University of North Alabama

Guide for

Planning and Assessing

Institutional Effectiveness

2011

Table of Contents

INTRODUCTION

This *Guide for Planning and Assessing Institutional Effectiveness* is presented as an instructive overview of the planning and assessment process at the University of North Alabama. It recognizes that each department or unit of the University is required to plan and assess its activities in a meaningful way, primarily for the purpose of continuous improvement. As such, specific planning and assessment activities are intended to be supported rather than prescribed.

Some deviation from the process outlined, when useful for the department or unit, may be appropriate. Innovation in programs, procedures, and assessment techniques is encouraged. Examples of required reports and/or documents are referenced in this guide and can be found, along with instructions for completion, on the Office of Institutional Research, Planning, and Assessment website. For all academic and education support/administrative units, the core planning and assessment requirement is completion of the *Annual Planning and Assessment Report* that is partially completed in October and fully completed by the end of the academic year. Additionally, all units complete a five-year review which follows a five-year cycle.

In general, however, assessment and continuous improvement have been around for many years. *Walter Shewhart* (1986) developed the long-standing process of continuous improvement while he was working for Bell Laboratories in the 1920's. The essence of his idea is a four-fold process that is shown in **Figure 1**. The four steps to the Shewhart Cycle as they are applied to UNA are defined as:

- **Plan** - Create a strategy as to what UNA wants to do and how it will measure success.
- **Do** - Follow the plan.

- **Check** - Assess the effectiveness of the current plan by looking at the success outcomes measures.
- **Act** - Make changes to the strategies to improve the measured outcomes (Shewhart, 1986).

The improvement process is cyclic and, therefore, does not have a termination point. Rather, it is assumed that continuous improvement can only be achieved by continuous assessment.

Figure 1
Shewhart Cycle of Continuous Improvement
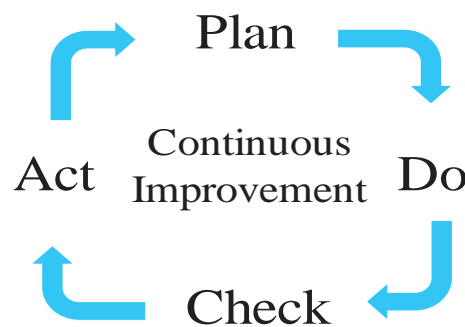
The improvement process for any institution should be built upon the foundation of a strong institutional mission statement. The mission statement describes the nature and concept of the institution's future and establishes what the institution plans to do, for whom, as well as the major philosophical premises under which it will operate (Below, Morrisey, and Acomb, 1987).

Primary among the reasons for an organization having such a statement are:

1. To ensure consistency and clarity of purpose throughout the institution
2. To provide a point of reference for all major planning decisions
3. To gain commitment from those within the institution thorugh clear communication

of the nature and concept of the institution's purpose

4. To gain understanding and support from those people outside the organization who are important to is sucess.

UNA's Mission Statement reads as follows:

"As a regional, state-assisted institution of higher education, the University of North Alabama pursues its Mission of engaging in teaching, research, and service in order to provide educational opportunities for students, an environment for discovery and creative accomplishment, and a variety of outreach activities meeting the professional, civic, social, cultural, and economic development needs of our region in the context of a global community."

ASSESSMENT AND INSTITUTIONAL EFFECTIVENESS OVERVIEW

Institutional Effectiveness:
- ✎ **Setting goals**
- ✎ **Systematic assessment**
- ✎ **Establishing, measuring and improving outcomes**

Institutional Effectiveness is "the process of articulating the mission, setting goals, and using data to form assessment in an ongoing cycle of goal setting and planning" (Grossman & Duncan, 1989). This definition clearly encapsulates the intent of UNA's criteria and expectations for its institutional effectiveness plan.
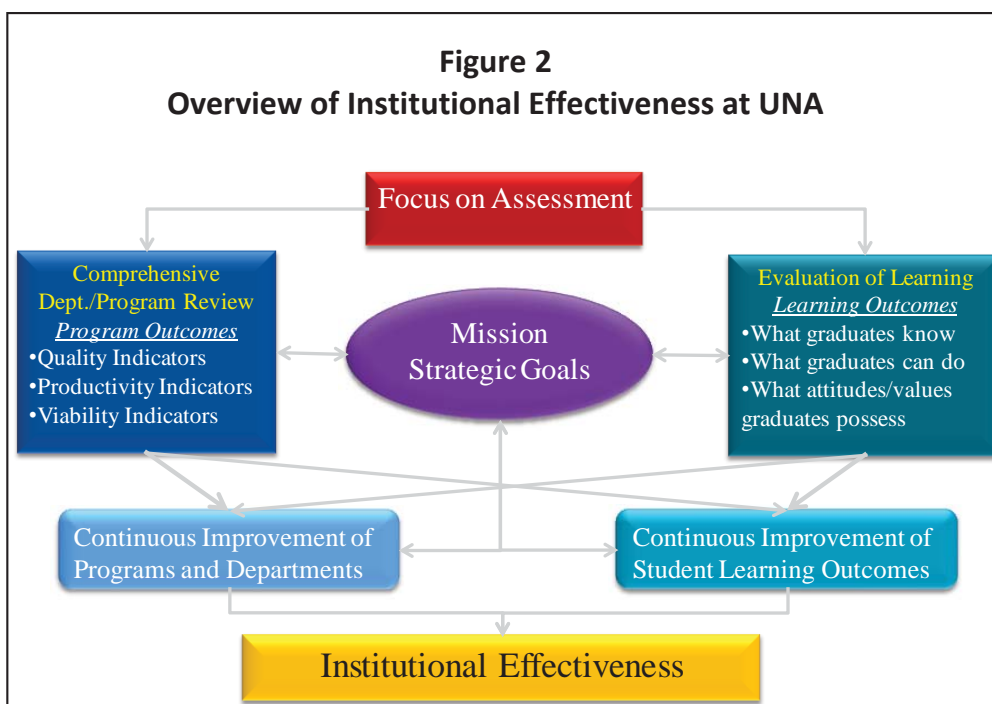
Assessing institutional effectiveness relies on the determination of how well the various colleges, divisions, departments, and support units carry out their functions and accomplish their goals, as well as a determination of the extent to which the University as a whole achieves its overarching goals and fulfills its mission. A major objective of this process is to identify opportunities for continuous improvement of department/operational goals and learning outcomes. An overview of UNA's institutional effectiveness process is shown in **Figure 2**.

According to a 2005 report by the National Commission of Accountability in Higher Education, the purpose of accountability is to encourage the highest possible levels of achievement. Its focus should be on improving results as opposed to simply meeting minimum standards or requirements. Assessment should be viewed as a positive, on-going process toward real institutional improvement in student learning and services provided by an institution to its stakeholders.

Educational programs at UNA must respond to four separate yet interrelated agencies: UNA (Mission, Vision, Strategic Goals, Core Competencies); State of Alabama (Statewide Transfer and Articulation Report System); College/School specific accrediting body (i.e. AACSB, ABET, NCATE, etc); and the Southern Association of Colleges and Schools (SACS), which is the regional accrediting body of the institution.

All these agencies share one common theme: improvement. All university units (Academic, Educational Support/Administrative) are required to engage in a systematic assessment process that leads to establishing,

Figure 2
Overview of Institutional Effectiveness at UNA

Focus on Assessment

Comprehensive Dept./Program Review
Program Outcomes
- Quality Indicators
- Productivity Indicators
- Viability Indicators

Mission Strategic Goals

Evaluation of Learning
Learning Outcomes
- What graduates know
- What graduates can do
- What attitudes/values graduates possess

Continuous Improvement of Programs and Departments

Continuous Improvement of Student Learning Outcomes

Institutional Effectiveness

measuring, and improving student learning outcomes and operational goals.

PRINCIPLES OF ASSESSMENT

The American Association for Higher Education (AAHE) formed a group called the Assessment Forum. This forum compiled a list of good assessment practices. It has become common practice in higher education to engage in assessment by following these generally accepted principles. UNA strives to adhere to these principles:

Nine Principles of *Good Practice for Assessing Student Learning* are:

1. The assessment of student learning begins with educational values.
2. Assessment is most effective when it reflects an understanding of learning as multidimensional, integrated, and revealed in performance over time.
3. Assessment works best when the program it seeks to improve has clear, explicitly stated purposes.
4. Assessment requires attention to outcomes but also and equally to the experiences that lead to those outcomes.
5. Assessment works best when it is ongoing not episodic.
6. Assessment fosters wider improvement when representatives from across the educational community are involved.
7. Assessment makes a difference when it begins with issues of use and illuminates questions that people really care about.
8. Assessment is most likely to lead to improvement when it is part of a larger set of conditions that promote change.
9. Through assessment, educators meet responsibilities to students and to the public.

Note: The original article appeared on the American Association for Higher Education (AAHE) web site at: http://www.aahe.org/assessment/principl.htm (site no longer active). A more detailed explanation of each principle as listed in the original article is available via the following link: http://www.uky.edu/Assessment/principl.htm.

While the primary purpose for engaging in a comprehensive institutional effectiveness and assessment process is to improve institutional programs and services, the method by which this process is to be guided should be clear, consistent, and concise. The process should also follow accepted standards of both articulation and accountability so that documented evidence of the process may be effectively used to support all four of the above mentioned agencies. With this in mind, the foundation on which UNA's *Guide for Planning and Assessing Institutional Effectiveness* is built comes primarily from the Commission on Colleges of the Southern Association of Colleges and Schools through their *Principles of Accreditation: Foundations for quality enhancement (2010),* and the Core Requirements (CR) and Comprehensive Standards (CS) included therein.

As a general rule, success in demonstrating compliance with an accreditation requirement typically involves responding to all key phrases embedded in the core requirement or comprehensive standard. Crafting responses that thoroughly address the literal interpretation of all key words and phrases is vital. This is especially important in the institutional effectiveness requirement of CR 2.5 and CS 3.3.1.

Core Requirement 2.5 reads as follows:

The institution engages in ongoing, integrated, and institution-wide research-based planning and evaluation processes that (1) incorporate a systematic review of institutional mission, goals, and outcomes; (2) result in continuing improvement in institutional quality; and (3) demonstrate the institution is effectively accomplishing

> "...the primary purpose for engaging in a comprehensive institutional effectiveness and assessment process is to improve institutional programs and services..."

its mission.

The key points of this requirement that typically must be interpreted literally and addressed satisfactorily are:

- The institution is the primary focal point for a case statement on compliance.
- There is an expectation for the description of the planning and evaluation process that is active and continuous rather than static or single.
- There is an expectation for documentation of the systematic review of institutional mission, institutional goals, and institutional accomplishments consistent with the mission.
- There is an expectation for the documented use of results of institutional planning and evaluation to achieve institutional improvements.

Comprehensive Standard 3.3.1 currently reads as follows:

The institution identifies expected outcomes , assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results in each of the following areas:
1. *educational programs, to include student learning outcomes*
2. *administrative support services*
3. *education support services*
4. *research within its education mission, if appropriate*
5. *community/public service within its education mission, if appropriate*

The key points of this requirement that typically must be interpreted literally and addressed satisfactorily are:

- The expected focus for documenting compliance with CS 3.3.1 is at the unit level of individual educational programs, administrative, and support services.
- The expected achievements of each program/department should be articulated, and evidence presented concerning their accomplishment.
- There is a distinction between program outcomes and learning outcomes and this standard addresses the establishment and evaluation of both.
- There is an expectation that the results of assessment will be used to improve educational programs, administrative, and support services.

Comprehensive Standard 3.5.1 currently reads as follows:

The institution identifies college-level general eduation competencies and the extent to which graduates have attained them.

The key points of this requirement that typically must be interpreted literally and addressed satisfactorily are:

- General Education should be part of the institutional mission.
- The expected achievements of the General Education program should be articulated, and evidence presented concerning accomplishments.
- Improvement should be guided by the establishment and evaluation of learning outcomes.

Core Requirement 2.5 and Comprehensive Standards 3.3.1 and 3.5.1 are straightforward and concise. Very simply, the institution should have a written plan to cover institutional assessment, program assessment, and general education assessment. Furthermore this plan must be congruent with the institutional mission and strategic goals. In this plan, the

Major Components of CR and CS criteria:
- ✎ **Evaluation**
- ✎ **Review**
- ✎ **Improvement**
- ✎ **Documentation**

"OIRPA has the primary responsibility for the overall coordination and implementation oversight of institutional effectiveness for UNA."

expected achievements should be articulated, and improvements should be guided by the establishment and evaluation of learning and/or operational outcomes. The implementation of a successful institutional effectiveness plan requires cooperation at multiple levels of an institution from centralized committees to individual programs and/or departments.

The Office of Institutional Research, Planning, and Assessment (OIRPA) has the primary responsibility for the overall coordination and implementation oversight of institutional effectiveness for UNA. This includes developing and disseminating the procedures and protocols and supporting documents required to meet the specifications of *The Guide for Planning and Assessing Institutional Effectiveness*. It also coordinates assessment processes of the University and serves as a central resource for institutional effectiveness and accreditation matters by acquiring, archiving, analyzing, and reporting internal data; submitting federal and state reports; responding to external requests for data; and providing consultative services on institutional effectiveness and accreditation. Furthermore, OIRPA conducts a cycle of internal and external surveys pertaining to institutional effectiveness, including surveys relating to the effectiveness of advising, employer assessment of UNA graduates, and alumni attitudes. A list of regularly scheduled satisfaction surveys approved by UNA's Board of Trustees on March 7, 2003, is available on the OIRPA website.

The Institutional Effectiveness Committee is a shared governance committee whose primary responsibility is to adopt procedures dealing with institutional effectiveness and assessment; review assessment activities and make procedural recommendations where needed; and review and make recommendations concerning University goals and initiatives where needed. The Institutional Effectiveness Committee does not recommend budgetary, structural, or

personnel changes to an academic department or educational support/administrative unit. Rather, the sole function of the Institutional Effectiveness Committee in reviewing departmental and unit reports is to ensure the consistency and integrety of the assessment process.

Within the individual academic or educational support/administrative department, the primary responsibility toward institutional effectiveness is to develop outcomes that support the departmental mission, institutional mission, and institutional strategic goals. Within the academic area each department should also adopt learning outcomes which support the program's mission and that may support the institution's core competencies. Furthermore, each department should improve these learning outcomes through the establishment of useful assessment strategies.

Outlined below are additional positions/areas responsible for initiating and acting on assessment results. Appropriate goals should be assigned and a timeline formulated for completion of each phase of the assessment process; all unit personnel should be involved in the planning/assessment process and in the implementation of indicated improvements.

- **Vice Presidents** are responsible for reviewing all departmental reports within their division, coordinating departmental goals with divisional goals, and developing a divisional *Annual Planning and Assessment Report*.
- **Deans** are responsible for developing, collecting, reviewing, and approving new goals to be added to its long-term strategic goals as well as complete the *Annual Planning and Assessment Report*. Deans also have the responsibility of reviewing the five-year program reviews with each department chair.
- **Department chairs and program faculty** are responsible for recommending changes

in curriculum and departmental goals and student learning outcomes as a result of the five-year program reviews and assessment of the student learning outcomes. Changes should typically be recommended in the academic year following each program review. This process is documented and approved through the departmental, college, and institutional curriculum committee structure. The department chair is also responsible for completion of the *Annual Planning and Assessment Report*.

- **The University Curriculum Committee** is responsible for recommending University-wide academic initiatives for continuous improvement in performance on General Education Student Learning Outcomes. These recommended initiatives should be received by the Vice President for Academic Affairs and Provost for appropriate dissemination to academic departments.

- **Strategic Planning and Budget Study Committee** is responsible for aligning resources to specific institutional effectiveness goals as well as serving in an advisory capacity to strategic, annual, and SMART Budget planning.

- **The President** is responsible for initiating approval of any changes to the University Mission Statement. Following completion of the University Mission Statement Review every fifth year and with consideration of any resulting recommendations from the Ad Hoc Leadership Task Force, the President will recommend any changes needed in the University Mission Statement. These recommendations are to be circulated through the University's Shared Governance Committee structure for comment. The President will then make appropriate recommendations to the University Board of Trustees.

- **The President** is also responsible for initiating changes to University Goals (found in the University Strategic Plan) following recommendations from the Strategic Planning and Budget Study Committee, the University Institutional Effectiveness Committee and the University Curriculum Committee. Recommendations from these groups will typically follow the review of the five year assessment of the University Goals by the Institutional Effectiveness Committee.

- **The President** is also responsible for recommending University priority initiatives to support the various University Goals. These initiatives are included with an Assessment Report and the University's Annual Plan, that supports the longer term Strategic Plan. In making these recommendations, the President will consider input from the various Shared Governance Committees and from other constituent groups as represented by the University Executive Council. The University priority initiatives are updated in the University's Strategic Plan on an annual basis and should provide guidance to the various units of the University in developing *Annual Planning and Assessment Reports*. It should be noted that initiatives often arise as a result of unexpected opportunities and unanticipated problems. They may be added to the planning agenda of a unit at any time during the year rather than only at times called for in the planning guide timeline identified below.

- **The University Executive Council (EC)** is responsible for initiating changes to the state's SMART Planning and Budgeting process. The EC seeks input from the University's Institutional Effectiveness Committee, the University Strategic Planning and Budget Study Committee, and other appropriate constituents. The timeline for this activity is determined by the state budget cycle and is to be communicated to the appropriate constituent groups by the Vice President for Business and Financial Affairs. Once the SMART Planning and Budgeting goals and

budgets have been established, these are to be communicated to the University community through the respective Vice President.

- **The University Executive Council** is also responsible for the Ad Hoc Administrative Task Force's assessment of administrative systems and for recommending to the President any changes in administrative procedures. This formal review will follow the five year periodic assessment of administrative systems and procedures. While the five year assessment is the formalized review, improvements may be suggested throughout the year as dictated by need and opportunity.

- **Shared Governance** is a means of University management in which each chief group in the University community participates in decision-making. This participation must be real and based on the principles that each group has the largest influence in matters that concern it most and that decisions made by shared governance bodies must have actual influence in University decision making. Shared governance includes mutual participation in the development of policy and decisions in the areas of strategic and budget planning, faculty and staff welfare, selection and retention of academic and administrative officers, campus planning and development, and organizational accountability. Shared governance at UNA is composed of 4 strategic committees, 16 task committees, and the Executive Committee. The Institutional Effectiveness Committee as well as the Strategic Planning and Budget Study committee are part of this makeup. This level of participation ensures that institutional effectivenss covers the entire campus and that there is adequate representation from all constitutents within the IE process.

- ASSESSMENT OF INSTITUTIONAL EFFECTIVENESS AT UNA

Institutional assessment is an iterative method for improving the programs and processes through which an institution carries out its mission, aligns itself with its core competencies, and implements and/or updates its strategic planning. Institutional assessment at UNA is tied to the institutional mission, is comprehensive of all institutional operations, uses multiple sources and types of evidence, and involves faculty and staff throughout the institution. Assessment is also tied to budgeting directly and indirectly via the strategic planning and institutional effectiveness processes. One of the most important components of good institutional assessment is its capacity to effect change. Information gleaned from assessment should be used to improve programs and processes within the institution. This aspect of assessment is becoming more important at UNA as the culture of assessment becomes an intrinsic part of all university operations.

Effective assessment should answer three basic questions. Where has the institution been? Where is the institution now? Where does the institution want to go? The process is both iterative and cyclical in that a good institutional effectiveness plan and the assessment that goes with it is never really finished. It is a road map to the institution's destination, and the destination represents the institution's best future.

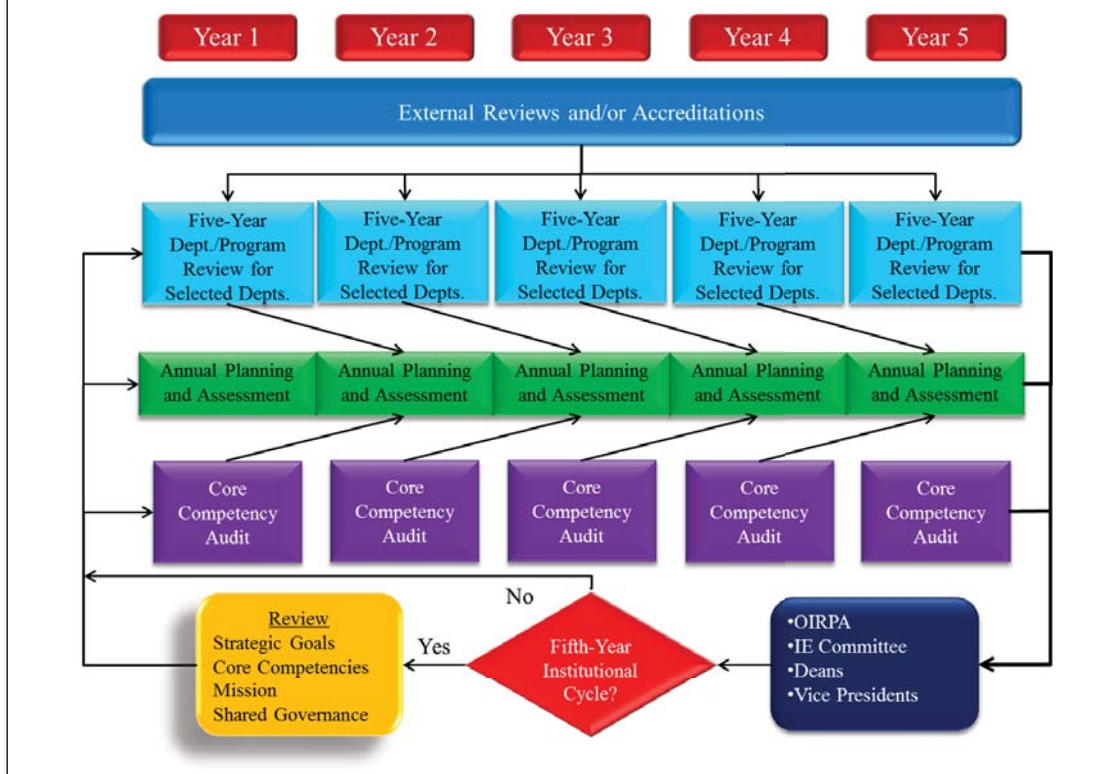Institutional assessment involves the following general components:

- **Annual Assessment** – Each year all academic and educational support/administrative departments are responsible for completing the *Annual Planning and Assessment Report*. This is a two-fold instrument whereby the department establishes goals/learning outcomes at the beginning of the fiscal year, followed by an assessment of each goal/outcome at the end of the year. Additionally, departments may indicate strategic goals for the next two- to five-years, in order to aid the University in longer-term planning.

- **Program/Departmental Review** – In addition to the annual assessment, each academic, administrative, and educational support unit is required to conduct a comprehensive review of goals, outcomes, assessments, and viability every five years. This review occurs on a staggered cycle. Based upon the three basic assessment questions, the Program/Departmental Review is designed to review where the department/program has been, where it currently is, and where it would like to go in the future.

- **Assessment of Core Competencies –** Each department that offers General Education Compenent courses is requred to perform an annual *General Education Assesssment Audit*. Additionally, all acacdemic program learning outcomes that support UNA's Core Competencies are required to assess the performance of these outcomes through the *Annual Planning and Assessment Report*.

- **Organizational Assessment** – Certain components of UNA including its mission, strategic plan, core competencies, and shared governance structure are also required to undergo a cyclical process of comprehensive evaluation and assessment.

- External Assessment - Through the use of external program accrediting agencies and departmental audits whereby external reviewers/consultants are use, UNA actively strives to improve its programs/departments through nationally recognized criteria and practices.

These components of UNA's assessment process are unique in that they offer different views of institutional performance, and are

Effective assessment should answer three basic questions:
- Where has the institution been?
- Where is the institution now?
- Where does the institution want to go?

Figure 3
Schematic of Institutional Effectiveness Process at UNA

interconnected because each is dependent upon the results of the others. A schematic of UNA's institutional effectiveness process is depicted in **Figure 3**. From this schematic one can clearly see that the *Annual Planning and Assessment Report* is the backbone of the process. It is buttressed by the five-year cycle of program reviews as well as the assessment of the Cor Competencies, institutional review, and assessment from external reviews and accreditations.

The schematic also indicates that, as a department completes its five-year program review, goals and initiatives from the review may be incorporated into the following year's *Annual Planning and Assessment Report*. Likewise, results from the *Core Competency Audit Report* may be used by the affected departments to create goals for the following year's *Annual Planning and Assessment*

Report. After each iteration of the annual report, program review, and Core Competency audit, various institutional groups review the findings as they relate to UNA's organizational structure (i.e. mission, strategic goals, Core Competencies, and governance structure.) When each of the components to UNA's organizational structure undergo a cyclic review, information from past reports will be used in part to update and improve the effectiveness of the institution.

Annual Planning and Assessment Report

In the past, UNA's annual reporting process included two separate steps. *The Annual Action Plans Report* was generated by each department in October and contained unit plans for the up-coming school year. In June a separate *Assessment Report* was completed to acknowledge and review the disposition of the

10

Figure 4
Time for Annual Planning and Assessment Report

Long-Term/ Strategic Goals reviewed by Deans

Long-Term/ Strategic Goals reviewed by President

Long-Term/ Strategic Goals reviewed by SPBS Committee

2nd Part of APAR due Aug. 30th for non-academic departments

| September | October | November | December | January | February | March | April | May | June | July | August | September |

1st part of Annual Planning and Assessment Report due Oct. 1

Long-Term/ Strategic Goals reviewed by VPs

Budget initiatives (if any) based on Priority Initiatives are established

2nd Part of AAPAR due June 30 by academic departments

October plans. The current *Annual Planning and Assessment Report* combines the two reports into one. While the information is still captured in October and June, the combined report allows both the pre- and post-planning process to be more fully integrated together.

After the OIRPA Director and Institutional Effectiveness Committee assessed past *Annual Planning and Assessment Reports* in 2008, it was decided that a need and desire existed to incorporate more longer-ranged planning into the process. Therefore, the new process allows department chairs/directors to plan for up-coming fiscal years.

The current *Annual Planning and Assessment Report* is now in an electronic, web-based format located within the Institutional Effectiveness section of the OIRPA website. The report consists of three parts or sections:

- Strategic Goals (over the next 2-5 years)
- Annual Current Year Goals
- Student Learning Outcomes (for academic departments only)

The timeline for completing the *Annual Planning and Assessment Report* is shown in **Figure 4**. In October, the chairs/directors will submit their annual goals along with their strategic goals for the next two to five years. In November and December, the Deans and Vice Presidents respectively will review the strategic goals and make recommendations to the President. The President reviews the all strategic goals with the Strategic Planning and Budget Study Committee in February. In March, the SPBS committee (working with the President and Vice Presidents) creates budget initiatives for the next fiscal year based on these next fiscal year priority initiatives.

In June, each academic and educational support/administrative department completes the second half of the *Annual Planning and Assessment Report* by outlining the status of each of that department's goals. In August, the OIRPA office will report to the Institutional Effectiveness Committee on the outcome and status of the annual reporting process. *The Annual Planning and Assessment Report* can be found on the Office of Institutional Research, Planning, and Assessment's website at http://www.una.edu/administration/planning-

assessment/.

Five-Year Program/Department Review Assessment

The second, critically important phase of assessment for each academic and educational support/administrative department consists of a Program/Departmental review**.** These comprehensive reviews were internally created through a joint effort of faculty, department chairs, directors, deans, vice presidents, OIRPA, and the Institutional Effectiveness Committee. As shown back in **Figure 3** program/department reviews are an integral part of UNA's overall institutional effectiveness process because they are buttressed by the previous year's annual and Core Competency audit reports, and they serve as a catalyst for the creation of key goals contained within annual reports in the future. The timeline for completing the *Program/Departmental Review* is shown in **Figure 5.**
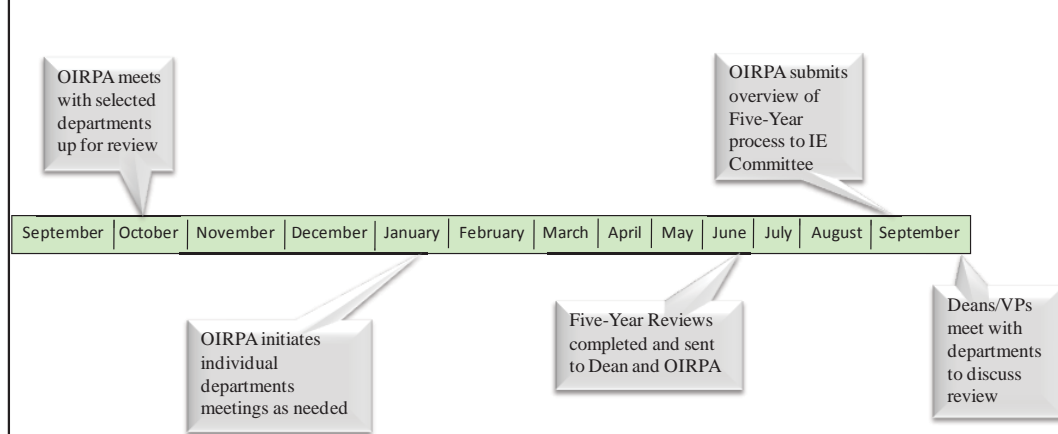
Within the academic division, the five-year schedule is determined by each College. Furthermore, the academic departments should assess themselves at both the department and program levels. In the case

where an academic department is responsible for more than one program, each program should complete a separate review by a qualified coordinator for that program.

In addition to addressing program viability, productivity, and efficiency, all academic departments are to focus on the extent to which **student learning outcomes** and/or **departmental goals** are achieved, and to identify opportunities for improvement. The University's five Core Competencies, approved by the Board of Trustees on March 7, 2003, are to be included in the learning outcomes for all academic programs. June 30 is the target date for completion, and the program review report should go to the appropriate dean, Vice President, the Office of Institutional Research, Planning, and Assessment, and the Institutional Effectiveness Committee. A template of the Academic Department Review Outline can be found at http://www.una.edu/research/progdeptreview.html.

The educational support/administrative departments of the University also undergo an extensive review that is t conducted on a five year cycle. These reviews address viability, productivity, and efficiency of the unit, while

Figure 5
Timeline for Five-Year Program/Department Review

OIRPA meets with selected departments up for review

OIRPA submits overview of Five-Year process to IE Committee

| September | October | November | December | January | February | March | April | May | June | July | August | September |

OIRPA initiates individual departments meetings as needed

Five-Year Reviews completed and sent to Dean and OIRPA

Deans/VPs meet with departments to discuss review

focusing on the extent to which **departmental goals** are achieved, and opportunities for improvement are identified. The department review report should go to the appropriate Vice President; OIRPA; and the Institutional Effectiveness Committee. A template of the Educational Support/Administrative Department Review Outline can be found at http://www.una.edu/research/progdeptreview.html.

Assessment of UNA's Core Competencies

The University of North Alabama has five college-level general education competencies that graduates are expected to acquire during their undergraduate course of study. UNA's Core Competencies are as follows:

- **Effective Communication**
- **Critical Thinking**
- **Use of Existing and New Technology**
- **Analysis and Reasoning**
- **Seeking Out/Acquiring Knowledge**

The University of North Alabama has adopted a three-pronged approach for assessing the extent to which graduates have achieved the above core competencies. This approach includes 1) the assessment of student learning outcomes in the General Education Component courses, 2) the administration of a section of the CAAP exam to rising juniors, and beyond, as a graduation requirement, and 3) the assessment of specific student learning outcomes that also support UNA Core Competencies within each academic program. More detail of this three-pronged assessment approach may be found in UNA's 2009-2010 Core Competency Audit Report.

Assessment of Core Competencies through the General Education Component

All academic departments that offer a General Education Component course are required to complete the General Education Audit form. This form consists of an assessment matrix for the General Education Component program. More specifically, this matrix demonstrates that each department has identified the extent to which UNA students are obtaining the Core Competencies through the General Education Component courses. Assessment of these courses ensures that program learning outcomes are established and related Core Competencies have been identified, assessments of student learning outcomes are ongoing, and program modifications are taking place as needed.

Assessment of Core Competencies through the Collegiate Assessment of Academic Performance (CAAP)

Since 1995, the CAAP Exam has been administered each semester to rising juniors and beyond at UNA as a graduation requirement. In recent years, one section of the exam (Reading, Writing Skills, Science Reasoning, Critical Thinking, or Math) has been administered each semester on a rotating basis. Thus, considerable data have been accumulated. The CAAP Exam, however, is a nationally normed test and, as such, components of the exam are not fully congruent with UNA's Core Competencies. Therefore, the five sections of the CAAP Exam are used to assess Effective Communication, Critical Thinking, Analysis and Reasoning, and Seeking out and Acquiring Knowledge. While the CAAP Exam has been determined not to assess one of UNA's Core Competencies (Use of Existing and New Technologies), it was found that the General Education Component as well as specific program learning outcomes fully supported this Competency.

Assessment of Core Competencies within each academic program

The third avenue for identifying the extent to which UNA graduates have attained the college-level Core Competencies involves assessment within each program. As part of the Annual Planning and Assessment Report,

academic departments at UNA are surveyed to ascertain progress within each department toward establishing and assessing student learning outcomes within each program.

As part of the overall assessment of learning outcomes, each program much specify the outcomes, how each outcome is assessed, the results of the assessment/s, and what improvements were made based upon the results of the assessments. Therefore, program learning outcomes that support UNA's Core Competencies are adequately assessed and improved within the academic department in which the program resides.

University Level Assessments

At the University level, systematic assessment is called for in at least the following areas: evaluation of the Mission Statement (five-year cycle), evaluation of University Goals, evaluation of the SMART Planning and Budgeting System (annual cycle), and evaluation of the effectiveness of administrative processes and/or systems within the University (five-year cycle). University level assessment will be administered by the President's Office, the Institutional Effectiveness Committee, the Strategic Planning and Budget Study Committee, and OIRPA.

University Mission Statement

The evaluation of the University **Mission Statement** is to occur every five years. The evaluation should answer two questions: first, is the Mission Statement appropriate, and second, how well is the mission being fulfilled? Each five-year period, the Mission statement should be evaluated by a leadership task force appointed by the President. Membership should be broad based and include board members, administrators, faculty, staff, students, alumni, and community representatives. The Task Force should report to the President

and then share the results of the evaluation widely within the University community. The University Executive Council, with the assistance of the Director of OIRPA, will be responsible for conducting appropriate review, seeking input from the appropriate Shared Governance committees, and recommending to the President and the Board of Trustees any changes needed as a result of the review of the Mission Statement.

University Goals

Evaluation of the University Goals will occur every five years. As with the University's Mission Statement, the evaluation process should focus on two questions: are the goals appropriate and how well are the goals being achieved? The responsibility for evaluating the University Goals lies first with an assessment of these goals by OIRPA and second through oversight by the University's Institutional Effectiveness Committee. The results of the evaluation will be shared widely within the University community. The President, working with the appropriate committees of the Shared Governance system, will initiate changes as needed through the Strategic Planning process and will make appropriate recommendations for any needed changes in the goals to the University Board of Trustees.

SMART Planning and Budgeting System

The SMART Planning and Budgeting System is driven by the state budgeting office. Each fiscal year, the University is charged with identifying key initiatives from its strategic plan and corresponding budget requirements for the initiatives. Responsibility for identification of such goals and development of budget requests to accomplish these goals is a responsibility of the University Executive Council. The Vice Presidents, with input from the Institutional Effectiveness Committee and the University Strategic Planning and Budget Study Committee, are to recommend to the President appropriate goals and budget requests for

inclusion in the annual budget appropriation request. This information is to be shared with the University community through the Shared Governance committee structure. Annual evaluation of the accomplishment of goals identified in the SMART Planning and Budgeting System will be conducted by the University Executive Committee with input and assistance from the University Strategic Planning and Budget Study Committee and the University Institutional Effectiveness Committee. Results of the assessment will be shared with the University community and provide the basis for certain future planning and budgeting changes. The evaluation should be completed on a schedule identified by the Vice President for Business and Financial Affairs that meets deadlines required for appropriation requests.

Administrative Systems

The evaluation of the effectiveness of administrative systems within the University consists of determining the effectiveness of existing administrative functions and processes and assessing the effectiveness of the University's Shared Governance committee structure. Each of these separate evaluations is to be conducted on a five year cycle and will be the responsibility of separate task forces appointed by the President. These ad hoc groups will work with and coordinate their work through the University's Institutional Effectiveness Committee. The results of the assessment of administrative functions/systems and the shared governance committee system are to be reported to the President and shared within the University community. Recommendations for change resulting from the evaluations may originate from the President, the University Executive Council, and the Shared Governance Executive Committee. Upon approval by the President, suggested changes go the University Board of Trustees for final

approval, as appropriate.

Assessment Report Components

The assessment template to be used in conjunction with the various assessments or reports identified in this guide differs somewhat as a result of the different focus of each assessment. In general, however, each template and the assessment report that is generated will:

- address the specific goal
- identify a limited number of key performance indicators
- identify a performance target
- document the results achieved
- document the actions taken as a result of the assessment
- identify the office responsible for insuring that the assessment is completed
- identify the office or position responsible for ensuring that improvement plans are implemented

These results, as summarized in the assessment report, will go to the appropriate approving authority (Dean, VP, President, etc.) and will be shared with the appropriate constituent groups. The results are then used to influence goals and outcomes for the next planning cycle. **Figure 6** details the various assessment activities at UNA.

Post-Assessment Activities

The various assessment reports are typically due to each unit's respective approving authority on June 30 annually or every five years, depending upon the assessment schedule. While the report brings closure to the previous period's assessment cycle, it also represents the beginning of the next stage of the planning and assessment cycle.

The typical planning process is outlined below:

Assessment Reports (completed by June 30) are reviewed by appropriate administrator(s) and constituent groups over the summer and fall following their completion. Each approving authority is to provide effective feedback to the reporting unit at every level in order to achieve the goal of continuous improvement.

- Some adjustments to the upcoming *Annual Planning and Assessment Reports* and budgets may result from immediate problems and opportunities identified. These immediate adjustments will be made to the Annual Planning and Assessment Report and/or budget in September. Two-way feedback is essential in the budget request process and should include documentation of the improvements or modifications made as a result of approved or denied requests for funding.

Figure 6				
Types of Assessments				
Assessment	Schedule	Responsibility of:	Document(s) involved:	Reporting Channel
Assessment of each unit's Annual Action Plan/Goals	Annual June 30	Each cost center head with faculty and/or staff involvement	Annual Action Plan Assessment Report Form	Submit to Dean and/or appropriate Vice President
Academic Program Review	Five year cycle June 30	Each department chair and program faculty	Program Review Template	Deans; VPAA
Core Competency Assessment Audit	Annual Assessment	OIRPA and Academic Departments	General Education Assessment Form; Annual Planning and Assessment Repot	VPAA
University Mission Statement	Five year cycle June 30	Ad Hoc Leadership Task Force – appointed by President	Mission Statement Review Template	President; Board of Trustees
University Goals	Five year cycle components assessed annually; June 30	Institutional Effectiveness Committee. OIRPA	University Goal Assessment Template	President
University Annual Initiatives (Annual Action Plan)	Annual Assessment June 30	Institutional Effectiveness Committee, OIRPA	Annual Action Plan Assessment Form	President
SMART Planning and Budgeting System	Annual Assessment (timeline identified by VP for Business and Financial Affairs)	University Executive Council and the Strategic Planning and Budget Study Committee	SMART Budget Form per state finance office (provided by the VP for Business and Financial Affairs)	Vice President for Business and Financial Affairs; President
Administrative systems evaluation	Five year cycle; June 30	Ad Hoc Administrative Task Force and Institutional Effectiveness Committee	To be developed by Ad Hoc Committee	President; Board of Trustees
Shared Governance Structure/Processes	Five year cycle; annual components; June 30	Ad Hoc Task Force of Institutional Effectiveness and Shared Governance Committees	To be developed by Ad Hoc Task Force	President; Board of Trustees

- Upon reviewing assessment reports, the Institutional Effectiveness Committee may make recommendations concerning changes to the assessment process. While it is not the function of the Institutional Effectiveness Committee to recommend changes to a program, department, or support units, this committee does have the responsibility of assessing the overall assessment process.
- Results of assessments will be used primarily to develop new initiatives, goals and budgets for the upcoming academic year. In some cases, the results will impact planning for several years into the future.

Institutional Effectiveness/Planning/Budgeting/Assessment Timeline

Planning, budgeting and assessment activities are ongoing and overlapping, with some activities focused on current year plans and budgets, and concurrent activities meant to address future year plans and budgets. A formal procedure for submitting annual and interim requests for new or additional funding has been established. Budget requests may be wholly/partially funded at the unit, college, division, or University level. Feedback from each applicable level to the unit level is necessary for effective unit planning and budgeting. In order to provide guidance in implementation of planning, budgeting and assessment activities for both current and future activities, this document integrates the two timelines – one for current year plans/budgets and the other for future year plans/budgets. The following general combined timeline is suggested:

September:
- Directors/Department Chairs to discuss previous year's departmental/program review results.

October:
- Departments will submit *Annual Planning and Assessment Report* for current Fiscal Year and may include strategic goals for the next two to five years.
- Academic departments and support departments that are scheduled for the Five-Year Department/Program review will begin process.
- UNA will submit Fourth Quarter SMART report at end of month.
- Departments that underwent five-year review last year may include these goals to current year's *Annual Planning and Assessment Report*.

November:
- UNA will submit SMART Budget Form 19A to the Governor's Office.
- OIRPA meets with departments undergoing five-year department/program review.

December:
- OIRPA submits Five-Year Enrollment Data report to academic departments.

January:
- Departmental strategic goals are reviewed by Deans.
- President submits budget/initiatives for next Fiscal Year
- President's proposed budget/initiatives are articulated to:
  » Council of Academic Deans
  » Institutional Effectiveness Committee
  » Strategic Planning and Budget Study Committee
- UNA will submit First Quarter SMART report at end of month

February:
- Departmental strategic goals are reviewed by Vice Presidents.

March:
- Department strategic goals are reviewed by the SPBS.

April:
- UNA will submit Second Quarter SMART report at end of month
- UNA budget initiatives are created from departmental/area strategic goals and President's budget initiatives.

June:
- All cost centers will submit completed second part of the *Annual Planning and Assessment Reports* based on the first part created in October to OIRPA as well as supervisor.

- UNA will submit summary of the *Annual Planning and Assessment Report* to Board of Trustees.
- Departments/areas that are involved will submit five-year reports to Institutional Effectiveness Committee, Area Vice Presidents, and Deans.

July:
- UNA will submit SMART quarterly report at end of month

August:
- President creates operational plan from January's projected budget/ initiatives for next fiscal year.
- UNA will submit SMART Budget form 19B to Governor's Office.
- OIRPA will submit to the Institutional Effectiveness Committee a summary report of the *Annual Planning and Assessment Report*.
- OIRPA meets with vice presidents and deans for review of completed five-year departmental/program reviews.

CONCLUSION

This assessment guide is intended as a tool to guide each unit in its planning and assessment activities and to help ensure that all appropriate assessments take place on a systematic schedule. It is not intended as "the" answer to each assessment question that may arise. Each unit is encouraged to be innovative and to adopt procedures that best measure the unit's effectiveness. Each unit is also reminded that it is the unit's responsibility to document each assessment, the tools used, the results obtained, and the actions taken as a result of the assessment. The documentation file should be maintained in each unit and available for review by appropriate constituents and accreditation review teams. It is recommended that the documentation file be maintained in an electronic format.

Of critical importance is the documentation of plans, initiatives and actions taken as a result of the previous year's assessment. It is recommended that each unit maintain an electronic documentation file that identifies the assessment and the actions taken as a result of the assessment. A copy of this file should be maintained electronically.

It is expected that minor, non-substantive enhancements may be necessary to this new *Guide for Planning and Assessing Institutional Effectiveness* to ensure continuous improvement in the document. Such changes, as approved by the President, will be forwarded to the Board of Trustees as information items.

Approved by Institutional Effectiveness Committee, May 2, 2007

Adopted by University Board of Trustees, June, 2007

Revised by Institutional Effectiveness Committee, May, 2008

Adopted by President's Executive Council , June, 2008

Revised by Institutional Effectiveness Committee, May, 2011

KEY TERMINOLOGY

Academic Department/Program Review - These reports are required for each academic department as well as its specific programs offered within. These program reviews are to be completed every five years on a cycle identified by the various Colleges or, more often, if needed for program accreditation purposes. The program reviews are to involve numerous constituent groups of the University and look at the extent to which the program successfully accomplishes identified student learning outcomes, satisfies the needs of students and external stakeholders, and continues to meet state viability standards and other program efficiency indicators. If an academic department offers more than one program, separate program reviews should be completed by qualified program coordinators.

Annual Planning and Assessment Report – Each academic, educational support, and administrative unit at the University is expected to develop an Annual Planning and Assessment Report in October, including goals and strategies to achieve those goals. These reports should support the University's Strategic Plan, its goals, strategies, and priorities. On June 30, each unit should amend the report to include the action taken during the year to accomplish the goals, the assessment of the degree to which the goals have been met (including improvements made as a result of the prior year's assessment), and the steps that are planned for the coming year in continued pursuit of the goals.
In addition, the Annual Planning and Assessment Report identifies new goals, if appropriate, that are being considered for the next two to five years, once a new budget is approved.

Close the Loop – The process of reviewing assessment results, reaching conclusions about the meaning, determining implications for change, implementing change, and re-assessing if improvement was made.

Educational Support/Administrative Department Review - These reports are required for each support/administrative unit. They are to be completed evey five years on a cycle identified by the Vice Presidents. The reviews are to involve numerous constituent groups of the University and look at the extent to which the department successfully accommplishes its mission and goals.

Operational Outcome – A clear, concise statement that describes how a department (academic/administrative/educational support) can demonstrate the completion of a goal.

Performance Indicators – Performance Indicators are the metrics used to measure how well a goal is being achieved. Depending on the goal, the Metric or Performance Indicator might be the results from nationally normed tests or exams scores on various surveys of constituents or some other specific measure that helps determine the degree to which a University or Unit Goal is being accomplished.

Goals – Specific items that an academic, educational support, or admistraive unit wants to pursue during the course of a defined period. For each goal, the unit identifies several specific strategies, or actions to be taken in support of the goal. For most of the academic, educational support, and administrative units of the University these goals should guide certain actions at the unit level.

Program Assessment – An ongoing process designed to monitor and improve student learning. Faculty develop explicit statements of what students should learn, verify that the program is designed to foster this learning, collect empirical data that indicate student attainment, and use these data to improve student learning.

SMART Budget – The SMART [Specific, Measurable, Accountable, Responsive, Transparent] budgeting process is an initiative of the State Budget Office. All universities in Alabama are required to complete a Strategic Plan from which they are expected to identify a small number of strategic goals or initiatives each year, to identify the budget needs to reach these goals or initiatives, to assess their accomplishment, and to report this quarterly as part of the annual budgeting process. The timetable for the SMART Budget process is driven by the State Budget Office and is a responsibility of the Vice President for Business and Financial Affairs and OIRPA. Both the Institutional Effectiveness Committee and The University Strategic Planning and Budget Study Committee are actively involved in identification of the University's SMART Budget goals.

Student Learning Outcomes – Student learning outcomes are at the core of the academic program or General Education Component courses. They represent the minimum learning objectives for a given program or General Education Component course. Each academic department is to identify specific learning outcomes that students are expected to achieve. Student learning outcomes should be identified and expressed as measurable objectives. The performance of students in achieving identified student learning outcomes will drive much of the continuous improvement and initiatives of the unit as well as the University.

University Goals – Each University goal identifies a broad performance area that is relatively stable over a significant period of time. For instance, one of the goals of the University is to "provide high quality programs." This broad goal is 'aspirational' in nature. The University will have relatively few goals and will continue to focus on and aspire to satisfy these goals over the period of time covered by the Strategic Plan. The most recent official University goals are printed annually in the University of North Alabama Undergraduate and Graduate Catalogs.

University Strategic Plan – This document identifies the University mission and vision statement, along with the University goals and strategies. The planning cycle typically ranges from two to five years and is updated annually. For each goal, the Strategic Plan should identify several priority initiatives. The Strategic Plan should also outline key actions to be taken and key resource decisions (in particular the source and use of additional revenues) needed to support priority initiatives. The University's Diversity Plan is an integral component of the overall University Strategic Plan.

BIBLOGRAPHY

Below, P.J., Morrisey, G. L. and Acomb, B.L. (1987). The executive guide to strategic planning. San Francisco: Jossey-Bass.

Grossman, G.M., and M. E. Duncan. (1989). *Indications of institutional effectiveness: A process for assessing two-year colleges.* Columbus, Ohio: Center on Education and Training for Employment.

Shewhart, W.H. (1986). Statistical Method from the viewpoint of quality control. Washington, D. C.: Dover.

Southern Association of Colleges and Schools Commission on Colleges. (2010). The principles of accreditation: Foundations for quality enhancement. Decatur, Georgia: Souther Association of Colleges and Schools.