [Please see master matrix of CWO's](#). Student activities must be assessed within the course section of the college's learning management system (CANVAS) assessment module. The rubrics were embedded into the CANVAS in 2013. The data is collected at the end of each semester by the Academic Services Office, and shared with faculty. Additionally, every convocation allows time for faculty training in assessment, with time for ['tuning'](#) rubrics with one another, and the opportunity to give [feedback](#) about the assessment training.

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

The incorporation of curriculum opportunities for students to achieve the college wide outcomes is mandatory for all programs on campus. Additionally, every semester all college-wide outcomes (CWO's) listed on syllabi are assessed and reported out. This is monitored by the assessment committee, academic services office, CAO, and the divisional deans.

Beginning in 2013 curriculum maps for all programs have been submitted to the academic services office; these maps outlined the number of times each of the college-wide outcomes are assessed in each program. Please see [training screenshot](#) in our evidence file where we asked faculty to tie their course outcomes to their program outcomes, this same process was used for the college-wide outcomes and the results were submitted to the academic services office and was collected into the matrix referenced above.

In relation to students with identified disabilities, our 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. Between Spring 2015-Spring 2017 the Specialized Services Office has created and deployed individual plans for 348 students, with an average of 69.6 students per semester utilizing the full services of the Specialized Services Office.

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

North Central State College's mission, which focuses on skills for employment, and continued education, is always the foremost consideration when college-wide outcomes are revisited. There has been a concerted effort throughout upper level administration to simplify our vision, mission, goals and strategic plans and align all activities to these clear focused goals to minimize confusion in the execution of the goals, and maximize our impact on the communities we serve.

The communities we serve consistently reaffirm the needs of our graduates to exemplify skills in critical thinking, communication-both written and oral, and display cultural sensitivity and awareness. Please see data from the [President's community-wide advisory team in relation to the needed college-wide outcomes](#) identified as essential for success in business, by our area employers.

As an example of this shifting, one college-wide outcome transitioned from computer literacy to information literacy. This was in response to the changing needs of the workplace and the changing demographics of employees and students-from baby boomers in need of computer operation training to millennials in need of discernment in relation to valid information found online.

1P1f. Designing, aligning, and delivering co-curricular activities to support learning (3.E.1, 4.B.2)

In direct response to the opportunity outlined in [1P16](#), from the 2012 systems appraisal report, where peer reviewers stated that "*although North Central State College has co-curricular learning objectives, it acknowledges the need to create a systematic and broad based approach to align and integrate its co-curricular activities with curricular learning objectives*", the College, in 2013 asked the newly hired Dean of Liberal Arts to begin the creation of an honors college program in an effort to promote more engagement for our transfer students in relation to our college-wide outcomes. Piloted in spring 2014, the honors projects that are the backbone of the program focus on one or more of the following LEAP identified skills areas:

- Critical thinking
- Research integrity
- Character development
- Leadership and Global Awareness.

- These areas of focus were selected by the Dean of Liberal arts from research into sister college's publications of best practices in honors programs.
- Every semester since fall 2014, the Honors College has invited speakers on a variety of topics to speak to our honors students as well as the general public on issues of leadership, community development, diversity, global engagement, etc.

[Please see attached Colloquial schedule.](#)

In addition to the creation of the Honors College program, the college has participated in the following co-curricular initiatives to foster leadership development as well as promote alignment between program outcomes and co-curricular activities:

- Phi Theta Kappa (2005)
- Student Government and student government- reports to the board of trustees. Student government president also serves on president's cabinet.
- The National Society for Leadership and Success (2015), coordinated by our director of Tutoring. This society trains several hundred students per year between OSU/NCSC. This has resulted in approximately 3000 student hours that included service to the community.

1P1g. Selecting tools/methods/instruments used to assess attainment of common learning outcomes (4.B.2)

A variety of means have been used since 2003 for the assessment of both program and college-wide outcomes. College-wide outcomes were assessed on a rolling three-year schedule until the spring of 2013. Until 2013, faculty participation in all aspects of assessment was approximately 30%, with most faculty voicing the opinion that they understood little of what the assessment committee did, and the use of the data.

At that time the assessment committee (composition of which is outlined above) voted upon the use of standardized rubrics that could be embedded into the college's Learning Management System (LMS) CANVAS. The rubrics selected were six of the VALUE rubrics developed by AACU. Please see 1R1 for a description of each rubric and 2013-2016 outcome data.

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

Faculty were trained during the spring 2013 In-service, and during the fall 2013 Convocation for deployment in the fall 2013 courses. The first semester faculty were asked to assess one assignment, in one course, using one of the six VALUE rubric. In subsequent semesters, faculty were encouraged to vary the rubrics and the assignments, to gain familiarity with all six of the adopted rubrics. Additionally, faculty were given 2 to 4 hours at each service to collaborate and analyze the use of various assignments to help norm the scoring of the rubrics across campus. These discussions are still encouraged and facilitated, and time is allotted at every in-service for assessment. Beginning fall 2015 the assessing of the college-wide outcomes was successfully embedded into the fabric of faculty activities. When a college-wide outcome is identified for assessment on any given syllabus, the faculty teaching that course in the semester will deploy the rubric. The aggregate data has been collected by the Academic Services Office and presented to faculty and staff at the biannual meetings, as well as emailed to all employees. The analysis of the CWO trends has been at times weak. This is due in part to lack of understanding as discussed above, as well as a shift in the 2015 academic year, in relation to timing of deployment of each of the college wide outcomes. This issue is described in the results section below.

1R1a,b,c. What are the results for determining if students possess the knowledge, skills and abilities, that are expected at each degree level.

- While the college has instituted a systematic, consistent, 100% full-time faculty participation in college wide outcomes assessment, the results are inconsistent at this stage of development. This is not an unexpected outcome in light of the level of maturity of use of assessment data for the greater faculty community. One explanation for the upward skewed data beginning in the 2015/2016 academic year is that our initial deployment of college wide outcome VALUE Rubrics focused on training faculty in the process and the use of the technology; thus the faculty randomly selected the courses where they would glean the college wide outcome data. Thus, the data was collected in a cross section of first year, second year, and/or developmental courses.
- When the training period was finished, a review of deployment strategies was implemented, and faculty were instructed to rethink where they would deploy the VALUE rubrics. A majority of program faculty chose to deploy rubrics in their capstone courses. This was to address what faculty believed was our most pressing need, the guarantee of skill attainment of all of our students in the areas of communication, critical thinking, cultural awareness, quantitative and information literacy skills to our external constituents.
- The purpose of the reformation of the assessment team in 2013, and the subsequent simplification of the assessment process was to gain our goal of 100% participation. We have achieved that goal. Since spring 2013 all full-time faculty have participated in a graduated deployment of AACU VALUE rubrics in courses they teach. The data collected, while displaying widespread participation also reveals upward skewing of achievement for all six outcomes and increased standard deviation with larger deployment.
- The first semester the rubrics were deployed in [Fall 2013](#), was a training semester for faculty. They spent the both in-service and convocation time learning the technology for rubric deployment. The assessment committee conducted all of the training.
- In the second semester the deployment was voluntary, and meant to allow faculty practice time. [Spring 2014](#) Despite the low deployment numbers, some valuable data was gathered that displayed the cross section of achievement of our students between divisions, and between first year and second year courses. As noted earlier, most of the time, the greater the number of sections where the rubrics were deployed, the greater the standard deviation. This reveals the subjectivity inherent in the way we have deployed the rubrics and the variety of disciplines in which the rubrics were deployed. The fluctuations in the standard deviation was found to be a marker of either widespread deployment of the rubric (IE: Oral communication rubric deployed in Engineering, English, Criminal Justice, and Nursing) in the given semester, or narrow deployment (in Nursing courses only).
- As the process matures, and the assessment committee continues training faculty in aligning assignments and expectations to rubrics this issue should become less prevalent.
- Deployment numbers increased for a time in [Fall 2014](#), and [Spring 2015](#). With an average class enrollment of 15, deployment of rubrics every semester averaged approximately 30 sections. For workload equity among faculty with sections where students numbered upwards of 50-100, it was decided that faculty could randomly select 15 students to assess. The sampling method is only marginally random, in that records displayed in the LMS for rubric assessment are ordered from A- Z.
- [Fall 2015](#) saw a change in faculty philosophy related to college wide outcomes. Where previously the CWO's appeared multiple times throughout the program, faculty decided to limit the number of sections where the CWO's would appear on the syllabi. This was decided for two reasons. First, there was the fear among faculty, as the State of Ohio moved to a 100% student success funding formula, that assessment scores would be used

against faculty, or the institution. Thus, faculty decided to limit deployment to capstone courses, [See data Fall 2016](#). Secondly, as we embraced the student success agenda, the burden of other activities started to overwhelm faculty. This was a step back for the assessment committee, however it was recognized that in order to continue any growth we had to acknowledge faculty fears. However as the perception of 'top down' assessment priorities has lessened we are gaining traction in creativity again with assessment. Faculty are again beginning to seek pre and post CWO data similar to what they are reporting in their program assessment reports. The [Spring 2017 CWO report](#) displays continued limited deployment in capstone courses, and consistency in results.

III. IMPROVEMENTS

- Several process improvements have been implemented in light of the capstone success data we have gleaned. Faculty are beginning to deploy the VALUE rubrics in a pre and post manner throughout their programs. This is to meet two needs; first to isolate where change happens in students' journey at NCSC in relation to improvement in the 6 skill areas, and to display our own value as an institution that prepares hitherto-fore under-prepared students for the workforce not only in technical skill attainment, but in the soft skill areas that are increasingly important to employers.
- Additionally, the process for adding a new college-wide outcome in over a decade has begun, in response to community requests that we begin assessing, and focusing on specific areas related to professionalism. This includes such sub categories as attendance, teamwork, work ethics, demeanor, hygiene, organizational skills, ethical behavior, and conflict resolution. The new rubric is being deployed starting Fall semester 2017.
- The role of assessing college-wide, and program level outcomes at the level of introduction, reinforcement, and mastery is an ongoing and soon to be more emphasized part of continuous improvement for the faculty. The structures and feedback system for college-wide and program assessment are extremely solid; this was our goal over the last few years. Thus, increasing maturity of analysis, and deployment are the goals for the next three years.
- At this stage, Academic Services gathers and disseminates the CWO data. The original use of the LMS in its current role was meant to 1. make the gathering of the data as easy as possible for faculty, and 2. protect anonymity for faculty to reduce barriers to participation. We are at a stage where we need to re evaluate this process.
- College-wide training for all employees in regard to solid research methods, such as correlation vs. causation, understanding true random sampling, understanding confounding factors, etc. is planned for the future.
- Lastly, our on-campus adjunct faculty will be trained during the 2017-2018 year to deploy the rubric in all classes in which the rubric appears on their syllabi.

Sources

- 1844 20120215 System Assessment - Systems Appraisal
- 1844 20120215 System Assessment - Systems Appraisal (page number 19)
- 2011 appraisal opportunities
- Advisory Committee Feedback
- College wide outcome graphic for 2013-2016

- College Wide Outcome Matrix- ALL CLASSES
- Evolution of College Wide Outcomes
- Evolution of College Wide Outcomes
- Fall 2013 CWO Chart
- Fall 2014 CWO Chart
- Fall 2014-2016 vs2 CWO Chart
- Fall 2015 CWO Chart
- Fall 2015, Fall 2016 PARS compliance
- Fall 2016 CWO Chart
- Fall 2017, Assessment Workshop Feedback
- Mapping Training Screenshot
- NCSC Honors Colloquium Attendance
- North Central State College Assessment Table
- Scenarios for helping faculty 'tune' their application of the rubrics
- Spring 2014 CWO Chart
- Spring 2015 CWO Chart
- Spring 2016 CWO Chart
- Spring 2017 CWO Chart

1.2 - Program Learning Outcomes

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

1P2: PROCESSES

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

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

1R2: RESULTS

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

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

1I2: IMPROVEMENT

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

Responses

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

institution (3.E.2)

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

In the 2013-2014 academic year, the college, through the leadership of the chair of the assessment committee and the CAO, completely revamped the program outcomes and college-wide outcomes assessment process at NCSC.

This was a direct result of the February 2012 HLC system's appraisal feedback report where an OO (outstanding opportunity) was identified in section 1R3. The peer reviewer [stated](#) that *"frequent change in academic leadership have slowed the progress of systematic assessment of program learning objectives. Ensuring that all programs conduct assessment and report results as required will strengthen evidence that student learning at all levels is being achieved."*

The Program Learning Outcome revamp, while consistent and successful has been - in comparison to the revamp of the college-wide outcome assessment, less consistent in level of maturity across disciplines and divisions. Please see two examples of inconsistent maturity levels. [VCMT](#) and [BUSM](#). Despite this inconsistency of maturity levels between divisions, the departments that deeply understand the connection between their program outcome results and various interventions are helping their colleagues to improve. VCMT did improve somewhat in their analysis of their data for the [15/16 academic](#) year. The assessment committee recently, Fall 2017, began the analysis of Program Assessment Reports (PARS) and is again providing input to departments on such topics as assessibility, causation vs. correlation, validity of assignment to really measure the outcome, etc.

Faculty are afforded twice yearly opportunities to synthesize input from advisory committees, credentialing or accrediting bodies, sister institution's outcomes, and best practices research into undergraduate education, to update program learning outcomes.

Additionally, the Ohio Department of Higher Education (ODHE), establishes the parameters of what can be offered at a two year public institution of higher education in the state. The college is approved to deliver AAS, AAB, ATS, AA, and AS degrees through the state of Ohio. The college adheres to, and trains faculty/deans on adherence to the ODHE standards for academic programs. This is outlined, and reviewed in the college's [curriculum handbook page 12, for ODHE guidelines for all applied associate degree](#).

North Central follows the ODHE Standards for the AA and AS degree's. These standards reflect ODHE's focus on maximum transferability between all Ohio public colleges. Please see page 13, of the [NCSC curriculum committee handbook for these guidelines](#).

The process for determining program level outcomes evolved quite differently than the process for college-wide outcome assessment. The process has been repeated several times since 2003. With the most marked changes in process in 2012, and again in 2014. Both of these academic years posed challenges and opportunities to "tune" the curriculum to the needs of the community and focus student learning on the essential knowledge and skills for an associate degree. In 2012, by state mandate, the college transitioned from Quarters to Semesters. This transition necessitated a complete restructuring of all program curricula.

In 2013 ODHE mandated that all associate degree programs reduce credit hours from the cap of 72 down to 65 credit hours. This again necessitated a careful review of essential learning outcomes and the best way to meet the skill set needs requested by employers while reducing instructional time. AA and AS curricula had previously undergone this 'tuning' process specific to transfer, and were created

within the 65 hours limit.

Ultimate responsibility for the tuning of curriculum to employer and other educational partner's expectations lies with the faculty.

We have three academic divisions at NCSC. While the overall philosophy and training for assessing program level outcomes is similar for all divisions, how these outcome assessments are gathered and reported are tailored to the needs of the faculty and students within each division.

The Nursing and Allied Health programs align their program learning outcomes with licensure and accreditation standards. The program assessment reports submitted by these departments generally mimic the structure of what they submit to their external accreditors.

The Business Industry and Technology Division houses a more diverse group of disciplines; from engineering technology to networking. Some disciplines have external accreditation, others have Ohio State licensure requirements, and still others meet the specific transfer needs of some of our long standing articulation agreements with our most invested four year college partners.

The Liberal Arts Division, while often collaborating with the Associate of Applied Business, and Applied Science departments, does house several recently created transfer degrees (AA, AS) that have reached a threshold of student enrollment that has made program outcome data gathering essential. The parameters behind the triggers for data gathering will be discussed in the results section.

All of North Central State College's programs align with ODHE standards for delivery of degrees at the associate degree level. **(3.E.2)** All significant changes to said programs are approved through our internal processes. These processes begin with community input; leading to faculty creation or modification of the program; followed by program coordinator review, dean review, curriculum committee review; and finally CAO approval. The curriculum [handbook](#) and [flow chart](#) are attached in the evidence folder.

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

Program level outcomes are outlined on each program page of the College's website and displayed in the annual [catalog](#). The catalog coordinator updates these every Spring Semester. This communication occurs whether outcomes are internally created through advisory committees and best practices research or assigned by an external credentialing or accrediting body.

The program outcomes are assessed at various stages throughout the students' journey through their programs. In 2009 and 2011 faculty were afforded the opportunity to learn about curriculum mapping. Since that time the mapping of course outcomes to program outcomes has been enforced at a division level. Extensive training has been delivered to guide faculty in not only assessing mastery level outcomes, but the formative outcome assessment at various stages throughout programs. This is to display the graduated level of achievement we expect in our students.

Our goal in assessment is to track our students' progress, display change, and reveal opportunities for growth in our own teaching practices.

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

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. Failure to schedule these meetings can be noted on faculty evaluations; thus ensuring accountability for this standard. Information from these meetings is brought to the bi-annual college wide meetings held in Spring and Fall Semesters. Faculty are given an average of 4 hours of group time during these college-wide meetings, with all of their colleagues to focus solely on the following:

- The relevance of program outcomes to the 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.

1P2e. Designing, aligning, and delivering co-curricular activities to support learning (3.E.1,4.B.2)

Each of the programs listed below have been created to supplement student learning outside of the classroom. In addition to the NCSC specific programs, our students/employees benefit from our co-located status with The Ohio State University. All NCSC students and employees are welcome to participate in the OSU drama club, movie nights on campus, all student fairs, and a wide variety of clubs for individual student needs.

- Honors college- Students are assessed every semester they are enrolled in the honors program, on their project completion, poster presentations, and colloquial attendance.
- Technology Clubs- aggregate assessment of outcomes as a group, national competitions.
- Phi Theta Kappa- aggregate assessment of outcomes as a group, national competitions
- Student Government
- The National Society of Leadership and Success- benchmarks of community service/leadership activities must be met for students to remain in the society.
- Internships-outcomes assessed by on-site supervisors
- Diversity and Justice Council

1P2f. Selecting tools/methods/instruments used to assess attainment of program learning outcomes(4.B.2)

The tools selected to evaluate program level outcomes are as varied as the programs. Faculty are responsible for collaborating with colleagues on the validity of tools used in measuring program outcomes. Faculty submit a program assessment report annually to the assessment committee. This report is reviewed and feedback is given to faculty in relation to the measurability of outcomes based upon the wording of those outcomes. Outcomes must be written using Blooms verb terminology.

- Fall 2015, the committee decided to temporarily suspend feedback on tools used and data gathered, to focus on training and feedback surrounding each department's analysis of trends they are seeing in their outcomes assessment. This change was enacted to reignite participation and creativity in the process of program assessment.
- Additionally, the committee structure, and membership, has changed dramatically within the last 4 years. This was an intentional shifting of the responsibility for data gathering from the "Program Chair" position (now a completely administrative position of Assistant Dean) to the program faculty.

External tools are selected based upon external credentialing standards: certification tests, licensure tests, journeyman certification etc...

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

When the college renewed the assessment committee charter in 2013, training was made available for all faculty during all college-wide in-service meetings. Program assessment reports (PAR) turned in annually, the Tuesday before the Fall break for Thanksgiving.

Widely communicated program outcomes are required by all 44 programs on campus. However, we have 19 new transfer degree pathways for students. Seventeen of those pathways have less than 12 students enrolled. Since these do not meet our minimum student threshold for program data, we do not feel comfortable deploying PARs for them. These degrees are essentially individualized Ohio Transfer Module Degrees (OTM) which allow for the completion of general education transfer pathways, with up to 15 credit hours in a specialty the student would like to explore. Due to low enrollments, AA and AS concentrations are being reviewed.

Two of the transfer pathways have met the enrollment threshold- Psychology and English. Thus, the program directors in these disciplines have begun gathering data on those program learning outcomes.

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

- As of Fall 2016, 100% of the programs that were required to turn in program assessment reports did so. Please see the [internal PARS compliance report](#).

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

Several examples of the program assessment activities are as follows:

- The Accounting program assesses eight outcomes annually, ranging from competency in basic accounting principles, to the use of accounting software, preparing taxation and auditing documents, as well as managing all of a company's accounting data. They have submitted for each of the two years since the Program Assessment process was re-implemented.
- The Business program assesses five outcomes annually, ranging from basic accounting, marketing, economics, and management concepts, as well as application of technology to business process. Our business program is a strong example of a program that delves into analysis of their assessment results, creates improvements in light of those results, and gains insight from their advisory committee. This program continues to be guided by Continuous Quality Improvement (CQI). Thus, they are reviewing their outcomes to better align their program outcomes to higher order skill attainment in light of Blooms taxonomy. This focus on CQI is the goal for all of our programs. However we still have variability between programs in assessment maturity.

The renewing of our assessment programs necessitates we guide the faculty to methodically incorporate new skills in the scholarship of teaching and learning. This approach is used to avoid the mistakes of the past where a culture of mistrust dominated the campus for years in relation to what faculty believed were poorly communicated shifts in practice that affected their work.

- Part of the tension of those years was described by the HLC peer reviewers in our 2008

systems' appraisal feedback for item 412a. The review stated: *"Improvement items are decided upon by top administrators, which creates a top-to-bottom, one-way communication process. This limits the recognition and formation of meaningful and necessary targets, goals, and priorities for creating improvement. This is an opportunity for the College to strengthen its commitment toward valuing people by institutionalizing a "top-down-bottom-up" communication and decision-making structure."*

The assessment committee does plan to address the best way to give constructive feedback on the content of program learning outcomes within the next year. However the current priority is to have faculty practice the current skills, and gain proficiency in analysis of what they have identified as the targets for their programs. At the beginning of the assessment renewal process, all departments were sent multiple examples of sister institutions' program learning outcomes for their discipline. This information research and sharing was led by the CAO.

Faculty were encouraged to collaborate with other institutions. Many programs did collaborate, some did not, and some sought to change their outcomes but found their community/employer advisory committee members resistant to substantial change.

In the evidence files for Accounting and Business you will see both the 14/15 & 15/16 PAR documents. However, the 15/16 PAR has the 14/15 data included for reference. The Accounting and Business Departments are leading the rest of the college in relation to their analysis of the assessment results, and deploying improvements in light of those results. Of special note on their PARS, you will see that their comments area highlights critical analysis of the results as well as action items for improvement. The details related to analysis and action items have now been added to our PARS template college wide. We have done this to encourage the same level of engagement, and thinking for the future that our Accounting and Business faculty members have shown.

- [PARS for ACCT 14/15](#), [PARS for ACCT 15/16](#), [PARS for BUSM 14/15](#), [PARS for BUSM 15/16](#).

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

Internal

- Our comparison of targets with our internal goals is adequate. We set a very high benchmark based upon participation when we revamped the system in 2013. The benchmark was 100% participation. We have attained the 100% participation benchmark. Thus, we have begun to address the maturity level of each of the program assessment reports. The desire is to help faculty practice the skills for several years, and then build upon their understanding of the basics.
- The normal chain of command in relation to compliance is somewhat circumvented. Assistant Deans receive the PARS reports as a carbon copy when the faculty send the reports to the chair of the assessment committee. Other than reviewing for participation the faculty supervisors have no input on the content, allowing this to be a faculty driven initiative. However, the assessment team members do not always feel comfortable assessing/giving feedback on their colleagues work. Thus more meaningful dialogue needs to happen to create improvement in how assessment is done at the program level.

External

- External benchmarks for program efficacy at this point are measured by certification rates

graduation rates, accreditation reports, and graduate/employer survey results. Annually the institutional research office compiles this evidence from each department. Some examples include [RN, and LPN state Board](#), [Allied Health exams](#).

- The PARS are created internally and at this time many of the measures used by faculty are internal to the college. Thus, quantitative external bench-marking is not available. As assessment matures at NCSC increased external bench-marking is the goal.

1R2d. Interpretation of assessment results and insights gained

- Several issues have been identified when the assessment results are taken as a whole. Obviously, individual program insights can be gleaned from the (PAR) evidence files several examples here [MECT](#), [PHTA](#), [ENGL](#), [RADS](#), [CRMJ](#) (please note CRMJ is a PAR turned in early for 2017). However globally the trend has been that approximately 50% of our faculty fear assessment, find it as an add-on to their “real” work as teachers, and believe it is too unscientific to give them needed insight. That said, there is some improvement since 2011 when only program directors and chairs participated in any kind of program assessment planning and reporting, and we will continue working toward our goal of 100% *substantive* participation.
- The goal of the assessment team is to take seriously the challenge of making assessment meaningful, and guiding faculty through the process so that none feel it is a waste of time, and all benefit from the insights gained from viewing their student achievement in aggregate.
- As the assessment committee moves forward, a goal for the 17/18 academic year is to shape faculty behavior in terms of providing feedback on the importance of reliability of the measures used for assessing program outcomes, the importance of external benchmarks, and the absolute necessity of curriculum development and teaching practices, informed by program outcome assessment results.

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

The philosophical underpinnings of assessment at NCSC is that it is a peer process, driven by faculty, and that useless assessment is worse than no assessment in light of workload issues. Thus, five important goals are set for the coming one to three years.

- Assessment committee members continue working on becoming experts on campus in assessment.
- As stated in the 1P1, training in research methodology for all employees will be a future action project.
- Assistant deans are more involved with assessment, able to guide faculty, and give mission focused input from the vantage of the management team.
- Curriculum [mapping training](#) be redeployed during the 17/18 academic year. This training will include all faculty and administration.
- The CAO and ALO will remain on the assessment committee to ensure sustainability of the vision for the team until such time as a majority of faculty have a solid vision of what informative college-wide assessment activities truly look like.
- The scholarship of teaching and learning will be the focus of monthly academic division meetings.

Sources

- 1844 20120215 System Assessment - Systems Appraisal
- 1844 20120215 System Assessment - Systems Appraisal (page number 16)
- 1844 20120215 System Assessment - Systems Appraisal (page number 19)
- 2017-2018 North Central State College Curriculum Committee Handbook
- 2017-2018 North Central State College Curriculum Committee Handbook (page number 12)
- 2017-2018 North Central State College Curriculum Committee Handbook (page number 13)
- 2017-2018 North Central State College Curriculum Committee Handbook (page number 19)
- 9.2.16 NCSC Curriculum Handbook V. 2 (1)
- Allied Health Pass rates
- Comprehensive list of external certifications by degree area
- CRMJ2190
- Fall 2015, Fall 2016 PARS compliance
- Full list of AACU rubrics and domains
- Intern,License,Wages,Employer
- LPN, RN Pass rate Trends 2005-2017
- Mapping Training Screenshot
- NCSC Honors Colloquium Attendance
- PAR ACCT 14.15
- PAR ACCT 15.16
- PAR BIOS 14-15
- PAR BIOS 15-16
- PAR BUSM 14.15
- PAR BUSM 15.16
- PAR CRMA 14.15
- PAR CRMJ 14.15
- PAR ECED 14-15
- PAR ENGL 14-15
- PAR ENGL 15.16
- PAR for CRMJ completed 16.17 (1)
- PAR HMSV 15-16
- PAR ITNT 14-15
- PAR ITSD 14-15
- PAR MECT 14-15
- PAR PHTA 14-15
- PAR PHTA 15_16
- PAR PLGL 14-15
- PAR RADS 15-16
- PAR RESP 14-15
- PAR RESP 15-16
- PAR RNUR 15.16
- PARS PSYC 14-15
- Pass rates CISS ITEC
- Placeholder Program outcomes, new 16-17
- VCMT PARS 15-16
- VCMT Program Outcomes 14-15

1.3 - Academic Program Design

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

1P3: PROCESSES

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

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

1R3: RESULTS

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

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

1I3: IMPROVEMENT

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

Responses

1P3a. Identifying student stakeholder groups and determining their educational needs (1.C.1, 1.C.2)

The processes for identifying and meeting student stakeholders educational needs are varied and the processes overlap in purpose. Student success is one of three pillars of NCSC's strategic plan. Thus, NCSC currently participates in the Student Success Leadership Institute, Achieving the Dream, the Ohio Department of Higher Education's Completion agenda, as well as TRIO, and Perkins with

primary focus upon helping students succeed. Also, our board of trustees take pride in being the owners representative, and trustees bring ideas on stakeholders needs through their monthly discussion on "Owner Connections."

Our additional locations - the Urban Center in Richland County and the Crawford Success Center in Crawford County - have steering committees from business and the community and continually provide us feedback on educational needs.

To inform program development based upon student and other stakeholder needs the college engages with the community through bi-annual advisory committee meetings for all of its AAS and AAB technical programs, as well as an annual meeting of the wider advisory committee audience with the president every Spring semester.

Internally, the process for development of new programs, reworking of current programs, and discontinuation of programming is achieved at the division level and is always conducted with an eye toward meeting the community as well as student need. When considering community needs, not only do we consider, social, and economic needs but we seek and respond to needs of our career center partners with whom we have valued relations, just as we do with employers.

Several systems are used to ensure the development of programs that meet the following criteria:

1. Meet community needs (in-demand with living wages)
2. Align with the mission of the college
3. Display academic integrity whether transfer or job placement
4. Are financially viable for the college

The systems used are:

- [The curriculum committee](#)
- [The program review committee](#)
- The assessment committee
- Annual review by president's staff and deans of the 5-Year fiscal trends for every program, data provided by the controller.
- Annual assessment of allocation of faculty resources across all academic disciplines, data provided by the director of Institutional Research
- The [EMSI](#) report indicating job openings, projected growth, and salaries (EMSI data of Ashland, Crawford, Huron, and Richland counties)
- IR Office analysis of enrollment data that is reported and analyzed president's cabinet
- [All college advisory committees](#)

Additionally the attached [chart](#) lists the surveys used by the college to determine the needs of each group. Once needs are determined, necessity guides resource allocation.

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

In the Spring of 2017, the college began a pilot deploying the College Student Inventory (CSI) to Tuition Freedom Scholars (a cohort of several hundred students eligible for free tuition after being dually-enrolled in high school / college level courses, who continue full-time with the college while maintaining a GPA of 2.5 or more). CSI looks into student's academic difficulty; receptivity to help; study habits; family support; and counseling, career, and financial guidance. The goal of the pilot was to assess the tool prior to expanding the use of the tool with all students enrolling in the first Year

Experience course.

Apprentices represent another stakeholder group. An advisory group serving our apprenticeship program was initiated two years ago and meets on an annual basis looking at in-demand jobs, training, scheduling, and the importance of effective relationships with sponsoring companies. We also have an internship program shared with the OSU-Mansfield campus, with more than one hundred companies who have participated. They provided feedback on our students and programs and helped the college determine their needs.

Additionally, we have many national grants such as the Trade Adjustment Assistance Community College Career Training grant (TAACCCT III through the U.S. Department of Labor) with multiple states, and the Right Signals grant (through the American Association of Community Colleges and national foundations). These grants have relied heavily on external local and national advisory teams that focus on aligning our program design and certificates with workforce development needs and training.

As described in [1P1c](#), annually the president conducts a college-wide Advisory Committee meeting consisting of local employers.

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

All programs (academic and service departments) on campus are evaluated for currency and effectiveness every three years. The institutional services and program review committee, led jointly by a dean and a faculty member are the primary facilitators of this process. The committee membership includes the CFO, faculty, staff, and administrators from a wide range of disciplines on the academic and nonacademic sides of the institution.

New program creation is guided from the division level, with input from the external advisory committee, and must pass inspection at the institutional level through the curriculum committee, the CAO's office, and finally through president's staff (consisting of the President, CAO, CFO).

Appropriate stewardship of current resources, whether human, fiscal, or physical is one criterion used when a new program is evaluated. There are times, however rare, where a program may not be fiscally rewarding, but is advantageous for the community to continue. This is in keeping with the College's mission to meet the education needs of the communities we serve. As an example, in Spring 2015 it was determined that our Early Childhood Education program was struggling financially, and that our graduates' salaries were not competitive. However our advisory committee, consisting of childcare providers across our service region insisted that the need in our region did exist for credentialed, qualified workers. In response, the Early Childhood Education program complete closure was stopped and made a concentration within an ATS degree.

Additionally, we utilize the information provided by the Ohio Association of Community Colleges to assess the community need in relation to our programs. This gap analysis between graduates produced and employment available according to CIP code helps all institutions meet the needs of the state.

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

Both quantitative and qualitative measures are used to assess the currency and effectiveness of academic programs. Quantitative external benchmarks used most frequently are external

licensure pass rates, program accreditation appraisals, job placement rates and earnings data.

In Spring 2017, we began surveying our graduates during their graduation practice in order to capture the immediacy of their feedback and enhance the response rate. This survey had previously been deployed via email to graduates, 6 months after graduation. While this gave us some data, the response rate was low. See results section.

To a lesser extent quantitative data is gleaned from the program assessment reports submitted annually to the assessment committee. We understand that this is of slightly less accuracy than our external quantitative data at this level of maturity. However our goal is to increase the consistency of data collection, the reliability and validity of the measures used by faculty in program assessment.

Graduate feedback in terms of qualitative data is collected via employer surveys advisory committee members, who frequently hire our graduates, and alumni satisfaction surveys.

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

Viability of programs and community needs assessment are achieved through multiple reviews:

- The institutional services and program review committee ([multiple meetings every semester](#))
- Annual review by president's staff and deans, of the 5-Year fiscal trends for every program (controller)
- Annual assessment of Allocation of faculty resources across all academic disciplines dashboard (IR)
- The EMSI report indicating job openings, projected growth, and salaries. EMSI data in our service region such as in Richland, Ashland, Crawford, and Huron counties.
- Advisory committee feedback reports.

In response to information gathered and analyzed in both of these processes, several programs have been discontinued or reduced in scope sometimes to certificates.

- In 2013 we reduced the number of career tracks in our VCMT program when it was determined that the region was experiencing a contraction in the market for broadcast majors.
- In 2014 we made a number of program changes in the area of engineering technology to meet employer needs
- In 2015 we transitioned the paralegal program to a concentration within the Business Administration Degree. This was accomplished by gaining input from area employers and the current members of the advisory committee for the Paralegal program.
- In 2015 we transitioned the ITEC program in software development to a transfer degree to better align with the needs of our transfer student population.
- In 2015 our Early Childhood Education program was transitioned into two different tracks. The first track was created to meet career center partner and advisory board needs (Associate of Technical Studies ECED). The second was created as a concentration within our Associate of Arts specifically for our students who were seeking to transfer to one of our 4 year partners.

1R3a,b,c. What are the results for determining if programs are current and meet the needs of the institution's diverse stakeholders?

Use of the [EMSI Results](#) (sample of EMSI for Human Services Department) is an example of the information we utilize to determine programming needs, which then guides program design and

modifications. Additionally we analyze trends from various sources outlined below:

- State pass rates for [Allied Health](#) and [Nursing](#)-with external benchmarks.
- Non health area pass rates for credentials [Police Academy](#), [CISS & ITEC](#)
- [Retention rates within programs](#) - this analysis displays potential barriers in program mix, scheduling, or other areas of need we must address. As an example the Human services program has been directed to rework their program in light of the SSI results below, and the aggregate analysis of retention rates ratio to students enrolled.
- [Student Satisfaction Inventory \(SSI\) results](#)-
- [Graduate Survey Results](#)- These help us to understand percentages of our students obtaining jobs in their field of study. The most recent survey was deployed at graduation practice to increase participation. We are aware of the drawback of this approach, but proceeded with the change with the knowledge that we will review the usefulness of the data in two years, and may revert to sending 6 month follow up emails.
- [Focus Group Feedback](#), students described several issues, faculty variability, lack of knowledge of the complaint system, timely feedback with faculty, and scheduling issues, this was t
- College Student Inventory [CSI Pilot results example](#) guides our supportive interventions for students who display various risk factors for success.

III. Improvements

- **CSI Expansion**

The College Student Inventory, which has previously been used by the college for students' own identification of risk factors as an assignment in the First Year Experience (FYEX) course, will now be given to all entering students. A pilot of this wider application of the CSI was conducted Spring semester 2017, and is being deployed in Fall 2017 with faculty/advisor agreed upon parameters. Not all of the information gleaned in the CSI is useful for the advisor and should be considered protected information for the individual student to share.

This needs assessment has been targeted for integration directly into all of the student's experience. Potential difficulties, and issues identified as barriers to this pilot project are: cost of the inventory, feasibility of deploying it to all students, usefulness of the data to engage the students and create action steps in response to it.

The success committee has agreed to do a one year pilot of this project, and evaluate effectiveness based upon several factors: 1. how many students actually took the CSI. 2. How many student plans were affected by the CSI (meaning, was their documentation in the advisor notes on faculty and advisor recommendations for course load, sequencing etc... based upon the CSI results) 3. Cost vs. usefulness of continued deployment of CSI.

The Institutional Service and Program Review Committee has requested the Institutional Research and Controller Offices to deploy a system of communication for following up with salient enrollment and fiscal trends to all academic programs. This will allow an annual update on program viability before any trends get out of control.

- **SSI Satisfaction Deployment**

In direct response to the 2012 system's appraisal report in [\(3R2\)](#), where reviewers stated that the college should "re-examine whether CCSSE truly measures satisfaction", in reference to our efforts to understand our students needs and their experience with our college. The college has committed to deploying the Noel Levitz Student Satisfaction Inventory annually.

Additionally, a significant action project born out of the first deployment of the SSI was undertaken at the 2017 strategy forum and will continue in various phases for the next several years to focus on “Enhancing the Student Experience, from Application to Graduation”.

- **SSI Results change/Focus Groups**

As a qualitative counterpart to the SSI annual deployment the college has convened 2 focus group sessions addressing strategic planning and the issues uncovered during the Fall Semester administration of the SSI. This will continue in the future on an annual basis after the Spring semester deployment of the SSI. Changes made as a direct result of the SSI/Focus group feedback include the initiation of the project to streamline course scheduling to match student needs, as well as peer training for faculty in relation to timely feedback, teaching quality, and classroom management.

- **Faculty Training/Complaint system centralization**

Deans/CAO have begun a monthly series of faculty training/mentoring time with focuses on the issues uncovered in the SSI and focus group research. Additionally, the complaint process, which is quite clear, needed a review in terms of use for strategic planning, thus the president's cabinet has deployed a pilot centralization system that was created in house.

Sources

- 17-18 advisory committee handbook policy 12-071
- 1844 20120215 System Assessment - Systems Appraisal
- 1844 20120215 System Assessment - Systems Appraisal (page number 26)
- 1P1c excerpt
- 2017-18 Calendar On-going (1)
- 2017-2018 North Central State College Curriculum Committee Handbook
- 9.2.16 NCSC Curriculum Handbook V. 2 (1)
- 9.2.16 NCSC Curriculum Handbook V. 2 (1) (page number 24)
- Advisory Committee Feedback
- Allied Health Pass rates
- APPENDIX-E-Curriculum-Mapping-Process
- EMSI Example Human Services
- Enrollment Trends -2012-2016
- Example CSI summary data sans student identifiers1
- Fall 16, Spring 17 SSI feedback
- focus group feedback
- Intern,Licence,Wages,Employer
- Intern,Licence,Wages,Employer (page number 1)
- LPN, RN Pass rate Trends 2005-2017
- LPN, RN Pass rate Trends 2005-2017
- Pass rates CISS ITEC
- Pass rates CISS ITEC
- Perkins Data Analysis 2017 June (1)
- Perkins Data Analysis 2017 June (1) (page number 6)
- Program Review Manual
- Stakeholder Needs assessment list

- Surveys Satisfaction etc.

1.4 - Academic Program Quality

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

1P4: PROCESSES

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

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

1R4: RESULTS

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

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

1I4: IMPROVEMENT

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

Responses

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

Faculty Role

Responsibility for determining the needed preparation for the entrance into any given program lies with the content experts, the faculty.

Advisory committee input for highest valued skills for each profession, sister institution similar

program analysis and comparison, state and accrediting body standards, and the subsequent curriculum mapping are the the faculty members' avenue for ensuring curriculum that is well planned in terms of prerequisite knowledge, efficient flow of learning, and of value for professional/citizenship needs.

The advisory committee input for "highest valued skills" and comparisons with sister institutions is integral to creating an associate degree program that delivers the needed education and training in two years. Associate degree faculty must focus all of their effort in communicating and effectively teaching the most important skills. [Curriculum](#) and [core learning outcome mapping](#) are essential skills for our faculty.

Training for faculty and academic administrators on curriculum mapping and the various elements of the scholarship of teaching and learning was initially conducted in earnest in 2009- while the college was preparing to move from a quarter to a semester calendar. The training has been repeated and augmented numerous times since 2009.

NCSC maintains a secure repository for all official curriculum, and has a rigorous system of control over curriculum change and the consistent communication of curriculum requirements between the website, the curriculum repository, the catalog, the student information system, as well as print marketing material. In light of this complexity of controls, this system is widely communicated to faculty and staff every semester.

Faculty/Staff Role

The implementation of processes to identify preparation needs, and support and guide students is shared by faculty, staff, and administrators. Beginning with the admission process, students are identified for level of services based upon need of developmental curricular or co-curricular activities. Being an open enrollment institution, we will inevitably have under-prepared students. Upon admission and before registration students will take the Accuplacer and the CSI tests. These tests identify developmental academic needs and ancillary risk factors.

The process by which all of this is communicated by the admissions and student success center advisors is discussed in more detail in 2P1.

All new students absent prior college experience are required to enroll in a one credit-hour college "First Year Experience" course. Students testing into developmental reading or writing are required to enroll in a three credit-hour "College Survival Skills" course which offers additional support for at-risk students.

All criteria for enrollment and preparation are advertised within the College catalog and website, as well as program advertisement material.

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

Maintaining rigor through credential oversight

Faculty credentialing for Credit College Plus (CCP) courses is coordinated by the Dual Enrollment Director and the Deans of all three divisions, as well as the Assistant Dean of Liberal Arts. Faculty are vetted through several process related to credentialing criteria.

The divisional deans as well as the assistant dean of liberal arts recruit CCP faculty, conduct

interviews, instruct faculty to submit transcripts as well as other documentation to the human resources department.

Master's degree in the subject matter, or 18 master semester-hours concentration in the content area from a regionally accredited institution are the thresholds which the potential faculty member must meet in order to be considered for selection as a faculty member. There are instances where current CCP faculty are given a professional development plan to meet the threshold.

Attached you will find the current audit of adjunct credentialing submitted to the Ohio Department of Higher Education for the 16-17 academic year. These files are maintained in accordance with Ohio Revised Code which requires CCP faculty and courses to be evaluated identically to on-campus courses. In addition to this control, all textbooks, course delivery methods, course assessments, as well as course outcomes must be identical to on-campus counterparts.

Our commitment to quality online education is evidenced by the college's membership in the Quality Matters consortium. Furthermore, the ELI (E-Learning and Innovation Department) conducts regular reviews of online courses using Quality Matters Rubric.

Maintaining rigor through curriculum oversight

The curriculum and faculty oversight for all modalities of learning are supervised by each of the division deans. For curriculum to be taught in a contractual arrangement, or in a hybrid or completely online format, the syllabi and curriculum worksheets must adhere to all NCSC standards in relation to learning outcomes, assessment methods, assignment of credit hours, and faculty control. Additionally, all off-campus, contractual, or online and hybrid faculty are regularly evaluated by the division assistant dean and by student end-of-semester evaluations.

Additionally, distance learning course satisfaction rates in aggregate are tracked for:

1. Student satisfaction
2. Student success
3. Faculty satisfaction

This tracking has occurred annually since 2008. The IR office regularly tracks and reports to the distance learning department, the division deans, and president's cabinet comparable success data for all modalities of teaching.

Maintaining rigor through student/faculty experience tracking

Students are surveyed annually whether face to face or online/hybrid with the SSI Noel Levitz survey. This summary data is analyzed and evaluated by the president's cabinet for any issues that may need to be addressed for the next academic year.

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

Transfer credit acceptance is processed through the registrar and academic services office with the input from divisional deans and the use of information gathered from the TES system, which is the transfer system endorsed by the State of Ohio. The Academic Services Coordinator spends a tremendous amount of time evaluating transcripts.

Academic Year	Number of Transfer In Transcripts Evaluated
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2015	562
2016	560
2017	484 as of September 8, 2017

NCSC has recently updated its policies related to prior learning assessment. The PLA option is communicated to faculty/staff/students; however we do not have many students taking advantage of this service. Since 2015 we have awarded less than handful of CLEP scores per year. Articulation credit - which comes onto the transcript and called K-credit, including CTAGs, institutional articulation agreements ... - accounts for only approximately 80 students per year. The minimum award has been 3 credit hours, and the maximum is usually 12 to 15 credit hours (Tech Prep). In 2017 the college requested an audit of its PLA process from an outside source. Thus, CAEL conducted an audit by interviewing staff, and reviewing our PLA policies and attendant material on our website.

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

Seeking specialized accreditation and maintaining program rigor is the responsibility of both faculty and deans. Where specialized accreditation has not been identified by our community partners as essential for a program, the dean works with faculty to determine the return on investment for our students in seeking accreditation. This is done with the understanding that we are not preparing students for only our geographic region.

The outcome of these discussions are presented to the President’s staff, which is the final decision making authority for seeking specialized accreditation. Our current specialized accreditation and other affiliations are outlined in the accreditation evidence [file attached](#).

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

This is answered in detail in [1P2 a,b,c](#).

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

The process for selecting the tools used to assess program rigor for all modalities is identical to the tools used for assessing program learning outcomes and college wide outcomes. Variations are acceptable when the modality warrants the difference and the outcomes achieved and the measurement of those outcomes can be assured to match what is done in the traditional format. Additionally, accreditation and external credentialing are considered of primary importance in verifying rigor, and is tracked by each department utilizing the services of the institutional research office.

1R4a,b,c.

- One of the difficulties we faced when obtaining external comparisons for our internally evaluated program learning outcomes, was the goal we set of 100% faculty participation with assessment in 2013. How we achieved this is outlined in two companion papers presented at

the HLC annual conference. Excerpt below:

In order to move the college forward, we limited our focus to one goal for one academic year. We placed a moratorium on program outcome reports for two years, while we practiced the deployment and use of college-wide outcomes. The goal was 100% faculty participation, which was eventually achieved. All faculty members were required to deploy one assessment, using one VALUE Rubric, within the learning management system during the fall semester 2013. The second year, faculty members were required to deploy two assessments each semester using two VALUE Rubrics.

By Spring of the third year (2016) every time a faculty member taught a course in which a VALUE Rubric was indicated for a college-wide outcome on the syllabus, he or she was required to deploy the assessment. In addition, we conducted in-service meetings where faculty members brought assignments and gathered in groups under posters of one of the outcomes and discussed how they interpreted each component of the VALUE Rubric related to that outcome. In essence we created an atmosphere in which learning could happen. We gave the faculty time and space to practice the fundamentals of college-wide assessment and made the software used to gather the data as easy as possible."

However, this "time and space" we created for faculty also included a simplifying of the scoring of the value rubric, which has limited our use of external bench-marking. This will be addressed as the process matures.

External Bench-marking

- [IPEDS](#) comparison report for NCSC and 12 sister institutions. As can be noted, NCSC lags behind sister institutions in graduation rates. While success rates have been the cornerstone of our strategic plan, the barriers blocking complete success ie; graduation/credential attainment have only been addressed since 2015, with changes in curriculum delivery, intrusive advising, the GPS initiative and most recently the investigation of course planning tools to keep students on track, and divisions offering courses at peak need times.
- Faculty "student success planning" for individual low retention courses. Examples here, [BIT](#), [HS,HS](#)-These analysis of individual results occurs in the academic department.
- Flashlight Surveys - [Faculty & Students IR Analysis of FTF vis a vis DL](#)- As can be noted from the link, alternative delivery student success rates are neither markedly higher, nor lower than their traditional delivery partner courses. This, along with the satisfaction rates indicated by faculty and students in the flashlight surveys, and student end of course evaluations, as well as dean evaluations give us multiple data points of quality of our alternative delivery courses. With the satisfaction rates increasing and the structures in place for consistent Quality Matters review, the college has decided to increase our targets for online course enrollment, to match state and national benchmarks (approximately 10% over our 18% internal benchmark)
- [CAEL audit of our PLA process](#)- The college is under-prepared in terms of offering PLA on a significant level.

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

- Several improvements have been implemented in the last several years in relation to academic quality. Specifically the college began an HLC action project related to curriculum integrity, which aligns curriculum content and preparation across all communication mediums.

Additionally the project has successfully moved the college forward with substantive conversations with faculty surrounding how curriculum is modified or created, and the resulting impact on our students.

- As the state of Ohio has moved toward 100% success funding, the college has re-evaluated its programming to align all of the short-term certificates offered with an external credentialing component - normally an exam or a licensure based upon an external exam.
- The dean of Business, Industry and Technology has been charged with creating a robust PLA program for the institution.

Sources

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1.5 - Academic Integrity

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

1P5: PROCESSES

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

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

1R5: RESULTS

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

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

1I5: IMPROVEMENT

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

Responses

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

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.

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

North Central State has, and adheres to code of conduct policies for faculty, staff, and students.

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 our 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.

This [link provides a sample of ethics policies](#) the college enforces.

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 College's IRB is a standing committee comprised of faculty and administrators. The wider college community is kept abreast of new and current HHS policies by periodic communications through the Academic Services Office. The rules of the IRB apply to students, faculty, and all others seeking to conduct research on campus involving any employee or student.

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

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.

Student evaluations of courses are scheduled the first semester for new adjunct faculty and routinely for experienced adjunct and full-time faculty.

In-class supervisor conducted evaluations by assistant deans/deans likewise follow a routine schedule based upon faculty Collective Bargaining Agreement. Instances of increased monitoring may occur based upon the identification of issues, or at the request of a faculty member who may be seeking additional feedback on performance.

All supervisor conducted faculty evaluation as well as student evaluations are reviewed with faculty members each semester. Additionally, the Chief Academic Officer reviews both in class and student evaluations of all faculty every semester.

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

As stated throughout this chapter the tools, methods and instruments include:

- Faculty academic freedom in scholarly practice stated in CBA
- Student academic misconduct procedures (Student Handbook)
- Student and supervisor evaluation of faculty process
- Curriculum committee procedures
- IRB federal guidelines
- Ohio Ethics Commission guidelines

1R5a,b,c.

- Since the last portfolio infractions related to faculty in adherence to ethical standards has been minimal and no termination have taken place as a result of ethical misconduct.
- Student academic misconduct that has risen to the level of CAO; only 11 times since 2014 with

no expulsions.

- The college has had only two non-misconduct expulsions since 2014

115 IMPROVEMENTS

- Curriculum integrity, which is one of our current AQIP action projects ensures integrity across divisions, disciplines, modalities, and faculty in that official syllabi are protected in a repository, and each course section, must have identical outcomes, assessments, and textbooks (unless approved by the course/program coordinator). Thus ensuring equity of practice for all students taking the courses, whether the class is delivered online, hybrid, from a part-time instructor, or from one of our contractual partners. However, this process can still be enhanced in some divisions, with increased supervision of part-time faculty, and specifically for an online course. Violations are caught quickly, and policies/processes for allowing deans/fellow faculty into online classes on a consistent basis are being created. However, the Academic Services Director does have access to all online courses, thus the academic services office can give division deans access quickly with little to no wait when issues arise.
- Students are not as widely informed in relation to the rules of human subject research as one might expect from a research campus. However, faculty who routinely ask students to submit draft research topics include the chair of the IRB on their discussions with students. Additionally, Deans/Asst. Deans, and President's cabinet have reviewed IRB policies and procedures within the last academic year.
- In the course of compiling evidence for this portfolio several policies were identified for review,(such as textbook selling) and appropriate action was taken to update and communicate the policies.
- Continued ethics training is planned for all upcoming college-wide professional development days.

Sources

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- NCSFA-AAUP Contract, 082317 Spring 2020 (page number 23)
- PowerPoint-for-IRB
- Title IX Training as of 9-22-16

2 - Meeting Student and Other Key Stakeholder Needs

2.1 - Current and Prospective Student Need

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

2P1: PROCESSES

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

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

2R1: RESULTS

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

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

2I1: IMPROVEMENT

Based on 2R1, what process improvements have been implemented or will be implemented in the

next one to three years?

Responses

2P1a. & I. Identifying under prepared and at-risk students, and determining their academic support needs (3.D.1) / Assessing the degree to which student needs are met

North Central State College has traditionally served a significant number of the under-prepared student population in our community. In 2012 [59%](#) of our student population tested into at least one developmental course. However, as we have expanded our early college program and those students have matriculated to our associate degree/certificate programs those percentages have decreased.

The educational attainment as a whole in the counties served by North Central State College trend 10 to 15% points lower than state and national averages. Thus, despite slightly less 'at risk' students, the support needs are still significant.

The student services area, along with the cross-campus access and success teams have systematically evaluated components of access and success, in relation to identifying key student groups and determining the ever changing needs of the population in our service area. The identification happens at two levels, aggregate and personal.

Aggregate Need Process

The process for determining the **aggregate** needs of at risk students begins with data gathering from:

- Internally created stakeholder surveys (alumni, employer, current student)
- Student Focus Groups
- Externally created engagement, satisfaction, and risk surveys: CSI (College Student Inventory), CCSSE (Community College Survey of Student Engagement), SSI (Student Satisfaction Inventory), NCCBP (National Community College Benchmark Project)
- Internal Institutional Research office analysis of high failure rate classes
- Student success team analysis of efficacy of all of our student success interventions (such as mediated course drop, guided pathways to success, developed meta majors, etc.)
- Attached is the institutional research department survey [list](#), with short descriptions of analysis done/actions taken.

The systematic assessment of how we gathered data to understand all of our stakeholder needs, and the creation, updating, and publication of the attached list, coordinated through the institutional research office and academic services was in direct response to the 2012 systems appraisal feedback advising the institution to better integrate processes for identifying all stakeholder needs, [excerpt attached.](#)

Additionally, the research deployed within the past year (SSI & student focus groups), had as its impetus the 2012 system's appraisal feedback specific to [3R3](#)

All of these data points are gathered, distilled, and presented *contextually* to guide the student success team, deans, president's cabinet, student services advisors, and faculty as they create sustainable interventions based upon:

1. Nationally recognized best practices from other institutions

2. Our unique student needs
3. NCSC institutional capacity

As an example, the analysis of identified needs, led the college to upgrade 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.

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

Personalized Need Processes

Attached you will find the [simple process map](#) that outlines the traditional process need identification.

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

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. These activities are addressed in annual evaluations with the deans. Faculty display accountability in this area by displaying their office hours every term on their personalized master syllabi, and their door calendars. Any complaint by students of lack of faculty engagement is addressed immediately.

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

The most useful tool for determining and meeting the student support needs in relation to tutoring, technology, laboratory, advising etc. has been the consistent deployment of the Flashlight survey (2008-present), and the CCSSE survey (2005-Present). With the addition of the SSI (Student Satisfaction Inventory) during the 2016/17 academic year we are able to now see the wider picture for all ancillary services, from the perspective of their importance to students as well as their satisfaction of those services. Several examples of response to determined needs would be the creation of the [STAR policy](#) and [procedure](#) to encourage students to higher levels of achievement while helping them bridge their achievement gaps, and the combining of the efforts of TRIO and tutoring, embedding tutors into courses, and placing tutors in Health Sciences at optimum times for student services.

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

The college's process for determining new student groups to target, is guided by thoughtful response to identified community needs and the confluence of those needs with our mission and resources. Needs are identified, then folded into strategy discussions that happen monthly at President's cabinet (structure/processes for broad campus input described in chapter 4).

An example of this process would be our response to the burgeoning College Credit Plus (CCP) student population. The College has been working with the high school superintendents, teachers, and counselors to assess and determine the additional educational offerings and services for this group of students. Based on feedback from students, parents, high schools, and colleges, the state of Ohio has

been updating its requirements including active communication with students and their families in school, at college, and on the web. The college has had standing meetings with the area counselors to continually review the students needs and the type of offerings of courses and services (orientation, tutoring, advising) that are most valuable.

2P1f. Meeting changing student needs.

To meet changing student needs, the institution must first determine those needs. This is done through the various data gathering methods outlined in this [chart](#). Once the need has been identified decisions are made at the department and/or division level to address those needs.

Several examples of recent improvements based upon changing student needs, would be the decision to use the CSI and STAR notices, to inform academic advisors of students who face significant risk of not continuing. Additionally, as the institution has increased in transfer student enrollment, and the feedback from our Student Satisfaction Inventory deployed in the 2016-2017 year indicated a need in this area, a dedicated liberal arts academic liaison is available for all transfer students.

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

To deploy support for student sub-groups the college uses information gathered from the various data gathering methods mentioned above in 2P1f.

Additionally, information is gleaned on an informal level through student interactions with 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.

One example of this process for identifying support needs of student subgroups would be the establishment of the 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. Furthermore, through collaboration with our co-located OSU-Mansfield university, a room has been designated for student veterans to socially interact and support one another.

Another improvement in relation to 2012 appraisal feedback [1P9](#) is our analysis and stronger focus on distance learner needs. In evaluating student surveys, and individual student CSI's (College Student Inventory) the college understood the need for student engagement and discipline in the success of distance education. As a result many courses modified to be hybrid courses to provide the necessary engagement and support that many of our students need. Persistence and self-discipline, which are traits critical for online success are now covered in student orientation and CSI inventories. It must be noted that the college is a QM (quality matters) institution. Thus, distance learning students' needs are addressed when new online classes are created/reviewed with the QM rubric.

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

Utilizing feedback from surveys, one-on-one advising appointments, information from faculty/staff, as well as high school counselors, the college offers a wide range of non-academic support services. These support services are not limited to at-risk students, however these are for the students who engage more often with the wide variety of support services we offer.

These services include:

Partnering with The Ohio State University Mansfield to offer psychological counseling services free

of charge to all of our students, as well as a number of OSU-supported events, open to NCSC students.

The Dash grant, which is used by the college to assist students with emergency expenses.

The protection of enrollment for employees of local businesses who are reimbursed based upon grade, and don't have to pay tuition until after their final grade is known.

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

The process by which we ensure non-academic support staff are qualified, trained and supported, and readily available to students is outlined in 3P1 and in chapter 3. In addition to the details in that narrative, we encourage our non-academic support staff to partner with other institutions for knowledge-sharing, and participate in various national professional organizations.

Additionally, the college hosts twice yearly in-service days for all employees to keep current with college activities, and gain training in a variety of salient topics for higher education professionals.

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

North Central State uses a variety of means to communicate non academic support services to our student population.

The tools used by the college to communicate non-academic support services include the college catalog and student handbook and the college home website and various social media accounts. Additionally, the student services division located in Kee Hall, which houses all student services functions of the college, utilizes information boards, posters in lavatories, brochures, leaflets and collectible trinkets from the various internal services being advertised. In addition, the college has large screen communication TV's in all buildings and information can be broadcast in the announcements area of CANVAS, the college's learning management system, as well as through email. It must be noted that these last two mediums are used judiciously so as not to condition students to ignore what may be seen as "spam" from the college.

Recently, the college has deployed Ellucian GO, which is an app students can download for free to their smart devices. Timely notifications are sent to those who have downloaded the app in order to "nudge" them to either take action or to increase their awareness of an important date or deadline.

Early in the on-boarding and enrollment process (new student advising appointments and orientation), these non-academic support services are highlighted and reviewed with students so that they may access these services from day one of their academic journey.

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

In 2015, when the system's appraisal was re-analyzed to find where we could focus our improvement efforts, thus a shortfall in our tools used to assess students needs was identified. [In 3R2](#), the reviewer questioned the validity of CCSSE data as an indicator of student satisfaction with their college experience. Thus the institution began the search for a tool that was reliable, valid, nationally normed, intuitive for our researchers, not terribly intrusive nor time consuming for our faculty and students, and would address a myriad of 'satisfaction' measures. The college chose the Noel Levitz SSI. This decision process was not as elaborate as the LMS decision; which included timelines, accompanying rubrics, and teams of reviewers. The choice was made by the president, CAO and

ALO, from recommendations received from the Director of Institutional Research.

However, the standard process for selecting all tools and instruments for assessment follow the process outlined in the attached [process map](#) which is referenced a number of times in this document.

2P11. Assessing the degree to which student needs are met

The college employs a variety of processes to assess how well student needs are met, both on the individual level as well as the aggregate level. The surveys referenced below in the result section, which have varying [timetables for deployment](#), afford all departments substantive data to target areas of unmet needs in the aggregate. Several areas of need are identified annually based upon feedback from these surveys.

Data from the results below are communicated to all areas by means of presentations given during department, committee, division, and college-wide meetings. Additionally, areas of specific need are addressed individually with departments, and action plans are created to address shortfalls. Furthermore, outstanding achievement in meeting student needs is celebrated in the same fashion. The institution values feedback that encourages as well as instructs in ways to do better.

2R1 a,b,c.

- [SSI](#)- The action project for enhancing the student experience was created in response to unmet student needs identified in the SSI, specifically where students described the feeling of 'getting the run around' on campus, struggles with understanding financial aid, and the difficulty in scheduling courses at the needed times.
- [Graduate Survey](#)- displays student satisfaction with NCSC educational goals, however the deployment of this survey right at graduation have yielded less affirmative answers to "employment in field" from previous surveys. However, the institution has decided to continue deployment of this survey at graduation, due to previous low response rates for surveys deployed 6 months out.
- [Orientation Survey](#)- N= 227 students have continuously indicated the need for one on one time, and less material during the orientation. Additionally, a review of the print material from all departments has become part of our current action project, in response to consistent responses from students about the complexity of registration and financial aid.
- [Student focus group input](#)-Students indicated a need for timely feedback from faculty, and consistency in professionalism from all aspects of the college. This has led to several improvements implemented within the last academic year as described below.
- [CCSSE results](#)-Our students consistently display higher than average levels of outside responsibility in comparison to our peer college students. This has led the college to rethink our advising system, so that long term relationships can develop between student and advisor, so that non-academic support needs can be more adequately addressed.

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

- The college is piloting the use of scheduling software (AdAstra) to better anticipate the student class delivery needs based upon the over-extended commitments of our students identified in the SSI and CCSSE results.
- The college is in the early stages of implementing various opt in, or opt out text message services to communicate support services more consistently to students, based upon our SSI results where students have described 'getting the run around' when seeking some support services.
- As our student population has shifted to more Credit College Plus students, and space on campus is less utilized, the college is investigating usage options on main campus and outreach centers. Consequently the decision has been made to discontinue offering classes at one of our outreach centers in January 2018, due to lack of student need for the center.
- As transfer degrees have increased in popularity the institution is investigating ways to leverage current human resource structures to meet needs of transfer students.
- Furthermore, based on results of surveys, the college has now moved in the direction of requiring orientation and the FYEX course.
- Advising is moving toward a personalized, one advisor for the entire college career model.
- The college access committee has been charged with developing a rubric/process for identifying new student groups to target for our services.
- As discussed elsewhere in response to SSI and student focus group input related to uneven teaching quality the academic divisions are spending meeting time every month to address this issue.

Sources

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- 2012 Appraisal 1P9
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- Personalized Student Needs Process Map
- Stakeholder Needs assessment list
- Success 1
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- Surveys Satisfaction etc. (page number 2)
- Tool Selection Process Map

2.2 - Retention, Persistence, and Completion

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

2P2: PROCESSES

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

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

2R2: RESULTS

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

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

2I2: IMPROVEMENT

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

Responses

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

Student retention, persistence, and completion has been the largest of three strategic focuses for the college since 2013. The student success team coordinates many of the activities surrounding the strategic planning for student success; with president's cabinet being the final body of accountability for achieving the retention, persistence, and completion targets agreed upon. The institutional research office is charged with the internal collection of retention, persistence, and completion data. This

information is shared consistently across the college through the success team, and president's cabinet.

Student Success Team

In 2013 the college transitioned the “Strategic Enrollment Management” team by separating it into two different teams with distinct focuses on two of the three strategic pillars the college has adopted as the guiding path for the next 3 years. One team, the “Access” team is the steering committee for all policy changes, and initiatives surrounding enrollment management, the removal of obstacles to enrollment and the assessment of community and other stakeholder’s needs.

The “Student Success” team is the steering committee for all policy changes, and initiatives surrounding retention, persistence, and completion. It also serves as the Steering Committee for the Title III Project on Advising. The “Student Success Team” (SST), meets every two weeks. The team is very much a working team. Members are routinely assigned responsibilities specific to policy creation, workflow changes, communication strategies, etc.

These responsibilities are born out of strategic discussions, focused on making the student experience a successful one, and informed by retention data trends presented by the office of institutional research, and anecdotal data from the front-line employees in both student and academic divisions. The team is chaired by the Chief Academic Officer, and consists of members across the [campus community](#). The team reports monthly to President's cabinet and works with the Title III coordinator to parse/analyze [leading and lagging](#) indicators for success to enable swifter changes in focus if needed.

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

The process for determining the retention/persistence/completion targets for students rely on internal sources informed by previous patterns specific to our college, and specific to the programs. It is understood that cohort and competitive entry programs warrant different retention targets.

Retention targets are set using multiple sources including: sister institution retention achievements, grant compliance retention rates, program accreditation retention targets, ATD participation targets, our own institutional history and trends, as well as the recent addition of faculty analysis of their own retention/persistence/completion rates, and subsequent retention plans.

Trend data guides the president's annual strategic planning retreat. Student success team members, as well as other faculty/staff/administrators from all areas of the campus are contributing members to these two day planning retreats. These retreats are often followed by several half day sessions with the same team, in Fall and Spring semester.

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

Analysis of student retention patterns are not the purview of the teams alone. In 2014 the CAO, began the practice of providing faculty annual evaluations of their own retention numbers within the context of their program retention numbers. Additionally deans were directed to facilitate discussions, and oversee the completion of individual faculty analysis of their retention numbers, as well as reports from each faculty member outlining their analysis and possible interventions to improve retention for the upcoming year. Retention data and interventions are a standing agenda items during academic division meetings.

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

Retention, persistence, and completion have been a consistent focus of the institution since our original participation in the Achieving the Dream initiative. This focus has become stronger in the years following with a variety of interventions.

- Requirement for all new students to enrolling in the First Year Experience course.
- The creation of swifter paths for completion of developmental course work by reducing prerequisites while increasing co-requisites, combining college level classes
- 60% full time faculty involvement with Title III training
- Faculty submissions of retention plans for high DWF rate courses

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

The tools/software used to track student progress, and the aggregate college success are:

- Ellucian- College's student information system
- IPEDS & HEI
- AdvisorTrac
- CCSSE

For example, the Title III grant team utilizes an Evaluation Team led by an external reviewer who reviews, analyzes, interprets and guides the team toward the next steps to be taken, based upon the data analysis. Other tools utilized have been student focus groups as well as faculty evaluations of the professional development activities required for all who participate in the grant.

The decision regarding which tools to use followed our standard data collection tool analysis, which pulls together stakeholders, balances ease of use, efficacy in measuring exactly what we hope to measure, with short term and long terms costs. In this instance the tools selection was guided by the team of writers of the grant, the grant steering committee (i.e. Success Team), and the grant task force.

2R2a,b,c.

- The college has improved significantly in the area of retention, persistence and success. Most pronounced gains have been in the area of our 'directions' student population, which is the population of students most in need of remediation. This population saw a 6% increase in [course success from 2015-2017](#), with a 3% increase for all students. Success rates when analyzed by department saw gains in 11 programs, with only 3 non 'teach-out' programs seeing declines in success rates. The most marked changes were seen in the [CISS](#) courses, with an increase in success rates of [11%](#). Human Services, and Radiology departments saw gains in course successes of 6%.
- NCSC has been the subject of national research from the CRCC , and has been asked to take the lead in state training in relation to community college excellence in gateway course completion within the first year, in which the college excels as [displayed in this chart](#).

2I2 IMPROVEMENTS

- The recent expansion and collaboration of the [TRIO](#) program with the tutoring center seeks to

- align and address the non academic issues that create barriers for students to finish college.
- Additionally, the creation of [8 new short term Title IV](#) eligible certificates was implemented specifically because of the need to help students, who often have life events that stop them from completing a full degree, with some form of a credential that can allow them to make a living wage.
 - The implementation of required orientation has also garnered positive feedback. Research indicates early positive connection with the college will help long term commitment and eventual success. Thus, the continued increase of participation in these events points toward a brighter future for the retention of our students.
 - The college began the embedded tutoring and a paired co-requisite project in the Fall of 2014 with the gateway English and Math courses, success of which is displayed in the results section.
 - The above initiative was expanded to several of the FYEX and Developmental Education Courses. Tracking has been conducted by the institutional research office and the results have validated the success of the approach. In 2014 the FXEX courses were offered in a flexible scheduling format. Additionally, at that time, in the absence of an orientation, the courses effectively served as an orientation. FYEX course success rates have increased to 80% pass rate. The course was offered in a variety of formats - truncated and earlier on, or pre-term for 5 consecutive days, or 3 days, or 3 Saturdays in a row. Additionally we offered flexibility for students who register late such as online and or/ Saturday classes.
 - Faculty retention plans for more courses (not solely high DWF rate courses) will be implemented in the next academic year.

Sources

- 12-07 standing committee structure
- 2017 orientation feedback
- 2P3 Excerpt Tool Selection process
- Intern,License,Wages,Employer
- Leading and Lagging indicators title III embedded
- Perkins Data Analysis 2017 June (1)
- Perkins Data Analysis 2017 June (1) (page number 10)
- Retention Plan Faculty Worksheet - Morrison - 2016-Nov-2
- Start Strong Data 2017
- Success 1
- Success 2
- Success 3
- Success 4
- Success 4.5_Persistence by Department
- Success 4.51_Fall to Spring Persistence by Program
- Success 4.52_Spring to Fall Persistence by Program
- Surveys Satisfaction etc.
- title IV certs

2.3 - Key Stakeholder Needs

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

2P3: PROCESSES

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

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

2R3: RESULTS

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

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

2I3: IMPROVEMENT

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

Responses

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

The college employs various measures for determining stakeholder needs. While the institutional research office is not the repository for all stakeholder need surveys, it is the clearing house utilized by College decision makers whenever decisions must be made for allocation of resources for initiatives, expansion of roles or services, or any changes that will affect the services provided to stakeholders.

The attached [list of surveys](#) are deployed institution-wide in a consistent fashion.

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

Each of these surveys are utilized by various constituencies on campus to make decisions, and target existing or new stakeholders. In order to achieve maximum consistent communication results from all of these surveys, the surveys are analyzed by the Institutional Research Office, the president's cabinet, and president's staff, then reported annually within context to the college community during in-service or division meetings, to the board of trustees, and monthly to the manager's advisory council.

It is in president's cabinet and the president's staff meetings, where the responsibility for policy review combines with data and survey analysis, that the structure of who to target, how and under what context, and the delivery of information that will be shared with employees, the public, and board of trustees happens. One example of new stakeholders include the recent combination of all program advisory committees to provide a global picture of their needs. Another example is focusing on the faith community to communicate how we can collaborate on changing the culture to emphasize the need of higher educational attainment in the region.

It is easy for data presentation to obscure rather than illuminate, thus the management team takes responsibility for the clear, consistent, and actionable presentation of data to meet stakeholder needs.

2P3c. Meeting the changing needs of key stakeholders

An example of the changing needs of our stakeholders is the age of our students. The average age of our students has dropped in the last decade from 28 to 24 years of age, with a bulk of our students (1/3) being CCP students. Many of these students are taking College courses at their high schools by their teachers. As the need has increased in relation to credentialed high school faculty, resources to meet students and teachers needs have shifted from our traditional on-campus to off-campus courses. Thus, NCSC has joined forces with our four-year partners to raise the educational attainment of our secondary faculty by offering formalized training, resources and opportunities to engage in informal discussions on pedagogy and best practices in teaching and learning.

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

There are a myriad of survey tools and data services that could be used. The college is deliberate in the initial purchase of such tools, as well as the ongoing assessment of those tools validity, reliability, cost, currency, and ease of use. Table, at the beginning of the this chapter, shows the different instruments used, whether through the college internal systems or external vendors. The process for selection follows the tool selection process map [attached](#).

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

Assessing the degree to which needs are met can be categorized in both short-term and long-term.

The short-term view addresses emergency issues that arise unexpectedly and demand immediate attention. This scenario is limited and the focus is on the long term view where we analyze trends in relation to needs that are increasing/decreasing, or areas where needs are just not being met. Short term immediate needs are normally identified by personal contact; whether it be the president receiving feedback from community members, an academic liaison listening to a student need, a recruiter coming back to the office after a college fair and finding answers to questions or meeting prospective student needs better with a different process. All of the above are examples that have actually happened, and became the 'trigger' event to change a process/procedure/policy etc.

With regard to the long-term view, assessment is done by comparing college outcomes over a three-year period, internally against our own data, and externally against sister institutions statewide and

nationally. For instance, the increase in CCP dual enrollment students over the past few years from few hundreds to over a thousand shows that we are meeting these stakeholders needs, in comparison to ourselves and statewide. Furthermore, minimizing prerequisite courses and increasing co-requisite courses with supporting tutors and labs earned the college a state and national reputation in the Guided Pathway to Student Success according to the Community College Resource Center.

2R3 a,b,c.

- [Campus Quality Survey](#)- Interdepartmental communication was indicated as an area of weakness on campus that the college has improved upon. Additionally, faculty indicate a significant gap in how it should be vs. how it is in the areas of employee training and recognition, as well as teamwork.
- Flashlight Surveys, [Faculty & Students](#). Students and faculty continue to highlight satisfaction with online and hybrid delivery, with a trend toward students requesting more on campus course interaction on the LMS.
- [College-Wide](#) advisory committee survey indicates solid achievement of our students in the technical areas of their programs of study. Both the college-wide as well as the individual advisory committee feedback indicate a need to focus on professional skills related to attendance, reliability, ethics, and professional demeanor.
- [HR Exit surveys](#)- Exit surveys indicate employee satisfaction with work load and benefits, and dissatisfaction with the ability to advance, and pay scales.

2I3 IMPROVEMENTS

- Several initiatives have been implemented or given more focus as a result of the Campus Quality Survey (CQS), the faculty portion of the flashlight surveys, as well as the feedback from the community advisory committees.
- The CQS trend data indicated an issue with interdepartmental communication. As a result, the reports that come bi-monthly from the managers to the president have been distributed to all employees over the past year. Furthermore, the president started issuing the "NCStatement" on important college topics to all employees as the need arise. The president and the administrative staff attend the monthly division meetings, and the open forum (once every semester), to present and answers employee questions.
- An improvement that has begun implementation on President's cabinet ([shared governance structure displayed here](#)) whereby the responsibility of two way communication from all members to the committee and to their constituencies will be required, monitored, and part of the supervisor's cycle.
- Although the employee exit interviews continue to show extreme satisfaction with benefits, they indicate a certain level of dissatisfaction with salaries. As a result, the college conducted an assessment this past year and adjusted the salaries of many faculty while providing higher raises for faculty and staff for the coming year. Other compensations were also instituted by shutting down for two weeks over the holidays, having 4-day work week over the summer, and providing additional personal time off for full time and adjunct faculty and staff.
- Additionally, the request by local employers through our advisory committee's has led to the inclusion of a new assessment outcome focused on professional and soft skills.

Sources

- 12-07 standing committee structure

- 2017 -FACULTY- FLASHLIGHT TECHNOLOGY SURVEY ANALYSIS
- 2017 FLASHLIGHT TECHNOLOGY SURVEY ANALYSIS
- Advisory Committee Feedback
- CQS comparisons
- Exit Interview Overview Charts
- FY2016_TABLE1_FIN-RATIOS_Excluding-GASB68
- Personalized Need Processes 2p1
- Stakeholder Needs assessment list
- Tool Selection Process Map

2.4 - Complaint Processes

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

2P4: PROCESSES

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

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

2R4: RESULTS

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

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

2I4: IMPROVEMENT

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

Responses

2P4a. Collecting complaint information from students

The process of collecting, addressing, and communicating actions from student or other stakeholders with grievances has not changed appreciably since the last portfolio.

However, due to recent student focus group findings we know that the complaint system, while systematic and communicated in a variety of ways (training with employees, in the policy manual as well as in the student handbook online) is not as widely understood by students. Thus a new communication plan is needed to gain input from students. Employees are well versed in the complaint process and feel comfortable with addressing issues.

Currently, each division/department documents identified complaints on an excel template housed

on either the Senior Administrative Assistant's desktop, or the shared drive of the division. Unless the director/dean of an area notices a trend, or has an issue that rises to a higher level, the issue is solved in the division, the incident is documented, the division VP is notified.

2P4b. Collecting complaint information from other key stakeholders

Collecting information on weaknesses in performance from our other stakeholders occurs through our alumni, employer, and employee surveys. The Alumni/Advisory Committee/Employer surveys are conducted annually in the Spring. Employee surveys are conducted annually at the Fall Convocation, and more formally from an external provider, every three years with the Performance Horizons Campus Quality Survey.

Our internal employee stakeholders have a formalized complaint system that is outlined for faculty in the CBA, and staff on the Human Resources webpage. Additionally, the human resources area is continually seen as a common area for faculty/staff to bring issues of concern, and routinely receives high ratings on the three-year deployed Campus Quality Survey.

2P4c. Learning from complaint information and determining actions

With the most recent deployment of the Noel Levitz SSI, and the subsequent student focus groups, we have the ability to address issues of poor performance in the aggregate. The college has in fact used the SSI data from Fall 2016 to guide the choice of the February 2017 Strategy Forum action project "Enhancing the Student Experience, from Inquiry to Graduation." The project continues, and will be expanded in the coming year. Additionally, the new creation of a "customer service" committee put forward by the Student Services division was in direct response to the information gathered from students during both the Fall 2016, and Spring 2017 SSI and student focus group findings, as well as the internal discussion taking place.

2P4d. Communicating actions to students and other key stakeholders

While the college is in process of centralizing individual complaints with an in house tool, it publishes and adheres to a long standing policy/procedure for the actual address of student and other stakeholder complaints to maximize protection for the plaintiff. All communication of resolution in any complaint process is kept within the division as well as delivered to, and stored in the office of the division Vice President when it relates especially to students, and also in the HR office when it relates to employees.

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

The tool selection to centralize the system was chosen in light of two limitations; an external tool is cost prohibitive at this time, and until we expand the use of a centralized tool we do not know the demand that will be placed upon the system. Thus, we have chosen a secure internally-created tool at this time.

2R4 a,b,c.

As can be noted by our departmental complaint log, [Liberal Arts](#), and [Business Industry and Technology](#) the lack of student complaints rising to the level of formal are minimal. It has been suggested that the lack of data is due to the threshold of complaints needing to be written.

The Campus Quality Survey is the tool for tracking issues in aggregate for employees. The results from this tool are described in Chapter 3.

SSI and Focus Group Feedback surveys and our responses to student dissatisfaction in aggregate is addressed in 2.1.

2I4 IMPROVEMENTS

The question of centralization of the complaint system has been addressed more than once in the cabinet meetings, and the decision to [use a tool for centralization](#) has been approved by president's staff.

Two initiatives have already begun in response to SSI and focus group aggregate complaints:

1. The AQIP strategy forum focus on the barriers students are experiencing during the on-boarding process. This initiative will continue into the next phase, whereby the issue students identified in the SSI data most frequently related to course scheduling will be addressed.
2. The issue identified by students in relation to timely feedback and variable quality across faculty is the focus of the once monthly academic division scholarship of teaching and learning sessions which began in Fall 2017.

Sources

- BITcomplaint log 10.11.17
- Complaint log Liberal Arts 2012-16
- NCSC centralized complaint log template

2.5 - Building Collaborations and Partnerships

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

2P5: PROCESSES

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

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

2R5: RESULTS

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

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

2I5: IMPROVEMENT

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

Responses

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

North Central State College, creates and cultivates partnerships through the philosophical lens of the institution being a servant of the community. All potential alliances are evaluated through this lens by the president, his staff, and the president's cabinet.

Most official connections are made through the networking of the executive and administrative staff with external responsibilities. However, as residents of the community, almost all employees are integral part of our service region, and opportunities for collaborations and changing needs are also identified and happening. Individuals from the college are 'showing up' at a variety of meetings and events where information is shared, ideas are sparked, community milestones are celebrated, or

potential grant partnerships are explored for the betterment of all involved.

Since 2014 and through collaborations with multiple partners, the college has managed close to 15 million dollars in grants. While grants and partnerships are generally advantageous for the institution, both financially and otherwise, extreme care is taken before a partnership is established to create win-win relationships based on the board of trustee's guiding vision "what good, for whom, and at what cost. " If the community cannot benefit, the focus is shifted to activities and partnerships where everyone does benefit. The college is a steward of community resources, and money alone can never be the driving force of a partnership.

2P5b. Building and maintaining relationships with partners

The relationship building process is integrated into all of our planning at the cabinet level. Vice Presidents, Deans, and Directors all meet regularly with direct reports to monitor work flow, discuss issues, and brainstorm ideas for expanding partnerships. This brainstorming, and initial investigation often happens through professional release time to attend meetings, seminars, and community events and cultivate already established collaborations. When a new collaboration is presented, the supervisor will work with the VP of the area, and as needed, will bring it to the president's cabinet or president's staff. The collaboration pros and cons will be discussed, including academic, economic and political implications before reaching a decision.

As a result, partnerships have been built and maintained over the last 6 years with K-12 partners, universities, community organizations, business and industries, and government entities. These relationships are described in full details under results.

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

The college is guided by its core mission and that of its board of trustees, who represent the community, in assessing the effectiveness of its partnerships. The mission states that the college exists for the citizens of its service region to succeed in their chosen field of learning, work or enrichment sufficient for the college to justify available resources. This is symbolized by the trustees governance policy logo of "what good, for whom, and at What cost." Operationally, partnerships are assessed by the education, economic, and political impact they have on our service region:

1. Educationally: raising educational attainment in the region through accessible, affordable, quality higher education
2. Economically: helping graduates get better jobs with sustainable wages that improve their standard of living and their quality of life; and provide the college with the necessary human, fiscal, and physical resources to make it happen
3. Politically: advocate with representatives and government officials for local, state, and federal policies that help the college achieve its mission of student access and success

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

In addition to the educational, economic, and political impacts stated above, the college measures its collaborations by a number of quantitative and qualitative measures:

- Grant total amounts and trends for each academic year are reported bi-annually to all employees and discussed at the annual president's cabinet retreat.
- Community advisory committees are gathered annually to give input to the president in regards to the coming year's strategic plan of the institution, and our effectiveness of having met the

previous year's planning.

- The number of events hosted by the college is tabulated and evaluated for qualitative success by the participants. This is not as formal of a measurement as above. This comes in the form of report outs by participants of events and during meetings.
- Employer surveys are deployed annually.
- Alumni surveys are deployed annually.
- ATD and SSLI annual Reports

2R5.a,b,c.

K-12 Partners

Tech-Prep and career centers

NCSC has been a tech prep regional center as part of the Ohio Tech-Prep consortium which includes six college Tech Prep Regional Centers serving as liaison to Ohio's 91 career-technical planning districts, 23 community colleges, and 14 universities to ensure high-quality career-technical education programs. The Centers work with their education partners to increase student access to quality career-technical education pathways that provide opportunities to earn college credit while in high school. They are jointly managed by the Ohio Department of Higher Education and the Ohio Department of Education's Office of Career-Technical Education. There is concern at the time of this report being written that the State of Ohio's decreased funding of this program statewide will negatively impact our ability to develop and sustain important relations with career centers in our region including the articulation pathways that have resulted from strong relations in the past.

College Credit Plus (CCP)

The Ohio Department of Higher Education expanded the college credit plus program in 2014 and mandated that all public institutions both secondary, and post secondary in the state of Ohio would "work collaboratively and think innovatively (*sic*)...to advance the achievement and success of Ohio's students, and the program should be structured to ensure open access to all college-ready students..." The College is proud to currently have 38 CCP agreements.

Additionally the state mandated that the program must provide flexibility and encourage innovation. "Increasing the participation rates of underrepresented and low-income student populations in programs that result in higher graduation rates and post-secondary persistence is an important education priority for the state" (ODHE, 2014).

Workshops/Camps for middle school students during the summer

The college, through its various outreach centers, and the collaborations between the Liberal Arts and Business/Industry/Technology Divisions has hosted a variety of short workshops or longer term camps for elementary to middle school children of the communities we serve to gain experience in such varied topics as creative writing, hands-on engineering problems, and Chinese culture among others.

Partnerships with universities

The college currently has over 30 articulation agreements (2+2) with 17 in-state 4-year institutions such as The Ohio State University, Ashland University, and Youngstown State University. Additionally, the college has blanket articulation for all of the associate of arts and associate of

science concentrations with University of Phoenix, Western Governors University, Franklin University and DeVry. Several of these allow for on-campus or nearby degree completion, including Franklin University and Miami University with 3+1 program (third year at the same tuition rate as NCSC).

A partnership with The Ohio State University (OSU) and its Center for Design and Manufacturing Excellence is helping us fund the investigation of new program development in the area of polymers. A strong partnership exists on our co-located campus with OSU-Mansfield that focus on enhancing efficiency of shared maintenance, security, child care, and marketing activities while working on a bigger vision of a campus district to brand the identity and broaden the visibility of higher education.

Community Organizations

College administrators, faculty and staff are encouraged to maintain connections and communicate community needs through their relationships within community organizations, such as Clergy groups, foundations, Kiwanis, Rotary, United Way etc. It is through these groups that much of the informal dialogue of how the college is meeting, or not meeting, the community needs happens. One relationship that is atypical is our collaboration with the faith community, when we meet with local clergy twice a year to help our community appreciate the importance of higher education as a higher calling.

National Collaborations and Business and Industry Collaboration

Through the U.S. Department of Labor Trade Adjustment Assistance Community College Career Training (TAACCCT) grant, we partnered with 3 other community colleges in three different states and received ~\$2.9 million, of \$15.6 million grant. The results of this tri-state collaboration show that we exceeded the average outcome of all 256 TAACCCT national grants funded by the federal government.

Through collaboration with the American Association of Community Colleges (AACC), Lumina Foundation, and the local Regional Manufacturing Coalition (RMC), the college is establishing a regional mechatronic credential framework that is based on Lumina's 8 levels of credentialing while working with local businesses to align credentials with job responsibilities for a model that can be duplicated nationally especially in small and rural communities.

State Agencies / Other Institutions of Higher Education

One significant driver to many of our partnerships is the Ohio Association of Community Colleges (OACC). The OACC represents the 23 public community colleges in Ohio as a member supported group whose mission is to advocate for Ohio's community colleges, provide leadership and strategic direction at the state and national level, provides opportunities for trustee development, as well as serve as a resource for its member institutions. To this end, OACC has taken the lead on a number of success driven collaborations involving the state, NCSC and various other institutions.

NCSC is also a partner in the "Student Success Leadership Institute" (SSLI) which is driven by OACC in collaboration with the Ohio Department of Higher Education (ODHE). This is a vibrant gathering of the 23 public community colleges in Ohio to focus on completion of credentialing that leads to employment and/or transfer for students.

Additionally, the OACC is the lead agent for the Gates Foundation awards, the Great Lakes grant, and a myriad of other grants in which NCSC plays a key role. For instance, NCSC is the lead

participant and fiscal agent of the state \$1.3 million Open Educational Resources grant (OER) innovation grant to develop online textbooks for students free of cost. The College is leading 15 other community colleges and 2 universities (Ohio State University and Ohio Dominican) on this project.

Another strong collaboration is the \$350,000 state innovation grant with Marion Technical College and the Marion and Mansfield city schools to expedite student pathway to graduation, starting at the 9th grade and finishing high school and associate degree at the same time through dual enrollment.

NCSC deans/directors/vice presidents and president are all deeply involved in OACC activities; so much so that monthly meetings are attended by the college's CEO, CAO, CFO, Academic and Student Services Deans, registrar, controller, director of financial aid, and workforce administrators.

2I5: IMPROVEMENTS

With ever shrinking state resources, and decreasing demographics, the college continues to seek out collaborations that make sense for our students, employees, the community and the state.

The college will continue to seek out external resources to compensate for reduced revenues, and partnering versus competing for the same shrinking pool of students or resources (maintenance, lab facilities, IT functions, etc...) and to enhance efficiency.

Sources

There are no sources.

3 - Valuing Employees

3.1 - Hiring

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

3P1: PROCESSES

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

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

3R1: RESULTS

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

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

3I1: IMPROVEMENT

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

Responses

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

The guiding vision for recruitment and hiring is the principle of aligning talents with positions, and

ensuring positions are needed and resources are allocated to support those positions. Thus, the concept of getting the “right people on the bus in the right seats” guides all hiring managers. The process is coordinated through the human resources office, which falls under the leadership of the CFO. The process in 2017 is similar to what was reported in the systems report in 2011. However, one key difference exists; the President’s staff (President, CFO and CAO) is significantly more involved in the process. Unless funding structures change and the college has more resources available for human resources, this centralization and vigilant integration of hiring with focus on the strategic goals will continue for the foreseeable future.

The process begins with an initial requisition sent to the controller's office for institutionally funded positions or the accounting manager/grant financial coordinator for grant funded positions to verify funding is available. The position is then discussed at President’s Staff to determine if it will be filled.

The process is outlined in the [attached process map](#)

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. Additionally, each position has an education requirement that is based on grade level placement. Through the Ohio Association of Community Colleges, Human Resources network, HR directors can share position descriptions and salary information for bench-marking and standardization.

For full-time faculty positions, more than one candidate may be forwarded to the Vice President of Academic Services for a second interview. Upon interviews with the President and Vice President, and follow-up discussion with the hiring Dean, the Human Resources department is notified of the hiring decision. 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.

A [rubric for identifying](#) credentials needed for all fields is used by all academic divisions.

Of the 23 community colleges in Ohio, 13 are viewed as comparable institutions including NCSC in size. Thus, 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 fiscal realities have forced the College to create a more focused allocation of resources. Substantive human asset conversations now happen weekly within president’s staff. These conversations revolve around mission, vision, alignment of divisions and the position prioritization in light of competing needs.

The college set a goal to increase diversity of employment to match the changing demographics of our service area and create a rich and diverse cultural experience for our students. Attached chart displays the institution's [shortfall in this area](#), despite the three top positions at the institution representing diversity in employment.

In order to reach our diversity goal, national diversity sources have been used to announce job vacancies. Additionally, the College reviews its local list of minority recruitment sources periodically and sends all job announcements to these. Lastly, the College has changed its EEO statement on all advertising to “*North Central State College is an Equal Employment Opportunity institution. We value campus diversity and demonstrate this in campus initiatives. We particularly encourage*

members of historically under-represented groups to apply.”

The college has discussed the need to create a more robust orientation program beyond the HR orientation portion. Currently, some departments conduct orientation at the departmental level; however, this is not uniformly done college-wide. The HR office conducts approximately a three-hour orientation for all new employees, and manages the new employee orientation site on the HR website. Topics covered include:

- Overview of benefits
- Citizenship verification, tax forms, direct deposit, and other administrative information
- Benefit enrollment paperwork
- Brief review of various policies
- Employee grievance procedures
- Training for web time entry
- Title IX training

In addition to the training above, new faculty are given release time to meet monthly for training with the Chief Academic Officer (CAO) in relation to assessment, accreditation, curriculum development, college policies related to committee structure, workload, grievance resolution specific to faculty and students, the college's continued focus on the scholarship of teaching and learning, and our relationship with the wider state community in relation to the state facilitated transfer system.

Staff/faculty and administrators are then introduced to all employees in their work area, and begin the training process outlined by their supervisor.

Furthermore, there is a faculty mentoring program (incorporated in the Collective Bargaining Agreement) where a new faculty is assigned a colleague from the same program. These veteran faculty members are provided one credit-hour of release time to mentor new faculty.

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

The 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. Several offices oversee the adherence to the credentialing process. 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. See sample of Business, Industry, and Technology Division, [2017 Fall audit](#).

The college not only monitors credentialing standards, but seeks out grants and partnerships that encourage adjunct to obtain the needed credentialing. Please see the result section for the grants/other programs the college has championed, specifically focused on helping [CCP](#) as well as on-campus adjunct further their education.

Process for hiring any adjunct faculty is outlined in the [following map](#).

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

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.

Annually, reports are generated by HR and IR indicating staffing levels and comparisons of those levels to similar institutions.

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

One of the struggles of a small institution in an economically depressed environment, with a diverse mission to serve residents that are rural/urban/suburban, is the ability to attract people with competitive wages. Thus, the college must find creative ways to attract and retain staff in numbers that meet the needs of the institution. These non-income based ways of attracting and retaining staff are thoughtful investigated practices that balance the needs of the institution, its employees, and the needs of the community. The following practices have been put in place with input from the college community to add value to employment without endangering the fiscal standing of the institution:

- Extremely competitive benefits package
- Fun committee, which seeks input from employees regarding celebrations of birthdays and events, employee achievements, special college milestones, etc.
- Summer schedule, 10 hour days, 4 days per week (i.e. 3-day weekends for employees)
- Closing before and during Christmas and New Years holidays. Generally closed for a 2-week period. Over the past 4 years, in addition to the normal 4 paid holidays, the college has given employees 2 additional paid days-off during this period, with an overall cost of more than \$100,000
- Premium holidays: 2 to 3 months of free health insurance
- Gift cards to purchase turkeys for Thanksgiving
- Cook out and team-building games at fall convocation

3P1e. Tracking outcomes/measures utilizing appropriate tools

The college tracks these outcomes in several ways. The deployment approximately every three years of the campus quality survey garners anonymous feedback from employees on their perceptions of morale, pay rates, recognition, and evaluation. Also, at times during open forums, in-service days etc., employees are surveyed using "clickers" for transparent and immediate responses to questions, concerns, and/or other matters.

Additionally, the President's staff engages in significant dialogue with areas where concerns may exist to address them.

3R1 a,b,c.

- Despite our rural, at times isolated location one of the ways we have met the needs of students is the use when pedagogically sound, of online courses using experts from across the state of Ohio. We offer all adjuncts, and well as experts who must commute, course loads aligned to reduce commute times, mentors to guide them, an adjunct faculty liaison to advocate for their concerns, tuition remission, as well as extensive free training. Overall, the college has been able to hire needed faculty and staff.
- [Feedback](#) from exit interviews indicates that
 - pay scale for many positions is on the lower end

- benefits package and health care are on the higher end
- almost all employees appreciate the flexibility of the schedule, the closing over the holidays and the flexible summer schedule
- In comparison to area employers our benefit plan provides one of the lowest deductible insurance plans. Additionally, recent research conducted by the NCSC HR office found that out of its 13 comparable colleges, NCSC employee contribution levels for health coverage is on the more modest end of the scale.
- [HR diversity report](#)- Despite the institutional changes to encourage diverse applicants, the institution has not achieved parity with area demographics in relation to under represented groups, thus the Diversity committee has become a standing committee reporting to president's cabinet, and diversity topics are set to be incorporated in all future professional development days on campus. The college demographics display gender parity.
- With the increase in CCP programming with high school faculty appropriate [credential attainment](#) has become a quality focus for the institution, thus we are continuing the consortium for the [CCP](#) program.

311: IMPROVEMENT

1. It is recognized that as much effort that has been put into standardizing our processes and creating a robust program for recruiting/screening/hiring, development of orientation processes beyond the initial HR on-boarding needs further maturation.
2. We are ready to turn our attention to the scheduling of full-day orientations for new staff and administrators. Additionally, faculty are assigned mentors upon acceptance of employment. This practice needs to be extended to staff and management.
3. According to an external executive AAUP forensic accountant our employee contribution to health insurance is extremely competitive. The lowest comparative percentage is at 22%, while the college is at 14% for the 2017-2018 year.
4. One recent improvement was the college joining a health insurance consortium to leverage collective power in the purchase of health insurance. In July 2014, NCSC joined the Stark County Council of Governments (COG). Participation in the COG has dropped our annual health insurance increases from percentages in the upper teens and twenties when not in the COG to 2.5% to 5.5% over the past 3 years. Additionally, the college received "premium holidays" over the past 3 years which resulted in 2 or 3 months of free insurance. The premium holidays typically offset the renewal increases each year.
5. The Campus Quality Survey will be deployed Spring 2018 to create consistency of feedback every three years.

Sources

- 16-032 staff hiring guidelines
- 16-043 Minimum Faculty Cred chart
- BIT audit 2017
- CQS comparisons
- CSCU Marketing Report_3 31 2017 (1)
- Executive Summary CCP credential consortium
- Exit Interview Overview Charts
- HR Demographic Report

- HR Hiring Process Map
- HR, Staff Hiring Guidelines 16-032
- MASTER CCP Credential Status Spreadsheet Oct. 2017
- North Central State_CCP Grant Agreement_03.03.16
- Performance Management Process for Staff
- Process Map Adjunct CCP
- Summer 2017 CCP Credential Status Spreadsheet B Sans surnames

3.2 - Evaluation and Recognition

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

3P2: PROCESSES

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

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

3R2: RESULTS

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

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

3I2: IMPROVEMENT

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

Responses

3P2a. Designing performance evaluation systems for all employees

Previous to the 2011 systems portfolio, one of the areas of struggle outlined by employees, and discussed in the 2006 portfolio was the need for accountability at all levels. The 2009 strategy forum product was the beginning of a plan to renew the performance evaluation system with the

responsibility for setting targets for performance. The inclusion of early reviews to address issues during a probation period has helped to refine and inform our orientation system for new employees. Supervisors are now required to complete 30, 60, 90 day reviews with every new employee.

Faculty and Staff are required to complete [self evaluations](#) annually. Self evaluation asks what performance difficulties have they encountered, specific to the surroundings, ways that their supervisor can create a more productive environment, and specific challenges the employee would like to address in the coming year, including professional development plans.

While the [accountability for the completion](#) of all annual reviews has been maintained since 2012, the completion of detailed professional development plans are intermittently enforced. Professional development planning is now part of the budgeting process for each Dean, and the outline of professional development is incorporated at the end of the annual evaluation form, while the College continues to provide more and more general professional development internally at campus meetings.

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

The college has now completed its fourth cycle of the campus quality survey. The consistent deployment of this measure has allowed us to review trend data and make changes based upon those findings.

Additionally the president and his VP's sit on most standing committees on campus, as well as schedule open forums at least four times per year to gain immediate feedback from employees concerning issues identified in the 'CQS', during exit interviews, or within informal complaints brought forward to supervisors.

Staff/Administration are given opportunity annually to complete the self-appraisal form which includes questions related to job satisfaction, systems that could be improved on campus, as well as accomplishments and plans for the future.

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

The simplification and narrowing of focus with the strategic plan in 2014 has helped significantly with aligning what employees do on a day-to-day basis with the overall institutional objectives. The starting point for all discussion during annual evaluations is, "how does what you do on a daily basis contribute to student access, student success, or the acquisition and/or stewardship of the resources to support access and success?" Both the [faculty contract](#), and [staff](#) evaluation forms incorporate such factors in it with supervisors focusing areas of improvements on the strategic goals.

The faculty evaluation tool touches upon a variety of areas related to the furthering of student success and student access. Student completed evaluations aligns to areas touched upon in the supervisory evaluation such as timely feedback from faculty and consistent communication which have an impact on student retention. Additionally, faculty are required to annually report on changes/techniques they are using to improve pedagogy. This request for reporting is for all courses a faculty member teaches, however special emphasis is given to courses in which the student DWF grade rate is *high*. Under the new contract, the college and the faculty agreed to pilot an annual evaluation that is more succinct with the college strategic goals of access and success. Parameters include services to the students, the program, the division, the college and the community. These evaluations will also be used to

compensate faculty for advancement in rank.

One of the best practices the institution has is the program review cycle for both instructional and non-instructional programs. This is done through a committee consisting of faculty and staff representatives that evaluate programs or departments, on a 3-year cycle, to ensure relevance, continuation of high quality and viable services, and opportunities for continuous improvement that are geared to enhance access and success for our students, while aligning the necessary resources to make it happen. Results from these reviews have led to concrete changes where programs were either eliminated, modified or taken to a higher level of service.

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

Faculty and staff receive performance evaluations on a consistent rotating schedule as outlined below:

For faculty, the first three years of employment are considered a probationary period. During this time, the Assistant Dean will administer the "Student Evaluation of Instruction" forms in all the faculty member's classes each semester during the first probationary contract year and at least one semester per year for the remaining two contract years of probation. The results will be shared with the faculty member in a composite format to be used as necessary for the improvement of teaching. The Assistant Dean has a responsibility to meet with the probationary faculty member and to review the results of the Student Evaluations. The Assistant Dean or designee may also administer these forms in other terms. There will also be at least one classroom and/or laboratory and/or clinical observation per term by the Assistant Dean for the first probationary contract year and at least one per year for the remaining two contract years of probation.

For non-probationary faculty, the Dean and/or Assistant Dean will provide a summative evaluation during the third year of the faculty contract including input from the faculty on the annual Faculty Performance Review form, information from the Student Evaluation of Instruction, classroom observation forms, and input from program director/coordinator. A summative evaluation will provide methods of teaching improvement and a professional development plan if necessary, as well as goals for the following academic year that are aligned with the college strategic goals, and determination of continued employment. Each non-probationary faculty member will annually complete a Faculty Performance Review form and discuss it with the assistant dean. The assistant dean will provide written input on the document. The review's primary purpose is to provide a structure for the advancement in rank process, and become part of the faculty member's permanent file.

For staff, performance appraisals are conducted on an annual basis for all full-time and part-time staff employees. The performance appraisal may occur either on the employee's anniversary date or at the end of the calendar year. In either case, every employee shall have a performance appraisal conducted by December 31st. (Note: this does not imply that only one performance appraisal may be done per year. The employee may request or the supervisor may conduct additional appraisals during the calendar year. Constant feedback is encouraged.)

There are two components of the process – performance appraisal and professional development. One to two weeks prior to conducting the appraisal, the employee being evaluated shall be given the Performance Appraisal Self-Assessment Worksheet, to reflect on their performance during the review period. In advance of the discussion with the employee, the supervisor will review the employee's Performance Appraisal Self-Assessment Worksheet, and complete the Performance Appraisal rating the employee and making relevant supporting comments.

The professional development discussion shall take place after the formal performance appraisal. It will include objectives for performance areas marked improvement needed or unsatisfactory, progress toward past performance objectives, and objectives for professional growth during the next year. This shall be a collaborative discussion. All performance standards that receive a rating of “Improvement Needed” or “Unsatisfactory” require a performance development plan. In addition, performance appraisals from the previous year that received a rating of “Improvement Needed” or “Unsatisfactory” are followed up in section “Progress Toward Past Performance Objectives”.

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

The college leadership is committed to continuous quality improvement. Thus, in an effort to always be accessible to all employees, the deans/vice presidents/president maintain an open door policy where employees can visit offices of any leader to voice concerns, give informal input, or ask for mentoring.

A variety of benefits have been in place for years. Tuition assistance is available to provide on-going professional development opportunities. As stated in chapter 3.1, the college offers a benefit package that is very competitive within the region. Also the new faculty evaluation system will be used for compensated faculty advancement in rank that ranges between \$1,000 and \$2,000. Due to high performance or reorganization over the past few years, many employees were promoted with salary increases.

The college conducts exit interviews of employees where the director of HR provides them with a questionnaire and meets with them to the extent possible to ascertain exit information and help with potential system improvement.

3P2f. Promoting employee satisfaction and engagement

As stated previously and in chapter 3.1, the College promotes employee satisfaction and engagement with a series of practices ranging from recognizing outstanding employees, holding recognition events, providing additional time off, scheduling flexibility, and team-building games.

Nominations for outstanding full-time and adjunct faculty, as well as staff, are submitted annually. These are forwarded on to the appropriate nominating committees. The committees are comprised of winners from previous years. In December, the college hosts a recognition dinner for all employees and their spouses. These awards, along with several other college dedicated awards, are announced and winners are recognized by the college community.

3P2g. Tracking outcomes/measures utilizing appropriate tools

The college uses several systems for evaluation of faculty/staff efficacy in their positions as well as the efficacy of the college to meet its employees needs.

- End of course student evaluations
- Annual self and supervisor evaluations of employees - with employee input, and interventions for professional development. While variability will always exist between supervisors in reference to subjective assessment of employee performance, Division VP's encourage supervisors to be realistic, and specific in their assessment of employee performance. Additionally, issues with performance are dealt with normally at the 30, 60, or 90 day review, or anytime during the annual review cycle. Supervisors are reminded and encouraged to give

feedback, especially in instances where employees are placed on an improvement plan.

- Campus Quality Survey
- Student Focus Groups/SSI/CCSSE

3R2a,b,c.

- The attached results display student overall satisfaction with instruction to be [slightly lower than our](#) peers. When this was addressed in the student focus group in Spring 2017, the students provided input that the issue was more of a variability in quality of instruction. The direct quote from students indicated that faculty on campus rarely fell into the middle range, [they were either 10's or 2's.](#)
- The attached [chart displays the](#) evaluation schedule of full-time probationary, and non-probationary faculty members. Adjunct faculty are evaluated every semester.
- Added notes to the Campus Quality Survey (CQS) have at times pointed to a recognition of only those employees who consistently cross the path of higher level administrators. However, overall response to recognition for jobs well done, and the feeling that "my job makes a difference" has remained at the top of employee satisfaction results. [CQS.](#)
- Sample program reviews for the [Human Resources area 2014 & 2017](#), display the substantive conversations that happen whenever any service area or academic department presents to the program review committee.

3I2: IMPROVEMENT

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

- The college has worked hard to highlight accomplishments through a variety of means. The president's monthly report allows each department to share successes and highlight individuals. The president's staff seek input from their direct reports on employees going the extra mile in fulfilling their jobs, as well as input after the employees are chosen for recognition.
- Additionally, Fall 2017 convocation was given over in part employee recognition. Faculty and staff who often go unnoticed were called out and praised by deans/directors/vice presidents/president during the college wide meeting.
- Due to human nature, there is at times wide subjectivity in evaluations between departments. While some deans/directors may feel free giving out evaluations that are heavy laden with "exceeds expectations" other areas are perhaps more realistic in their assessment. In the future, the college plans to conduct training into the completion of the annual evaluations, and stress the importance of evidence of an employee being marked as 'exceeding expectations', specifically by comparing what the job requirements are, and what evidence the supervisor has displayed for this superlative evaluation.
- As noted previously in chapter one, the results from the Spring 2017 Noel Levitz SSI and the subsequent feedback from the focus group, has galvanized an effort by the academic divisions to re-emphasize all aspects of the scholarship of teaching and learning, both at monthly divisional meetings, and the bi-annual professional development days.

Sources

- 2017 Self Appraisal Form
- 2017-18 Calendar On-going (1)
- 30-60-90_Day_Probationary_Evaluation_PDF_Fillable

- CQS comparisons
- Face-to-Face Classroom Observation Form
- Faculty Evaluations for Contract Renewal during 17-18
- focus group feedback
- HR, Staff Hiring Guidelines 16-032
- Human Resources Program Review 2014
- Human Resources Review 2017
- Insurance Premium Contributions
- NCSFA-AAUP Contract, 082317 Spring 2020
- NCSFA-AAUP Contract, 082317 Spring 2020 (page number 32)
- NCSFA-AAUP Contract, 082317 Spring 2020 (page number 59)
- NCSFA-AAUP Contract, 082317 Spring 2020 (page number 60)
- NCSFA-AAUP Contract, 082317 Spring 2020 (page number 61)
- NCSFA-AAUP Contract, 082317 Spring 2020 (page number 62)
- NCSFA-AAUP Contract, 082317 Spring 2020 (page number 63)
- Performance Appraisal form 2017 Fillable PDF
- Performance Management Process for Staff
- Position Requisition Fillable Form Final
- Surveys Satisfaction etc.

3.3 - Development

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

3P3: PROCESSES

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

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

3R3: RESULTS

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

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

3I3: IMPROVEMENT

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

Responses

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

Based on the National Community College Benchmark Survey, the College has averaged better than the 50th percentile in development/training expenditures per FTE employee. The majority of external professional development faculty driven in alignment with requirements of accredited programs and the collective bargaining agreement which includes specific language for funding. With the last few years being very challenging financially from the perspective of reduction in revenues, 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 (Education Advisory Board, Ohio Association of Community Colleges Student Success Leadership Institute) on topics related to student enrollment, student success, and campus safety.

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

Departmental advisory boards consisting of employers and community members from Ashland, Richland, and Crawford counties meet with Deans, Assistant Deans, and Faculty twice annually to review curriculum content, keep faculty abreast of trends, suggest improvements etc..please see [attached outline](#) of advisory board members responsibilities.

There are a number of pedagogical processes questions asked in the student surveys of teaching, as well as the dean in class evaluation. All evaluations are shared and discussed with faculty. Program coordinators are afforded stipends to perform in class evaluations on faculty teaching in their area of expertise; and new faculty are paired with experienced peers in their discipline. This fosters peer to peer mentoring.

There are a number of pedagogical issues and content-related review questions addressed during individual program accreditation, as well as during the once every three year program review cycle.

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. The pass rates for these credentials will, in the future be an important external tool of scrutiny for quality.

The department of E-Learning and Innovation hosts training workshops throughout Fall/Spring semesters surrounding all aspects of innovative curriculum development, use of technology in the classroom, and leveraging the LMS.

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

There are several systems the institution uses to support the continuing education and training of our student support staff, as well as faculty participating in student support services not related to their content expertise.

As stated previously all employees receive at least two hours of on-boarding from the HR office in regards to various institutional policies, culture, benefits, required forms, etc.

However, 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. Furthermore the tuition reimbursement program affords most employees the opportunity to gain desired development with additional salary compensation once completed with training.

The current process for allocating professional development funds, requires supervisors and direct reports to coordinate requests for professional development money from the Vice President over their

area by describing how the activity relates to the furtherance of the goals of student access or success.

To complement these off-campus professional development activities, the collegewide professional development activities are guided by a team of faculty/staff/administrators who plan the all-college convocation at the beginning of Fall semester, the all-college in-service in the middle of Spring semester, and the solely staff in-service near the end of fall semester where the entire college closes for the day. In addition, many departments conduct retreats when possible, on- or off-campus.

3P3d. Aligning employee professional development activities with institutional objectives

Maturity in terms of training and development of professional knowledge and skills varies from department to department. Annual evaluations include plans for professional development for the coming year that aligns with department as well as institutional objectives.

The 2017 strategy forum project focused on enhancing the student experience from inquiry to graduation is an example of alignment with institutional objectives.

As part of this project, the Transition Services office has developed a comprehensive training plan for the academic advisors, which has built upon previous successes, and avoided previous mistakes. The training begins with an overview of the workings of the college mission, policies, and culture. This encompasses such a vast amount of information that the initial training lasts at least 5 weeks with 'buddy' pairing during that time to allow the advisor to experience most aspects of student support, such as: placement testing, specialized services support, career counseling, and each of the divisional specific counseling. The training follows the Habley holistic paradigm for student services outlined in the [flow chart attached](#).

What is unique about the transition services model of training is not only the breadth of topics covered, or the cross training that occurs, but the consistent evaluation of that training at the 30, 60, and 90 day mark of an employee's tenure with the college.

3P3e. Tracking outcomes/measures utilizing appropriate tools

The college utilizes several tools to measure our efficacy with helping employees develop in their profession.

- Campus Quality Survey Questions
- Exit Interview Survey
- Annual Employee evaluation

3R3 a,b,c.

The attached professional development schedules [2015](#), [2016](#), [2017](#) reveal a commitment by the college to offering on-campus training in a variety of mission critical subject areas. In addition to these internal offerings during in-service and convocation, the college offers a myriad of technology workshops, tuition remission, monthly academic training meetings, and utilizes institutional and grant funds to send employees to professional seminars such as NACADA, ATD, AACC, ACCT, and OACC.

Table for tuition reimbursement over the last 5 years for employees to further their academic education

Year	2012	2013	2014	2015	2016
# Employees Reimbursed	10	13	10	9	8
Total Amount Reimbursed	\$50,000	\$50,000	\$50,000	\$50,000	\$40, 163

3I3: IMPROVEMENT

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

While the college has various safeguards in place for content expertise evaluation of faculty, there is no mechanism in place for the consistent professional development of the scholarship of teaching and learning other than the training provided by the ELI department, which is a voluntary activity. With this in mind, the CAO in collaboration with the divisional deans has set out an agenda for the 2017-2018 academic year, of spending one hour per month on various teaching quality topics, ranging from classroom de-escalation techniques to pedagogical best practices.

Starting in the 2017-18 academic year, the formal evaluation of full-time faculty has been updated to be done on an annual basis with focus on three main categories: service to the students with teaching and teaching-related activities; service to the program and the profession; and service to the division, the college, and the community. Furthermore, a new advancement in rank process has been established based on the [same three criteria with financial incentives](#) to move from instructor to assistant professor, associate professor, and professor.

The Transition and Student Services area endeavors to refine the process for training advisors. Additionally this model of 5 week job shadowing, and standardized training with 30, 60, and 90 day reviews of the training efficacy is a model that is being discussed as a possible expanded training model for many departments on campus. The AQIP project for the 2017-2018 year specifically focuses on the student services division and the deployment of a cross training model for employees within that division.

Training and development for faculty and staff on various office products (Excel/Word/Outlook) has waned over the last several yeas as it is assumed most employees understand the basics. However, as more of our jobs are dependent upon the accurate analysis and communication of data, more staff are needing upgrades to these basic skills, with college courses that are available to employees for free.

Sources

- 17-18 advsiory committee handbook policy 12-071
- 17-18 advsiory committee handbook policy 12-071 (page number 7)
- Advising Training Model
- Executive Summary CCP credential consortium
- Fall Convocation, 2016, Agenda
- Fall Convocation, 2017, Agenda
- Fall Convocation, Fall 2015, Agenda, 8-20-15
- Habley holistic student success coach training
- NCSFA-AAUP Contract, 082317 Spring 2020
- NCSFA-AAUP Contract, 082317 Spring 2020 (page number 60)
- Summer 2017 CCP Credential Status Spreadsheet B Sans surnames

4 - Planning and Leading

4.1 - Mission and Vision

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

4P1: PROCESSES

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

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

4R1: RESULTS

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

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

4I1: IMPROVEMENT

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

Responses

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

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 we communicate our [mission, vision, and values](#) have changed to reflect the evolving needs of our community and our State of Ohio, with an annual review by the Board of Trustees.

The current president's tenure began in 2013 with a focus on increasing the educational attainment of the communities we serve while leveraging the resources we have. In 2014 the communication of this mission was changed to facilitate easier understanding by employees and constituents. The mission was operationalized through [three important goals](#).

- Access
- Success
- Resources

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

This focused change described above has allowed concise communication of our mission to all constituencies, making integrated planning at the unit level more clear and manageable, while facilitating useful target setting and use of data for both measurement (KPI's) and change. Changes are continually made to the plans that under-gird our mission, vision, and values in light of new information such as: state and community changing needs, data that reveals opportunity for growth, the need to retract or expand program areas, or the need to adapt to changing federal or state requirements, as well as continuous alignment of resources due to external and internal factors impacting the college.

The institutional research department works closely with the president and his staff to monitor trends, strategic enrollment patterns, current employment opportunities for our students, and future employment growth areas. This data is shared widely, and in a consistent fashion.

This commitment is also displayed in a myriad of concrete ways : through communication of the values on a consistent basis, employee evaluation of institutional efforts to realize the mission, encouraging widespread participation in strategic planning, and through budget planning. The majority of the college community meets 4 times per year. The president reviews the mission, vision, and values at each meeting of the wider college community and in all the meetings of the President's cabinet.

Faculty meet once monthly as a wider group, before breakout sessions with their respective divisions. From Fall 2015- until Fall 2017, the first hour had been given over to, the president and vice presidents apprising the academic side of the institution of all new initiatives, changes, etc. and reiterate the focus on success and access for students. However, in the spirit of CQI, our SSI and student focus groups revealed a need for focus on the scholarship of teaching and learning. Thus, for the 2017-2018 academic year, first hour activities revolve around the craft of teaching. We continue to use the fifth Thursday of every semester to schedule needed open forums for communication, as well as the standard bi-annual college wide meetings. However, the efficacy of these hour craft of teaching meetings will be reviewed by deans/faculty/administrators at the end of this academic year.

Additionally, as noted below, the institutional budget is specifically built around the mission, vision, and values.

4P1 c. Communicating the mission, vision and values (1.B.1,1.B.2, 1.B.3)

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 strategic planning process of several hundred internal and external constituents this year led to updated vision, mission and values statements [attached](#).

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

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. These 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. However, the majority of our students at this juncture, still pursue career-focused programs of study in terminal associate degrees or certificates.

Another change is the accountability to offer programs that align to industry standards and external credentialing. Thus, the process for approving new programs, retiring old programs, or simply updating our programs involves significant oversight by our advisory committees (bi-annual meetings are required).

Thus, our mission is first informed by what the communities we serve tell us they need. It is next refined by state and federal mandates, and further focused by our available resources. The guiding vision can be captured in the phrase "what good, for whom, at what cost?" This is the lens through which our board sets strategic direction, how all programming decisions are made, how all budget allocations are filtered, and how time spent on activities is allotted. The repeatable processes for this alignment with our mission is outlined in this excerpt from [1P3 c & e](#).

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

The best way to display commitment to specific values is to show the alignment of human and fiscal resources with the values. In 5P3 we describe the process for building our budgets to accomplish institutional goals. Important to note in that response, that our 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. Budget managers are then interviewed before the institutional budget is finalized, when they request any funding that deviates from the agreed upon budget outlined in the comprehensive budget review completed in FY 14. This comprehensive budget review will be revisited during FY 18. However, it is laborious, thus it is not repeated annually. Budget managers need to explain how they believe the resources they will spend in the upcoming fiscal year will move the college forward on its strategic goals.

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

The college has used a variety of measures to track the progress toward realizing its mission, vision,

and values.

In Spring 2016, the president expanded the facilitated discussions with internal and external constituencies including:

1. College-wide advisory committee: this is made up of membership from each individual advisory committee as well as other interested area employers, business and government, and non profit leaders encompassing a wide variety of market sectors at this collegewide spring meeting.
2. Faculty and Staff at in-service meetings, convocation, open forums, and faculty meetings which occur monthly during Fall and Spring semesters.
3. Student surveys (Alumni, Graduation Survey, SSI, and CCSSE)
4. Student focus groups

4R1a,b,c.

From both the individual advisory committee notes and the presentation survey results from the President's [College-wide advisory meeting](#), the activities, surrounding the deployment of a new college-wide outcome focused on soft skills, are in direct response to the request by the community .

From the advisory meeting responses, and the student focus group results from Spring 2017, as well as the [SSI results](#), two projects have been launched:

1. The monthly meeting of faculty across divisions to raise the quality of teaching. Students told us that quality was uneven in the classroom. Faculty responded with a request for time to hone their craft of teaching.
2. The inclusion of professional/soft skill assessment as a new college-wide outcome.

Attached are two program review files, [FA review, response letter](#), and [UC review, response letter](#), which display the substantive conversations that take place during program review, which helps the college rework program mix as the needs of the community change.

4 I 1 IMPROVEMENTS

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

One of the issues that has been persistent in our college is the attempt to be all things to all constituencies. While this may seem a noble goal, it is unrealistic and often ends in less than satisfactory outcomes for the various constituencies the college aspires to serve, and leads to frustration by college employees. Scattered resources spread thinly over many good initiatives can lead at best to mediocre achievement of our mission; and at worst, the collapse of the system due to unfocused application of resources that are eventually drained away from mission-critical activities.

Thus, improvements being implemented by the college are:

- Academic: focus on our main product, quality teaching
- Non-academic: cross training of employees within the student services departments to enhance the student experience in relation to student access and success.

The first team will consist of the CAO and academic leadership. Monthly, each academic division meeting will devote one hour to topics voted upon by the faculty, designed to improve classroom performance. Topics for Fall 2017 have already been selected. They include: how to enhance student engagement and retention, how to deal with disruption in the classroom, how to measure soft-skill achievement, and signs of student psychological distress.

The second team leading the cross training is the AQIP/IPASS team, formed in response to the initiative chosen at the 2017 Strategy Forum to address the integration of student support throughout the student life cycle.

Sources

- 2013 STRATEGY FORUM PLAN
- 2017 NCSC Vision
- Advisory Committee Feedback
- Enrollment Trends -2012-2016
- Excerpt 3P1 c & e
- Financial Aid Program Review 2017
- Financial Aid Respose Letter 2.6.17
- IPEDSDFR2016_204422
- NC State ATD Summary 2016 Profile
- strategicplan_august2015
- strategicplan_august2015 (page number 2)
- strategicplan_june2017
- strategicplan_june2017 (page number 2)
- Surveys Satisfaction etc.
- Urban Center Program Review 2016
- Urban Center Response Letter 11.22.16

4.2 - Strategic Planning

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

4P2: PROCESSES

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

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

4R2: RESULTS

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

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

4I2: IMPROVEMENT

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

Responses

4P2 a. Engaging internal and external stakeholders in strategic planning (5.C.3)

As stated in 4P1, strategic planning at North Central State College is finalized at the president's staff and cabinet level. However, the direction the college takes in relation to its mission is informed at many different levels. The Board's Global Ends Policy / Mission states that "North Central State

college exists for the citizens of its service region (access) to attain the knowledge and skills to succeed in their chosen path for learning, work or enrichment (success) sufficient for the college to justify available resources (resources)." How that mission is acted upon in the various units of the college has become much more congruent, and the reason for our strategic goals of access, success, and resources coming directly from it.

The consistent, formal, and focused engagement of all stakeholders in planning the strategic direction of the institution has been the most significant improvement seen at the college in the last five years.

All stakeholders are engaged by the president and his staff through a series of meetings. These meetings with external stakeholders come in the form of community wide meetings, dinners, community surveys etc. where sector leaders are invited to give input on strengths, weaknesses, opportunities, threats and trends that impact the community. Thus, from these meetings, outreach centers have been established, programs have been closed, new programs have been started, and grants have been sought for. The purpose of this robust engagement with our constituency is to help the college focus extremely limited resources on the most essential goals.

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

This 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 our strategic plan (please refer to evidence source document in chapter [4.1 titled "strategicplan_june2017"](#)):

1. Access: (KPI: increase headcount and credit hours by 1% traditional and 0.5% non-traditional)
 - o foster a welcoming and collaborative culture for students and community
 - o provide affordable and viable learning opportunities
 - o offer effective outreach and delivery
2. Success: (KPI: increase success rate of (graduation + transfer + still enrolled) by 2.5% on each and overall)
 - o support and guide student goal development and achievement
 - o foster a student-centered inclusive learning environment inside and outside the classroom
 - o maintain a culture of excellence
3. Resources: (KPI: increase reserve by 2% and maintain a composite ratio of at least 4.0)
 - o be a great place to work
 - o manage fiscal resources responsibly
 - o align and optimize college assets and infrastructure

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

At the College, effectiveness (doing the right things) versus efficiency (doing things right) are moving relatively in tandem to fulfill the college mission. The clarity and simplicity of the strategic plan and goals allows for that. Additionally, the committee structure allows for collaboration and communication between departments and divisions to align efforts, albeit not all the way to the individual level.

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

For example, the dynamic tension between the dual role of the community college, that of terminal vs. transfer degrees, does lead some to believe we do not have an overall focus. However, the question of alignment is presented nearly every time a position opens, a significant purchase must occur, or a program creation is investigated. This is so purposeful that it has become almost a mantra at many meetings. However, as aligned as the college is in mission, the multiplicity of initiatives can lead to duplication of efforts, which decreases efficiency.

Another example of alignment would be the budget process which requires budget managers to give rationale for the subsequent year's budget requests solely on the basis of alignment with strategic goals. All requests must address how the money requested will advance the core mission of student success and student access, while increasing the resources in fulfillment of this mission.

Getting everyone on the bus and in the right seat to head in northerly direction will always remain our goal.

4P3d. Capitalizing on opportunities and institutional strengths and countering the impact of institutional weaknesses and potential threats (5.C.4, 5.C.5)

One of the College's major strengths is the partnerships it has formed with high schools, career centers, universities, businesses, government entities, and community organizations. One evidence of that is the growth of dual enrollment while partnering with more than 3 dozens high schools. In addition, the College is offering Tuition Freedom, a free-tuition program for dual-enrollment students who continue with the College full-time. While this is focused on the college mission of accessible and affordable education to raise educational attainment, it can create a fiscal threat if not minimized. As a result, the College is focusing its pre-existing scholarships, and new scholarships raised by the foundation, grants, and donors in the community to diminish this risk.

Another potential threat is one that is faced by communities and institutions across the nation, and that is calamities caused by human or natural disasters. As a result, the College has made it a priority to do safety training at every major gathering of employees which takes place at least twice a year.

Another example is overcoming the lack of additional revenues by actively pursuing grants. Our ability to bring in over \$15 million in grant over the past several years helped the College make Kehoe, where the BIT division is housed, a center of excellence in engineering and technology by purchasing state of the art equipment with enhanced IT infrastructure. This progress is preparing our students for a brighter future, with better jobs and better standard of living and quality of life.

4P3e. Creating and implementing strategies and action plans that maximize current resources and meet future needs (5.C.1, 5.C.4)

Ronnie Max Oldham stated that Excellence is the result of:

- caring more than others think is wise;
- risking more than others think is safe;
- dreaming and expecting more than others think is possible

Our College is accomplishing that through multiple initiatives:

1. Through our mission of serving the citizens of our region to have the knowledge and skills to succeed in their chosen path as evidenced by more than 14,000 graduates as we approach our 50th anniversary, serving more than 4,000 unique students every year.

2. Second by making major investments in dual enrollment known as College Credit Plus (CCP). Over the past few years, and in partnership with more than 36 high schools, enrollment in CCP has quadrupled to close to 1,200 students where tuition paid ranged from zero to 25% of regular tuition. This includes students in Engineering, Bioscience, and Business where students received their Associate Degree BEFORE they graduated from high school,
3. Third is our new Tuition Freedom Scholarship (TFS) program. It provides dual enrollment students who come to us after high schools with free tuition to finish their associate degree while going full time. This year we have several hundred TFS students, and invested close to \$750,000 in their scholarships to this point.

These initiatives help students reduce the cost of their higher education, allowing themselves and their parents to save so much and not be burdened with debt that exceeds \$30,000 per graduate and around \$1.4 trillion dollars nationally which exceeds the credit card debt.

4P3f. Tracking outcomes/measures utilizing appropriate tools (e.g. achievement of goals and/or satisfaction with process)

Tracking success in relation to the outcomes of strategic planning is done by the Institutional Research office, using measures established during the planning process, revisited annually, used by the Board of Trustees as the rubric for evaluating the CEO, and communicated widely and consistently to the all constituencies. Please see attached samples from 2017 fact-book. Access [1](#), [2](#), Success [1](#), [2](#), Resources [1](#), [2](#). More samples available upon request.

4R2a,b,c.

The initiatives stated above are not without major risks for the College, but ones that have a greater return on investment for our region as market analysis shows that for every dollar students invest in higher education at a community college in Ohio, they receive an average of more than five dollars of higher future income. In addition, taxpayers see an average rate of return close to 8 dollars due to taxes paid, less dependence on social services, and more educated and engaged citizens who actively participate in their civic and social responsibilities.

Since 2010 alone, we have served 4,515 unique high school students through some form of early college. These students have “earned” around 63,000 credits saving close to 9 million dollars over the past six years, just in our tuition cost only. If these were 4-year university costs, the dollars would double and triple.

We celebrate this advancement through collaboration with our partners to reduce the skills gap in Ohio that is 20% to 30% less than what employers seek and what potential employees have, to raise the educational attainment, enhance the brain gain, and help people find better job to improve their quality of life.

Financially, within the last 4 years, grant funding has allowed us to do the following:

- equipment for faculty and staff especially in the technology area
- Renovating facilities especially the Kehoe center of excellence
- Three Dimensional printer
- Fabrication lab
- Trio student services
- Automation robotics, in partnership with pioneer career and technology center
- Mobile training unit

- 4 year degree with universities with the third year at our college tuition rate
- Significantly upgrade the IT infrastructure with fiber optics, broadband capacity, online courses and security, Wi-Fi, and cloud hosting
- Title III advising enhancement: what used to be 600 students per advisor is now down to 200 with a considerably more manageable caseload, that is focused on student success

The attached [Efficiency report](#) display a variety of areas where the college has taken significant steps to meet or exceed state requests for collaboration to reduce costs, substantive efficiency in contract costs, and novel solutions for saving money.

412 IMPROVEMENT

As an example of alignment, the Academic Services area utilized the overall college strategic plan, and folded pertinent goals into the academic division's strategic plan, with the most pressing needs that faculty/deans identified including retention of students, the lack of soft skills displayed by our incoming students, and the general craft of teaching as a profession.

Thus, all divisions beginning September 2016 utilized their combined meeting time to address student retention topics. Peers were present, outside speakers were engaged, and group brainstorming were planned to address such issues as, 'how to engage students meaningfully in class, how to deescalate an unhealthy conversation in class, how to maintain healthy boundaries with students, how to foster a sense of responsibility in students, and how to create an environment where the professor is the facilitator, instead of director of student learning.

The college has slowly moved from an unsophisticated network of divisions running at times in direct conflict to a unified whole, adhering to widely communicated, thoughtfully written and established policies and agendas.

While the curriculum was stable previous to the conversion from quarters to semesters, the entire catalog of course syllabi and curriculum worksheets were not housed centrally. While each division had master copies of syllabi, the office of the CAO did not have master control over the most important products the college delivers. The congruity and communication between print material was at times weak, in light of this non centralization. In 2012 the curriculum was centralized into a repository that is accessible by all, on and off campus, locked down so edits must happen in a systematic fashion, on a redundant server, and backed up as an extra protection to an external hard drive daily. Chapter one describes the process for curriculum change in detail, however the improvement to this area also touches upon the efficiency we strive for as an institution. In curriculum there is very little duplication of effort, and the congruence of information given to the students has improved dramatically.

Sources

- Access 1
- Access 2
- Efficiency Report 6.12.16
- Resources 1
- Resources 2
- strategicplan_june2017
- strategicplan_june2017 (page number 2)
- Success 1

- Success 2

4.3 - Leadership

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

4P3: PROCESSES

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

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

4R3: RESULTS

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

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

4I3: IMPROVEMENT

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

Responses

4P3a, b, c.

Establishing appropriate relationship between the institution and its governing board to support leadership and governance (2.C.4) Establishing oversight responsibilities and policies

of the governing board (2.C.3, 5.B.1, 5.B.2) Maintaining board oversight, while delegating management responsibilities to administrators and academic matters to faculty (2.C.4)

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:

- **ENDS-** policies that describe what good the institution will do, for what constituency, at what cost.
- **Governance Process (Ownership Linkage)-** policies that address the responsibility of all board members to consistently gain feedback from the "owners" of the college to accomplish the owner's desired outcomes.
- **Executive Limitations-** these policies are the board's way of telling the CEO the limits of acceptability regarding staff means to accomplish Ends.
- **Board Delegation (CEO linkage)-** these policies deal with the board means that describe the nature of delegation and the proper use of delegated authority.

These categories are addressed every month during the board meetings. Thus, each board member, engages outside constituencies on a consistent basis in order to ascertain the "owner's voice" and then shares the message of how the 'owners' of the institution are perceiving our adherence to our mission, vision, and values.

The CEO, and those he/she designates, or those wishing to speak to the board are given an opportunity every meeting to examine how the ENDS goals are progressing throughout the year.

Executive limitations and CEO linkage policies speak internally to integrity and ethical conduct required by the CEO and the board respectively.

The aims of the strategic planning process are defined by the College ENDS policies. The president's cabinet annually reviews the accomplishments and challenges of the past year's efforts and updates the strategic plan to redirect the efforts for the coming year.

The college has seen dramatic improvement in the last 3 years with communicating our ENDS by simplifying our MEANS.

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. The Carver Model specifies that the President is the sole employee of the Board of Trustees emphasizing the primacy and responsibility of this position. According to the board, "as the institution goes, so goes the CEO," or stated differently "the CEO performance is identical to organizational performance."

4P3d,e,f. Ensuring open communication between and among all colleges, divisions and departments. Collaborating across all units to ensure the maintenance of high academic standards (5.B.3). Providing effective leadership to all institutional stakeholders (2.C.1, 2.C.2)

As was evident in the administration of the 2015 Campus Quality Survey (CQS), inter-departmental communication was the number one issue identified by employees for many reasons including:

1. Communication is complex in that different people interpret things differently based on their

- experience and their type of work
- 2. Not all employees view emails as the primary tool for communication
- 3. Not all committee members understand their roles in the dissemination of information
- 4. Extreme busyness leads to people forgetting to share information

The president made it a priority to address the issue through several new initiatives or enhanced existing ones including:

1. Meetings: Division and department meetings are held on a regular basis throughout the year. Fall Convocation Days and Spring Faculty/Staff Professional Days also provide an opportunity for an exchange.
2. Presidential Open Forums where important strategic information is presented college wide at least twice per year. The Staff and Faculty Caucuses and the Managers Advisory Council share much of the information, and are attended by the president as needed.
3. Printed/electronic newsletters: During Fall and Spring semesters, a bi-monthly newsletter from the president's office is distributed containing the reports from all the departments and their managers. The president, in conjunction with the marketing department, also issues the NCStatement when important information needs to be shared.
4. Correspondence and Email forums: Letters and email messages are common communication vehicles, particularly by committees and project teams.
5. Web sites: Committee minutes on our webpage are used increasingly as a means of updating campus members
6. Reports: Printed and electronic copies of reports are regularly distributed. Some reports represent significant data gathering by the College—for example, the Campus Quality Survey, Student Satisfaction Inventory, Community College Student Engagement Report, employee satisfaction, motivation, productivity, and retention.

The President uses president's cabinet-[which is advised by feedback from all of the college standing committees- to communicate](#), direct and implement the College strategic plan. This group plays a key role in the communication. 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.

The 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.

4P3g. Developing leaders at all levels within the institution

Employees are encouraged to grow in their profession at all levels; from the student services advisors being asked during training to form the 'why' of their involvement in the profession, and adopting their own framework from available research on student advising models; to the allocation of money to create assistant directorships in a number of departments for succession planning; to the college allocation of significant funding for potential leaders to attend local, state, and nationwide leadership summits, conferences, continue their education, or year long leadership group participation. A recent development has been the presentations by department leaders on different professional development topics at the Management Advisory Council meetings.

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

The college has a number of policies that address vision and mission. It additionally 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.

Thus, the institution's process for policy development and currency is the first critical 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 assure the implementation of the process.

From the reporting out at every board meeting as members gather information from the college's 'owners' (community members and local employers) and 'customers" (those who allow us to serve them as credit or non-credit students) to the continual reiteration of the refrain that all decisions must be made 'with the student in mind", the college has shaped a culture from top to bottom that we serve a higher calling: the betterment of the citizens of our communities.

4P3i. Tracking outcomes/measures utilizing appropriate tools

The creation and sustainability of our committee structure as well as our policy review cycle are the tools that helped the college display the best results for the continued focus on governance, communication and consistency.

The policy system establishes an owner and an expert for each policy or procedure who is responsible for its accuracy and relevance to current practices or the establishment of new policies and procedures within a particular area of authority. Progress in this improvement area is measured by total policies and procedures identified compared to the number of those which have been standardized, reviewed for accuracy and incorporated into the new Policies and Procedures (P&P) System.

NC State's P&P Manual is available online to facilitate search and retrieval for users. There is a comprehensive system for reviewing, updating, archiving, and keeping the P&P Manual current and relevant. In addition, the College has established a Policy Review Schedule with a 5-year cycle to assure that all P&P are kept current. Responsibility for the system is housed in the President's Office.

4R3a,b,c.

The impact of leadership in helping the institution act in accordance with its mission is seen through the recognitions by the constituents that the college serves:

1. In 2016, the college was named "Education Organization of the Year" by Ashland Chamber of Commerce
2. In 2017, the Community College Resource Center recognized NC State as one of the first colleges in the nation to take math pathway to scale (statistics, 75% of curriculum)
3. For many years, the board has been asked to present on Policy Governance at the Association of Community College Trustees (ACCT). In 2017, the board was asked to coordinate and present at the pre-conference on Board Governance, with article published in ACCT trustee magazine.
4. Board leadership and transition is collaborative and transparent - as an example, five current and previous chairs continue to serve on the board.
5. The president was awarded an honorary PhD in Community Leadership from Franklin

University, and was ACCT Central Region Chief Executive Officer of the year (2017).

Faculty leadership in fulfilling the mission is evident by the assessment committee taking responsibility for embedding soft skills across the curriculum in response to employers needs.

Fulfilling the mission requires having necessary financial resources. Leading the institution to success is evident through many years of balanced budget, additions to the reserve, and strong state composite ratio of financial viability.

4I3

- The communication disconnect between the three academic divisions was addressed in 2016 when the CAO along with academic council established a common time monthly for the entire academic structure to meet for one hour, just before divisional meetings. As noted previously, this joint meeting has now evolved to a single minded focus on increasing expertise in the craft of teaching and student persistence and success.
- The college has recently promoted a number of talented second in command employees to step into directorships if the need arises, thus ensuring continuity in leadership.
- The manager's advisory council has begun leadership professional development within its monthly meeting time.
- Funding has been provided to train middle managers to take leadership roles, and mentor their direct reports.

Sources

- 12-07 standing committee structure
- Carver manual annual training
- NCSC Policy Process

4.4 - Integrity

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

4P4: PROCESSES

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

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

4R4: RESULTS

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

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

4I4: IMPROVEMENT

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

Responses

4P4a. Developing and communicating standards

The College's board of trustees delegate responsibility for the adherence to all local, state, and federal ethical and legal mandates to the CEO. The college has comprehensive ethical and integrity guidelines within the centralized policy manual available through the college's website. These policies are the basis for all departmental communication of integrity standards.

Ethical standards are communicated across various sectors by various means. As was discussed earlier

in relation to student integrity, the syllabi, the catalog (which is the defacto student handbook) as well as syllabic supplements outline standards and recourse for students who believe an ethical standard has been violated by an employee or a fellow student. The Human Resources Department coordinates the initial orientation for all employees which includes review of legal guidelines, ethical standards and policies.

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

Training for employees in relation to ethical and legal standards happens both formally and informally, in an aggregate manner during college-wide and departmental meetings. However, violations of conduct related to integrity are mostly dealt with in a formal manner as they rupture a key component of trust. Thus documentation is normally the first step to any willful integrity violation. Employees are made aware of the seriousness with which the college approaches the breach of that trust.

Integrity violations that are less clear or unintentional, are dealt with by verbal warnings that are recorded in the VP office of the division/department involved. Additionally all infractions are noted in employee permanent records.

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

The board has an ethical code of conduct policy (#0230, #1103 paragraph e) for its members complying with the Attorney General requirement and receiving, with the president, annual training on such topics as conflicts of interest, public contracts and nepotism, gifts and things of value, confidentiality, and post term restrictions. Also, 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.

NCSC abides by all federal guidelines for conducting ethical financial operations. Independent audits are conducted annually. The College has had no audit findings for the reporting period, and all reports are available to the public. All policies, handbooks, 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 as well as an annual legal symposium provided by the Ohio Attorney General's office.

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

NCSC displays the regional accreditation documentation on the website. This is the dynamic link created by HLC in 2015. Additionally all fees are documented on the student interface of the SIS system, as well as printed while students are registering on campus. Additionally, ISBN numbers 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. Additionally, the college displays these program costs, updated annually on our website.

4R4a,b,c.

- Audits-[2012](#), [2013](#), [2014](#), [2015](#) [2016](#) These audits display NCSC's continued integrity in matters of fiscal compliance.
- Beginning in 2013 all materials related to defacto contractual materials (handbooks, guides, addendum to syllabi etc.) that govern or describe the relationship of the institution with its 'customers' whether they be students, community members, or employees is submitted to the institution's assigned general counsel through the AG's office for the State of Ohio.
- [Screen shot of JFS site](#) and [Program Details](#)- these materials are updated annually to create transparency for all potential 'customers', and also available on our website.
- [IRB decision tree](#)- This is an extensive, easy to use decision tree available to all employees and students to evaluate the need to submit any research to the institution's IRB. However, common practice on campus has evolved to the point where any faculty, student, staff, or external researcher considering any type of survey, or research, routinely contacts the chair of the IRB prior to proposing any activity that remotely deals with human subject research.

4I4: Improvements

- The college has isolated several areas needed for improvement, with some having been implemented to enhance transparency and model ethical behavior throughout the institution.
- Detailed program costs are displayed on our website and updated annually, however, while students can look at an itemized bill after they have registered- on our ellucian go app, or through the website; potential students can only see our best annual approximations of the costs. The college believes it is ideal to have a dynamic interface for potential students to see specific data directly from our student information system. This is a topic for discussion, along with the current placement on the website of the cost information, which is adequate, but not as user friendly as the college would like to be.
- Additionally, our Tuition Freedom Scholarship (TFS) program has brought this issue to the forefront, in that a number of TFS students and parents have been surprised that there are other costs, beyond tuition, that are associated with their courses. Lab fees in some courses are minimal, but health sciences and IT/Networking program fees can be substantial. Thus providing detailed itemization for students/parents before they have committed to the college is needed.
- An improvement that has been in place for several years has benefited the college in several ways. This is the automatic submission of a number of materials; whether handbooks, policies, small contracts, memos, etc. to the Ohio Attorney General's office for review before implementation.

This practice has:

1. protected the college legally on a number of occasions.
2. protected the college from any hint of lack of transparency.
3. modeled needed transparency and due diligence in terms of ethical and legal boundaries, for all managers.

Sources

- Carver manual annual training

- North Central State College 2013 Audit
- North Central State College 2014 Audit
- North Central State College -2015 Audit
- North Central State College -2016 Audit
- NorthCentralStateCollege 2012 Audit
- PowerPoint-for-IRB
- WIET - Training Provider Program Detail
- WIET - Training Provider Quick Search Results

5 - Knowledge Management and Resource Stewardship

5.1 - Knowledge Management

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

5P1: PROCESSES

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

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

5R1: RESULTS

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

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

5I1: IMPROVEMENT

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

Responses

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

The institutional research director coordinates the overall processes for knowledge management in relation to strategic planning and improvement.

Selected, key employees from IT/IR have direct access to the college-wide information systems which yield the salient data for decision making. Additionally, the IT department provides support through a [tickets system](#) by which data can be requested from individual departments. However, it must be noted unexpected data requests from individual departments, that do not seem to tie to strategic planning, or have the appearance of immature data requesting, are informally vetted through the IR office.

Data integrity is ensured by the coordination of IT/IR offices and any inconsistencies are normally caught quickly through consistent review, and are rectified immediately.

The college utilizes the following systems and data custodians to manage daily operations in relation to data needed by units

- Registrar – Student records, Elucian Colleague
- Controller's Office – Financial Transactions, Elucian Colleague
- Financial Aid Office – Financial Aid, Elucian Colleague
- Admissions – Enrollment Management to Initial Registration, Elucian Recruiter CRM and Colleague
- Student Support Services – Placement Assessment, Advising, Disability Services, Tutoring, AdvisorTrac and TutorTrac management software
- Academic Services – Assessment Data; Canvas LMS and SurveyMonkey
- Institutional Research – External Data; Proprietary (eg, EMSI, SurveyMonkey) and free (eg, Ohio Higher Education Information Database) databases and services

Data custodians are responsible for collecting and supplying operational data, and are associated with the organizational unit vested with the operational responsibility for the data.

It is important to consider information infrastructure, or the predominant style of designing and maintaining the structure of information. One goal of the institutional research office is to provide adequate distributed data to decision makers through a frozen data warehouse.

The college has made substantial improvement since the 2012 appraisal feedback report in this area, specifically through increased collaboration between Institutional Research and Information Technology. With years of experience performing IT database functions, in 2014 the college IR data analyst was promoted to IT Systems Manager.

IR and IT have improved collaboration to not only more efficiently respond to requests, but have become more proactive in data management. For example, the two departments resolved a long-standing issue of efficiently identifying former dual credit students who re-enter the institution for the first time after high school – a key cohort variable. Another example of this collaboration would be the IR/IT work to maintain and update an internal database for research when the external reporting requirement of longitudinal data expired for Achieving the Dream colleges.

The college is still evolving toward the ideal, systematized data management approach noted for improvement in the 2012 Systems Appraisal feedback in reference to 7P2. However, even with the

improved IR/IT collaboration, the analyst position in IR was not replaced, thus contributing to capacity challenges. Additionally there are still too many disparate databases outside of the Ellucian system that have to be manually joined together for certain reports by IR.

And while IT has increased the quantity of customized reports to end-users, they largely rely on live data as the college still lacks an integrated warehouse of frozen data. However, IT has created smaller frozen data sets for use by IR from term-based enrollment files and longitudinal [Achieving the Dream cohort data](#).

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

IR works with a myriad of units across campus to identify salient, contextualized data for decision making.

- President, who invests significant time in defining not only [high-level metrics](#) to fulfill board ENDS policies, but also cascading [MEANS metrics](#) closer to the operational level. These metrics are reviewed annually in preparation for the spring strategic planning cycle. The President is particularly interested in showing historical trend data for a metric, as well as benchmark comparisons against similar colleges statewide and nationally.
- CAO, who advises in developing criteria and measures for the state-mandated "[Completion Plan](#)" due every two years, as well as [low enrollment courses](#) prior to semester start-up.
- CFO, who advises in developing metrics related to state-mandated [Efficiency Report](#), and financial planning and analysis linked to annual strategic planning.
- Deans, who advise in metrics to assist with [academic management efficiency and success](#).
- Assistant deans and academic program directors, who advise on ensuring schedules and [labor market information](#) accurately reflect the program.
- College committees, especially those geared toward [student success and enrollment management](#). Meetings often results in ad-hoc requests.
- Grant and program managers at the college, who may require [unique metrics](#) to meet reporting requirements.
- Program review "clients": while there are [established metrics](#), a department may suggest an [alternative metrics](#) especially in departments with fewer standard measures.
- External sources. The college receives [data "coaching"](#) through both Achieving the Dream and a student success grant from the Ohio Association of Community Colleges.

It is important to note that given the wide variety of reporting requirements, data requests and users, the IR Department attempts to consolidate metrics as much as possible. For example, much of the data gathered during the annual strategic planning cycle is repurposed for program review, grant support and other uses.

In addition, IT works directly with end-user departments to create custom reports using SQL Reporting Services. The systems manager considers the end-user needs and proposes the variables for helpful real-time reports. For example, the IT department recently [created a series of reports](#) to assist college advisors as they move to a case management model.

The college has improved processes suggested in the 2012 system's appraisal report, 7P2, 3 & 5. Most importantly in the selection of benchmark information. For example, IR has developed approximately [10-12 "fact sheets"](#) of operational MEANs data for spring strategic planning that are front and back. Most of the back pages of each sheet contain various measures comparing to similar size Ohio peer colleges. Further, the college continually improves its process for refining metrics used

in its review cycle of academic programs and administrative departments. For example, the academic reviews attempt to provide a [360-degree snapshot](#) of enrollment/access drivers, student success drivers, labor market demand, assessment outcomes and financial/productivity measures.

5P1c. Making data, information and performance results readily and reliably available to the units and departments that depend upon this information

NC State decision makers receive data in three primary ways:

- Regular static reports used contextually for decision making, planning,
- Live reports drawn directly from online reporting systems
- Ad hoc requested reports

The following charts list [key reports and players](#) for the first two categories.

In 2012, the college purchased software for an online ticketing system available through a standard “myservices” weblink. The system provides tickets for numerous support services including a data and research queue. The system allows the end user to describe key information sought through a series of drop-down boxes, as well as narrative explanation. The end user assigns a priority level, due date, whether the request is a repeat, and the preferred analyst to complete the request.

IR and IT have shared access to the queue and regularly analyze the complexity of tickets. IT generally handles simpler requests such as lists, while IR generally takes requests requiring data manipulation. Further, IR itself is a power “requestor” of tickets to IT. As part of the ticketing process, there is often follow-up with the requestor for clarification – a step that IT itself has begun taking to ensure delivery of expected data.

Since 2014, the IR department has been allotted 4 hours at spring planning day to present data gleaned from the [“fact book” of MEANS](#) data intended for unit managers. The design of the fact book itself allows for highlighting of charts and narrative for the most critical trends. Moreover, the IR Director provides a separate presentation highlighting in detail his analysis of these trends to the board, the president and vice presidents, and follows up with key managers such as academic deans.

While many positive changes have been enacted since 2011, improvement in further giving context to the planning data throughout all departments on campus, would help more end-users better understand data. To that end, the college is investigating professional development based on a concept from [Western Technical College](#) on comprehending data for program review.

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

Much of this area has to do with the revamp of IT operations beginning in 2012. North Central State College (NCSC) has implemented an off-premise solution with Ellucian for its data center that handles its student information and organizational data. NCSC assessed its information technology state in year 2013, both in terms of infrastructure and staffing resources, and it was deemed insufficient to provide the computing power, disaster recovery, system support, and monitoring required to maintain an information system performance at acceptable levels. Application hosting and application management services were determined the most viable options to ensure the continuation of critical day-to-day system operations, backup, and protection of the organization’s data.

The data centers used by Ellucian are designed with security, accessibility, scalability, recovery and

reliability. These areas are validated by an annual SSAE 16 audit conducted by a nationally recognized, independent auditing firm. NCSC has started implementing a plan for its file directory and network services servers outside of Ellucian. We are in the process of replicating these systems at a separate College owned facility seven miles from the main campus.

Internal processes driven by IT to ensure reliability and security of knowledge management systems include:

- Monthly meeting of ERP “Power Users” facilitated by IT. Attendee offices include: Controller, Registrar, Student Services, Human Resources, Financial Aid, Academic Services, IT.
- Documented policies ensuring [password security](#) and restrictions on [wireless access](#).
- Policies requiring all new employees to sign a form [regarding handling of restricted information](#), and requirements for supervisor and human resource sign-off to access restricted data on the ERP system.
- [Various audit and exception](#) reports developed by IT to help end users find data errors.

Consequently, the college has followed up opportunities identified in the 2012 appraisal report for 7P7, through actions of the IT Department. But there remain numerous process risks to data reliability, especially at the data custodian level. The general problem tends to be lack of data standardization, which can result in confusion about what is stored, where it is stored, when it was stored and why it was stored. For example, academic program coding continually changes at the data custodian level, requiring IR to employ a “re-coding” system in order to consistently report data – especially over multiple terms.

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

The college’s processes for tracking outcomes related to knowledge management need further organization. The ticketing software does have a relevant open/close dates as well as a brief customer satisfaction survey. However it does not provide a strong “back end” to pull out aggregate tracking for the data/research queue, due in part to the college combining several service queues within the system. The IR Department does file a report every two weeks on activities, but the nature of these reports is subjective.

The most effective measurement tends to come from wider stakeholder surveys such as the Campus Quality Survey conducted every three years and a new capacity survey that is part of Achieving the Dream. Moreover, both [IR](#) and [IT](#) do self-studies every three years as part of the program/service review cycle.

5R1 a, b, c.

Data management, its strategic use, and performance results are accomplished through internal as well as external (statewide and national) assessments.

Internally, the program review process of both academic and non-academic programs and department has caused the creation and review of necessary data and focus on outcomes by both the review committee and the program/department in question. This has led to continuous improvement of services, better decisions on human and fiscal needs of programs, as well as the reductions of some courses and programs.

Statewide, the depth of data needed to produce the state efficiency reports has allowed the college to

realize efficiencies on: health care costs; technology through procurement of copiers, bandwidth, software etc.; administrative and operational services (energy, plant maintenance, custodial, child development center...) especially in working with our co-located campus; and textbooks. Similarly the development of the completion reports caused the institution to delve deeper into the data to enhance student access and success through partnerships with high schools and businesses, and the establishment of pertinent policies and procedures to align the human and physical resources.

Nationally, and more recently, the college participation in [Institutional Capacity Assessment from Achieving the Dream](#), has allowed national comparison to other institutions on multiple fronts. The online self-assessment taken by 47 college stakeholders in 2017 provided aggregate ratings on a 1-4 scale of increasing capacity. For the subsection on "Data and Technology", NCSC achieved a 3 rating compared to a national average of 2.8. Especially high were questions related to "Culture of Evidence". Administrative Services had the highest rankings (3.1), followed by Academic Affairs (2.7) and Student Services (2.5).

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

In response to feedback from 2012, specific to 7P1, the college is making progress in this area, through its ticketing system. But the college is also seeking ways to be more proactive in data delivery. For example, the college is implementing a scale-up of its College Student Inventory tool that predicts student risk factors based on a normed survey taken by students. The college intends to expand the pool of students taking this survey and offer it possibly before they even register for their first term. This would allow for more proactive student service matching as early as possible. A key step in this process is IR efficiently providing only the most critical information back to advisors. The IR Department presented this progression of data maturity at its 2016 program/service review. The arrow marks where the department saw itself on this continuum.

While the college has started a [predictive analytics process](#), one key observation from the program review was that it had yet to achieve capacity in terms of diagnostic analytics. The department concluded that it should invest the majority of its time in achieving this next step before going further. Moreover, the department noted a need to improve the domains of data dissemination to appropriate stakeholders and closing/widening the loop to ensure that decision-making is translated into action and action is widely evaluated. The department provided several interim goals, one of which it delivered upon in late 2016 when it provided [2-page graphic summaries](#) of key data gathered for program review for each academic department.

Other key areas for improvement include:

- Moving towards a centralized data administration infrastructure with the long-term goal of distributed data management;
- Continue to refine metrics at both the ENDS and MEANs level, especially re-purposing metrics for various reporting needs;
- Continuing to increase reliance on manipulated regular reports and Report Manager reports as opposed to ad hoc queries
- Working with data custodians to continue improving data standardization; and
- Improving the tracking systems for outcomes, especially if programming is possible to pull outcome data from the ticketing system

Sources

- Advisee CSI Summary
- Course Section Analysis 8.28.2017
- Data Ticket Example
- Deans Management Files
- ENDS Metrics Major KPIs
- Exception Reports
- Fact Book 2017
- Financial Aid Program Review
- FY17 Efficiency Reporting NCSC Final 2017
- HMSV Program Review 2017
- ICAT Results Summary_North Central State College.pdf
- Information Technology Services Support Review 2015
- IR Support Service Review 2016
- NC State ATD Summary 2017
- NCSC_Completion_Plan_2016-25_certified
- New Employee Security Policy 19-32a.pdf
- Password Policy 19-42.pdf
- Predictive Outcomes 1.24.2017
- Program Labor Market Sample
- Program Review Computer Information Summary
- Section_5_Charts1
- Spring Data Presentation
- SQL Reporting Services Folder
- Summer Research Study 7_9 Howard
- TAA Annual Performance Report
- Three Stages of Info Management
- Western Technical College
- Wireless Policy 19-24.pdf

5.2 - Resource Management

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

5P2: PROCESSES

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

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

5R2: RESULTS

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

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

5I2: IMPROVEMENT

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

Responses

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

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

5P2c. Allocating and assigning resources to achieve organizational goals, while ensuring the educational purposes are not adversely affected (5.A.2)

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.

At the strategy forum in Lisle, Illinois in February, 2013 the College outlined a resource allocation process which, while later modified, contributed to the alignment of resources toward the strategic goals of student access and success, the north star for all planning. The following human, fiscal, physical, and technological processes and resources are currently used to ensure stewardship and effective management of the institution.

Human:

One way of maximizing resources is the cessation of automatic funding of positions when vacancies occur. All positions, short of the presidency are re-examined for relevancy and possible restructuring.

Faculty/Staff/Administrator provide human resource need input which is folded into the discussion in planning. This input into all aspects of strategic and operational planning has helped greatly in informing president's staff of the very real needs 'on the ground' while allowing a more focused application of human resources to areas of high strategic importance.

For example, upon the retirement of the vice president for Institutional Advancement, the government relations portion of her duties were added to the director of grant development. Furthermore the public relations duties were assumed by the director of marketing. Additionally, the NCSC Marketing office has assumed media planning and public relations for the Mansfield branch of The Ohio State University, saving state dollars through shared services.

Fiscal:

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.

For 3 weeks, the CFO and Controller met with every budget manager on campus to clarify needs, compare department budget trends from the previous three years, gain feedback on important strategic budget lines.

When all interviews were complete, the CFO and Controller worked to create a draft budget, where they strategically prioritized requests, and analyzed them with the president's staff who communicated with their direct reports to clarify any issues.

Finally, when allocations were decided upon, a college-wide open forum was conducted. The original requests for essential operations allotments were 10% over the resources. A second round of interviews were conducted to build more trust between the departments and the CFO's office. This allowed for clarity on what constituted 'essential operations' budgeting, and allocations were shifted, and budgets were deployed.

Since that time, the 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. However, State funding in Ohio has moved to a 100% success model and the allocations are not as stable or easily predicted. Thus, there is very little

'organizational slack' for new innovations, all allocations are centered on current mission/vision needs.

Most innovations at this stage are funded by temporary or long term grants, with very 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 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.

Physical and Technological

In light of the institution's shared facilities with the Mansfield Branch of The Ohio State University NCSC's president's staff, and OSU's shared services team meet monthly. At each meeting, budgets, equipment needs, utility usage, technology infrastructure (such as campus bandwidth), security, priority list of facility maintenance, and or upgrades are discussed with information provided from appropriate offices from each campus. This has been a stable process for both campuses to evaluate infrastructure needs in light of each institutions' mission for the counties served by each campus.

5P2d. Tracking outcomes/measures utilizing appropriate tools

The outcomes are measured by the physical accomplishments and the dollars generated or spent as shown in the results section below.

5R2a,b,c. What are the results for Resource Management?

As a result of strong management of fiscal, physical and technological resources, the accomplishments over the past several years are as follows:

In 2010 the college employed a grant writer part time, this position became full-time in 2012 at the level of director of grant development. In alignment with our strategic goals the grants obtained have allowed NCSC to offer services for our students which previously were impossible for an institution of our size. In the past 5 years, the college has been awarded more than \$16 million in state, federal, corporate and foundation grants. Prominent among them:

- U.S. Department of Labor Trade Adjustment Assistance Community College and Career Training grant to fund robotics and advanced manufacturing equipment and training. **Funded for \$2,906,345 over 3 years announced in September 2013.**
- Ohio Board of Regents (OBR) Workforce Development Equipment and Facility program for Fab Lab, CNC and Robotics training equipment. **Funded for \$264,877 in April 2014.**
- OBR for a Targeted Workforce Development Expansion grant for **\$1,528,847** for improvements to Kehoe Center including boilers, chillers, control panels, elevators and fire alarm controls and a mobile training center announced in July 2014.
- U.S. Department of Health and Human Services Early Head Start grant for the Child Development Center. **Funded for total of \$2,374,245 over 5 years announced July 2014.**
- U.S. Department of Education Title III grant focused on intrusive advising across the college continuum. **Funded for \$2,008,509 over five years announced September 2014.**
- Ohio Board of Nursing awarded **\$200,000** through the Nursing Education Grant Program to fund LPN program growth in July 2015.

- U.S. Department of Education TRIO Student Support Services grant totaling **\$1.1 million** over 5 years announced August 2015.
- Ohio Department of Education grant to provide tuition and books for teachers needing to attain graduate credits to teach College Credit Plus courses in local high schools. **Funded for \$431,049 in December 2015.**
- U.S. Department of Agriculture Distance Learning and Telemedicine grant program grant for distance learning equipment for the Kehoe Center and four area school districts. **Funded for \$248,649 in January 2016.**
- Ohio Department of Higher Education RAPIDS grant for cyber security and advanced manufacturing equipment. **Funded for \$150,000 in April 2016.**

The college has balanced the budget and continually added to the reserve (currently at 20%) over the past 4 years, and maintained a clean audit over the past 14 years.

Physically and technologically, through multi million dollars expenditures we have upgraded and renovated the following for our students and employees:

- smart classrooms, computers, software, cloud storage, broadband, fiber optics, wireless, new Voice-over-Internet Protocol (VOIP) phone system, and security cameras
- Kehoe building entrance, reception area, and the web conferencing high-tech learning center
- Kehoe infrastructure fire alarms and elevators
- The purchasing and operation of the mobile training unit
- Kee Hall building one-stop for our students that now includes admission, advising, registration, career orientation, financial aid, testing, and the cashier office in one area
- A new IT Data Center was created to replace the existing data Center that had inadequate power, inefficient air conditioning, lack of redundant UPS power, and lack of fire protection which posed a risk of data loss.
- NC State in 2014 began an Energy Conservation Project for the Kehoe Center. The project was completed in 2016 reducing energy consumption by 24%.
- The industrial technology lab relocation and renovation from the basement to the second floor of the Kehoe Center
- The relocation of the IT department and the servers in the Fallerius building
- eLearning "Test Kitchen" technology training room for faculty

5I2: IMPROVEMENTS

- The college has operated in an environment of scarcity of financial resources due to lack of unrestricted revenues, and the flexibility they provide, from tuition and state support. This placed the institution in the position of constantly balancing the efficient operation of our mission critical components, the protection of our small reserve for emergencies, and seizing upon opportunities for innovation. Thus we have been forced to rely heavily, as displayed above, on grants. While we have been fortunate, and we are cognizant that all grant funds are restricted, and funded innovations must meet their goal before the grant expires, or be subsequently embedded into the institutional framework and general budget. As a result, we still find ourselves chasing grant dollars that at times, though congruent with our mission, stretch our human resources very thin. A focused discussion of good grants vs. ideal grants is overdue. Thus, we have agreed to participate with a new OACC (Ohio Association of Community Colleges) initiative as a partner with Lorain County Community College to pilot an "initiative agnostic" tool to examine the benefit of applying for various grants, and participating in the plethora of student success initiatives available. This is designed to focus our resources on initiatives that will yield the best return on investment. We will then be co-

presenters at a state-wide CAO/CFO meeting in relation to our findings.

- One of the dramatic improvement in information technology since the last portfolio is the central budget primacy of the IT department. Our students no longer consider PowerPoint, Wi-Fi, and the learning management system to be special technology, rather the platform to deliver education. The committee structure has afforded IT and the E-Learning and Innovation (ELI) departments to innovate; with input from their 'customers' the faculty, staff, and students; and take our system to the cloud. However, the ERP system company promised an ROI on our customer management system that has not come to fruition, while more training is needed for our employees. Furthermore, and as much as we have spent on technology, our students are demanding further improvements in lab equipment as indicated in the SSI survey results.
- Facility and information technology infrastructure has become intertwined and both college departments have worked closely together to dramatically improve our campus and meet the educational needs while stretching dollars from state capital budgets and grants.

The facility department and committee, through brainstorming and sheer physical labor, have developed and implemented construction and maintenance plans; renovated building and classrooms; brought students services into one building to make it one-stop for students; collaborated with OSU-Mansfield on shared maintenance services; and enhanced the safety on campus.

The information technology department and committee have worked hard to review and recommend the campus information technology direction; work on improved and effective integration of technology of hardware, software, wireless, and broadband capacity for academic, student services, and business processes; advocate for technology needs and educate the College community on technology plans and utilization; research emerging teaching and learning technologies in collaboration with the Distance Learning Committee; resolve Canvas Learning Management System issues; and develop related policies and procedures.

Sources

- 2016-efficiency-advisory-committee-report_FINAL_011317
- 2016-efficiency-advisory-committee-report_FINAL_011317 (page number 20)
- 2016-efficiency-advisory-committee-report_FINAL_011317 (page number 21)

5.3 - Operational Effectiveness

Operational Effectiveness focuses on how an institution ensures effective management of its operations in the present and plans for continuity of operations into the future. The institution should provide evidence for Core Component 5.A. in this section.

5P3: PROCESSES

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

- Building budgets to accomplish institutional goals
- Monitoring financial position and adjusting budgets (5.A.5)
- Maintaining a technological infrastructure that is reliable, secure and user-friendly
- Maintaining a physical infrastructure that is reliable, secure and user-friendly
- Managing risks to ensure operational stability, including emergency preparedness
- Tracking outcomes/measures utilizing appropriate tools

5R3: RESULTS

What are the results for ensuring effective management of operations on an ongoing basis and for the future? The results presented should be for the processes identified in 5P3. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared. These results might include:

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

5I3: IMPROVEMENT

Based on 5R3, what process improvements have been implemented or will be implemented in the next one to three years?

Responses

5P3a. Building budgets to accomplish institutional goals

Budgets are created by each department with input from all constituents. All departments are asked to prioritize their budget requests in alignment with the mission of student success or access.

Every February each manager is sent a spreadsheet which contains information about their department's previous budget, the assumed budget going forward, and categories for prioritization and alignment. Budget managers are asked to gain input from their direct reports, and communicate with their respective Vice President. These annual budget requests are vetted by the president's staff. Please see [5P2c](#) for details.

5P3b. Monitoring financial position and adjusting budgets(5.A.5)

Monthly, the Board of Trustees monitors our financial status ([see most recent](#)) including revenues, expenses, reserve, cash flow, and comparison to previous years. Every 6 months, the CFO, his staff, and the president's staff review current budget surplus or shortfall going into Spring Semester for necessary adjustments. Surplus has been used to replenish reserves. As indicated in chapter 5.2, the College has maintained a viable fiscal standing based on state standards with a strong composite ratio of 4.2 out of 5.0, balanced budgets, an average reserve (19.7% currently) that is being increased annually.

5P3c. Maintaining a technological infrastructure that is reliable, secure, and user-friendly / Maintaining a physical infrastructure that is reliable, secure, and user-friendly

Please refer to chapter [5P2c technology and infrastructure](#) in relation to the technological and physical infrastructure details.

One of the struggles we face as an institution is the abundance of space. This is due to having less traditional students on campus, more dual-enrolled students at the high schools, and less adult students due to the improved economy, while doing more online courses. This has caused a re-evaluation of vast amounts of campus space. Despite that, the facilities department has kept expenses for upkeep, maintenance and utilities under control.

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. This agreement provides a cost savings for the College with regards to internet bandwidth cost and OSU with regards to rack space cost for all CPE (Customer Premise Equipment) components.

5P3d. Managing risks to ensure operational stability, including emergency preparedness

Like other institutions of higher education, the College faces three main risks: human, financial, and cyber.

The human risk is about the safety of our students and employees. As a co-located campus with a regional campus of OSU at Mansfield, we have a shared services steering committee that collaborate on campus operations. The commissioned police officer leads a security force that maintain safety on campus for both institutions. He has also been instrumental in bringing OSU vast resources to practice addressing potential risks to the campus including: active shooter on campus and natural disasters such as tornadoes. This past year, the college has also partnered with Mansfield Sheriff's office - SWAT team for that purpose.

We also partner with OSU-Mansfield in the Crisis Assessment Team which consists of the college CAO, the police officer, specialized services staff, the on-campus clinical counselor and the Director of student services for OSU. This team meets consistently to evaluate any risk of human behavior to the campus. Information about suspicious activities is shared, possible interventions are planned, and the team attends various crisis training seminars.

A crisis management team has been established on campus made from key administrators. An emergency operating procedure has been developed and distributed to all employees and posted on

the college website.

The financial risk is mostly due to drop in full-tuition paying students. The college has been very diligent in compensating for that through multiple processes:

1. persistent pursuit of strategic grants (please see chapter 5.2)
2. determined quest of cost management
3. tireless seeking of scholarships for students

With regard to cost management, and through continuous review of cost drivers and processes, the college has managed to save millions of dollars over the past few years as indicated in our **Efficiency Report** that is a state requirement, including:

1. Joining the Council of Governors health care system that saved the college several hundred thousand dollars in each of the past few years, and reducing the rate of increase to single digit (versus double digits the years before).
2. Changing the business model of the child development center a couple of years ago to include private clients
3. Being diligent in not automatically replacing full-time positions unless they meet the strategic needs of the institution
4. Savings from contract with the co-located campus of OSU-Mansfield and consolidating multiple services
5. Leasing the campus available space while partnering with other universities to deliver baccalaureate degrees on campus

The cyber risk is related to the cyber security attacks that has left even our federal government vulnerable. Our IT department continues to be vigilant in protecting against cyber security issues by tightening access to servers, establishing back up servers at other locations to maintain business continuity, and training and vigilantly alerting employees against "phishing" attempts.

5P3e. Tracking outcomes/measures utilizing appropriate tools

The outcomes are measured by the mitigated human, fiscal, and cyber security risks indicated in the results below.

5R3 a, b, c.

The College balanced the budget for 4 consecutive years (2012-2016) without borrowing from the primary reserve, which has increased from 5.5% to 19.8 % over the same period. We have also increased the Ohio Department of Higher Education composite ratio from 2.7 to 4.0, The most recent composite ratio that is available for community colleges [FY 16](#) statewide is at [3.44](#).

As is displayed in the five independent **audits from the submission, (2012, 2013, 2014, 2015, 2016)**, of the last portfolio, the college has been consistently given a solid assessment of fiscal stability, despite the turbulence caused by the reduction in funding from the state, the plummet of enrollment after the quarter to semester conversion, as well as the loss of non-traditional age students when the economy strengthened.

With regard to cyber security, and through the diligence of our IT department, we have managed to

avoid a detrimental attack.

5I3: IMPROVEMENT

Based on 5R3, what process improvements have been implemented or will be implemented in the next one to three years?

- The information technology and facilities department were charged with, and successfully completed, an operational integration of the two departments. While still managed separately they currently work in conjunction on almost every project.
- Despite the state funding being focused 100% on student success (instead of access) and shrinking state funding resources, we have improved our financial standing and we were able to provide our employees with higher raises. With regard to the reserve, we are still working on further improvements as we are behind many of our peers, yet substantially more solvent than we were in 2012.
- In terms of safety training, the training described above will be repeated in Spring 2018, however it will involve more in situ training. There has been some discussion about closing a building off to all non employees, and using blank police training pistols to orient employees to the sound of gunfire in a building largely constructed of concrete blocks.
- Plans are in place to increase wireless access on campus, systems to notify all building/offices of a threat on campus (besides the already instituted Buckeye Alert), and an increase in security cameras.

Sources

- 1-10-17 MOU NCSC OSU bandwidth sharing agreement - Final
- boardpackage102517
- Efficiency Report 6.12.16
- Efficiency Report 6.12.16 (page number 2)
- Efficiency Report 6.12.16 (page number 21)
- Excerpt 5P2c technology and infrastructure
- Excerpt from 5P2c
- Fall_2016_Convocation_Presentation
- Fall_2016_Convocation_Presentation (page number 17)
- FY2016_TABLE1_FIN-RATIOS_Excluding-GASB68
- North Central State College 2013 Audit
- North Central State College 2014 Audit
- North Central State College -2015 Audit
- North Central State College -2016 Audit
- NorthCentralStateCollege 2012 Audit

6 - Quality Overview

6.1 - Quality Improvement Initiatives

Quality Improvement Initiatives focuses on the Continuous Quality Improvement (CQI) initiatives the institution is engaged in and how they work together within the institution.

6P1: PROCESSES

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

- Selecting, deploying and evaluating quality improvement initiatives
- Aligning the Systems Portfolio, Action Projects, Comprehensive Quality Review and Strategy Forums

6R1: RESULTS

What are the results for continuous quality improvement initiatives? The results presented should be for the processes identified in 6P1. All data presented should include the population studied, response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared.

6I1

Based on 6R1, what quality improvement initiatives have been implemented or will be implemented in the next one to three years?

Responses

6P1a. Selecting, deploying and evaluating quality improvement initiatives

Who is Involved in CQI Decision Making

Since the 2008 national fiscal crisis and the subsequent reduction in state funding for enrollment, and more importantly the transition to a 100% success funding model, the focus of the college has narrowed to three objectives; enhancing student success, increasing student access, and providing necessary resources. This streamlined strategic focus, which has as its foundation the primacy of continuous improvement, is embedded in all of college decision making processes from academic program creation, transition, or closure, to filling human resource vacancies, allocating budget dollars for facilities and IT infrastructures, to participation in grants and community projects.

The president's cabinet is the shared governance executive planning team on campus with representation from all constituents and committees. All standing committees on campus report to the president's cabinet monthly and all chairs of the standing committees are given an opportunity to

provide input on all policies, strategic shifts, and improvement projects. These standing committees have clearly articulated charges, which are often read at the beginning of committee meetings. These charges were created in concert with the committee members, the president, and the president's cabinet.

The President's cabinet is also the college's overall mission planning and CQI body and its charge is to align all College activities to achieve the mission and the goals of the strategic plan, oversee the College's policies and procedures, assure continuous improvement and accreditation, enhance communications among the College divisions, and advise the president.

The membership roll [attached](#) displays the integration of leadership from all of the committees below and the impact of committee decisions in relation to the strategic direction and quality improvement activities at all levels.

Committees/Charges

The Student Access and Strategic Enrollment Management Committee, whose charge is to develop and oversee implementation of strategies, systems, policies and procedures for increasing enrollment, while supporting the goals of student success and completion committee.

The Student Success and Completion Committee whose charge is to develop and oversee the implementation of strategies, systems, policies and procedures for increasing student completion, while supporting the goals of the student access and strategic enrollment management committee.

The Curriculum Committee with the charge to offer support to all curriculum changes at the College, including addition, deletion, and degree requirements, and uphold curriculum compliance, quality and integrity.

The Institutional Service and Program Review Committee with the charge to evaluate: viability of academic and student services programs/departments, academic support and administrative offices for mission congruence, fiscal stewardship, and interdepartmental integration and efficiency.

The Assessment Committee with the charge to advise and assist the academic departments as they develop and implement their general learning and program outcomes and assessment plans; and document and communicate assessment processes and results.

The Fiscal and Physical Resources Committee which focuses on matters related to budget, grants, foundation, and facilities with the objective of increasing revenues, enhancing efficiencies, reducing cost, and improving space utilization.

The Information Technology Services Committee whose charge is to review and recommend the campus information technology direction, capabilities and strategic objectives; oversee work on integration of technology to improve the IT infrastructure of hardware, software, wireless, and broadband capacity; advocate for and educate the College community about technology needs and accomplishments; and develop related policies and procedures.

Finally the E-Learning and Innovation Committee whose charge is to oversee and support initiatives related to the development of learning and teaching technologies, distance learning online and hybrid, including Quality Matters; develop policies and procedures, and coordinate related professional development activities; pursue grants to support faculty innovations.

The Process

The president's cabinet meets monthly. It is in these monthly meetings that the president and his vice presidents brief the cabinet on their perspective of all projects on campus, and in turn each standing committee team member is requested to give input on significant issues within their area. All cabinet members are afforded the opportunity to include items to the agenda.

During these meetings policies and procedures are updated/created, and quality initiatives are discussed. Assessment data from internal and external sources are presented and discussed (SSI, CCSSE, Campus Quality Survey, Strategic Planning Surveys, AQIP System's Appraisal). Department or division issues that have strategic impact are brought forward, and strategic decisions are placed before the cabinet for voting. It is the responsibility of all members to disseminate information to each of their committees. To assist in this process, a bi-weekly newsletter is published college-wide that includes updates from every department.

Evaluating Our Efficacy

The college, by means of focus groups, instant clicker polls, in-service surveys, department meetings, annual strategic de-briefing and planning meetings, community wide meetings etc. performs consistent internal evaluation of its efficacy in meeting the goals of student success/access, resource management and valuing employees. However, whenever appropriate the institution will use any available external measure for the evaluation of the College's efficacy in achieving its mission. Thus the college participates in CCSSE, NCCBP, Noel Levitz SSI, Campus Quality Survey, AACC, ACCT, CCRC, ATD, program accreditation, SSLI, etc.

Accreditation/CQI Embedded

One aspect of involvement that displays commitment to AQIP is to have the Accreditation Liaison Officer as a member of president's cabinet as well as academic council, Assessment Committee and the Curriculum Committee. North Central State made the shift four years ago to not only place the ALO on these committees, but for the Chief Academic Officer to lead a number of quality initiatives on campus.

This continuous improvement focus has been embedded so completely in the organization that the responsibility for championing CQI rests with everyone at all levels. Where previously AQIP was seen as an accreditation requirement, continuous improvement is seen as the standard for operating NCSC in the new "leaner" world of Higher Education.

6P1b. Aligning the Systems Portfolio, Action Projects, Comprehensive Quality Review and Strategy Forums

Where the president's cabinet and the standing committees seek to gain broad input from all constituencies, the process for aligning the portfolio with the action projects, and strategy forums happens at the higher leadership level. For instance, the last system appraisal was textually analyzed and [annotated](#) by the ALO and distributed to the president's cabinet and the larger community for feedback. While taking the shortfalls in the outcomes from the previous forum into account, the focus at the forum as well as the team members were selected by the President and Vice Presidents.

When the idea for the 2017 strategy forum was presented to the cabinet, all saw that the process/issue being addressed was extremely significant for the institution and addressed one of our major strategic

pillars. However, because it was seated in one division (Student Services) it could not have been decided by members of the president's cabinet unfamiliar with the fundamental problem.

This does not mean that in the future, alignment of the portfolio, action projects, CQR and strategy forum focus will remain within a smaller group. It does mean that we will constantly evaluate our efficacy of approach and be open to changing the process as the need arises. The current Strategy Forum team, which includes the president, meets weekly following the February 2017 forum and evaluates its efficacy by means of goals either gained, or timelines passed. Thus far, the team has met every monthly goal since the team was formed in October 2016.

The last 9 action projects selected since 2011 have been focused on one of two strategic goals; student access or student success. This has resulted in an aligned resource allocation system in terms of academic and non-academic programming, grant participation, action project commitments, program discontinuation, hiring, and the project selected for the strategy forum in 2017.

6R1 Results

North Central State College has successfully integrated its quality initiatives as evidenced by the following:

- The most recent **action projects** have participation of the highest level of executives on the teams.
- The president is a sustained member on the 2017 strategy forum team which meets weekly to continue the momentum begun at the February 2017 forum.
- Achieving the dream is coordinated by the Assistant Dean of Liberal Arts and the director of IR, and championed by the CAO and the CEO
- The student success leadership institute (SSLI) participation team is led by the Chief Academic Officer with participation from faculty from all divisions.
- Community College Research Center (CCRC), visited NCSC to gain input on our deployment of the "pathways to success model". From this review, NCSC was featured in the [CRCC report](#), being one of the first colleges in the nation to successfully scale the math pathways and co-requisite support initiative up quickly. This swift deployment resulted in our students taking less developmental credits, and expediting their journey to completion. CCRC also strongly complimented our across-the-college advising model.
- Displaying commitment to CQI throughout the institution, the college consistently invests money in various conferences, in-house training and events for staff, faculty, and administrators featuring national speakers related to leadership, success, etc. Events/conferences have included : ACE, Chair Academy, Education Advisory Board, Webinars.
- Additionally, nine teams have represented the college within the last year, to a number of Ohio Association of Community College (OACC) and Ohio Department of Higher Education led initiatives throughout the state.

6I1 Improvements

Several important improvements have been implemented based upon the college's experience with the focus on quality initiative since 2011.

- Executive team (President and/or a Vice President) involvement in all CQI initiatives. Research displays that high level commitment in CQI with consistent communication can shift the culture of an institution, more readily than pockets of CQI work on a campus, however dedicated the staff/faculty within those pockets of practice are. In keeping with the importance

of a consistent CQI message throughout the organization, the president and vice presidents as well as all deans/directors, all unit managers, and committee chairs consistently ask their teams "how does this help students, and how can we do better".

- Because CQI is driven in part by our standing committees it is imperative that the review of those committees efficacy and possible inclusion of new committees be revisited annually. Thus, as a result of the last strategic planning process, two new committees have been added to Cabinet: the diversity committee, and the Campus Emergency Response Team.

Several future improvements are being contemplated for the college. We have identified a need to factor in the intersection of community needs and scarcity of resources (human and capital). Thus, the college is considering reducing the number of CQI initiatives, integrating as many initiatives as possible, and shifting our focus even more of CQI initiatives on outcomes that build upon our strengths and addresses our deficits.

Sources

- 12-07 standing committee structure
- 12-07 standing committee structure (page number 1)
- 2011 appraisal opportunities
- CCRC NorthCentral_SiteVisitMemo_030217_Final

6.2 - Culture of Quality

Culture of Quality focuses on how the institution integrates continuous quality improvement into its culture. The institution should provide evidence for Core Component 5.D. in this section.

6P2: PROCESSES

Describe how a culture of quality is ensured within the institution. This includes, but is not limited to, descriptions of key processes for the following:

- Developing an infrastructure and providing resources to support a culture of quality
- Ensuring continuous quality improvement is making an evident and widely understood impact on institutional culture and operations (5.D.1)
- Ensuring the institution learns from its experiences with CQI initiatives (5.D.2)
- Reviewing, reaffirming and understanding the role and vitality of the AQIP Pathway within the institution

6R2: RESULTS

What are the results for continuous quality improvement to evidence a culture of quality? The results presented should be for the processes identified in 6P2. All data presented should include the population studied, the response rate and sample size. All results should also include a brief explanation of how often the data is collected, who is involved in collecting the data and how the results are shared.

6I2: IMPROVEMENT

Based on 6R2, what process improvements to the quality culture have been implemented or will be implemented in the next one to three years?

Responses

6P2a. Developing an infrastructure and providing resources to support a culture of quality

The College's quality improvement focus is evident primarily in the integration of AQIP in all aspects of the shared governance structure. Important to note is that AQIP as a term is not used widely on campus. When internal constituents were polled at various intervals, in terms of their familiarity with AQIP, the misunderstanding of the purpose of AQIP and the confusion that the jargon created led us to move toward eliminating the usage. Thus, what is called continuous quality improvement on campus, is just that. From the president, to the vice presidents, to the director of facilities, to the dean of student services, to the curriculum committee; when processes are discussed, they are always discussed, reviewed, and updated in light of NCSC being a continuous quality improvement organization.

North Central State College utilizes a variety of embedded structures within the institution to ensure the focus on continuous quality improvement is not lost in the whirlwind of day-to-day activities. As

we now know, if CQI is not embedded into the fabric of an institution, educationally focused activities can continue, but inattention to fundamental CQI techniques (assessing our performance, learning from that assessment, employing ever refined methods for improving our outcomes, and embedding that CQI mindset into the culture) will prevent all educational- and business-related activities from remaining relevant, and the college will stagnate.

With this knowledge and in direct response to the following feedback from the 2012 system's appraisal 5P8 in mind "*North Central State College has a process of communicating the institutional mission and values through the President's Convocation presentation and through the new employee orientation process. However, it remains unclear whether the communication of mission, vision, and values occurs continuously and within all administrative units,*" the college has made a number of changes to the institution. These include the annual strategic planning discussion with representatives from all constituents, the reorganization of both the academic and non-academic divisions, and the committee structures that are specifically aimed at increasing accountability and consistent flow of communication about the mission, vision, and values.

As stated before, the president's cabinet, which is a shared governance committee, is the primary policy making body, and the primary communication body for continuous quality improvement with focus on mission and vision. One example of specific commitment to CQI is the ALO sitting on this committee and being the person responsible for all AQIP initiatives.

Furthermore, the ALO along with the CAO are guiding members of the curriculum and assessment committees along with the academic management team of deans and assistant deans. Thus, the outcomes of our courses, how they are structured, how outcomes are assessed, and a myriad of other quality controls related to our main 'product' are monitored continuously by the people responsible for external compliance and curriculum integrity.

The president's staff which is comprised of the President, Chief Academic Officer and Chief Fiscal Officer, is the body charged with managing the direct line of accountability throughout the organization in relation to CQI. However, the chairs of each of the standing committees, outlined in 6P1 have both responsibility and authority to manage their committees and report to their supervisors.

6P2b. Ensuring continuous quality improvement is making an evident and widely understood impact on institutional culture and operations (5.D.1)

The annual strategic planning process helped us evaluate our SWOT analysis and our continuous improvement processes.

As of Spring 2017 college employees have completed 15 action projects, attended 3 strategy forums, submitted 2 systems portfolios, and presented best practices in assessment at the HLC conference twice.

The 2017 Strategy Forum team continues to meet weekly to address "Enhancing the Student Experience from Inquiry to Graduation", and is set to transition from the on-boarding phase, to the advising phase in Spring 2018 while meeting all of the current milestones decided upon at the strategy forum.

Our strong commitment to continuous quality improvement is evident by:

1. Fulfillment of our mission through changes in our culture to achieve our strategic goals of

access, success, and resources

2. The College has been an ATD college for over a decade, and an ATD Leader College. The developmental education initiative is still impacting student success.
3. The college has received a "non monetary, external expert guidance" grant in partnership with OSU-Mansfield from Complete College America to review and enhance our practices on student success.
4. The College has been a partner within the Ohio Association of Community Colleges and the Student Success Leadership Institute to continually learn from Completion by Design and American Association of Community Colleges' (AACC) Pathway Project.
5. Pursuing and receiving a Title III grant to overhaul our advising system and receiving compliments on our success from the Community College Resource Center (CCRC) for the advising model and taking the statistics math pathway to scale.
6. The College Board of Trustees and the President, through their commitment to policy governance and enhancing the institutional culture, have been continually invited to present at national conferences especially the Association of Community College Trustees (ACCT). In 2017, the board was asked to coordinate the ACCT pre-conference in policy governance and the president received the central region CEO award.

6P2c. Ensuring the institution learns from its experiences with CQI initiatives (5.D.2)

Every initiative on campus has within its very structure a component of reflection or evaluation. Most of the time these reflections are built into the timelines and goals outlined annually, semi-annually, or every semester. At times the efficacy is evaluated by an outside entity, as is displayed in the results below. Additionally, evaluations submitted by our ATD coaches, CCRC, college and program accreditation reviews, help us to have external quantitative measures of each CQI initiative, which then informs the next iteration of the initiative.

Additionally we utilize our own internal surveys - Campus Quality Survey, or even through community engagement and feedback (the president's advisory committee surveys). As stated throughout this document, these experiences have lead to multiple changes and improvement in our culture and services to our constituents.

6P2d. Reviewing, reaffirming, and understanding the role and vitality of the AQIP Pathway within the institution

Various times over the last several years the question of whether to stay with the AQIP pathway has been addressed. The most convincing of the arguments for discontinuing the pathway is that it has more than achieved the original purpose set out in 2005 within the last three years. We value CQI, we engage in CQI, it has become second nature at almost all levels of the institution to plan, do, check, adjust, etc. that we scarcely need the impetus of an outside entity to focus our efforts. Furthermore, we are finding our limited resources make the moving parts of AQIP a bit cumbersome, and finally the open Pathway now offers much of the same advantages as the AQIP pathway. Additionally, the state of Ohio compliance reporting, has increased dramatically within the last five years, specifically in light of the 100% performance funding focus.

The list below is a partial outline of initiatives impacting the college and its strong engagement with continuous improvement:

- Student Success Leadership Institute (SSLI) driven by the Ohio Association of Community Colleges (OACC), in conjunction with the Ohio Department of Higher Education (ODHE). This is the gathering of all 23 Ohio community colleges to focus on completion.

- Three Ohio community colleges have received Pathway grants from AACC and share their learning with other colleges including ours.
- Gates Foundation-Grant administrator, OACC distributes the money through Ad Astra to help with a variety of academic issues and scheduling related to retention.
- Columbia CCRC: NCSC was highlighted as being one of the first in the nation in scaling the statistics math course to expedite student completion.
- Lumina Foundation Right Signal grant in collaboration with AACC for continuous engagement with employers.
- NCSC is significantly involved with ACCT and has been invited to present so many times at the national gathering, and more recently coordinating the pre-conference on board governance.
- A member of the Education Advisory Board that continually shares best practices with the college community through in-house presentations and webinars.

Despite the multiplicity of commitments, the most recent experience with the strategy forum, and the college's leadership team's concentration on "focus, execution, and CQI" shows continued engagement. We value it, we do it, but we do have concerns about our limited resources and the myriad of external reporting commitments and how we must implement AQIP. Interestingly, when asked, most of the team of administrators who have been with the college for more than a decade had serious doubts that we would have moved this far forward without AQIP. We are thankful, and so far, we are sticking with it. Any change would require extensive assessment and introspection.

6R2a,b,c.

Ways of measuring quality include the quantitative results of success measures and the qualitative feedback of constituents served.

Quantitatively, our strategic focus on access, success and resources - under the board's mantra of what good, for whom, and at what cost - is showing that we are certainly moving in the right direction based on the following outcomes:

1. Advancing the mission of raising educational attainment by increasing the annual unique headcount of students by 3% last year (to 3,889), early college credits by 4% and distance education credits by 7%; when other colleges' trends are moving in the opposite direction
2. Awarding in the last two years nearly 400 free Tuition-Freedom scholarships, with an investment around \$750,000, for dually-enrolled students continuing with the college.
3. Of the 363 freshman matriculating from high school in AY 2017, 46% entered with college credit reducing their developmental education and expediting their journey to completion
4. Increasing the three-year 2013 to 2014 cohort success rate (graduation + transfer + still enrolled) by 5%.
5. Increasing the completion of gateway mathematics and English courses by 4% for minority students last year - mostly due to the implementation of a co-requisite for the gateway statistics course which has now been taken to scale with about 75% of the college's students.
6. Completion of gateway math and English within one year--improved from 11% for the 2013 First Time in College (FTIC) cohort to 20% for the 2016 FTIC cohort.
7. Completion of gateway math within one year--improved from 17% for the 2013 FTIC cohort to 30% for the 2016 FTIC cohort.
8. Completion of gateway English within one year--improved from 34% for the 2013 FTIC cohort to 40% for the 2015 FTIC cohort.

9. Year one credit completion rate for entering cohorts (ABCD)--improved from 75% for the 2013 cohort to 81% for the 2016 cohort.
10. Between 2013-2014 and 2016-2017 academic year, minority success has increased tremendously:
 - o From 6% to 16% in completing math and English gateway courses
 - o From 8% to 26% in completing math gateway courses
 - o From 29% to 48% in completing English gateway courses
 - o From 65% to 80% in year one credit completion
 - o From 29% to 48% in year one fall-to-fall persistence
1. Increased grant funding allowed the college to hire additional advisors (additional 5 FTE), with an average of 150-200 students per advisor.
2. Over the past 5 years, the college has successfully obtained more than \$15M in grants for renovating facilities, but more importantly enhancing the technology on campus including automation, robotics, 3-D printing, Wi-Fi, broadband, and computers to enhance the students' learning experience.
3. The college has been maintaining a balanced budget, adding to the reserve and enhancing the state financial viability ratio

Qualitatively, our surveys of students, employees and employers have been reported throughout this document with multiple successes and areas of improvement.

6I2: IMPROVEMENT

The state's 100% performance funding model has been challenging but has helped the college implement strong success initiatives to sustain itself. The influx of state-mandated dual enrollment requirements created logistical and financial challenges for faculty visiting high schools to monitor students' progress, but it has also given opportunities for faculty to collaborate with their high school counterparts and align curriculum outcomes. The college is and will be working to develop more discipline-specific pathways for high schools.

The 2017 AtD Institutional Capacity Assessment suggests one leadership challenge is engaging faculty to take leadership for initiating student success efforts. In an Employee Satisfaction survey, the faculty and staff indicated that their two top levels of satisfaction are knowing their work makes a difference and having the freedom to express their ideas. These have been key to employee engagement. Faculty involvement in the statewide Student Success Leadership Institute and the Assessment Committee has been particularly strong over the last two years and is being used as a model for other efforts that need to continue in the future.

Another challenge is seen in the 2017 Community College Survey of Student Engagement results showing that North Central State students are statistical outliers in the amount of time that they work and provide dependent care. Students' responsibilities can jeopardize persistence and interfere with attempts to support students with tutoring and advising. Advising outreach, embedded tutoring, online options, TRiO Support Services, day care availability, and emergency financial aid for food, lodging and transportation are being used to support these very busy students.

Also challenging is the stagnation in next-term student persistence rates, which is being aggressively addressed through intrusive advising, the addition of academic liaison, and the reduction of the number of students per advisor. The graduation rate has also been challenging, but National Community College Benchmark Project data show that, in 2017, the college graduated 16% and

transferred 18%--tremendous progress from 2014 when 10% graduated and 4 % transferred.

In light of the CQS data and systems appraisal comments addressing areas of "opportunity" for growth the college has placed customer focus and "Enhancing the Student Experience" as our number one action project for the next 18 months.

Finally, with regard to the committee structure, two new committees will be added to cabinet: the diversity committee, and the Campus Emergency Response Team committee. One more committee (standing or ad hoc) focused primarily on customer service is being formed and will report to the president's cabinet.

Sources

There are no sources.